#### **Corporate Compliance Report**

Audit & Compliance Committee of the CCH Board of Directors October 18, 2024





Compliance Program Overview

 $\odot$  Review and Approve Audit & Compliance Committee Charter

Metrics

- $\odot$  System Compliance Program
- $\odot$  CountyCare Medicaid Health Plan Compliance Program

➢ Recoveries

#### **Compliance Program Overview**





The main purpose of the CCH Compliance Program is to **prevent** violations of laws, regulations or internal policy, **detect** violations as they happen and **correct** any issues that could lead to future violations.

Prevention	Detection	Correction
Written Policies & Standards	Effective Lines of Communication	Response to Offenses and
Compliance Program Oversight	Internal Monitoring & Auditing	Corrective Actions
Education & Training	Enforcement of Standards and Disciplinary Guidelines	



# Q1-Q3 CFY 2024 CCH System CountyCare Compliance Program



- Last approved 10/20/2023
- Review and Approve

COOK COUNTY HEALTH	Category: CHARTER POL	ICY
Subject: CHARTERS FOR THE BOARD OF DIRECTORS	Page: 1 of 4	
Title: AUDIT & COMPLIANCE COMMITTEE OF THE BOARD OF DIRECTORS CHARTER	Approval Date:	Posting Date:

This document sets forth the duties and responsibilities, and governs the operations of the Audit & Compliance Committee of the Board of Directors of Cook County Health (CCH).

#### PURPOSE

CCH Chief Executive Officer (CEO) and the Board of Directors (Board) are committed to the proper oversight of our Audit and Compliance programs. In furtherance of this objective, the Board initiated an Audit and Compliance Committee (Committee)<sup>1</sup> composed of independent directors.

The purpose of the Committee is to provide oversight to the CCH internal audit and corporate compliance programs and monitor that systems are in place to ensure the quality of information used by the Board of CCH or by external agencies to evaluate the fiscal affairs and regulatory compliance. Additionally, the Audit and Compliance Committee will provide oversight to ensure the Board of Directors and management of CCH establishes a culture based on honesty and integrity.

The Committee shall advise the Board in matters relating to:

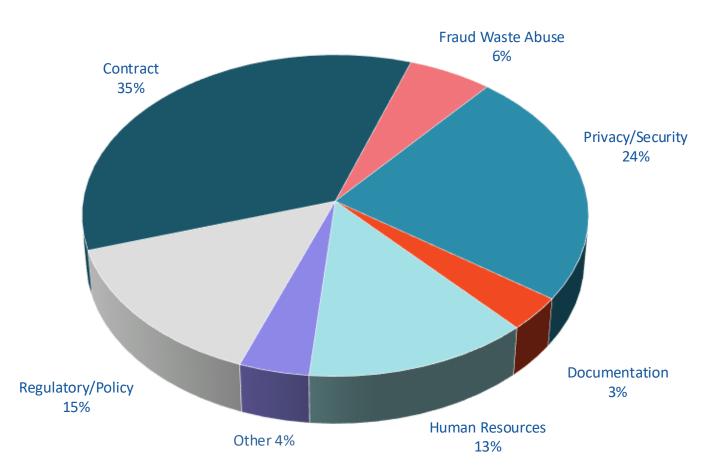
- 1) the integrity of CCH financial reporting;
- 2) the effectiveness of CCH internal controls;
- 3) the performance and effectiveness of CCH internal audit and corporate compliance programs;
- the implementation of standards and processes to promote professional responsibility and honest behavior; and
- 5) the compliance with regulatory requirements, as they relate to CCH corporate compliance.

## CCH Provider Metrics Q1-Q3 CFY 2024 Activities by Category



## Q1-Q3 CFY 2024 CCH System Compliance Program





#### 12/01/2023 -08/31/2024

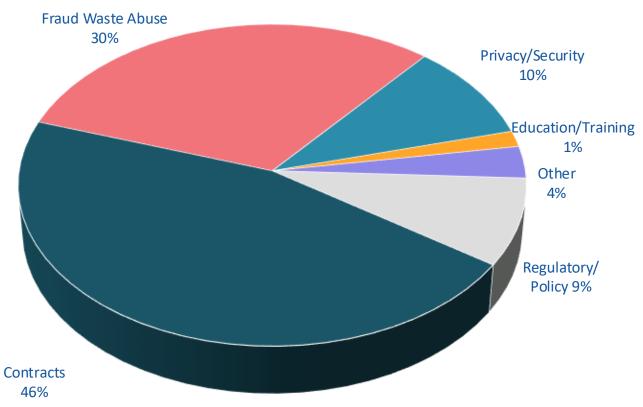
Categories	2024		2023
	Count & S Total Cont		% of Total Contacts
Contracts	247	35%	49%
Privacy/Security (HIPAA)	167	24%	14%
Regulatory/Policy	102	15%	13%
Human Resources	93	13%	12%
Fraud, Waste & Abuse	41	6%	3%
Documentation	24	3%	5%
Other (Quality, Research)	29	4%	4%
	703		

## CountyCare Metrics Q1-Q3 CFY 2024 Activities by Category SFY 2024 CountyCare Recovery Metrice



### Q1-Q3 CFY 2024 CCH System CountyCare Compliance Program





#### 12/01/2023 - 08/31/2024

Categories		2024	2023
		t Count & % Contacts	% of Total Contacts
Fraud Waste & Abuse <sup>1</sup>	174	30%	35%
Privacy/Security (HIPAA)	55	10%	9%
Contracts	256	46%	44%
Regulatory/Policy	49	9%	7%
Education and Training	9	1%	<b>0%</b> <sup>2</sup>
Other (Conflict of Interest, Documentation, Human Resources, Quality)	18	4%	5%
	561		

<sup>1</sup> The majority of Fraud Waste & Abuse activity is directly attributed to the Department of Healthcare and Family Services (HFS) Office of Inspector General provider notifications and requests for information.

<sup>2</sup> This category was not previously tracked separately in past years

#### **CountyCare Compliance Recoveries**



State Fiscal Year 2024 (All Quarters)

#### **Recovery Metrics**

Reporting Period S-FY 24	Overpayments Identified	Overpayments Collected
Q4: 04/01 – 06/30/24	\$6,843,883	\$826,895
Q3:01/01-03/31/24	\$3,464,387	\$3,058,361
Q2 10/01 – 12/31/23	\$5,577,235	\$368,058
Q1 07/01 – 09/30/23	\$1,226,051	\$836,559
TOTAL – SFY 2024	\$17,111,556	\$5,089,873
TOTAL – SFY 2023	\$4,257,873	\$6,968,261

#### **Proactive Preventative Loss**

<b>Reporting Period</b>	Savings
Q4:04/01-06/30/24	\$1,523,076
Q3:01/01-03/31/24	\$378,316
Q2 10/01 – 12/31/23	\$145,463
Q1 07/01 – 09/30/23	\$30,490
TOTAL – SFY 2024	\$2,077,345
TO TAL – SFY 2023	\$1,676,544

# **Questions?**

