Corporate Compliance Report

Audit & Compliance Committee of the CCH Board of Directors

January 21, 2022

COOK COUNTY HEALTH

Meeting Objectives

Review

Highlights of FY 2021

- Metrics
  - Year-Over-Year Comparison
  - Contacts by Category
    - Cook County Health Compliance Program
    - CountyCare Medicaid Health Plan Compliance Program
      - Recoveries
    - Cook County Health Research Compliance Program
- Receive and File – Annual Reports
  - Cook County Health
  - CountyCare
  - Cook County Health Research
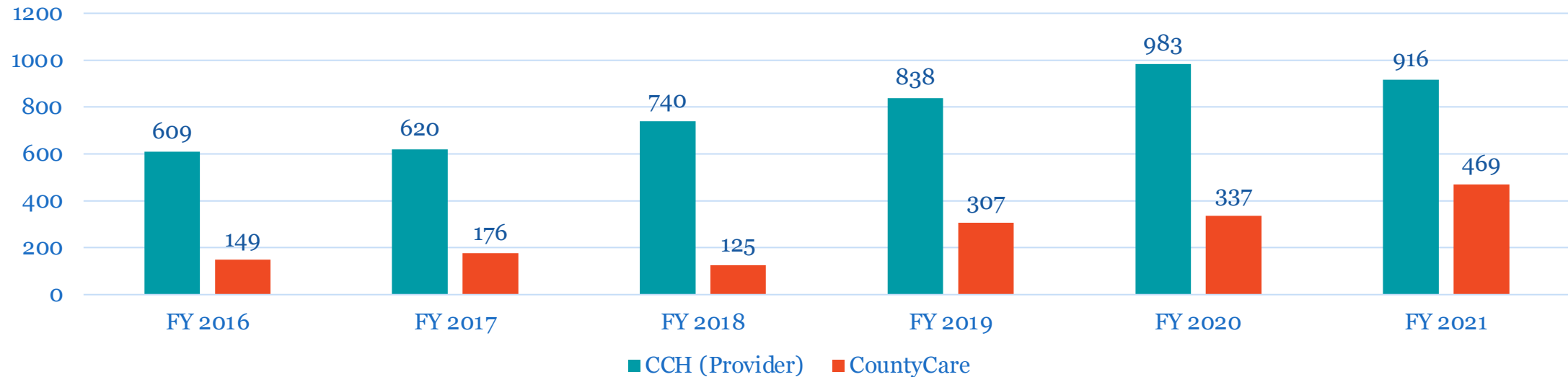
Facing Forward – 2022 Compliance Work Plan

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Metrics

Highlights of the Annual Reports
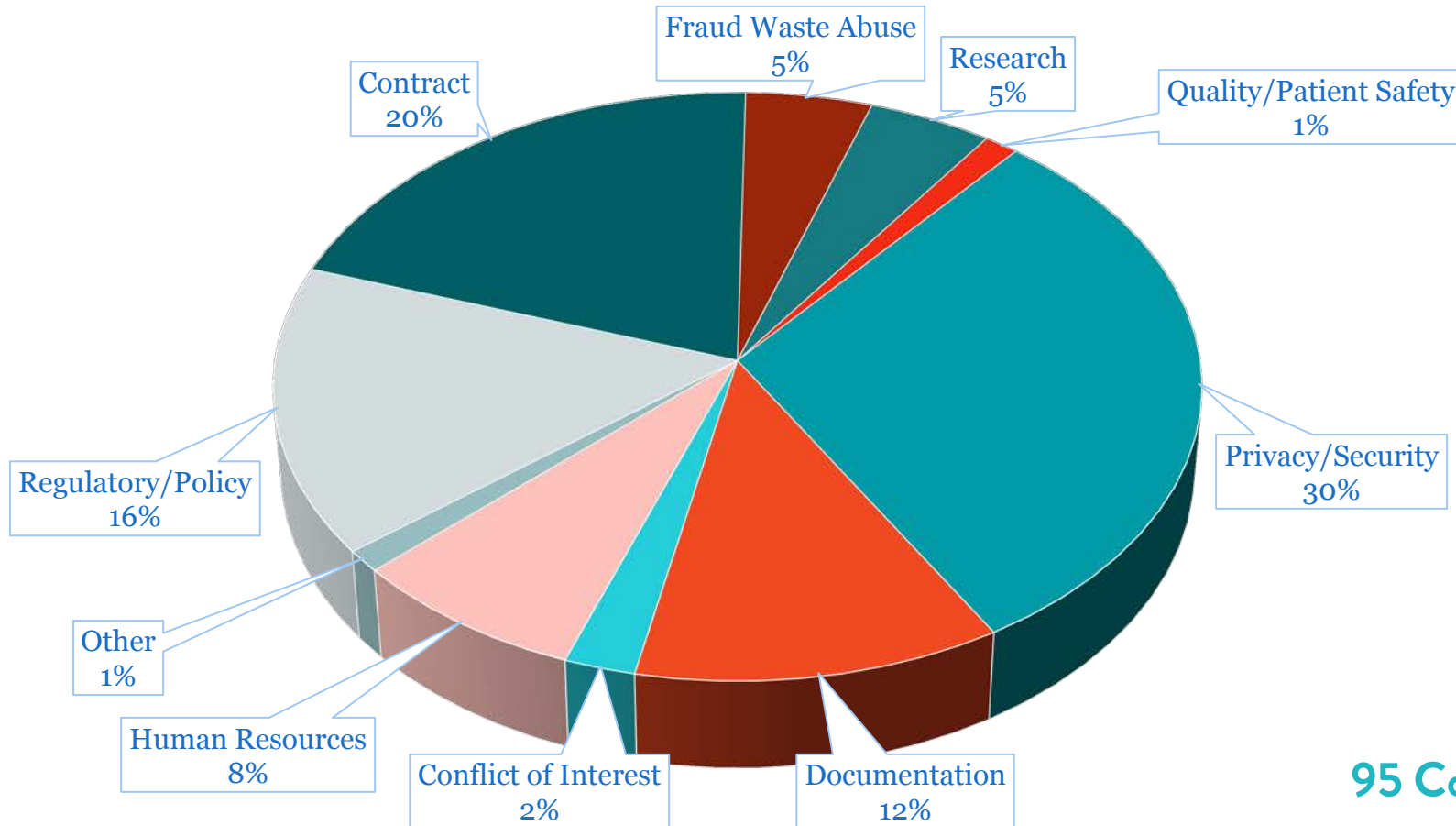
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Year-Over-Year Compliance Program Contacts

CCH System Compliance and CountyCare Health Plan

FY 2021 Contacts by Category

CCH System Compliance Program

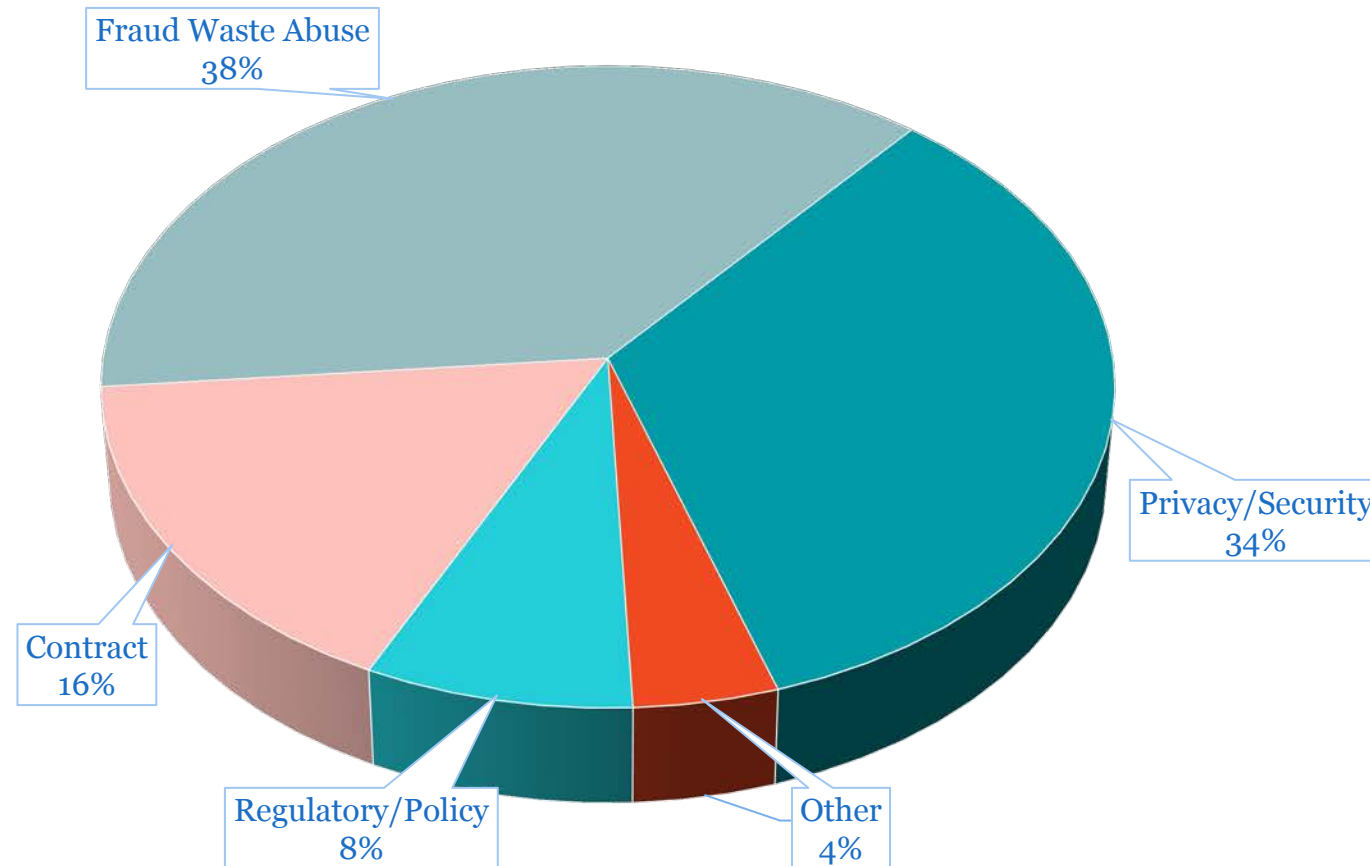| Categories	
Privacy/Security (HIPAA)	278
Contracts	184
Regulatory/Policy	145
Documentation	108
Human Resources	70
Fraud Waste & Abuse	44
Research	43
Conflict of Interest	21
Quality/Patient Safety	12
Other	11
	916

95 Contacts (10%) were COVID-19 Related

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FY 2021 Contacts by Category

CountyCare Health Plan Compliance Program

Fraud Waste Abuse
38%

Privacy/Security
34%

Contract
16%

Regulatory/Policy
8%

Other
4%

12/01/2020 – 11/30/2021

Categories	
Fraud Waste & Abuse	176
Privacy/Security (HIPAA)	159
Contracts	77
Regulatory/Policy	37
Other	20
TOTAL	**469**

4 Contacts (<1%) were COVID-19 Related

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CountyCare Fraud, Waste and Abuse Recovery Metrics

State Fiscal Year (S-FY) 2021 through S-FY 2022 Q1

S-FY	Reporting Period	Tips[1]	Referrals to HFS OIG	Overpayments Identified[2]	Overpayments Collected
2021	Q1 07/01 - 09/30/20	49	0	$ 1,277,500	$ 196,600
2021	Q2 10/01 – 12/31/20	106	8	$ 1,697,500	$ 304,000
2021	Q3 01/01 – 03/31/21	49	20	$ 1,970,360	$ 713,020
2021	Q4 04/01 – 06/30/21	46	9	$ 1,378,755	$ 485,839

S-FY	Reporting Period	Tips	Referrals to HFS OIG	Overpayments Identified	Overpayments Collected
2022	Q1 07/01 – 09/30/21	100	18	$ 583,637	$ 66,066

Proactive Preventative Loss

S-FY	Reporting Period	Overpayments Collected
2021	Q1 07/01 - 09/30/20	$ 333,400
2021	Q2 10/01 – 12/31/20	$ 716,000
2021	Q3 01/01 – 03/31/21	$1,112,186
2021	Q4 04/01 – 06/30/21	$1,206,723

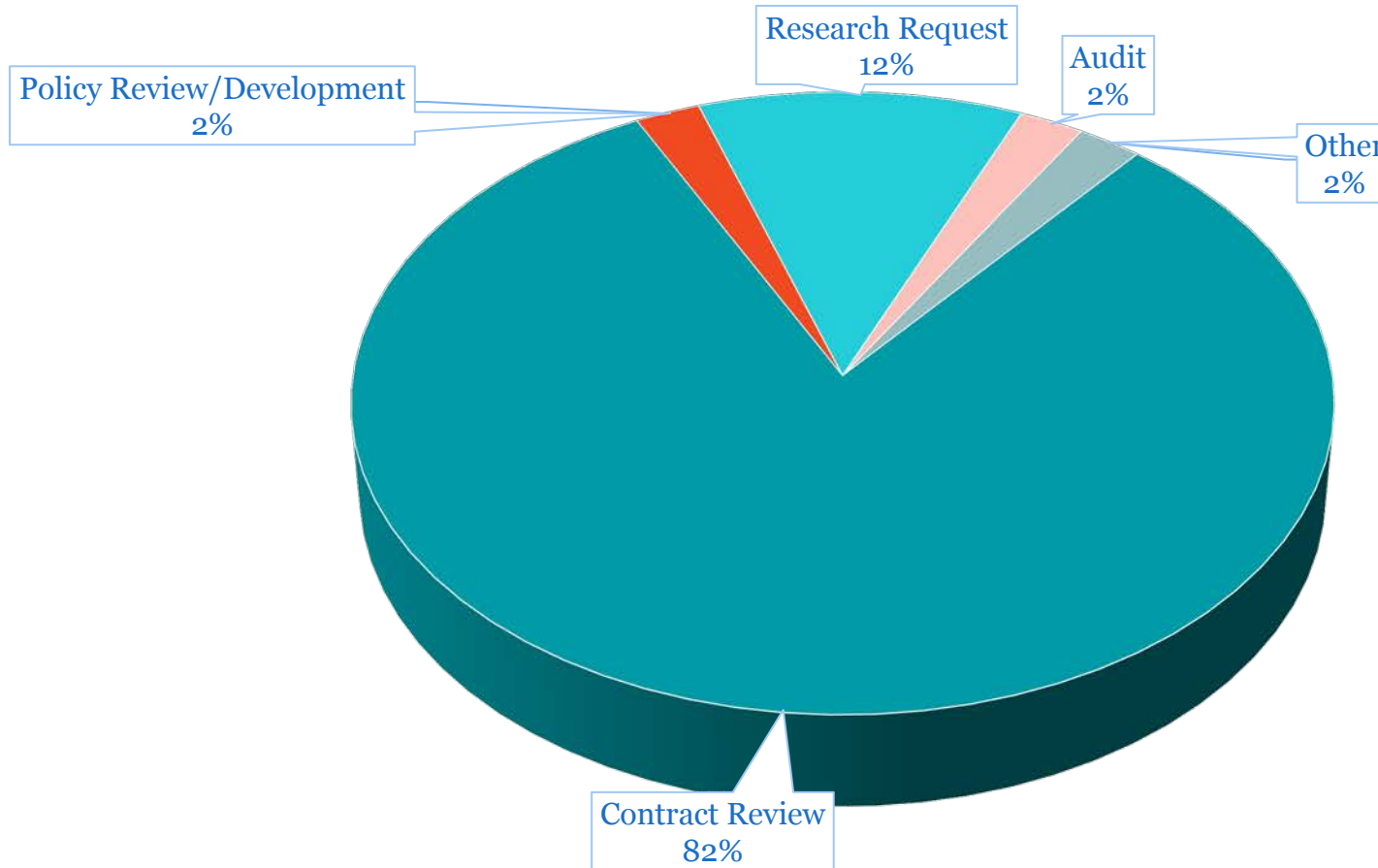| S-FY	Reporting Period	Overpayments Collected
2022	Q1 07/01 – 09/30/21	$1,029,151

[1] The term **Tip** as defined by HFS OIG includes any allegations or incidents of suspected FWA opened on a CountyCare provider. A tip is a preliminary identification of a potential concern.

[2] The **Overpayments Identified** column indicates the currently outstanding amount that has been paid to a provider for identified inaccurate codes. These amounts may be supported through additional review of documentation submitted by the provider or may be offset if a provider elects to bill a corrected claim.

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FY 2021 Contacts by Category

Research Compliance Program

Policy Review/Development
2%

Research Request
12%

Audit
2%

Other
2%

Contract Review
82%

12/01/2020 – 11/30/2021

Categories	
Contract Review	35
Research Request	5
Audit	1
Policy Review/Development	1
Other	1
TOTAL	**43**

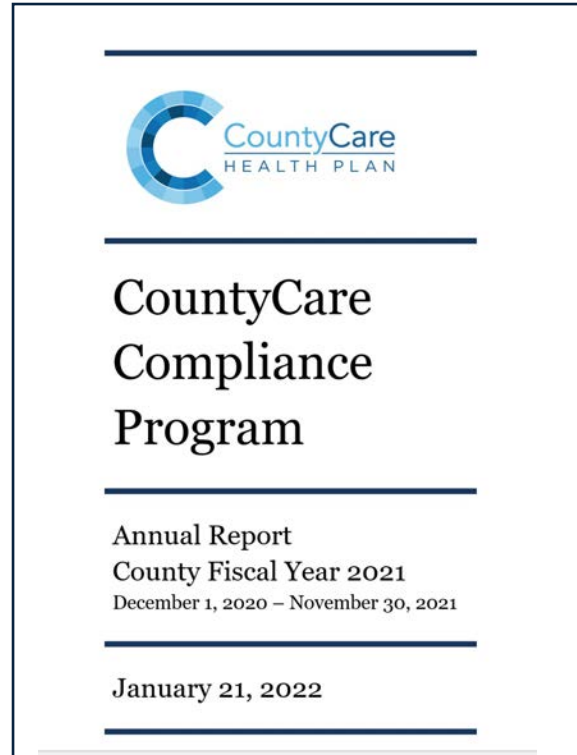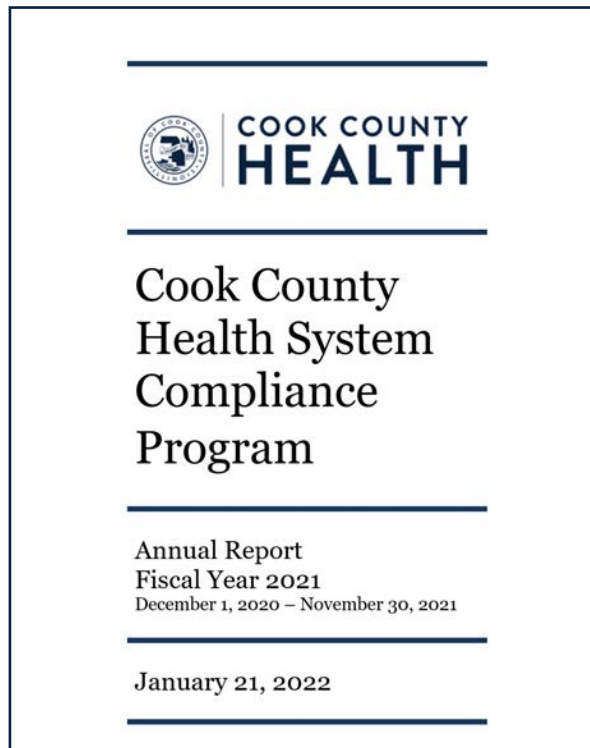COOK COUNTY
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Receive and File

Annual Reports

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Corporate Compliance Annual Reports

CCH System Compliance Program and CountyCare Medicaid Plan Compliance Program
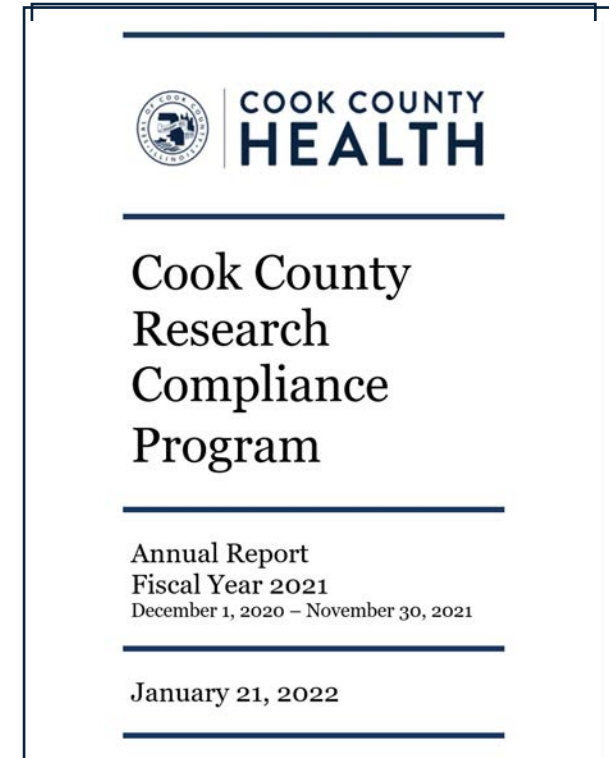
Facing Forward

FY 2021 Work Plan

Facing Forward

2022 Corporate Compliance Work Plan

In addition to continued administration of the essential elements of the Corporate Compliance Program, (1) standards of conduct and policies; (2) oversight responsibilities; (3) education and training; (4) mechanisms for reporting; (5) enforcing standards; (6) monitoring and auditing; and (7) prevention,

Corporate Compliance will embark on the following key initiatives in 2022:

- Development of Animated Educational Videos
- Continued Development of the Research Compliance Program
- Advancement of Clinical Documentation Education Program
- Implementation of Recommendations for Improvement from External Effectiveness Evaluation

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Questions?

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