Minutes of the Meeting of the Board of Directors of the Cook County Health and Hospitals System (CCHHS) held on Friday, February 25, 2022 at the hour of 9:00 A.M. This meeting was held by remote means only, due to the determination that a public health emergency exists.

### I. Attendance/Call to Order

Chair Taylor called the meeting to order.

Present: Chair Lyndon Taylor, Vice Chair Hon. Dr. Dennis Deer, LCPC, CCFC and Directors Robert Currie; Raul

Garza; Ada Mary Gugenheim; Joseph M. Harrington; Karen E. Kim, MD, MS; Mike Koetting; David Ernesto

Munar; Heather M. Prendergast, MD, MS, MPH; Robert G. Reiter, Jr.; and Otis L. Story, Sr. (12)

Absent: None (0)

Additional attendees and/or presenters were:

Yvonne Collins, MD - Chief Medical Officer,

CountyCare

Claudia Fegan, MD – Chief Medical Officer

Aaron Galeener - Interim Chief Executive Officer,

CountyCare/Health Plan Services

Andrea M. Gibson – Chief Strategy Officer

Jeff McCutchan – General Counsel

Suja Mathew, MD – Chair, Department of Medicine Connie Mennella, MD – Chair, Department of

Correctional Health

Israel Rocha, Jr. - Chief Executive Officer

Deborah Santana - Secretary to the Board

The next regular meeting of the Board of Directors is scheduled for Friday, March 25, 2022 at 9:00 A.M.

### II. Employee Recognition

Israel Rocha, Jr., Chief Executive Officer, provided an introduction to the Board Resolutions under Agenda Item IV.

### III. Electronically Submitted Public Speaker Testimony (Attachment #1)

The following testimony was read into the record:

1. Dian Palmer President, SEIU Local 73

NOTE: action was taken on Agenda Items IV(A), IV(B), V(A), V(B), V(D) and V(E) in one (1) combined motion.

#### IV. Board Resolutions (Attachment #2)

- A. Resolution honoring Dr. Connie Mennella
- **B.** Resolution honoring Dr. Suja Mathew

This item was taken out of order and was considered before the provision of public testimony. Dr. Claudia Fegan, Chief Medical Officer, provided an overview of the Board Resolutions honoring Dr. Connie Mennella, Chair of the Department of Correctional Health, and Dr. Suja Mathew, Chair of the Department of Medicine. Mr. Rocha, Dr. Fegan, and the Board expressed their gratitude for the exemplary work that Dr. Mennella and Dr. Mathew have done on behalf of CCH, and wished them great success in their future endeavors.

### V. Board and Committee Reports

### A. Minutes of the Board of Directors Meeting, January 28, 2022

Chair Taylor inquired whether any corrections or revisions to the minutes were needed. Hearing none, he advanced to the next item.

### B. Human Resources Committee Meeting, February 17, 2022 (Attachment #3)

- i. Meeting Minutes, which include the following action items:
  - Proposed Collective Bargaining Agreements (CBAs), including an economic package (wage increases and healthcare), negotiated between the County of Cook and the following entities:
    - The International Union of Operating Engineers, AFL-CIO Local 399; and
    - The House Staff Association of Cook County, representing all postgraduate level physicians and dentists (Interns, Residents and Fellows).

Director Prendergast provided an overview of the Meeting Minutes. It was determined that there were no additional questions on the proposed CBAs that would need to be addressed in a closed meeting, so the Meeting Minutes will be included in the combined motion made later in the meeting.

#### C. Managed Care Committee Metrics (Attachment #3)

- i. Metrics Review (Committee did not meet in February)
- ii.Review of Health Equity Updates presentation (originally presented at January Managed Care Committee Meeting)

Aaron Galeener, Interim Chief Executive Officer of Health Plan Services, provided an overview of the Metrics. The Board reviewed and discussed the information.

Dr. Yvonne Collins, Chief Medical Officer of CountyCare, provided an overview of the Health Equity Updates presentation, which was originally presented at the January Managed Care Committee Meeting and was requested to be presented to the full Board at a future meeting. The Board reviewed and discussed the information.

### D. Quality and Patient Safety Committee Meeting, February 17, 2022

- i. Meeting Minutes, which include the following action items:
- Stroger Hospital and Provident Hospital Medical Staff Appointments / Reappointments / Changes

Director Gugenheim provided an overview of the Meeting Minutes. The Board reviewed and discussed the information.

#### E. Finance Committee Meeting, February 17, 2022

- i. Meeting Minutes, which include the following action items:
- Contracts and Procurement Items
- Receive and File CCH Grant Award-Related Items
- Proposed Transfer of Funds

Director Reiter provided an overview of the Meeting Minutes. He noted that there were a number of contractual items (request numbers 8, 12 and 14) that are pending review by Contract Compliance.

Director Garza noted that he will be abstaining on request number 16 under the Contracts and Procurement Items contained within the Meeting Minutes.

### VI. Action Items

#### A. Contracts and Procurement Items

There were no Contracts and Procurement Items presented directly for the Board's consideration.

### B. Any items listed under Sections IV, V, VI and IX

Director Gugenheim, seconded by Director Reiter, moved to approve the following:

- Item IV(A) Resolution honoring Dr. Connie Mennella;
- Item IV(B) Resolution honoring Dr. Suja Mathew;
- Item V(A) January 28, 2022 Board Meeting Minutes;
- Item V(B) Minutes of the Human Resources Committee Meeting of February 17, 2022, which include the proposed Collective Bargaining Agreements (CBAs), including economic packages (wage increases and healthcare), negotiated between the County of Cook and The International Union of Operating Engineers, AFL-CIO Local 399; and The House Staff Association of Cook County, representing all postgraduate level physicians and dentists (Interns, Residents and Fellows);
- Item V(D) Minutes of the Quality and Patient Safety Committee Meeting of February 17, 2022, which include the Stroger and Provident Hospital Medical Staff appointments / reappointments / changes; and
- Item V(E) Minutes of the Finance Committee Meeting of February 17, 2022, which include the Contracts and Procurement Items, Grant Award-Related Items, and Transfer of Funds.

On the combined motion, a roll call vote was taken, the votes of yeas and nays being as follows:

Yeas: Chair Taylor, Vice Chair Deer and Directors Currie, Garza\*, Gugenheim,

Harrington, Kim, Koetting, Prendergast, Reiter and Story (11)

Nays: None (0)

Absent: Director Munar (1)

\*Director Garza abstained and voted PRESENT with regard to request number 16 under the Contracts and Procurement Items contained within Item V(E) Minutes of the Finance Committee Meeting of February 17, 2022.

THE MOTION CARRIED.

### VII. Report from Chair of the Board

Chair Taylor stated that CCH is preparing to embark on the strategic planning process. This is an important exercise for this organization, and he looks forward to the active and full engagement of all of the stakeholders – from the Board to CCH's community partners, he looks forward to receiving all input.

Israel Rocha, Jr., Chief Executive Officer, provided an overview of the CEO Divisional Report. The Board reviewed and discussed the information.

A. FY23-FY25 Strategic Plan Update (Attachment #5)

Andrea M. Gibson, Chief Strategy Officer, provided an overview of the presentation on the FY23-FY25 Strategic Plan Update. The Board reviewed and discussed the information.

### IX. Closed Meeting Items

- A. Claims and Litigation
- **B.** Discussion of personnel matters
- C. Human Resources Committee Meeting Minutes, February 17, 2022

The Board did not recess into a closed meeting.

### X. Adjourn

As the agenda was exhausted, Chair Taylor declared the meeting ADJOURNED.

Respectfully submitted, Board of Directors of the Cook County Health and Hospitals System

Attest:

Deborah Santana, Secretary

Cook County Health and Hospitals System Minutes of the Board of Directors Meeting February 25, 2022

ATTACHMENT #1

### **Testimony of Dian Palmer, President of SEIU Local 73**

Chairman Taylor and distinguished members of the Cook County Health Board of Directors,

I am speaking on behalf of the 2,500 Union members of SEIU Local 73 employed in various elected offices throughout Cook County who have worked throughout the ongoing pandemic.

In 2020, the federal government provided Cook County with funding which allowed 80 hours of paid leave time to be utilized in the event an employee, or someone in their household tested positive for COVID and needed to quarantine. This funding was provided to prevent the spreading of this deadly virus and to protect the public.

While these 80 hours were extended in 2021 it has not been extended for 2022. We have members who have contracted COVID on multiple occasions. Our members use this time for themselves, or to care for their children, their spouses, and in many cases, their elderly parents.

We call on you to urge Cook County Commissioners to pass a resolution that the 80 COVID hours will replenish every fiscal year (December first) retroactive to December 1, 2021 for all Union employees to come out of federal dollars provided to Cook County for COVID-19 purposes.

This resolution is in the interest of protecting the public as a whole, and discouraging employees from coming to work while sick.

Thank you.

Dian Palmer President My name is Joyce Ball and I am a Registered Nurse in the Emergency Department at Provident Hospital. I am here on behalf of the CCHHS Registered Nurses. Cook County Health is requesting an additional 64.1 million dollars in funding for agency nursing contracts, which costs County taxpayers more money than retaining staff nurses. CCHHS nurses continue carrying the hospital system's patients safely through the ongoing pandemic. CCHHS has done nothing to retain staff and is hemorrhaging RNs. NNOC last met with CCHHS January 11th. County has intentionally delayed responding with counter proposals for staff retention. We demand to meet immediately and for the County to release their counter proposals to NNOC.

Respectfully, Joyce Ball

Cook County Health and Hospitals System Minutes of the Board of Directors Meeting February 25, 2022

ATTACHMENT #2

### COOK COUNTY HEALTH BOARD OF DIRECTORS

### RESOLUTION R-22-01

### Resolution Honoring Dr. Concetta Mennella

WHEREAS, DR. CONCETTA MENNELLA is an exemplary correctional health physician, teacher and advocate; and

WHEREAS, DR. MENNELLA committed early in her career to care for underserved, vulnerable populations as a member of the National Health Service Corps; and

WHEREAS, DR. MENNELLA, following a medical school rotation that exposed her to the need for high quality care for detained populations, has provided care to patients detained in Cook County Jail since 1991; and

WHEREAS, for the past thirty years, DR. MENNELLA has continued to be a tireless advocate of her patients, a compassionate caregiver and a leader who inspires and empowers her team and correctional health leaders around the country; and

WHEREAS, in recognition of her exceptional care and leadership, DR. MENNELLA was named Chair of the Department of Correctional Health in 2014; and

WHEREAS, DR. MENNELLA has dedicated her life to uplifting the health and wellbeing of her patients at the jail, addressing the health conditions that disproportionately impact detained individuals; and

WHEREAS, whether that is ensuring unique specialty services for a patient in need, advocating for compassionate release or family visitations for patients under hospice care, or developing mitigation efforts to address infectious disease risks at the jail, including access to robust COVID-19 testing and vaccination, DR. MENNELLA always serves as a voice for her patients; and

WHEREAS, before and during the COVID-19 pandemic, DR. MENNELLA's leadership and around-the-clock work resulted in an extensive COVID-19 mitigation, testing and care plan that was lauded by the U.S. Centers for Disease Control and Prevention as a best-in-class strategy for a correctional health setting; and

WHEREAS, the Cook County Sheriff said that during the pandemic DR. MENNELLA's "leadership and tireless work on behalf of her patients saved lives, and the citizens of Cook County should be grateful for her unswerving dedication"; and

WHEREAS, DR. MENNELLA has authored many journal articles during her career, providing notable insights on topics ranging from COVID-19 to antibiotic resistant infections, and advancing the field of correctional health care nationally; and

WHEREAS, DR. MENNELLA earned the 34th "Human Rights Award" from the National Alliance Against Racist & Political Repression, the Health and Medicine Policy Research Group "Medicine Award" in 2018 and Cook County Health's "Doctor of the Year" award in 2017; and

WHEREAS, after making a positive impact on the health of countless individuals, DR. MENNELLA is beginning a well-deserved retirement.

NOW, THEREFORE, BE IT RESOLVED, that the Board of Directors of Cook County Health, on behalf of the more than 5 million residents of Cook County, does hereby gratefully acknowledge CONCETTA MENNELLA for her remarkable career and dedication to the mission of Cook County Health and the people the health system serves.

Approved and adopted by the Cook County Health Board of Directors on February 25, 2022.

**APPROVED** 

FEB 25 2022

BY BOARD OF DIRECTORS OF THE COOK COUNTY HEALTH AND HOSPITALS SYSTEM

#### COOK COUNTY HEALTH BOARD OF DIRECTORS

### RESOLUTION R-22-02

### **Resolution Honoring Dr. Suja M. Mathew**

WHEREAS, DR. SUJA M. MATHEW is an experienced and accomplished physician leader who has dedicated her career to providing patient-centered, expert medical care and mentoring future physicians; and

WHEREAS, DR. MATHEW joined Cook County Health in 2000 as an attending physician in the division of general internal medicine, where she showed a strong commitment to the underserved and providing medical care to anyone in need; and

WHEREAS, DR. MATHEW brought to that position the compassion, understanding and commitment to health equity which has guided her distinguished career; and

WHEREAS, in 2015, DR. MATHEW was promoted to Chair of the Department of Medicine, where she was responsible for all inpatient and outpatient operations for the health system; and

WHEREAS, DR. MATHEW showcased her leadership while mentoring future physicians as program director of the internal medicine residency program from 2008-2016; and

WHEREAS, Dr. Mathew has provided steadfast leadership to other Cook County Health internal medicine physicians; and

WHEREAS, the last two years have proven to be a watershed time in healthcare, with a global pandemic further exposing the inequities DR. MATHEW has devoted her career to addressing; and

WHEREAS, DR. MATHEW has earned the respect and admiration of her colleagues for her extensive knowledge, her undying commitment to the health system and its mission, and her work to create the next generation of physicians; and

WHEREAS, DR. MATHEW stepped onto the national stage and represented Cook County Health in a positive way first serving as a governor of northern Illinois for the prestigious American College of Physicians and is now a Regent of ACP; and

WHEREAS, the Health System's leadership team and the Cook County Health Board of Directors is indebted to DR. MATHEW for her exceptional clinical skills, stalwart leadership and mentorship;

NOW, THEREFORE, BE IT RESOLVED, that the Board of Directors of Cook County Health, on behalf of the more than 5 million residents of Cook County, does hereby gratefully acknowledge SUJA M. MATHEW for her remarkable career and dedication to the mission of Cook County Health and the people the health system serves.

Approved and adopted by the Cook County Health Board of Directors on February 25, 2022.

**APPROVED** 

FEB 25 2022

BY BOARD OF DIRECTORS OF THE COOK COUNTY HEALTH AND HOSPITALS SYSTEM

Cook County Health and Hospitals System Minutes of the Board of Directors Meeting February 25, 2022

ATTACHMENT #3

## Health Plan Services Update

Prepared for: CCH Board of Directors Meeting

# Aaron Galeener Interim Chief Executive Officer, Health Plan Services February 25, 2022



## **Metrics**



## **Current Membership**

Monthly membership as of February 4<sup>th</sup>, 2022

Category	Total Members	ACHN Members	% ACHN
FHP	265,099	20,539	7.7%
ACA	116,800	18,176	15.6%
ICP	30,411	5,257	17.2%
MLTSS	8,321	0	N/A
SNC	5,350	608	11.4%
Total	425,981	44,580	10.5%

**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

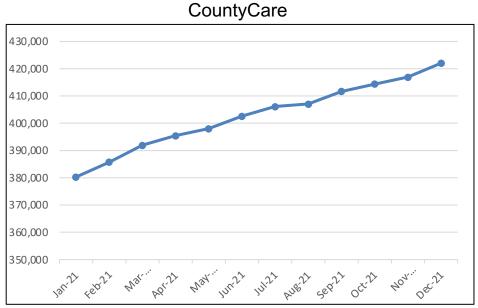
Illinois Department of Healthcare and Family Services December 2021 Data

Managed Care Organization	<b>Cook County</b>	Cook Market Share
*CountyCare	422,054	32.3%
Blue Cross Blue Shield	334,273	25.6%
Meridian (a WellCare Co.)	316,758	24.3%
IlliniCare (Aetna/CVS)	126,311	9.7%
Molina	96,581	7.4%
YouthCare	9,689	0.7%
Total	1,305,666	100.0%

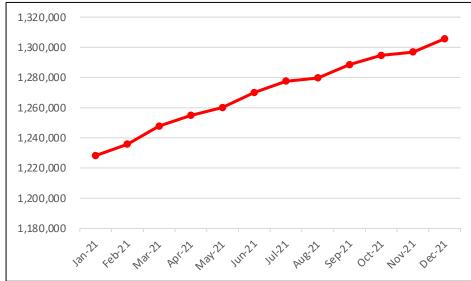


<sup>\*</sup> Only Operating in Cook County

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







- CountyCare's enrollment has increased 11% over the past 12 months, ahead of the Cook County increase of 6%
- CountyCare's enrollment increased 1.2% in December 2021 compared to the prior month

Source: https://www.illinois.gov/hfs/MedicalProviders/cc/Pages/TotalCCEnrollmentforAllPrograms.aspx

# FY 22 Budget | Membership





# Operations Metrics: Call Center & Encounter Rate

	Performance									
Key Metrics	Nov 2021	Jan 2022								
Member & Provider Services Call Center	Metrics									
Abandonment Rate	< 5%	2.42%	1.10%	2.41%						
Hold Time (minutes)	1:00	0:27	0:10	0:23						
% Calls Answered < 30 seconds	> 80%	81.87%	93.27%	82.81%						
Quarterly										
Claims/Encounters Acceptance Rate	98%	98%								



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



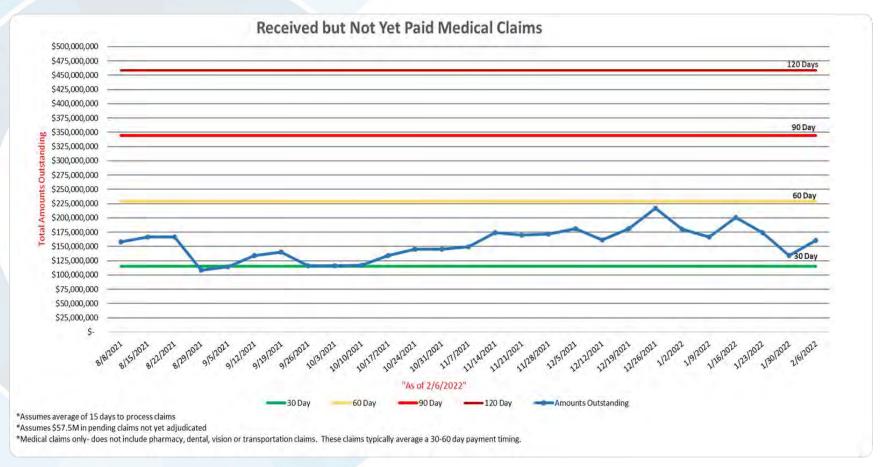


# CountyCare COVID Vaccination Rates

Vaccination Phase	Count of Membership	Percent of Total Membership (426k)	Percent of Vaccine-Eligible Membership (379k)
1st of 2 doses only:	29,170	6.85%	7.69%
Fully Vaccinated:	154,011	36.15%	40.62%
Vaccinated with at least 1 dose:	183,181	43.05%	48.36%



# 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	
Week of 2/6/2022	\$			27,271,582	\$	832,764	\$	174,037	\$	160,696,309	

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



<sup>\*</sup>Medical claims only-does not include pharmacy, dental, vision or transportation claims

<sup>\*</sup>The amounts in the table are clean claims

# CountyCare Health Equity Initiatives Prepared for: CCH Managed Care Committee

Yvonne Collins, MD
Chief Medical Officer, CountyCare
February 25, 2022



# **Objectives**

- Review baseline health plan data
- Discuss health equity related to the pillars
- Examine the work around housing Insecurity
- Discuss the efforts around other areas

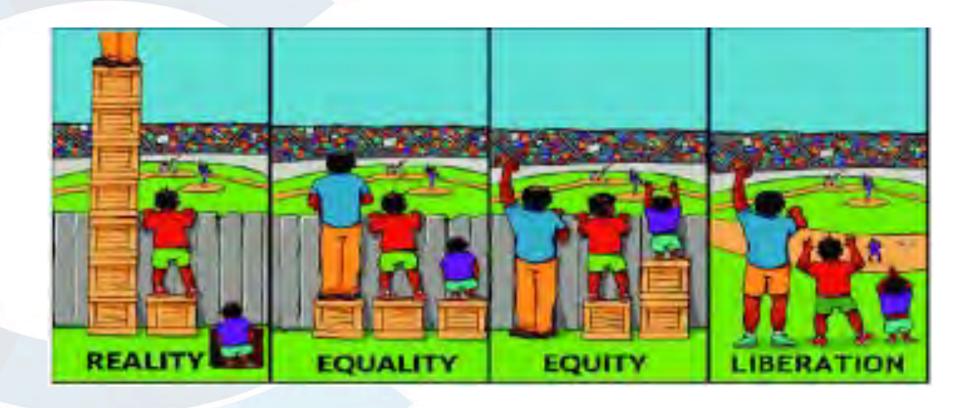


# HEALTH EQUITY

 Health equity means that everyone has a fair and just opportunity to be as healthy as possible. This requires removing obstacles to health such as poverty, discrimination, and their consequences, including powerlessness and lack of access to good jobs with fair pay, quality education and housing, safe environments, and health care.



# HEALTH EQUITY





# Disproportionately Impacted Area (DIA) Zip Codes

	T	ble A-2—Qualif	ned DIA Zip Co	les	
60018	60411	60617	60901	61606	62242
60033	60415	60619	60912	61610	62254
60040	60419	60620	60915	61701	62272
60064	60425	60621	60927	61739	62274
60071	60426	60623	60955	61801	62286
60077	60428	60624	60958	61802	62448
60085	60429	60626	60970	61820	62471
60087	60432	60628	61012	61832	62474
60090	60433	60629	61020	61866	62522
60099	60435	60632	61032	61910	62526
60101	60436	60633	61054	61920	62560
60104	60438	60636	61101	61938	62565
60106	60455	60637	61102	62002	62618
60110	60458	60639	61103	62018	62681
60115	60459	60640	61104	62056	62702
60120	60466	60641	61109	62059	62703
60133	60469	60643	61201	62060	62801
60139	60471	60644	61235	62090	62864
60141	60472	60645	61239	62095	62882
60145	60473	60646	61282	62201	62901
60153	60478	60649	61341	62203	62906
60155	60501	60651	61401	62204	62907
60160	60505	60652	61410	62205	62912
60164	60506	60653	61443	62206	62951
60165	60534	60659	61455	62207	62966
60171	60545	60706	61462	62232	62992
60185	60608	60707	61469	62233	
60402	60609	60714	61603	62237	
60406	60612	60804	61604	62238	
60409	60616	60827	61605	62239	



# HEALTH PLAN DATA



# CountyCare COVID Vaccination Rates

Vaccination Phase	Count of Membership	Percent of Total Membership (426k)	Percent of Vaccine-Eligible Membership (379k)
1st of 2 doses only:	29,170	6.85%	7.69%
Fully Vaccinated:	154,011	36.15%	40.62%
Vaccinated with at least 1 dose:	183.181	43.05%	48.36%

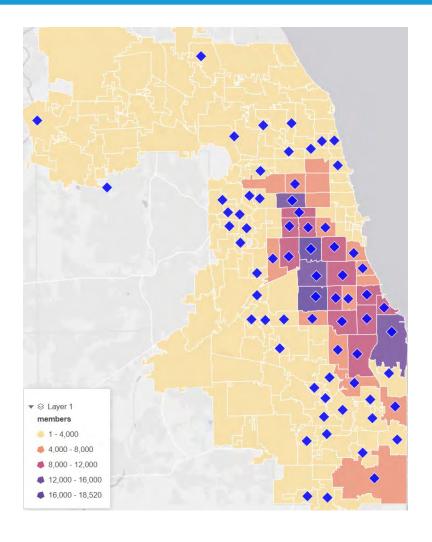
Member Counts by Residential Area (*DIA= Disproportionately Impacted Area):								
# of Members with a								
Residential Area	Least 1 Dose							
DIA Cook County	140,722							
non-DIA Cook County	44,066							
Other	456							
Total	185,244							

Data as of 2/04/2022



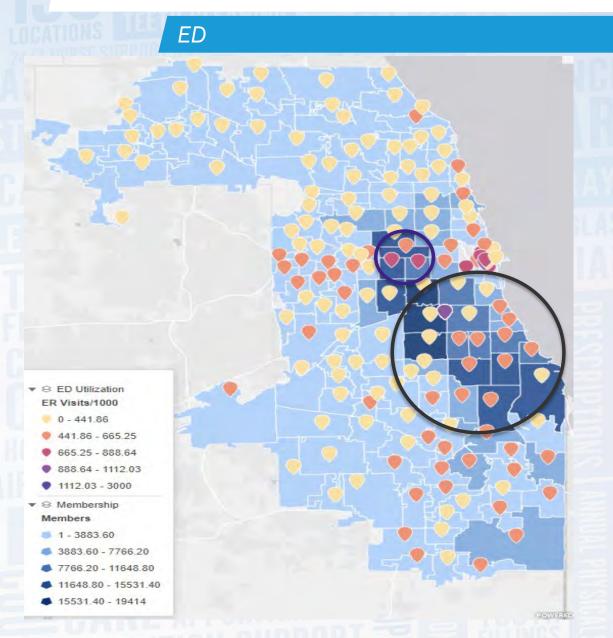
### Membership by DIA Zip

### Disproportionately-Impacted Areas (DIA)



- The shaded zip code areas represent CountyCare's membership while the diamond markers represent 68 DIA zip codes that CountyCare members reside in
- Out of CountyCare's current membership, 325K members live in disproportionately-impacted zip codes, which is 80% of CountyCare's current membership of 411K for September 2021

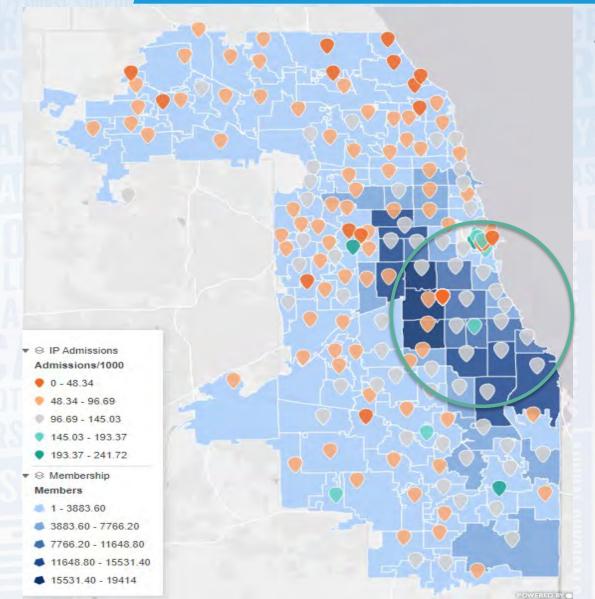
### **ED Visits**



- The average zip code-level ED utilization rate was 448.13 per 1000 people during the reporting period.
- When adjusted for membership population size (i.e. membership population >= 1000), ED utilization is highest in the Eastern part of the county relative to the average rate for the county.
- Three areas in West Chicago, which has a total membership of about 35K members, had very high ED utilization rates during the reporting period (60644, 60624, 60651). ED utilization rate in those areas ranged from 550.8 699.9 visits/K (23% 56% higher than the expected ED visit rate),
- ED Utilization is also high in South Side Chicago and South Suburbs, which represent a majority of the CCH population and would be high opportunity areas

### **Inpatient Admissions**



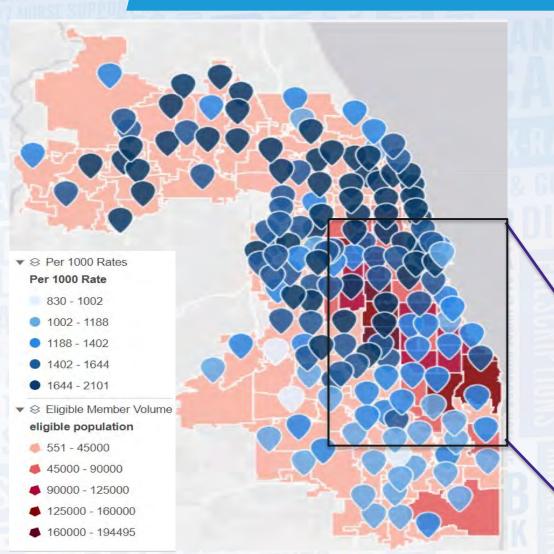


### Inpatient Admissions

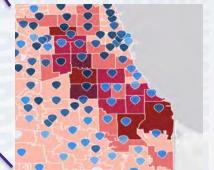
- The average zip code-level hospitalization rate was 104.9 per 1000 people during the reporting period.
- When we account for membership size (i.e. membership population >= 1000), we observed a higher rate of hospitalization in the **Eastern part of the county** relative to the average rate for the county.
- The highest IP admission rate was in the **Eastern part of the county**. where 10 zip code areas comprising over 100K members during the reporting period had IP admissions ranging from 119 149 admits/K (14 42% higher than the expected admission rate)



### **PCP Visits**



- The map shows per 1000 PCP Visit rates for zip codes where eligible member population is greater than 500 member months during 202004-202103.
- The greatest opportunity for improvement is in the Southern part of Cook County. This impacts 209,464 member months.
  - Average per 1000 PCP Visit rate is 1114.
  - Zip Code (60411) in Southern Cook County comprises of 68,262 member months and has an average per 1000 PCP Visit rate of 1100.
- The highest number of PCP visits per eligible member population was in the NE part of Cook County.
  - Average per 1000 PCP Visit rate is 1527.





### Integrating Metopio and DIA Zip Code Data



- Data driven tool that provides information on where our members live
- Allows targeted planning

Value Type	The state of the s	
	How to Interpret this Value	Example Interpretation
Index	Higher value means higher vulnerability to COVID-19	$60636\mbox{has}$ the highest COVID vulnerability index, with an index of $62.50$
Proportion	Higher value means higher proportion of members with high school education	60615 has the lowest proportion of members with a HS education (55%)
Proportion	Higher value means higher proportion of members with food insecurity in the ZIP	41% of people in 60141 are food insecure
Proportion	Higher value means higher proportion of members in poverty	42% of people in 60624 and 60621 are in poverty
Proportion	Higher value means higher proportion of members in deep poverty	18% of people who live in 60612 are in deep poverty
Index	Values above zero indicate higher need for rental assistance Values below zero indicate less need for rental assistance	60621 has the highest rental assistance index of 1.32
Index	Values above zero indicate higher social vulnerability Values below zero indicate less social vulnerability	60621 and 60624 have the highest social vulnerability index values at 2.32
Proportion	Lower values indicate more internet access, higher values indicate less internet access	t 39% of people in 60636 do not have internet access
	Proportion  Proportion  Proportion  Proportion  Index	Higher value means higher proportion of members with high school education  Higher value means higher proportion of members with food insecurity in the ZIP  Higher value means higher proportion of members in poverty  Higher value means higher proportion of members in poverty  Higher value means higher proportion of members in deep poverty  Values above zero indicate higher need for rental assistance  Values below zero indicate less need for rental assistance  Values above zero indicate higher social vulnerability  Values below zero indicate less social vulnerability  Lower values indicate more internet access, higher values indicate less internet



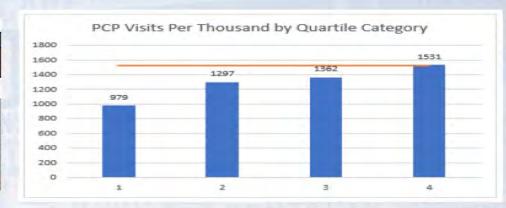
### Data Integration Example - Rental Assistance Index

### Rental Assistance Priority Index (Metopio Summary Tab / RPX)

- · 406k members reside in ZIP codes which have the highest quartile of rental assistance priority index.
- 23% of members reside in the top 10 zip codes for the rental assistance priority index are also DIAs
- For the top 10 ZIPs, the average rental assistance priority index is 940% higher than the average rental assistance for the broader population
- Average PCP visits/1,000 for members residing in the top 10 ZIPs (1,416) is 7% less than the average number of PCP visits/1,000 (1,524).
- ED visits/1,000 for members residing in the top 10 ZIPs (568) is 24% higher than the average number of ED visits/1,000 (459).

ED and PCP Visits - HP vs Top 10%								
Measure	HP		Top 10%	% Difference Between HP & Top 10%				
ED Visits/k		459		568 24%				
PCP Visits/k		1,524	1,	416 -5%				

Quartile Category Breakdown									
Quartile Category	Current Members	% Membership	Average Surevey Metric Value						
1	31	0%	-0.73						
2	812	0%	-0.60						
3	3,588	1%	-0.42						
4	406,573	99%	0.23						
	660	0%							
Grand Total	411,664	100%	0.10						

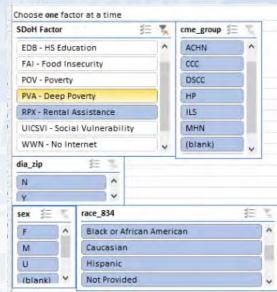


### **Implications**

- Data to support target population for upstream SDOH housing interventions ex. renters at risk of eviction
- Quality metrics for collaborative programs with housing providers



### CountyCare Health Equity Dashboard



Dashboard includes Metopio, DIA, demographic and health care utilization data -Filterable by zip code, DIA status gender, race, SDoH Factor, provider group and CME

Example below shows output used to develop Cook County Health's Transformation Proposal

zip	Region	dia_zip	CVI	%FAI	%POV	%PVA	RPX	UICSVI	wwn	Current Members	Current Membership	Med PMPM 10		PCP Visits Per 1000
	60629 Southwest Chicago	Y	53.38		0.20	0.18		0.78	0.74	18	,529 4.59	% \$218.68	323	1,734
_	60632 West Chicago	Y	52.26			0.19	0.07	0.72	0.70	14	,881 3.6	% \$184.96	234	1,775
^	Far Southeast 60628 Chicago	Ÿ	48.76		0.31	0.24	0.12	0.86	1.18	0.23 12	,012 2.9	\$335.72	582	1,225
Ų	Far Southeast 60620 Chicago	Y	48.09		0.30	0.25	0.12	0.81	1.31	0.29 11	,724 2.8	% \$323.36	555	1,293
U	60619 South Chicago	Υ	46.48		0.29	0.25	0.12	0.79	1.26	0.30 10	,981 2.7	\$349.11	637	1,303
TA	60609 South Chicago	Y	51.92		0.25	0.27	0.11	0.93	1.10	10	,662 2.69	\$319.69	396	1,610
	60637 South Chicago	Υ			0.32	0.35	0.19	0.92	1.54	0.23 10	,043 2.49	\$333.91	539	1,179
	60636 Southwest Chicago	Υ	62.50		0.36	0.32	0.14	1.14	1.92	0.39 8	,842 2.1	6 \$342.72	561	1,383
	60608 Central Chicago	Y			0.19	0.19	0.08	0.74	0.84	8	,614 2.19	\$345.55	398	1,697
N =	60621 South Chicago	Υ	53.26		0.41	0.41	0.21	1.33	2.32	0.35 7	,742 1.9	6 \$398.03	639	1,436
	60616 Central Chicago	Y			0.22	0.23	0.10	0.65	0.36	4	,928 1.29	\$472.34	370	1,384
	Far Southeast 60643 Chicago	Υ			0.21		0.08	0.28	0.23	4	,720 1.19	6 \$401.35	499	1,259
	60615 South Chicago	N			0.23	0.24	0.14	0.57	0.49	4	,214 1.0	\$394.51	607	1,270
i I	Far Southeast 60633 Chicago	Ÿ			0.18	0.18	0.08	0.40	0.36	1	,498 0.4	% \$256.95	423	1,421
	60805 Southwest Suburbs	N						-0.23	0.04		723 0.29	\$366.92	394	1,415
	60456 Southwest Suburbs	N						-0.07			148 0.0	\$296.07	368	1,369

# HFS QUALITY PILLARS



Measure Abbreviation	P4P Measures	P4R Measures for Reporting
Aim: Better Care		
	Pillar 1: Adult Behavioral Health	
FUH	1. Follow-Up After Hospitalization for Mental Illness: 7-Day	1. Follow-Up High Intensity Care for Substance Use Disorder (FUI) - 7 day follow-up
1011	2. Follow-Up After Hospitalization for Mental Illness: 30-Day	2. Follow-Up High Intensity Care for Substance Use Disorder (FUI) - 30 day follow-up
FILA	3. Follow-Up After Emergency Department Visit for Alcohol and Other Drug Abuse or Dependence: 7 day	3. Pharmacotherapy for Opioid Use Disorder (POD)
FUA	4. Follow-Up After Emergency Department Visit for Alcohol and Other Drug Abuse or Dependence: 30 day	
	Pillar 2: Child Behavioral Health	
FUH	1. Follow-Up After Hospitalization for Mental Illness: 7-Day (6-17 years of age)	1. Mobile Crisis Response Services that Result in Hospitalization (EDW data)
1011	2. Follow-Up After Hospitalization for Mental Illness: 30-Day (6-17 years of age)	2. Visits to the ER for BH services that Result in Hospitalization (EDW data)
5110.4	3. Follow-Up After Emergency Department Visit for Mental Illness:7-day (6-17 years of age)	3. Overall Number and Length of BH Hospitalizations (EDW data)
FUM	4. Follow-Up After Emergency Department Visit for Mental Illness: 30-day (6-17 years of age)	4. Number of Repeat BH Hospitalizations (EDW data)
	Pillar 3: Maternal and Child Health	
PPC	1. Prenatal and Postpartum Care: Timeliness of Prenatal Care	<ol> <li>Well-Child Visits in the First 30 Months of Life (W30)</li> <li>Child and Adolescent WellCare Visits (WCV)</li> </ol>
PPC	2. Prenatal and Postpartum Care: Postpartum Care	3. Annual Dental Visit (ADV) - Age Groups: 2-3 years, 4-6 years, 7-10 years, 11-14 years, 15-18 years, 19-20 years
CIS	3. Childhood Immunization Status (Combo 3) - (CIS)	4. Childhood Immunization Status (CIS) - Combo 10
im: Healthy People	e/Healthy Communities	
	Pillar 4: Equity	
BCS	1. Breast Cancer Screening	1. HIV Viral Load Suppression (CMS Adult Core Set)
CCS	2. Cervical Cancer Screening	2. Gap in HIV Medical Visits
СВР	3. Controlling High Blood Pressure	3. Prescription of HIV Antiretroviral Therapy
AAP	4. Adults' Access to Preventive/Ambulatory Health Services	
	Pillar 5: Improving Community Placement	1 LTCC Community Comp Plan and Limitete
	None	LTSS Comprehensive Care Plan and Update     Successful Transition after Long-term Care Stay
		2. Successful fransition after Long-term Care stay

### PIW – Assignments

Performance Improvement and Population Health

**Quality Improvement Committee** 

P1: Adult BH
P2: Child BH
Aim: Better Care

Co-chairs: Terri/Debra Exec. Sp.: Andrea McGlynn P3: Maternal/Child Health

**Aim: Better Care** 

Co-chairs: Maeve/Emily Exec. Sp.: Andrea

McGlynn

P4: EQUITY
Aim: Healthy People/Healthy
Communities

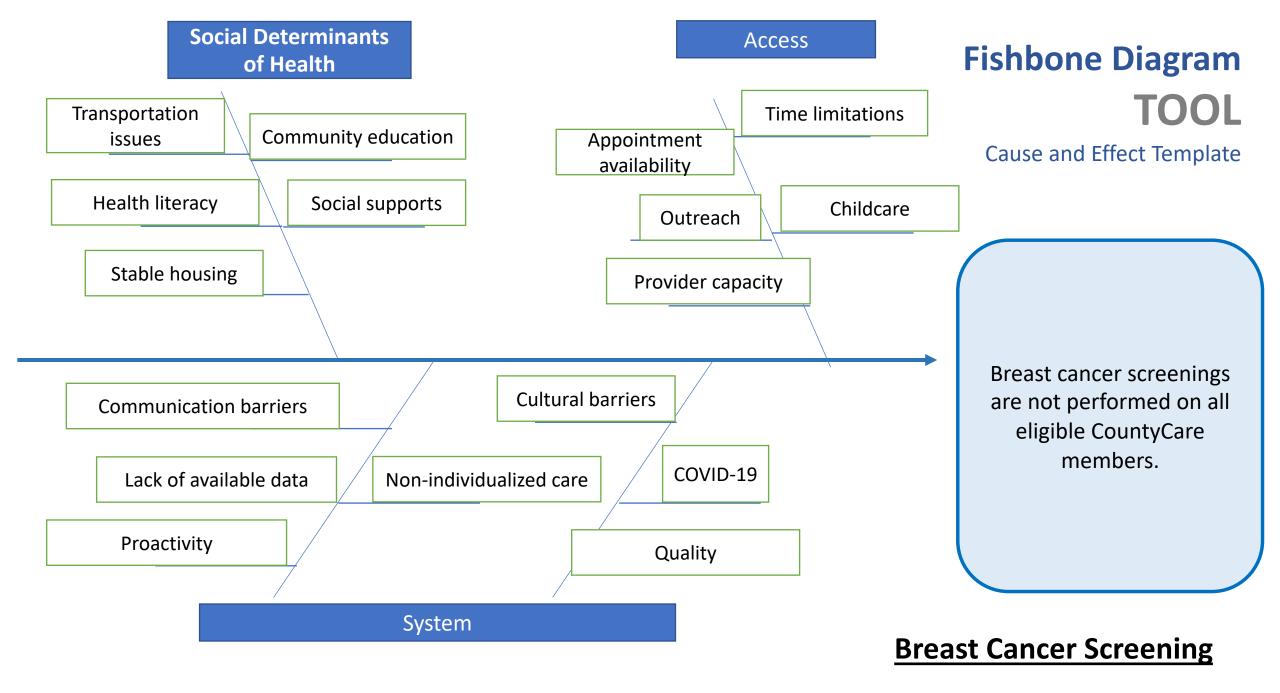
Co-chairs:
Gagan/Justine
Exec. Sp.: Dr. Collins

P5: Improving
Community Placement
Aim: Health
People/Healthy
Communities

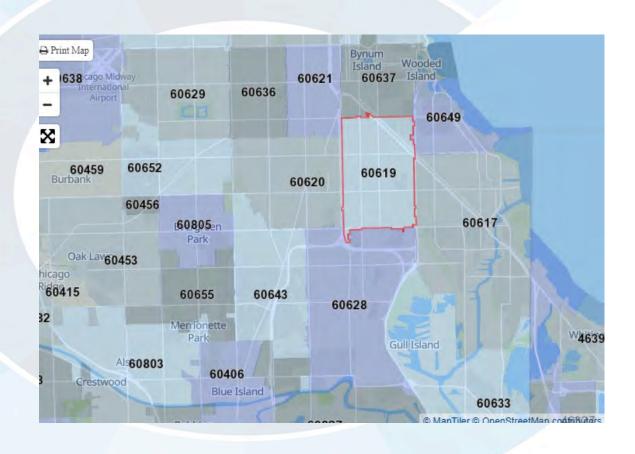
Co-chairs: Monica/Vivian Exec. Sp.: Marcy Elamin

### PIWs: Equity Training

- Brings to the forefront social determinants of health and how critical they are to improving health outcomes
- Allows for thinking beyond the individual to focus on community concerns and interests
- Stratification reporting to identify:
  - Racial, ethnic, geographic, and/or age disparities in care
  - Hold health plans accountable to address such disparities, with the goal of achieving equitable health care and outcomes
- Focus on Disproportionately Impacted Areas (DIA) Zip codes with the greatest number of members with gaps in care



### Provider Group A: Targeted Outreach



- Provider Group A targeted outreach to zip codes:
  - 60619 (Neighborhoods: Avalon Park, Burnside, Calumet Heights, Chatham, Grand Crossing, Roseland, Longwood Manor, Park Manor, West Chatham
  - 60628 (Neighborhoods: Calumet Heights, Morgan Park, Roseland, West Pullman, Longwood Manor, Washington Heights, Fernwood, Brainerd

### Provider Group A: Interventions by DIA zip codes

- Member outreach to 609 member's living in zip codes 60619 and 60628 with 1-4 gaps in care AND offer transportation via Uber
  - Start Date: 09/07/2021
  - 3 phone calls to member
  - Assistance with scheduling mammogram and/or PCP appointment
  - Offered transportation via Uber
  - Follow-up phone call after appointment to ensure appointment p
    - Assistance with rescheduling appointment as needed

### Outreach Summary members with 2 + Care Gaps 507 Calls

# Unique Member Calls	% from 507 Population	Last Call Resolution
141	27.8%	Answering Machine - Left Message
102	20.1%	Conversation with member, discussed care gaps and UBER opportunity
170	33.5%	Call Attempts- No answer
3	0.6%	Member requested to be added to Do Not Call list
86	17.0%	Invalid Phone number

- 6 members accepted UBER ride
- 10/15/21 1<sup>st</sup> scheduled appt
- # of members accepting an appt is lower than expected
- Members have expressed appreciation for the UBER offer but did not have transportation as a barrier.
- Besides assistance with PCP visit, CCS, BCS, additional specialty referrals, medical and psychosocial care needs addressed



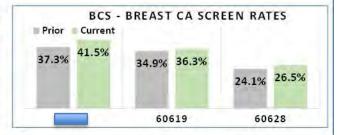
### Provider Group A – Disproportionately Impacted Areas (DIAs)

### Zip Codes 60619 and 60628 – July to December 2021 Rate Comparison

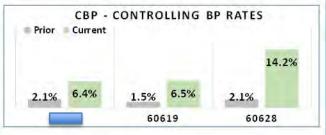
				AAP	- PCP Vis	it				
	Noncompliant		Compliant		Denominator		Rate		Diff from CCSN	
Zip Codes	Prior	Current	Prior	Current	Prior	Current	Prior	Current	Prior	Current
CCSN	11,682	8,542	13,082	15,062	24,764	23,604	52.8%	63.8%		
60619	1,065	816	857	936	1,922	1,752	44.6%	53.4%	-8.2%	-10.4%
60628	693	493	542	644	1,235	1,137	43.9%	56.6%	-8.9%	-7.2%

52 /10/	56.6%
33.4%	43.9%
	53.4%

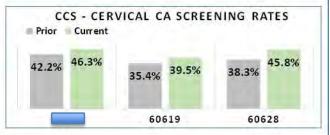
				BCS - Br	east CA S	creen				
	Noncompliant		Compliant		Denominator		Rate		Diff from CCSN	
Zip Codes	Prior	Current	Prior	Current	Prior	Current	Prior	Current	Prior	Current
CCSN	1,299	1,074	773	762	2,072	1,836	37.3%	41.5%		
60619	69	51	37	29	106	80	34.9%	36.3%	-2.4%	-5.3%
60628	60	50	19	18	79	68	24.1%	26.5%	-13.3%	-15.0%



				CBP - C	Controllin	g BP				
	Noncompliant		Compliant		Denominator		Rate		Diff from CCSN	
Zip Codes	Prior	Current	Prior	Current	Prior	Current	Prior	Current	Prior	Current
CCSN	3,222	2,789	68	191	3,290	2,980	2.1%	6.4%		
60619	198	157	3	11	201	168	1.5%	6.5%	-0.6%	0.1%
60628	142	109	3	18	145	127	2.1%	14.2%	0.0%	7.8%



				CCS - Cerv	ical CA Sc	reening				
	Noncompliant		Compliant		Denominator		Rate		Diff from CCSN	
Zip Codes	Prior	Current	Prior	Current	Prior	Current	Prior	Current	Prior	Current
CCSN	6,887	5,942	5,021	5,132	11,908	11,074	42.2%	46.3%		
60619	521	437	285	285	806	722	35.4%	39.5%	-6.8%	-6.9%
60628	330	266	205	225	535	491	38.3%	45.8%	-3.8%	-0.5%



# Provider Group B: MY2021 HEDIS Measure Performance

### **HEDIS Measure Performance Report:**

Type: Monthly |LOB(s): ALL|Super Group B | Sub Group: ALL|Year/Month: 2021 July|Grouping: PCP|Payers: MCD,MLI

								Perce	entile			
Measure Abbrev	Measure Name	Total Num	Denom	Needed Mbrs to Target	Previous Month Rate	Current Rate	Rate Diff	Percentile 25th	Percentile 50th	Target Percentile 75th	Percentile 90th	Overall Rate
	Adult Access to Preventative/Ambulatory Services	12557	23502	7460	50.94%	53.43%	2.49%	77.16%	81.69%	85.17%	87.56%	59.48%
BCS	Breast Cancer Screening	1356	3316	768	39.76%	40.89%	1.13%	52.85%	58.82%	64.06%	69.22%	43.52%
СВР	Controlling High Blood Pressure	31	4826	3233	0.54%	0.64%	0.10%	54.01%	61.80%	67.64%	72.75%	8.60%
CCS	Cervical Cancer Screening	3008	9849	3630	30.26%	30.54%	0.28%	55.23%	61.31%	67.40%	72.68%	46.56%



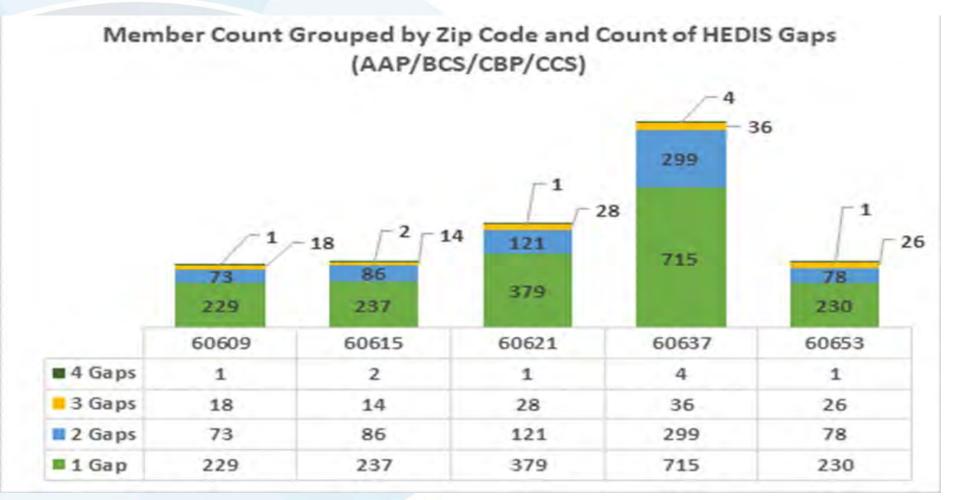
# Provider Group B: BCS & CCS Rates for Disproportionately Impacted Areas (DIAs) with Mammography Site Designation

<u> </u>						1		
		Breast Cancer Scree	ening					
Mbr DIA	маммо	Community Name(s)	В	CS	Group B	fference CountyCare	Mbr DIA	МАММО
Zip	SITE	, , , , , , , , , , , , , , , , , , , ,	Denom	Rate	Rate 41.2%	Rate 43.8%	Zip	SITE
60637	PROV	Greater Grand Crossing, Hyde Park, Washington Park, Woodlawn	154	35.1%	-6.11%	-8.77%	60637	PROV
60619		Avalon Park, Greater Grand Crossing	152	42.1%	0.94%	-1.72%	60411	
60620		Beverly	142	52.1%	10.94%	8.28%	60619	
60649		Jackson Park Highlands, Woodlawn	134	52.2%	11.07%	8.41%	60636	
60621	PROV	Englewood, Park Manor	126	36.5%	-4.66%	-7.32%	60620	
60644	PRIETO	Austin	118	29.7%	-11.51%	-14.17%	60649	
60651	STROG	West Humboldt Park, North Austin, Austin	110	33.6%	-7.53%	-10.19%	60621	PROV
60636		Englewood	107	36.4%	-4.72%	-7.38%	60644	PRIETO
60612	STROG	Medical District, East Garfield Park, Lawndale	100	30.0%	-11.17%	-13.83%	60651	STROG
60628		Cottage Grove Heights, Longwood Manor	99	52.5%	11.36%	8.70%	60623	STROG
60653	PROV	North Kenwood, Bronzeville	98	39.8%	-1.37%	-4.03%	60629	
60623	STROG	Little Village, Lawndale	92	35.9%	-5.30%	-7.96%	60628	
60411		Chicago Heights	85	43.5%	2.36%	-0.30%	60624	STROG
60629		Chicago Lawn, Ashburn, Gage Park	85	43.5%	2.36%	-0.30%	60617	
60609	PROV	Back of the Yards, Bronzeville	81	40.7%	-0.43%	-3.09%	60653	PROV
60624	STROG	East Garfield Park, Lawndale	79	31.6%	-9.52%	-12.18%	60612	STROG
	-							

			Cervical Cancer Scree	ening			
•	Mbr DIA Zip	MAMMO SITE	Community Name(s)	co	cs	% Dit Group B Rate	ference CountyCare Rate
	Zip			Denom Rate		30.7%	46.9%
	60637	PROV	Greater Grand Crossing, Hyde Park, Washington Park, Woodlawn	654	30.7%	0.00%	-16.16%
	60411		Chicago Heights	507	32.0%	1.22%	-14.94%
	60619		Avalon Park, Greater Grand Crossing	405	34.1%	3.34%	-12.82%
	60636		Englewood	400	26.8%	-3.98%	-20.14%
	60620		Beverly	394	30.5%	-0.27%	-16.43%
	60649		Jackson Park Highlands, Woodlawn	347	35.4%	4.72%	-11.44%
	60621	PROV	Englewood, Park Manor	332	34.0%	3.31%	-12.85%
	60644	PRIETO	Austin	321	30.2%	-0.51%	-16.67%
	60651	STROG	West Humboldt Park, North Austin, Austin	319	30.7%	-0.01%	-16.17%
	60623	STROG	Little Village, Lawndale	313	21.1%	-9.64%	-25.80%
	60629		Chicago Lawn, Ashburn, Gage Park	254	30.3%	-0.42%	-16.58%
	60628		Cottage Grove Heights, Longwood Manor	246	27.6%	-3.09%	-19.25%
	60624	STROG	East Garfield Park, Lawndale	232	32.3%	1.60%	-14.56%
	60617		East Chicago, Calumet Heights	226	32.7%	2.01%	-14.15%
	60653	PROV	North Kenwood, Bronzeville	225	32.9%	2.16%	-14.00%
	60612	STROG	Medical District, East Garfield Park, Lawndale	218	31.7%	0.92%	-15.24%



# <u>Provider Group B</u> Member Count grouped by zip code and count of HEDIS Gaps (AAP/BCS/CBP/CCS)





# HealthCare Extravaganza Results October 23, 2021 at Provident

### **Successes**

- Gaps closed
- Member interaction
- CountyCare staff engagement with members
- Increase Health Equity for disparate population in 4 zip codes
- Promotion of CountyCare HealthPlan
- Multidisciplinary Collaboration with Provident Staff
- Member Incentives: AAP, BCS, CCS and COVID vaccination

### O Member Comments:

- Liked to be able to get all services done at once
- Been waiting 6 months for a mammogram and then CountyCare called
- Glad that services are offered on a Saturday because it is hard to come during the week

### **Gaps Completed**

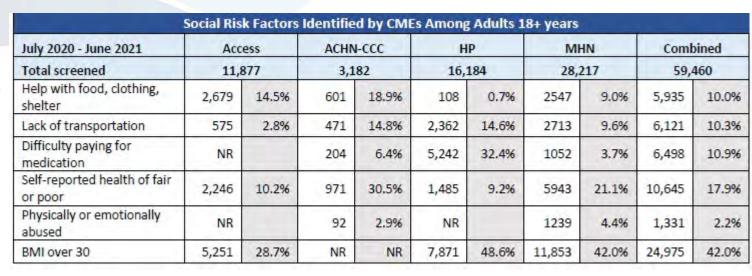
- Mammograms 22/34
- Pap Smears 14/29
- PCP Visits 13/27
- COVID Vaccination 6

### Volunteers

- CountyCare Staff at event 8
- CountyCare Outreach staff
- Provident Mammograms 5
- Provident Providers 10
- Nurses 2
- MA/Clerks 5



### CountyCare



Social Risk	Factors I	dentifie	d by	CMEs A	mong	Childrer	0 - 17	/ears		
July 2020 - June 2021	Access		ACHN-CCC		HP		MHN		Combined	
Total screened	10,058		759		3,149		18,371		32,337	
Help with food, clothing, shelter	509	5.1%	101	13.3%	1,896	60.2%	1359	7.4%	3,865	12.0%
Lack of transportation	39	0.4%	19	2.5%	684	21.7%	1239	6.7%	1,981	6.1%
Difficulty paying for medication	NR		4	0.5%	178	5.7%	572	3.1%	754	2.3%
Self-reported health of fair or poor	0	0.0%	32	4.2%	266	8.4%	723	3.9%	1,021	3.2%
Physically or emotionally abused	NR		5	0.7%	NR		392	2.1%	397	1.2%
BMI over 30	1,040	10.3%	NR		505	16.0%	NR		1,545	4.8%
Depression	8	0.1%	24	3.2%	123	3.9%	NR		155	0.5%



# HOUSING INSECURITY





### The Battle Against Homelessness

### Prevention

- Eviction prevention
- Diversion

### Crisis

- Bridge
- Medical Respite

### Housing

- Rapid ReHousing
- PSH

### Income

- Employment
- SOAR

### Medical Respite

### Medical Respite at a Glance

Medical respite care is acute and postacute care for people experiencing homelessness who are not ill enough to remain in a hospital, but are too ill to recover on the streets.

136 U.S. programs (https://nimrc.org/medical-respite-directory/)

Medical Respite Care...

....reduced index hospital length of stay: 2 days ....reduced subsequent emergency department visits: 45% ....reduced subsequent inpatient admissions: 35%

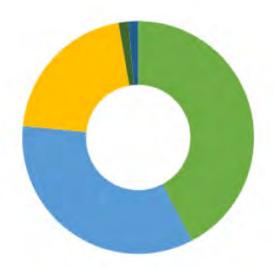
....ROI offset for each hospital dollar invested in Medical Respite: **81%** (Shetler D. J of Health Care for the Poor and Underserved 2018;29(2):801-813.)



### Medical Respite

### MRC of Oak Park FY21

- CountyCare P4P Withhold Reinvestment: 42%
- Cook County Dept of Planning & Development: 34%
- FEMA: 21%
- Donations: 1%
- Foundations: 1%





### Members Experiencing Homelessness

 CountyCare Investment as of 2/3/2022

Baseline= 0
Target =66
\*In January 2022
CHH confirmed
we now have 67
slots

### **FHP Target Group**

- Referred = 222
- Active Outreach= 2
- Removed from Outreach = 220
  - UTR= 72
  - Ineligible= 20
  - Deceased= 2
  - CC Referred EFG= 65
  - **❖** Enrolled = 61
  - ❖ Matched with housing provider = 20 Bridge Housed= 6
  - ❖ FHP Housed=35



### Advancing Health Equity (AHE) Learning Collaborative (Phase 2)

### 7 states total

 Illinois Team has decided to focus payment innovation around the Cook County Health/CountyCare investment in the Flexible Housing Pool (FHP).



Explore Tenancy Supports as a critical component of the investment and Medicaid model

# OTHER STRATEGIES



### **Food Insecurity**



Top 10 Values by ZIPs With More Than 500 Current Members

ZIP	Region	dia_zip	Food Insecurity Rate	Current Members	% Current Membership
60621	South Chicago	у	41%	7,742	1.9%
60624	West Chicago	Υ	37%	9,306	2,3%
60636	Southwest Chicago	Y	36%	8,842	2.1%
60653	South Chicago	Y	33%	5,747	1.4%
60827	Far Southeast Chicago	Y	32%	4,984	1.2%
60649	South Chicago	Y	32%	9,113	2,2%
60637	South Chicago	Υ	32%	10,043	2.4%
60644	West Chicago	Υ	32%	10,650	2.6%
60472	South Suburbs	Y	31%	748	0.2%
60628	Far Southeast Chicago	Υ	31%	12,012	2.9%
Grand Total	2	4	34%	79,187	19.2%



### PREVIOUS PARTNERSHIPS

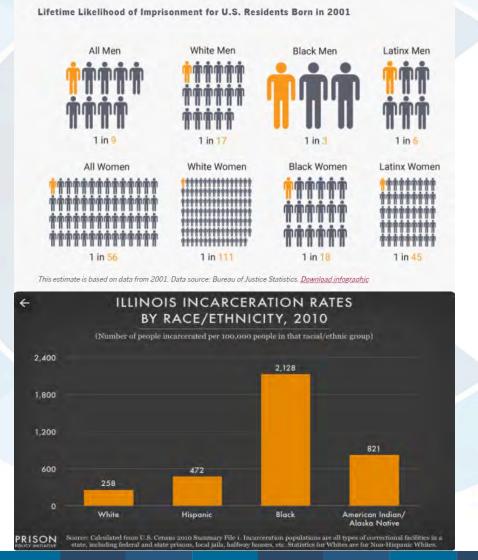
- Fresh Food Trucks
- Food as medicine
- Prepared Meal Delivery

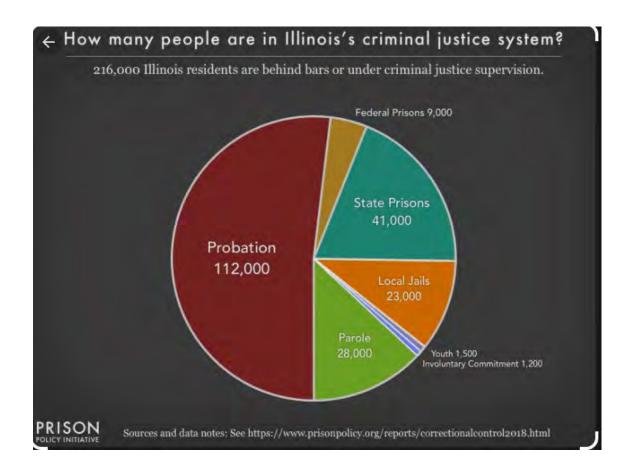
### WHAT'S NEXT?

- -Food insecurity programming including nutritionists evaluations (for select diagnoses), education on food labels and alternatives
- -Education on SNAP benefits
- -Other food subsidies



### **Incarceration Statistics**

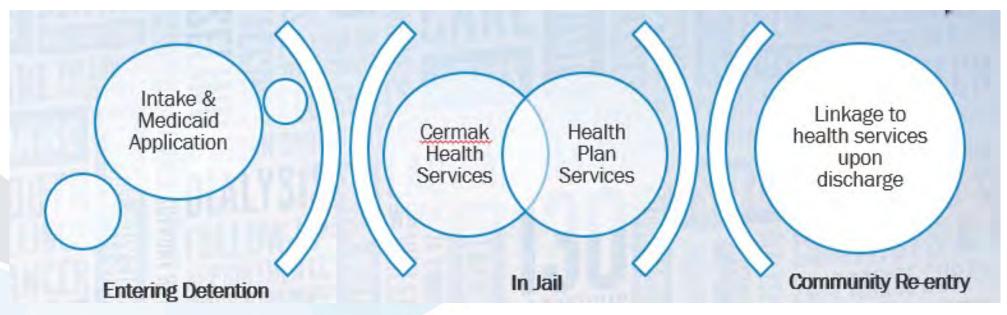






### Justice Involved Population Health Program







### **EQUITY Goals**

- Equity Training for HPS Staff
- Increasing County MBE/WBE and State BEP spend
- Director of Equity
- Health Equity Accreditation
- Racial Disparity Dashboard
- Incorporation of Metopio Data
- Member Demographics Campaign
- Provider Incentives





### **Thank You**



Cook County Health and Hospitals System Minutes of the Board of Directors Meeting February 25, 2022

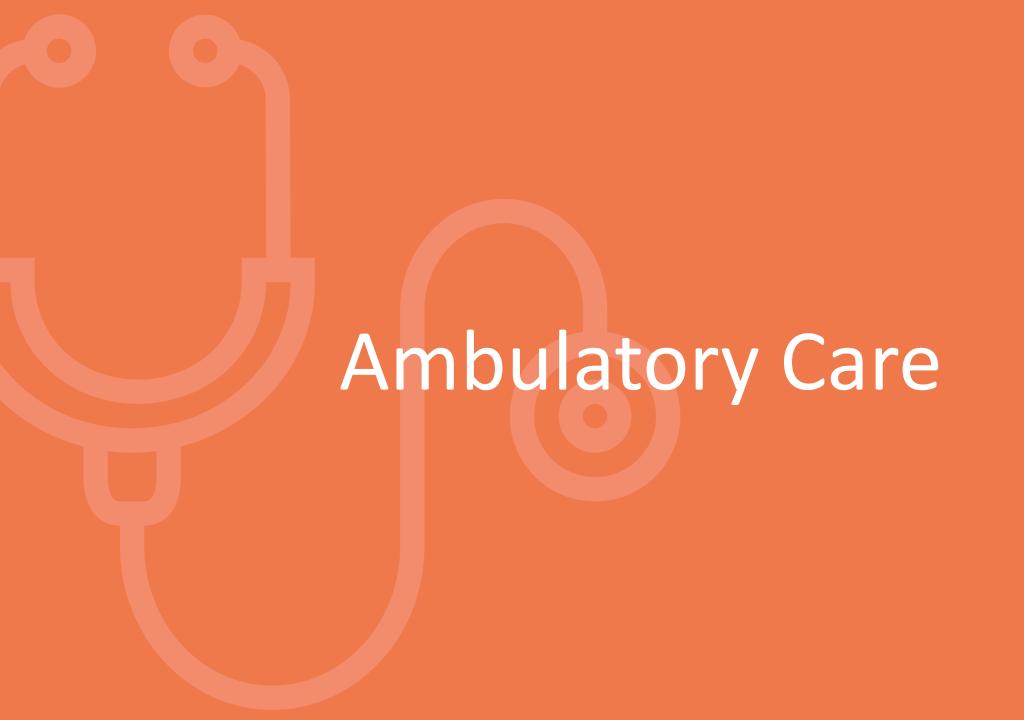
ATTACHMENT #4

## **Divisional Reports**

Strategic Highlights & Opportunities
For CCH Operating Divisions for January 2022

February 25, 2022





# Strategic Highlights January 2022

- CCH's Ambulatory Services was selected by America's Essential Hospitals to present at their National Conference *VITAL 2022*. Two presentations were selected *The Compassionate Journey* and *The Community Mass Vaccination Program*.
- Our Patient Support Center answered more than 41,000 patient calls with an average answer speed of sixty seconds.
- We completed insurance verification retraining provided by the revenue cycle department for all scheduling staff.
- Our newly merged Covid-19 testing and vaccination call center answered more than 12,000 calls.
- Our primary care community sites will begin copayment collection and training as part of our concerted focus on improving revenue capture.
- We are working to reduce specialty care backlogs by removing duplicates and patients already seen, adding new patient access for advanced practice providers, and rewriting Cerner triage rules to move patients not needing in person visits to eConsult.
- To continue addressing access matters, our specialty team is focused on optimizing the use of Advanced Practice Providers and maximizing e-consult services for several specialties. The specialty team is partnering with our patient support center to fill vacant slots and develop an opportunity for patient self-scheduling for services with immediate access.
  - GI Stroger backlog decreased from 89 to 12 due to added slots and templates for APP's.
  - Hand Orthopedics Stroger Backlog decreased from 335 to 0 due to added slots and templates for APP's.
  - Orthopedics backlog decreased from 255 to 207 due to added slots and templates for Advanced Practice Nurses.
  - Hematology backlog decreased from 268 to 227 due to rerouting orders to eConsult.

### COVID-19

- The last day of operation for the re-opened mass vaccination sites (Matteson, Forest Park, DesPlaines) sites was February 13, 2022. In the four weeks we were open, we administered 15,713 COVID-19 vaccines to community members.
- We began giving away \$100 gift cards as part of a comprehensive incentive program to increase vaccination rates. We distributed the first \$250,000 worth of gift cards in less than one day to patients at the mass vaccination sites, throughout our community health centers, and at Stroger and Provident hospitals.
  - The week before the gift card promotion, we saw an average of 400 people a day across all of Cook County Health's fifteen sites offering vaccination. On the first day of the promotion, we saw approximately 2,500 people. Despite having exhausted our gift card supply, the next day we saw nearly 1,700 people at our three mass vaccination sites alone. We were thrilled with the response, and this helped us understand the positive impact of incentive programs.
  - We also want to highlight that 44% of the vaccines we administered for the promotion were first doses!



# Strategic Opportunities/Challenges January 2022

- Across oral health, we are focusing on patient access and volumes by reviewing all appointment templates, slot utilization, and no-shows.
- We received equipment early in January enabling our Cottage Grove and Robbins community dental clinics to do digital radiographs.
- We expanded elective surgeries at Provident by adding an additional full day of block time to better serve our patients.
- We are working on a project proposal to form a limb salvage program.
- Working with Human Resources to prioritize hiring needs across ambulatory.



# Cermak Health Services

# Strategic Highlights January 2022

- Ongoing Patient Vaccination. From February 2021 through January 31, 2021, 14,897 COVID Vaccination doses have been dispensed.
- Current vaccination rates of active patients housed in the jail are 64% have received at least one dose and 54% have received two doses.
- Preparation for National Commission on Correctional Health Care (NCCHC) Accreditation continues. Survey is expected in 2022. JTDC reaccreditation survey also expected in 2022.



# Strategic Opportunities/Challenges January 2022

- Increase in jail census. Trending suggest census for 2022 to be in excess of 6,000 detainees.
   Transfers to the Illinois Department of Corrections have stalled again with more than 850 detainees remanded to IDOC remaining at Cook County Jail.
- COVID protocols, testing and vaccination remain critical strategies to mitigate and contain COVID at the jail.



# Cook County Department of Public Health

# Strategic Highlights January 2022

### **COVID**

- o To date, CCDPH's mobile program has administered more than 47,675 vaccinations at 1,257 locations.
- o To date, CCDPH partner providers completed 4,223 in-home vaccinations
- o To date, CCDPH has distributed 361,640 BinaxNOW tests to organizations
- Distributed thousands of KN95 masks to CBOs, FQHCs and municipalities

### **Non-COVID**

- CCDPH's Opioid Overdose Prevention Team updated two resources for community stakeholders a research brief that summarizes the research evidence on overdose prevention sites and an opioid ShinyApp with 2020 overdose mortality counts. The research brief will be shared on our website, the ShinyApp is available <a href="here">here</a>. Opioid data in the ShinyApp is also available by municipality.
- Registration is now open for the 17<sup>th</sup> Annual Chicago Food Justice Summit that will be held virtually on Feb 23-25, 2022. The theme of this year's summit will be Collective Care, highlighting how, in the face of a global pandemic, neighbors, mutual aid networks, cooks, and local growers showed up for us and showed up for each other. CCDPH is partnering with Chicago Food Policy Action Council to plan this year's event which will include a panel session on Cook County's Good Food Purchasing Initiative. You can learn more and register for this year's summit at <a href="https://www.chicagofoodpolicy.com/chicagofoodsummit">https://www.chicagofoodpolicy.com/chicagofoodsummit</a>.
- Routine inspections: 50; nuisance complaints responded to:33; COVID mitigation violations received & responded to: 66 COVID Order tickets/citations issued: 2



# Strategic Opportunities/Challenges January 2022

- New time-saving Sexually Transmitted Disease surveillance workflow is planned to roll out by the end of the second quarter.
- Moving forward with planning for the Healthy Suburban Cook Survey, Health Atlas, and the Youth Risk Behavioral Survey. Creation of a survey to assess data across units at CCDPH to understand existing data streams, ongoing projects, grant, assessment, or evaluation requirements, databases, data collection, practices, and indicators of interest specific to each unit to be incorporated using Qualtrics.
- CDPH plans to launch WePlan 2025 within the next 4-6 weeks.
- Working with Human Resources to prioritize hiring needs.





# Strategic Highlights January 2022

- Due to the increase in the Medicaid population and hold on redeterminations until the end of the Public Health Emergency (PHE), CountyCare continues to experience significant growth with membership in January 2022 exceeding 425k.
- In January, CountyCare was notified that it will retain 50% auto-assignment within Cook County beginning in March in comparison with Blue Cross Blue Shield, Aetna, and Molina's 16.7% and Meridian's 0% auto-assignment.
- On January 31, CountyCare's Health Plan Care Management team transitioned to CCH's home-grown care management system, CMIS.
- In alignment with the Healthcare and Family Services (HFS) implementation of the new admission, discharge, and transfer (ADT) vendor, CountyCare established a no-cost data sharing agreement in November and completed its ADT implementation this past month with Collective Medical Technologies.
- As part of CountyCare's contract with Healthcare and Family Services, CountyCare has made a commitment to invest in diverse minority- and women-owned businesses that are certified by the state Business Enterprise Program (BEP). To meet this commitment, in January, CountyCare transitioned 60% of its call center to PCG Consulting Group (PCG). Based in Cook County, PCG reflects the diversity of its community with 79% of employees coming from local underserved areas. The remaining 40% of call center operations will transition by July 1, 2022.
- Claim auto-adjudication increased to 85% and there was a decrease in claims pended in November.
- Timeliness to pay claims continues to decrease month over month and is currently close to an average of 30 days.
- As of January, 33 CountyCare members have been placed in permanent housing through the Flexible Housing Pool and 3 members are in bridge housing.
- In 2021, over 14K emergency home delivered meals were provided to members as part of CountyCare's meals program due to the COVID-19 pandemic.
- In 2021 it was identified that 4.4K CountyCare members had visited the emergency department due to ESRD/CKD. CountyCare issued a request for proposal and in January, selected a vendor to improve the care management of members with ESRD/CKD to improve quality outcomes and reduce unnecessary utilization of the emergency department.

# Strategic Opportunities/Challenges January 2022

- Opportunities for cost-savings and quality improvement continue to be an area of focus for Health Plan Services in 2022. Under its Medical Cost Action Plan structure, CountyCare has identified over \$40M of estimated costs savings opportunities for County FY2022 across the areas of Pharmacy, Network Management, Medical Management, and Operations.
- Development of additional value-based care models and additional expansion of the CountyCare PCP network.
- CountyCare is continuing to implement initiatives to improve its Medical Loss Ratio (MLR) through its medical cost action plan process.
- Working with Human Resources to prioritize hiring needs.





# Strategic Highlights January 2022

- ACR Mammography 3-D accreditation documentation was received on January 31, 2022
- ICU reopening expected this Spring
- Offering monoclonal antibody therapy to reduce COVID-19 hospitalizations.



# Strategic Opportunities/Challenges January 2022

- HVAC system being addressed to ensure optimal OR and procedure needs.
- General facilities upgrades continue including painting, lighting and furniture continue.
- Preparing for accreditation surveys for lab and nuclear medicine.
- Planning staffing levels for expansion of med-surg and the reopening of the emergency room to ambulance runs.
- Working with Human Resources to prioritize hiring needs.



# John. H. Stroger, Jr. Hospital

# Strategic Highlights January 2022

- Covid Volume has declined by 80% down to 25 inpatients
- Surgical volumes recovering
- 4x daily throughput meetings to coordinate care and improve access, reduce length of stay and reduce ER boarding times
- First Stroger Hospital Patient Family Advisory Council on February 23<sup>rd</sup>



# Strategic Opportunities/Challenges January 2022

- Working with County's capital planning team on wayfinding at Stroger Hospital
- "Geographic" localization being pursued to cohort similar patients to make clinician rounding easier, to improve quality, and potentially reduce LOS being evaluated.
- Disbursing EVS and Transportation employees to specific departments or nursing units to help with speed/throughput being piloted and targeted for expansion.
- Evaluating options for expanded chaplaincy services.
- Working with Human Resources to prioritize hiring needs.





ISRAEL ROCHA, JR.
CHIEF EXECUTIVE OFFICER
REPORT TO THE BOARD OF DIRECTORS
February 25, 2022

### **Employee Recognition**

At the end of this month, after a thirty-year career with Cook County Health, **Dr. Connie Mennella** will be retiring from her role as Chair of Correctional Health. Driven by her desire to help the underserved, Dr. Mennella, a native Chicagoan and Northwestern University Medical School graduate, came to work for CCH' Cermak Health Services in 1991 after completing a residency in Internal Medicine. Dr. Mennella started at Cermak as a Primary Care physician and subsequently became the head of Cermak's Department of Correctional Health in 2014. In her leadership role, Dr. Mennella has been dedicated to addressing the health conditions seen disproportionately in the incarcerated such as mental illness, substance use disorders and poorly controlled chronic illnesses. Her leadership was instrumental during the COVID-19 pandemic; the Cermak team's mitigation efforts were recognized as a best practice by the CDC. Dr. Mennella's tireless work and dedication have been recognized by her peers and leaders in the medical community. She earned the 34th "Human Rights Award" from the National Alliance Against Racist & Political Repression, the Health and Medicine Policy Research Group "Medicine Award" in 2018 and Cook County Health's "Doctor of the Year" award in 2017. Cook County Health is exceptionally grateful to Dr. Mennella for the compassion and expertise she has provided to her patients and team during her tenue.

**Dr. Suja Mathew**, Chair, Department of Medicine, will be departing CCH after more than 20 years of service to the health system. Dr. Mathew joined CCH in 2000 and was appointed Chair of the Department of Medicine in 2015. She also served as Director of the Internal Medicine Residency program from 2008-2016. Dr. Mathew has committed her career to advancing health equity, providing compassionate health care, and mentoring the next generation of physicians. Thank you to Dr. Mathew for your tremendous work.

The **Cook County Department of Public Health** recently achieved recertification as a local health department by the State of Illinois. CCDPH's Community Needs Assessment and Health Plan was also approved as part of certification. As a certified local health department, CCDPH serves as the public health authority for suburban Cook County. CCDPH strives to prevent the spread of other communicable diseases, enforce public health laws and regulations, analyze health data, address emerging health threats, and promote the health and wellbeing of its communities. Congratulations to the entire CCDPH team for this achievement.

### **Activities and Announcements**

# **COVID-19 Update**

After several weeks of significant increases, inpatient admissions for COVID have continued to decrease as have cases at the jail.

While indoor mask mandates will be lifted in most public spaces per the Cook County, Chicago and Illinois health departments, healthcare facilities will continue to require masking.

Cook County Health continues to offer COVID vaccination to employees, patients and the community. CCH has administered more than 989,000 vaccine doses. The reopening of three mass vaccination sites in Matteson, Forest Park and Des Plaines, coupled with the distribution of \$100 gift cards resulted in a substantial increase in vaccine distribution in just a four-week period.

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 here.

IMPACT 2023 Focus Areas 1 and 5

### CCH Strategic Plan 2023-2026

CCH has kicked-off the development of its 2023-2026 Strategic Plan. A number of employee and community town hall meetings will begin next week and an online feedback tool will be launched to ensure that Cook County residents and staff can provide input into the process. More information will be available on the CCH website next week.

# **Black History Month**

On Tuesday, February 22, 2022, Cook County Board President Toni Preckwinkle, CEO Israel Rocha, Chief Medical Officer Dr. Claudia Fegan, Chief Equity and Inclusion Officer Shannon Andrews, CCH physicians and others participated in a Facebook Live event to celebrate Black History Month. The panel discussed the importance of representation in health care, the impact of COVID on the African American community, mental health and more. The event can be viewed on CCH's YouTube channel. In addition to the panel discussion, CCH interviewed a number of staff about the importance of Black History Month. These videos can be found on CCH's social media channels. Chief Medical Officer Dr. Fegan was featured in a BHM video and profile that ran in the Chicago Sun-Times and was interviewed about the important role Provident Hospital has played in the medical field.

IMPACT 2023 Focus Area 5

### **US Navy Officials Visit**



On February 17, 2022, officials from the US Navy visited Cook County Health in preparation to launch a new program to educate and train Navy medical personnel in Stroger Hospital's trauma unit to ensure the force remains medically ready.

IMPACT 2023 Focus Area 1 and 2

### **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 mid-February 2022, CCH's Fresh Truck partnership with the Greater Chicago Food Depository (GCFD) resulted in 372 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 41,369 households, representing 136,506 individuals, totaling more than 935,550 pounds of food. Most of the individuals benefiting from the Fresh Truck screened positive for food insecurity at a CCH health center visit.

The Greater Chicago Food Depository's Fresh Food Truck visits for the month of March include the following ACHN Health Centers.

- March 3 Prieto Health Center 2424 S. Pulaski Road, Chicago, IL 60623
- March 8 Provident Hospital/Sengstacke Health Center 500 W. 51st Street, Chicago, IL 60615
- March 17 Arlington Heights 3520 N. Arlington Heights Road, Arlington Heights, IL 60004
- March 18 CORE Center 2020 W. Harrison Street, Chicago, IL 60612
- March 24 Blue Island Health Center 12757 S. Western Ave., Blue Island, IL 60406

IMPACT 2023 Objective 5.1c

### **Community Affairs**

### **Community Advisory Councils**

During the First Quarter of 2022, topic presentations include Patient Experience, the Cook County HIV Integrated Programs (CCHIP), and Social Work. In addition, updates on Cook County Health, Covid-19 Vaccination and Community Outreach are provided. Each clinic also does an update on its operations at the meeting,

We have started recruiting members for the Belmont Cragin Advisory Council, which will be launched in the second quarter of the year. A notice on the advisory councils was included in the latest CCH Community Newsletter which was sent on February 18.

In addition, as part of the Strategic Planning Process, Mr. Israel Rocha will hold a joint community advisory council meeting on Thursday, March 3, at 12:00pm.

Upcoming CAC meeting dates, including the 2022 schedule:

**Robbins:** Tuesday at 1:00 PM: March 8, June 14, September 13, December 13 13450 S. Kedzie Road, Robbins, IL 60472

**Arlington Heights:** Tuesday at 1:00 PM: March 15, May 24, August 23, November 29 3520 N. Arlington Heights Road, Arlington Heights, IL 60004

**North Riverside:** Wednesday at 1:00 PM: March 16, June 15, September 14, December 14 1800 S. Harlem Avenue, North Riverside, IL 60546

**Englewood:** Thursday at 1:00 PM - March 17, June 16, September 15, December 15 1135 W. 69th Street, Chicago, IL 60621

**Cottage Grove:** Tuesday at 1:00 PM: January 25, April 26, July 26, October 25 1645 S. Cottage Grove Avenue, Ford Heights, IL 60411

# Provident Hospital/Sengstacke Health Center:

Wednesday at 9:00 AM: January 28 (Friday), April 13, July 13, October 12 500 W. 51st Street, Chicago, IL 60609

**Blue Island:** Wednesday at 1:00 PM: February 16, May 18, August 17, November 16 12757 S. Western Ave., Blue Island, IL 60406

IMPACT 2023 Focus Area 5

### **Community Events**

As in person event participation begins to resume, Cook County Health and CountyCare will be present at events to promote the health system and the Medicaid program. Events in the month of March include the following:

- March 1 Cook County Health and CountyCare promotion at the **Cook County Commissioner Bill Lowry's Community Co-Op** which takes place at the Apostolic Faith Church located at 3823 S. Indiana in Chicago. The event is being co-hosted by Alderwoman Pat Dowell, State Representative Lamont Robinson, State Senator Mattie Hunter and Bishop Horace Smith. Besides doing promotion for Provident Hospital's medical services and CountyCare Medicaid enrollment, CCH HIV CHIP staff will conduct HIV testing. We will promote the HRSA Healthy Start Program.
- March 1 Cook County Health and CountyCare promotion at the **Project Hood's Black History Month Free Breakfast & More Popup** which takes place at the New Beginnings church located at 6620 S. King Drive in Chicago.
- March 16 CountyCare promotion at the **Roseland Hospital Vaccine Clinics** which takes place at the hospital located at 45 W. 111<sup>th</sup> Street in Chicago.
- March 26 Cook County Health and CountyCare promotion at the **Englewood Community Health & Resource Fair** which is hosted by BCBS and Volunteers of America and takes place at the Kennedy King College gymnasium located at 6301 S. Halsted Street in Chicago.
- March 30 CountyCare promotion at the **Roseland Hospital Vaccine Clinics** which takes place at the hospital located at 45 W. 111<sup>th</sup> Street in Chicago.

Community Newsletter, media and social media reports are attached

# **Legislative Update**

### Local

On January 12 CCH appeared before the Cook County Health & Hospitals Committee to provide a COVID-19
and Contact Tracing Update as well as a Quarterly Report on Behavioral Health services provided by CCH by
the Departments of Behavioral Health & Psychiatry, Cermak, JTDC and CCDPH.

### State

• The Governor delivered his State of the State and Budget Address on February 2. The legislature had planned to return to Springfield that week, but cancelled due to the snowstorm that presented dangerous travel conditions throughout Illinois.

House and Senate leaders have said that they intend to stick with their original schedule for committee and final bill passage deadlines, with April 8 as the last day of the spring session.

- Highlights from the Governor's State of the State and Budget Address:
  - \$1.7B surplus for FY2023 first projected surplus in over two decades
  - Creation of a new Chief Behavioral Health Officer, who will report to the Governor and coordinate services across state agencies
  - New initiatives and funding to support health care workforce including:
    - Pipeline for the Advancement of the Healthcare Work Force Program (PATH) which will provide \$25M to community colleges to support recruitment and training of high-demand heath care positions, with a focus on recruiting first generation college students and persons of color
    - Increased funding for Nurse Education Scholarship Program, grants to nursing schools, nurse education fellowships
    - \$180M to preserve and grow the health care workforce, with a focus on safety net providers and providers in underserved areas of the state, through reinvestment of MCO risk corridor program
    - Waiving annual licensure fees for ~470,000 health care workers in FY2023
- Cook County Health has two primary legislative priorities in the Spring 2022 session:
  - SB3695 (Sen. Jacqueline Collins) / HB4642 (Rep. Robyn Gabel) Amends the Freedom of Information
     Act (FOIA) to ensure that HIPAA protected health information is not subject to public records requests.

**Status:** An amendment was filed to address concerns raised by stakeholders including the Office of the Attorney General and clarifies that the bill only applies to HIPAA covered entities and information protected by HIPAA. SB3695 was heard by the Senate Executive Committee and passed out unanimously. Jeff McCutchan presented testimony on behalf of CCH. SB3695 awaits action by the full Senate.

A decision was made to only move the Senate bill, given the volume of bills being considered in the House.

SB3734 (Sen. Mattie Hunter) / HB4645 (Rep. LaToya Greenwood) — Creates the Equity and Representation in Health Care Act, which authorizes a new loan repayment and scholarship program to promote greater diversity among health care providers when it comes to race, ethnicity, and other underrepresented demographics. This Act will also build and strengthen the workforce at community-based provider locations that serve a high-proportion of Medicaid and uninsured patients, specifically at FQHCs, FQHC look-alikes, and provider locations operated by CCH, including Cermak Health

Services. CCH co-leads this effort with the Illinois Primary Health Care Association (IPHCA), which represents FQHCs statewide.

**Status:** SB3734 was assigned to Senate Appropriations – Health, which does not currently have a posted meeting date.

HB4645 was assigned to the House Health Care Availability and Access Committee where CCH family physician Dr. Whitney Lyn testified in support of the bill and Kathy Chan answered technical questions from the committee members. HB4645 passed 12-0-0, with an agreement that an amendment would be brought back to committee to address questions and clean up technical errors. CCH is working with IPHCA and IDPH on amended language.

# Other bills of interest CCH supports include:

 HB4437 (Rep. Delia Ramirez) – Expands Medicaid to adults 19-54 years who have income at or below 138% FPL, regardless of immigration status. Healthy Illinois leads this effort.

**Status**: Assigned to Appropriations – Human Services.

- Healthy Illinois successfully advocated for coverage for immigrant adults 65+ years, which began December 2020, and coverage for those 55-64 years, which will begin no later than May 2022.
- SB3632 (Sen. Doris Turner) / HB4264 (Rep. Greg Harris) Getting To Zero Omnibus, which includes a \$15M appropriations request that will support increased access to and uptake of PrEP, keep more people living with HIV in care, and continue funding for supportive services. This is an initiative of the AIDS Foundation of Chicago.

**Status**: SB3632 assigned to Appropriations – Health; HB4264 assigned to Appropriations – Human Services.

• At the February 17 meeting of the Medicaid Advisory Committee's Public Education Subcommittee, HFS shared that they expect to release communications resources that can be used by providers, MCOs, and other stakeholders to encourage Medicaid enrollees to update their addresses, in anticipation of a wind-down of the federal Public Health Emergency (PHE) and the restarting of Medicaid redeterminations. The federal PHE is currently scheduled to expire mid-April 2022, however, there is speculation that the PHE will be renewed at least one more time this calendar year.

HFS also anticipates that immigrants 55-64 years of age will be able to enroll before the end of May 2022 in the expanded Health Benefits for Immigrants program, which was authorized in the Spring 2021 state legislative session. The <a href="Health Benefits for Immigrants Seniors">Health Benefits for Immigrants Seniors</a> program currently in place for those 65 years and older has more than 9500 active enrollees, with nearly 70% living in Cook County.

### **Federal**

• Appropriations – February saw bipartisan, bicameral progress toward resolution of the outstanding issues on FY 2022 appropriations. The Democratic and Republican leaders agreed to a framework and gave the subcommittees their revised top-line numbers, charging them with drafting the components of an omnibus bill to fund the government through the rest of the fiscal year. To give themselves the time to do that, a third CR was passed by the House on February 8, by the Senate on February 17 and signed by the President on February 18, before the second CR expired at midnight. This current stop-gap measure runs through March 11.

The Administration has begun to circulate a proposal for about \$30 billion in additional emergency supplemental spending. While details are scarce, it includes \$17.9 billion for vaccines and treatments, \$4.9 billion for testing, \$3 billion to cover COVID-19 treatment for the uninsured, and \$3.7 billion for next-gen vaccine research. Hospital organizations and other provider groups have expressed disappointment that this

new request does not appear to replenish the flexible Provider Relief Fund (PRF), nor do the public health funds appear to be targeted to local public health departments.

Along with America's Essential Hospitals and other organizations, the County is advocating that any new COVID-19 emergency supplemental appropriation include additional PRF funding and flexibility, for an orderly, and a gradual phase down of the enhanced FMAP after the end of the Public Health Emergency.

- **FY 2022 Budget and Reconciliation** Discussions between the White House and Sen. Joe Manchin (D-WV) are reported to be on hold for the time being. Meanwhile, Senate Democratic leaders are encouraging Senate Committee Chairs to formally markup bills with elements to the Build Back Better package that Sen. Manchin could support. These then could be repackaged into a new reconciliation that could pass the Senate with only Democratic votes. The outlook for this strategy is uncertain with a crowded Senate calendar and looming midterm elections.
- The County continues to discuss what may be possible through another legislative vehicle or a slimmed down BBB for its priorities, including:
  - 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.
  - Public Health Infrastructure: Funding to support core public health infrastructure activities to strengthen the public health system through grants to state, territorial, local, or Tribal health departments, including direct funding for large county public health departments.
  - Maternal and Child Health: The "Momnibus" provisions to 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.
  - Safety-Net Hospital Infrastructure: Grants for construction or modernization projects to increase capacity and update safety-net hospitals and other medical facilities
- Medicare Cuts Hospital organizations are already calling on Congress to extend the delays enacted in early December. The legislation delayed 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 In late January the Biden Administration confirmed that it had spent almost \$7 billion in PRF for providers to purchase COVID-19 vaccines and therapeutics. HHS argued that this was appropriate because the vaccines and therapeutics purchased were given to providers at no cost. Together with the Trump Administration spending \$10 billion from PRF on Operation Warp Speed, nearly ten percent of the PRF was not allocated directly to hospitals and other providers.

On January 31, the FDA approved Moderna's Spikevax, while also retaining the vaccine's emergency use authorization status. Moderna is the second COVID-19 vaccine to get full FDA approval.

On February 8, Dr. Anthony Fauci, the Administration's chief medical advisor, announced that the U.S. is exiting the "full-blown" pandemic phase of the COVID-19 pandemic. Dr. Faucik pointed to vaccinations, medical treatments, and prior infection, as factors that would alter the situation in the coming months. He expressed the hope that all COVID-19 restrictions would be dropped in the coming months, including mandatory masking. He did, however, warn that local health departments might need to bring back some restrictions to address regional outbreaks.

On February 11, the FDA issued an EUA for a new monoclonal antibody for the treatment of COVID-19 that is effective against the omicron variant. The EUA for bebtelovimab is for the treatment of mild to moderate COVID-19 in adults and pediatric patients with COVID, and who are at high risk for progression to severe

COVID-19, and for whom other FDA approved or authorized treatment options approved are not clinically appropriate or accessible.

On February 17, CMS issued a request for information (RFI) asking for input on how to increase health equity and improve reimbursement in Medicaid and the Children's Health Insurance Programs, including how to provide consistent coverage options for eligible individuals, both during and after the COVID-19 PHE. CMS aims to improve participation and reimbursement for providers that have traditionally had low participation rates in Medicaid and CHIP.



# Earned Media Dashboard: January 24 - February 17, 2022







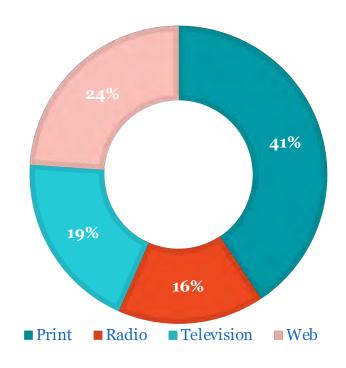
# **Top 5 Local Media Outlets**

- 1. WBBM Radio
- 2. Chicago Tribune
- 3. ABC 7 Chicago
- 4. Daily Herald
- 5. Fox 32 Chicago



# Media Dashboard: January 24 – February 17, 2022

# **Media Outlet Type**



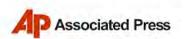
# **Most Common Topics**

- 1. The COVID vaccine and kids
- 2. Provident Hospital and Dr. Daniel Hale Williams
- 3. Winter safety
- 4. Vaccine incentives
- 5. Mask mandate



# Recent Cook County Health COVID-19 Media Coverage

18,809 Media Hits on COVID-19 since February 2020



Pfizer asks FDA to allow COVID-19 vaccine for kids under 5



Mask-optional policies questioned as children and teens lead in new Illinois COVID-19 cases



Treatment aimed at preventing COVID-19 for those at high risk now available at some Illinois hospitals



Cook County Health Offers \$100 Visa Gift Card For Those Who Get COVID-19 Vaccine At Its Sites Through Sunday



Accuracy of at-home COVID tests: Exposure to cold should not affect results, experts say



How treating long-haul COVID-19 is affecting health care resources



Distribuye Illinois pruebas caseras de Covid a las comunidades más vulnerables



# Social Media Report

January 24 - February 18, 2022





# Social Media Summary

# January - February Activity

During January 24 – February 17, the communications team posted content on Facebook, Twitter, Instagram and LinkedIn for Cook County Health.

Posts included content such as COVID-19, interviews with local media, recognition for physicians and the hospital, and health tips.

Facebook – 60 posts

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

Instagram – 46 posts (includes stories and IGTV)

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

**Twitter - 57** 

https://twitter.com/CookCtyHealth

LinkedIn – 21 posts

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



# Social Media Summary

# As of February 17

# Twitter

- Impressions: **24.2K (up 12.5%)**
- Profile visits: 5.9K (up 31.6%)
- Mentions: **117**
- Followers: 4,416 (up 24)

# LinkedIn

- Impressions: **29.3K** (up **4%**)
- Page Views: 1.4K (up 23%)
- Followers: **7.5K** (up 1**64**)

# Facebook

- Total impressions: **682K** (up **142%**)
- Post engagement: 9.7K (up 73%)
- Page views: **1.98K** (up **45%**)
- Page followers: 7,584 (up 67)

# Instagram

- Impressions: **61.3K** (up **122%**)
- Reach: **33.5K** (up **248%**)
- Profile visits: **552**
- Followers: **2,713** (up **25**)





# **Letter from the CEO**

Dear Cook County Health Friends and Partners,

This February, Cook County Health is proud to recognize Black History Month. It is a time for us to reflect on and honor our past and look to the future as to how we as a health care institution can be a force for positive change.

A number of the nation's most renowned African American health care providers have served at Cook County Health institutions. Dr. Daniel Hale Williams, the founder of Provident Hospital, performed the first open heart surgery there while establishing a training school for Black physicians and nurses; Emma Reynolds, who worked with Dr. Hale Williams to open Provident and was enrolled in the hospital's inaugural nursing class; Dr. Austin Maurice Curtis, who was mentored by Dr. Hale Williams and went on to become the first African American surgeon at Cook County Hospital; and Dr. Leonidas Berry, a



gastroenterologist who co-created the Eder-Berry Gastroscope, an instrument used to obtain tissue samples of the stomach.

They are just a few of the people whose legacies live on in what we do here at Cook County Health, ensuring access to high-quality health care for anyone who needs it, regardless of race or ability to pay. This history underscores the dedication to equity that is at the core of Cook County Health's 185-year-old mission. Today, that mission is carried on by a new generation of health care leaders. Learn more about a few of the providers serving our diverse patient population and what representation in health care means to them further down in this newsletter.

As we look to the future, we must continue to work to reduce the barriers and structural racism that have resulted in health disparities in the Black community, including the response to the COVID-19 pandemic, which has borne a particularly high toll on African Americans. At the system-level, these efforts are being driven by Cook County Health's newly-established Center for Health Equity and Innovation under the leadership of Shannon Andrews, the health system's inaugural Chief Equity and Inclusion Officer.

Please join us on Tuesday, February 22 as we hold a Facebook Live Event to discuss Black History Month with a number of Cook County Health providers and community partners. We will also

discuss COVID-19, vaccines and reducing hesitancy within the Black Community. You can find more details about the event below.

Thank you for your continued support.

Sincerely,

fell.

Israel Rocha, Jr. CEO

# **Cook County Health to Hold Virtual Town Hall to Celebrate Black History Month**

COMMUNITY FORUM

# Celebrating Black History Month A Conversation with African American Leaders in Medicine

TUESDAY, FEBRUARY 22, 2022 6:00 p.m.

Watch via Cook County Health's Facebook Live



Moderated by Dr. Claudia M. Fegan, Chief Medical Officer

# OPENING REMARKS BY



Toni Preckwinkle Cook County Board President



Isreal Rocha Chief Executive Officer



Shannon Andrews
Chief Equity and Inclusion Officer

# PANELISTS



**Dr. Whitney Lyn** Attending Physician VII-SC, Family Medicine



Dr. Temitope O. Oyedele Attending Physician VII, Infectious Disease



Bridgette Poston, LCSW Psychiatric Social Worker Cottage Grove Health Center



Bishop Barry L. Tidwell Pastor/Teacher/Visionary of The Rain or Shine Missionary Baptist Church, Chicago



# Month, Representation in Medicine



We asked several Cook County Health team members to discuss what Black History Month means to them, what inspires them, and about the importance of representation in medicine.

Check out a few of their stories by clicking the links below. Additional stories are on our social media pages.

# Errick Christian, Medical Researcher

# **Tracy Everett, Emergency Department Nurse**

# Dr. Temitope Oyedele, Infectious Disease Physician

Dr. Claudia Fegan, Chief Medical Officer, Cook County Health, also spoke with the American Heart Association about the legacy of Dr. Daniel Hale Williams, a pioneering surgeon and the founder of Provident Hospital. **Click here to read the article.** 







# **COVID-19 Booster Shot Information**

Cook County Health's mass vaccination sites completed a scheduled one-month run on February 13, having administered nearly 15,000 vaccines – 35 percent of which were first doses.

The sites opened in January amidst the omicron surge to respond to the increased need for vaccine access.

"We are pleased to see such a positive response during the month-long re-opening of our large-scale community vaccination sites," said Israel Rocha, Cook County Health CEO. "During this winter's surge, we saw an influx of people looking to get a primary vaccine or booster shot at doctors' offices and pharmacies. These locations were inundated and many people were faced with weeks-long wait times. By opening the mass sites, which offered walk-in availability, we were able to increase access to vaccination and meet a lot of the pent-up demand we were seeing in the community."

Cook County Health will continue to administer the COVID-19 vaccine at its community health centers, hospitals and through pop-up vaccination events. CCH's community health centers are also distributing free high-quality KN95 masks for all, regardless of vaccination status.

More information can be found at **myshotcookcounty.com** or printing the fliers below.





# Keep Up to Date with Cook County Health

As the COVID-19 pandemic continues to evolve, keeping on top of the latest information is

critical. Cook County Health provides the latest information as it relates to the health system, COVID-19 vaccination events, health education, and more on its social media channels:

<u>Facebook</u>

<u>Twitter</u>

Instagram

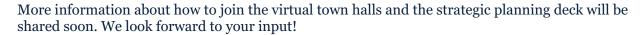
# Save the Date: CCH Strategic Planning Town Halls

Cook County Health has begun its Strategic Planning Process for FY23-FY25. We look forward to getting feedback from the community on the health system's perceived strengths, weaknesses, threats and opportunities.

We will be engaging with stakeholders to assess the health system's current state and map out the road ahead through online questionnaires, meetings and virtual forums.

Please save the date for Cook County Health's upcoming community strategic planning town halls:

- Tuesday, March 1 6 − 7 PM (Spanish)
- Wednesday, March 2 6 − 7 PM
- Thursday, March 3 8 − 9 AM



Updates to CCH's Strategic Planning process can be found in the <u>Governance Section</u> of the CCH Website. You can read about previous strategic plans by clicking on the links, <u>Impact</u> <u>2023</u> and <u>Impact 2020</u>.

If you would like to share input outside of the town hall events or ask a question, please send an email to **StrategicPlan@cookcountyhhs.org**.

# **Cook County Health Creating New Belmont-Cragin Advisory Council**

Cook County Health is establishing a Community Advisory Council for our new Belmont-Cragin Health Center!

Community Advisory Councils are comprised of local community leaders and patients who help keep health centers in touch with the neighborhoods they serve and provide guidance on community needs.

Each council has between 10 to 15 members and holds virtual quarterly meetings where they share input with CCH leaders and receive updates from the health system.





CCH has established Community Advisory Councils for our health centers in Arlington Heights, Blue Island, Cottage Grove, Englewood, North Riverside and Robbins and at Provident Hospital/Sengstacke Health Center.

We welcome your participation! If you would like to join a Community Advisory Council please submit an application through the application link <u>on CCH's community relations webpage</u> or by emailing Marcelino Garcia, Director of Community Affairs at <u>mgarcia6@cookcountyhhs.org</u>.

# **Cook County Health in the News**









Chicago Tribune: <u>Treatment aimed at preventing COVID-19 for those at high risk now available at some Illinois hospitals</u>

Daily Herald: How treating long-haul COVID-19 is affecting health care resources

ABC 7 Chicago: Accuracy of at-home COVID tests: Exposure to cold should not affect results, experts say

Associated Press: Omicron surge is undermining care for other health problems

# Visit our website at cookcountyhealth.org

If you would like to invite a representative from CCH to attend a community event, please send an email to <a href="mailto:events@cookcountyhhs.org">events@cookcountyhhs.org</a>.

To provide feedback on CCH Community News, update your contact information, or unsubscribe, please email Marcelino Garcia, Director of Community Affairs, at <a href="mailto:mgarcia6@cookcountyhhs.org">mgarcia6@cookcountyhhs.org</a>.

Cook County Health and Hospitals System Minutes of the Board of Directors Meeting February 25, 2022

ATTACHMENT #5



# **Timeline**

February/March Stakeholder Feedbac
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March/April TBD CCH Board of Directors, Review and Aggregation of

Feedback from Stakeholders

April Draft Strategic Plan submitted to CCH Board

May CCH Board Strategic Plan vote

June-July Develop 3-year financial outlook with FY23 budget

August Strategic Plan-Informed budget presented to the CCH Board with 3-year

financial outlook

September Submit Strategic Plan and 3-year financial outlook to the County Board in

tandem with the 2023 budget

October County Board to vote on Strategic Plan



# Stakeholder Feedback

# February/March

# **Town Hall Meetings**

March 1	12:00 pm	Employee Town Hall
March 1	6:00 pm	Community Town Hall (Spanish)
March 2	6:00 pm	Community Town Hall
March 2	7:00 pm	Employee Town Hall
March 2	4:00 pm	Labor Management Meeting
March 3	8:00 am	Community Town Hall
March 3	12:00 pm	Joint Community Advisory Board Meeting
March, TBD		<b>Board of Commissioners</b>

Online survey for all employees and the community will go live on or before March 1, 2022. Promotion will occur through emails, community newsletter, social media and town hall meetings.





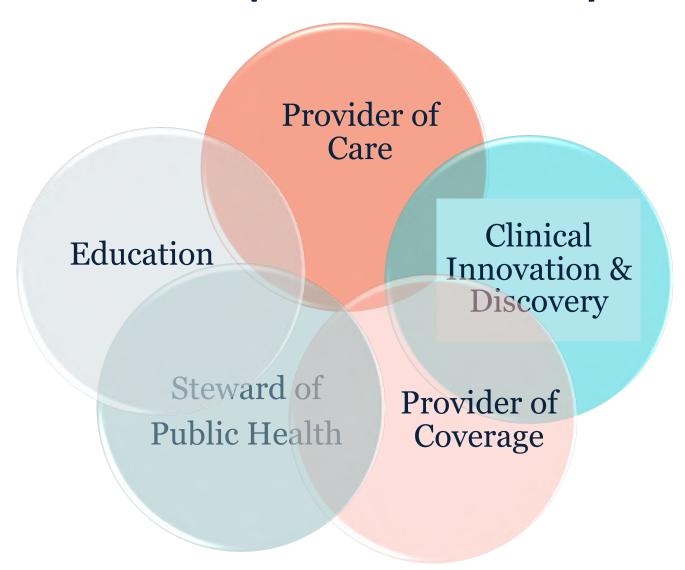
## **CCH** Mission and Vision

Mission: To deliver integrated health services with dignity and respect regardless of a patient's ability to pay; foster partnerships with other health providers and communities to enhance the health of the public; and advocate for policies which promote and protect the physical, mental and social well-being of the people of Cook County.

Vision: In support of its public health mission, CCH will be recognized locally, regionally and nationally – and by patients and employees – as progressively evolving model for an accessible, integrated, patient-centered and fiscally-responsible health care system focused on assuring high quality care and improving the health of the residents of Cook County.



## Safety Net for Vulnerable Populations & Community Asset





## Cook County Health

Over 188 years as the busiest healthcare safety net in the Midwest

#### Annually:

Serve more than **600,000** individuals through the health system and health plans

**Nearly 850,000** outpatient registrations annually

More than 1 million outpatient prescriptions filled annually

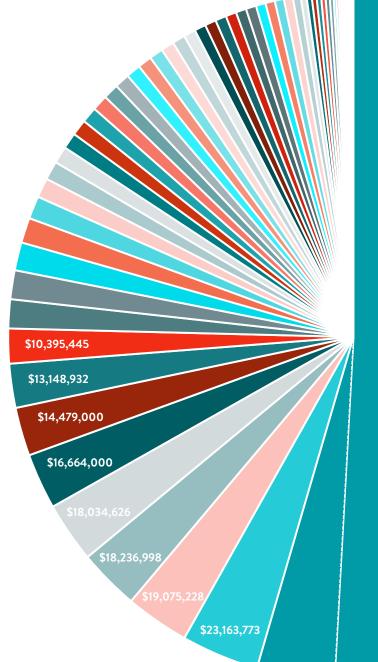
More than **100,000** emergency/trauma visits

**More than 30,000** intake screenings annually and **nearly 3,000,000 doses** of medication distributed annually at Cook County Jail

40,000+ visits to the Ruth Rothstein CORE Center, one of the busiest HIV treatment centers in the US



## Charity Care at Hospitals in Cook County 2018



Stroger Hospital

\$324,638,453

Provident Hospital

\$23,228,258

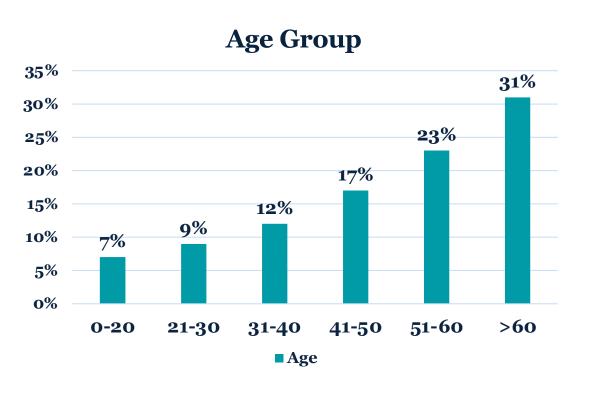
Total: \$347,866,711

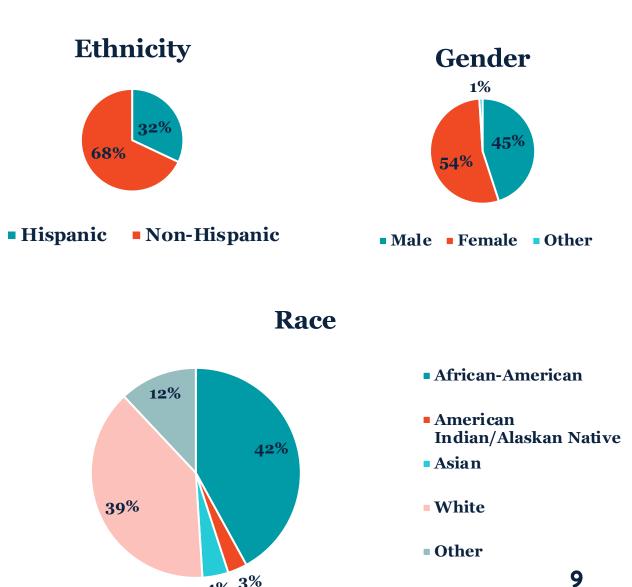


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## **CCH Patient Demographics**

**CCH Visits: 2017-2021** 









#### Primary Care Medical Homes (Family Health Care)

- 1. Arlington Heights Health Center Arlington Heights, IL
- 2. Belmont-Cragin Health Center Chicago, IL
- 3. Austin Health Center Chicago, IL
- 4. North Riverside Health Center North Riverside, IL
- 5. Dr. Jorge Prieto Health Center Chicago, IL
- 6. Englewood Health Center Chicago, IL
- 7. Robbins Health Center Robbins, IL
- 8. Cottage Grove Health Center Ford Heights, IL

#### Regional Outpatient Centers

(Includes Primary Care Medical Homes, specialty, diagnostic and procedural services)

- 9. John Sengstacke Health Center at Provident Hospital Chicago, IL
- 10. Blue Island Health Center Blue Island, IL
- 11. Cook County Health
  Central Campus Chicago, IL
  - Professional Building
  - Specialty Care Center (Clinics A V)
  - Women & Children's Center at Stroger Hospital
- 12. Ruth M. Rothstein CORE Center Chicago, IL

#### Child & Adolescent Services

13. Morton East Health Center • Cicero, IL



### CCH & COVID-19

#### Provider Roles and Public Health Roles

#### **Cook County Health**

- More than 300,000 COVID tests administered
- Mitigation and prevention at Cook County Jail
- Nearly 2,000 COVID-19 inpatients since beginning of pandemic
- Close to 1 million does of COVID-19 vaccine administered through clinics, mass sites, and community locations; Vaccinated 525,000 unique individuals.

#### **Cook County Department of Public Health**

- Developed and executed extensive contact tracing program for suburban Cook County
- Issued mitigation orders and conducts mitigation inspections
- Distributed 1.2M doses of COVID-19 vaccine to suburban Cook County providers and partners
- Organized more than 1,300 hyper-local pop-up sites providing more than 48,600 vaccines.



#### FY21 Accomplishments:

- ✓ Mitigation of COVID-19 at Cook County Jail
- ✓ Improved patient outcomes (e.g. ulcers/falls)
- ✓ Achieved compliance with employee vaccine mandate
- ✓ Implemented patient navigator program
- ✓ Established consolidated help line for employees
- ✓ Managed FY21 budget with positive results
- ✓ Progress on revenue cycle turnaround plan
- ✓ Balanced FY22 budget
- ✓ Established a CountyCare reserve

- ✓ Increased support for Public Health
- ✓ Achieved CountyCare highest quality rating
- ✓ National recognition for cardiology/stroke
- ✓ Administered close to 1 million COVID-19 vaccines
- ✓ Established Office of Health Equity
- ✓ Established community vaccine program and information portal
- ✓ Pandemic response, including hyper local campaign
- ✓ Invested in imaging, dialysis and other modernization at Provident Hospital
- ✓ Opened new health center at Belmont Cragin



## Focus of Prior Strategic Plans

Impact 2020:

Impact 2023:

Delivery High Quality Care

Deliver High Quality Care

Grow to Serve and Compete

Grow to Serve and Compete

Foster Fiscal Stewardship

Foster Fiscal Stewardship

**Invest in Resources** 

Leverage and Invest in Assets

Leverage Valuable Assets

Impact Social Determinants/Advocate for

**Patients** 

Impact Social Determinants of Health

**Advocate for Patients** 

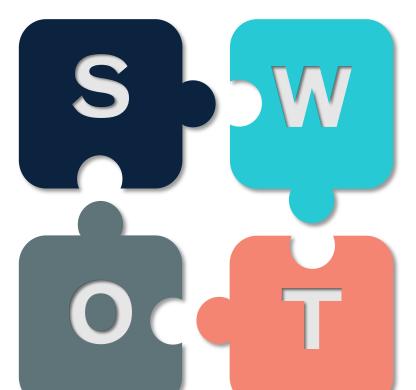




Mapping Out The Road Ahead...

#### **STRENGTHS**

 Strengths describe what an organization excels at and what separates it from others: a strong brand, loyal patient base, a strong balance sheet, assets, unique technology, etc.



#### **WEAKNESSES**

 Weaknesses stop an organization from performing at its optimum level. They are areas where the business needs to improve to remain competitive: a weak brand, higher-than-average turnover, high levels of debt, an inadequate supply chain, or lack of capital.

#### **THREATS**

 Threats refer to factors that have the potential to harm an organization. For example, overturing ACA is a threat to our Medicaid Patients as it may reduce their eligibility for health care coverage.

#### **OPPORTUNITIES**

 Opportunities refer to favorable external factors that could give an organization a competitive advantage.



Mapping Out The Road Ahead...

#### **STRENGTHS**

Strengths describe what an organization excels at and what separates it from others.

Examples of strengths may be a strong brand, a loyal patient base, a strong balance sheet, an organization's employees, unique technology, etc.

What are Cook County Health's strengths?





Mapping Out The Road Ahead...



#### WEAKNESSES

Weaknesses stop an organization from performing at its optimum level. They are areas where the business needs to improve to remain competitive.

Examples of areas identified as weaknesses may be a weak brand, higher-than-average turnover, high levels of debt, an inadequate supply chain, lack of capital, etc.

What are Cook County Health's weaknesses?



Mapping Out The Road Ahead...



#### **OPPORTUNITIES**

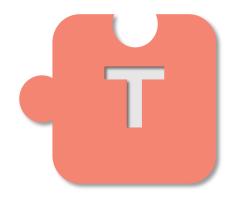
Opportunities refer to favorable external factors that could give an organization a competitive advantage.

Examples of potential opportunities could be an aging patient population, partnerships with FQHCs, expanded coverage for patients, access to federal and state funded programs, new technology, etc

What are Cook County Health's main opportunities?



Mapping Out The Road Ahead...



#### **THREATS**

Threats refer to factors that have the potential to harm an organization.

For example, overturing ACA is a threat to our Medicaid patients as it may reduce their eligibility for health care coverage, competition for Medicaid patients, State fiscal condition, redeterminations, state of the economy, additional COVID surges, etc.

What threats does Cook County Health face?



## Questions for Discussion and Input

What should CCH's highest priority be in the next three years?

What services are needed in the community?

What are we doing well? Not so well?

How do we treat patients who come from different races, religions and ethnicities?

- What is our competitive edge against local and national systems who enjoy greater brand recognition and greater resources?
- What programs and services do we offer that set us apart?
- How do we better advocate for universal access to affordable, high-quality care for all?



## What should our focus areas be going forward?

Patients – Employees – Facilities – Clinical Process –
Equity – Systems – Supplies – Innovation –
Integration – Access – Ease of Service – Efficiency –
Technology – Experience – Telehealth – Programs –
Revenue Cycle – Recruitment – Teamwork –
Community Health – Emergency Preparedness –
Growth/Expansion – Partnerships

Other?



# Questions?

