

Overview of Ambulatory

Health Centers

Maternal Child Care



Overview of Ambulatory Health Centers

COOK COUNTY HEALTH CENTERS

Primary Care Medical Homes

(Family Health Care)

- NEW! Arlington Heights Health Center 3250 North Arlington Heights Road, Suite 300 Arlington Heights, IL 60004
- Logan Square Health Center 2840 West Fullerton Avenue, Chicago, IL 60647
- Austin Health Center 4800 West Chicago Avenue, Chicago, IL 60651
- Cicero Health Center 5912 West Cermak Road, Cicero, IL 60804
- Dr. Jorge Prieto Health Center 2424 South Pulaski Road, Chicago, IL 60623
- Near South Health Center 3525 South Michigan Avenue, Chicago, IL 60653
- Woodlawn Health Center6337 South Woodlawn Avenue, Chicago, IL 60637
- Englewood Health Center1135 West 69th Street, Chicago, IL 60621
- Robbins Health Center13450 South Kedzie Avenue, Robbins, IL 60472
- 10 Cottage Grove Health Center 1645 Cottage Grove Avenue, Ford Heights, IL 60411





Overview of Ambulatory Health Centers

Regional Outpatient Centers

(Includes Primary Care Medical Homes and diagnostic and procedural facilities)

- John Sengstacke Health Center at Provident Hospital 500 East 51st Street, Chicago, IL 60615
- Oak Forest Health Center 15900 South Cicero Avenue, Oak Forest, IL 60452
- Cook County Health Central Campus
 Professional Building
 1950 West Polk Street, Chicago, IL 60612
 Specialty Care Clinics
 1901 West Harrison Street, Chicago, IL 60612
- Ruth M. Rothstein CORE Center 2020 West Harrison Street, Chicago, IL 60612

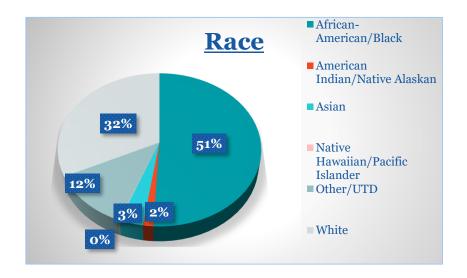
Children & Adolescent Based Services

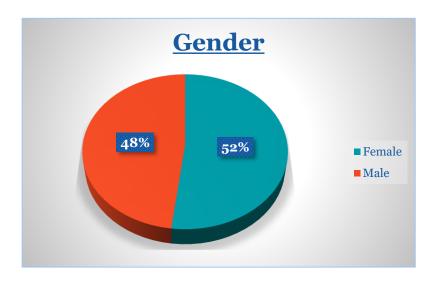
- Morton East Adolescent Health Center 2423 South Austin Boulevard, Cicero IL, 60804
- Children's Advocacy Center1240 South Damen Avenue, Chicago, IL 60608

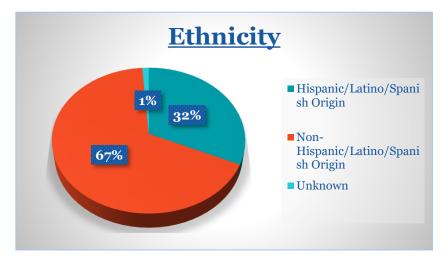


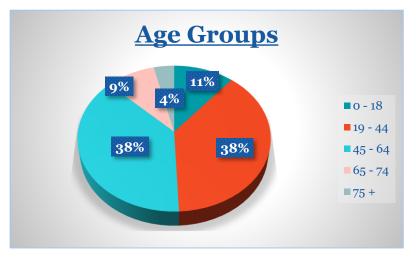


FY2018 Overview of CCH Patients Demographics











Overview of Ambulatory Health Centers

Acuity of our CountyCare patients (Cook County Health data compared to others)

Provider	Risk Score*
All CountyCare Providers	1.14
Cook County Health	1.41

Source: 2018 IL Medicaid Data.

^{*} Risk score based on diagnosis codes, national drug codes derived from pharmacy claims, and medical claims



FY2018 Primary Care Visits

Campus	Clinic	FY2018	FY2017
	Prieto	16,716	19,399
	Near South	14,438	13,682
	Logan	Logan 14,672	
	Oak Forest	13,747	13,500
	Austin	12,936	12,951
Ambulaton, Hoolth Contous	Englewood	12,036	12,003
Ambulatory Health Centers	Vista	Vista 11,214	
	Cicero	Cicero 10,938	
	Woodlawn	10,153	9,185
	Robbins	9,926	10,005
	Cottage Grove	9,536	9,625
	Morton East	893	974
	Children's Advocacy	533	541
	General Medicine Clinic	44,745	46,908
Stroger	Ruth M. Rothstein CORE Center	13,724	14,521
	Stroger Pediatrics	Stroger Pediatrics 4,283	
Provident	Provident Sengstacke		16,659
Total		217,152	218,026



Our Services

Overview of Ambulatory Health Centers

2018 – Other Visits	Totals
Prenatal	10,178
HIV/ AIDS Visits	18,821
Behavioral Health	29,277
Dental	9,558
TOTAL	67,834



FY2018 Specialty/Diagnostic/Procedure Visit Volume

Campus	Clinic	FY2018	FY2017
Ambulatory Health Centers	Austin- OBGYN/Behavioral Health*	5,848	1,747
	Cicero- OBGYN/Family Planning	982	1,266
	Logan Square- OBGYN	925	802
	Oak Forest	29,073	28,322
	Oral Health	5,039	4,709
	Total	41,867	36,846



Impact 2020 Update

Status and Results

- Deliver High Quality Care
- Grow to Serve and Compete
- Foster Fiscal Stewardship
- Invest in Resources
- Leverage Valuables Assets
- Impact Social Determinants
- Advocate for patients



Impact 2020

Progress and Updates

Focus Area	Name	Status
Deliver High Quality Care	Logan Replacement Health Center: make investments in outpatient facilities, leveraging CCDPH data on population health and changes in the local health care environment impacting availability of primary care or specialty services. 2017: Open replacement Logan Square Health Center	In progress
Deliver High Quality Care	Implement extended hours, requires impact bargaining: provide a health care experience that is patient-centered and convenient, including extended weekend and evening hours, patient support center, pre-registration, parking. 2017: Establish extended hours at all health centers.	In progress



Impact 2020

Progress and Updates

Focus Area	Name	Status
Deliver High Quality Care	Continued focus on strengthening PCMH. 2017-2019: Attain year-over-year increases in primary care patients empaneled at community health centers and patient satisfaction scores. 2017-2019: Implement telephone management phone tree at all primary care sites.	In progress
Deliver High Quality Care	Decrease ambulatory dwell time through process improvements. 2017-2019: Reduce wait times year-over-year.	In progress
Grow and Compete	Increase of primary care patients by 10%.	In progress



FY2020-2022

The Future

Environmental Scan of Market, Best Practices and Trends



- Our Competition
- Our Customer
- Our Funding Sources



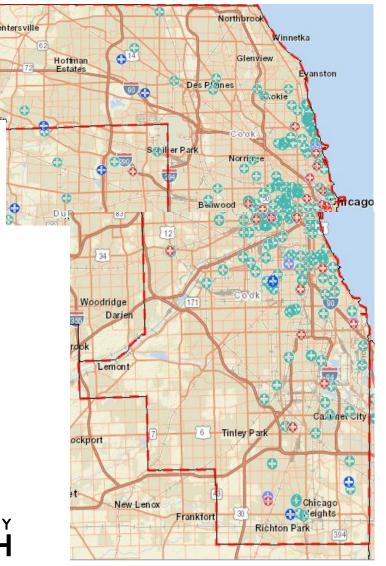
Our Competition



Federally Qualified Health Centers (FQHCs) & Ryan White HIV/AIDS Providers

Cook County Health

14 Health Center Locations



IN COOK COUNTY

FQHC Health Centers
 FQHC Look-A-Like Health Centers
 10

Ryan White HIV/AIDS Providers 61

Total Federal Grant Funding in 2017:

FQHC's: \$197M

• Ryan White HIV/AIDS: 41.9M

(include Core Center)

Services:

- Primary Care
- Maternal Child Care



Source: US Dept. of Health & Human Services, Bureau of Primary Health Care, UDS MAPPER, 2017

Federally Qualified Health Centers (FQHCs)

Continuously

Opening New Health Centers

&

Renovating Health Centers









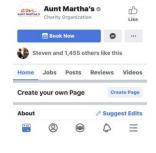


Billboards

Strong Branding: Federally Qualified Health Centers (FQHCs)



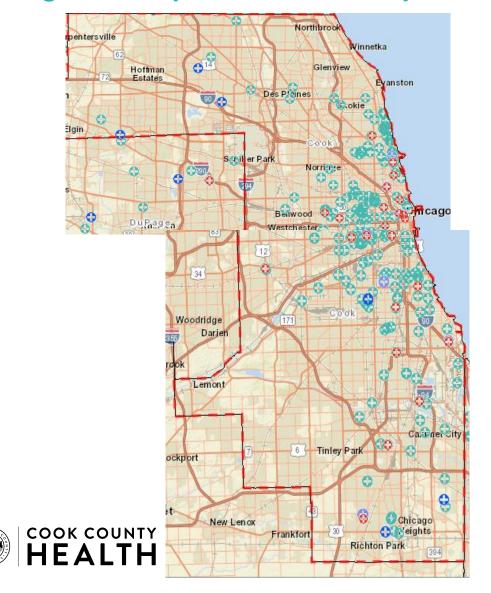
Social Media



Branded Health Center Websites



Mergers & Acquisitions: Federally Qualified Health Centers (FQHCs)



- Acquiring free clinics
- Acquiring hospital medical practices
- Acquiring residency training sites
- Potential for future mergers and acquisitions among FQHCs

Other Community Providers

Free Clinics

Specialized Providers Individual Pediatric & Prenatal Medical Practices

Medical Practices of Health Systems



Prenatal / Delivery

- Safety-Net Health Systems
- All Other Health Systems



Our Customer



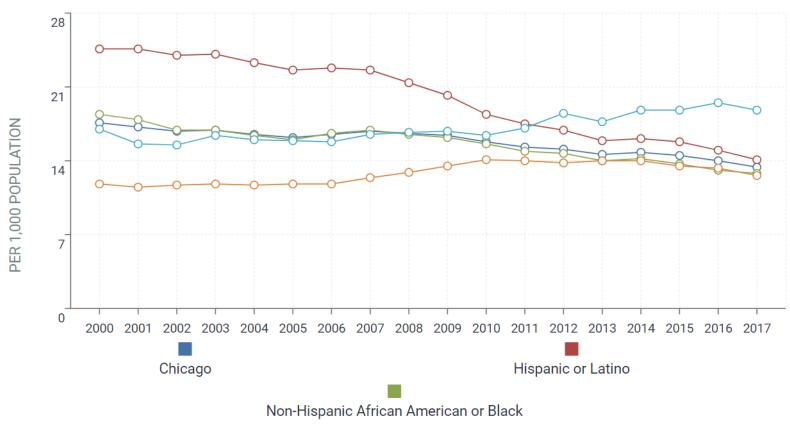
Total Population of Cook County	
2012-2016	5,696,008
Total Population Low Income of Cook County	1,903,001
Total Patients Served by Federally Health Centers (Low Income)	732,144
Total Patients Not Served (Low Income)	1,117,857

Source: US Dept. of Health & Human Services, Bureau of Primary Health Care, UDS MAPPER



City of Chicago Birth Rate

Race-ethnicity



Source: Illinois Department of Public Health, Vital Statistics

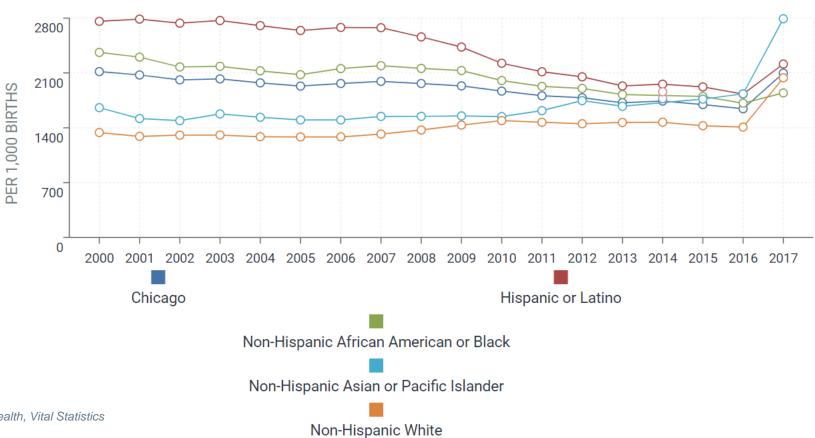


Non-Hispanic Asian or Pacific Islander

Non-Hispanic White

City of Chicago Fertility Rate

Race-ethnicity



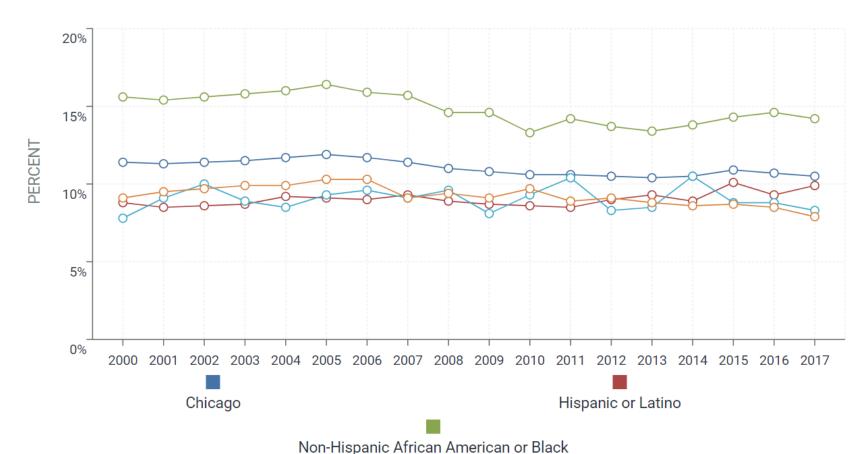
Source: Illinois Department of Public Health, Vital Statistics



Asian or Pacific Islander

City of Chicago Preterm Birth

Race-ethnicity



Source: Illinois Department of Public Health, Vital Statistics

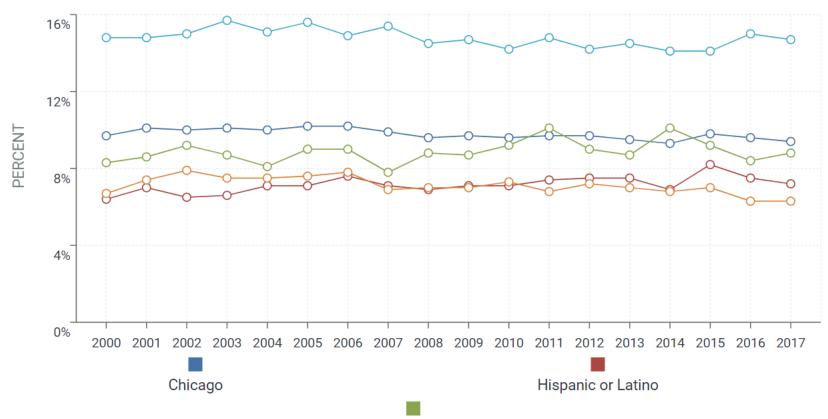


Non-Hispanic Asian or Pacific Islander

Non-Hispanic White

City of Chicago Low Birthweight

Race-ethnicity



Source: Illinois Department of Public Health, Vital Statistics



Non-Hispanic Asian or Pacific Islander

Non-Hispanic African American or Black



City of Chicago Infant Mortality Rate

Year 2012	Number	Rate per 1,000 births
▼ Race-Ethnicity		
Chicago	303	7.4
Hispanic or Latino	73	5.5
Non-Hispanic Asian or Pacific Islander	9	3.3*
Non-Hispanic African American or Black	163	12.7
Non-Hispanic White	44	3.7

Year 2017	Number	Rate per 1,000 births			
▼ Race-Ethnicity	▼ Race-Ethnicity				
Chicago	240	6.6			
Hispanic or Latino	60	5.5			
Non-Hispanic African American or Black	127	11.4			
Non-Hispanic Asian or Pacific Islander	11	4.0*			
Non-Hispanic White	39	3.6			

- The infant mortality rate has decreased, but significant disparities exist based on race / ethnicity.
- The infant mortality rate for infants born to Non-Hispanic black women is **two to three times** as high as the infant mortality rate of infants born to Non-Hispanic white women.

Source: Illinois Department of Public Health, Vital Statistics



Infant Mortality Rate

- Infants at higher risk for infant mortality include those born to:
 - Non-Hispanic black women
 - Younger mothers
 - Unmarried women
 - Women with a high school education or less
 - **U.S.-born** women (vs. foreign-born)
 - Women covered by Medicaid
 - Women with three or more previous births
 - Residents of the city of Chicago
 - Women with pregnancy-related hypertension (high blood pressure) or eclampsia
 - Women who had **no prenatal care**

Source: Illinois Department of Public Health, Vital Statistics



Our Funding Sources



Reduction in Medicaid coverage across Illinois

	Oct. 2018	Nov. 2018	% Change	Dec. 2018	% Change
Cook County	1,413,665	1,386,693	1.91%	1,353,809	2.37%
Other	1,617,146	1,591,627	1.58%	1,556,278	2.22%

- Steady decreases in Medicaid membership due to loss of coverage across fee-for-service and managed care.
- Cook County Medicaid beneficiaries are losing coverage at a higher rate than those in other IL counties. Possible cause of loss of Medicaid coverage is current redetermination policy.

Consolidation of Medicaid Managed Care Plans

Today: 6 Medicaid Managed Care Plans

*CountyCare

Meridian (a WellCare Co.)

Blue Cross Blue Shield

IlliniCare

Molina

Next Level

Future:

May experience more consolidation

Continue pay for performance contracts

Compliance / Regulatory

SWOT Analysis

Strengths, Weaknesses, Opportunities and Threats



Strengths

- Health Centers are part of Health System
 - Hospital
 - Ancillary Services
 - Specialty Care
 - Care coordination
 - Health Plan
 - Support Departments (project mgmt., regulatory, etc.)
- Mature integrated Electronic Health Record & Data Systems
- New health centers
- Staff commitment to serving Cook County's vulnerable and underserved populations

Weaknesses

- Lack of full integration with Health System
- Lack of managed care knowledge and infrastructure
- Lack of operational efficiency knowledge
- Lack of standardization across health centers
- Lack of performance management knowledge
- Limited Branding: marketing and communication
- Lengthy hiring process
- Distant community relationships
- Limited multi-lingual / cultural staff competency
- Early stage of culture of excellence

Opportunities

- Optimize integration of services across Cook County Health
- Improve patient access and productivity
- Increase specialty care and imaging services
- Performance in managed care contracts
- Prenatal and pediatric patient base
- Deepen community roots and connections
- Diversification of talent
- Partnerships with Federally Qualified Health Centers

Threats

- Federally Qualified Health Centers
 - Predominant market presence in primary care and maternal child health
 - Better service and patient experience
 - New state of the art facilities
 - Strong community brand
 - Access to federal operating and capital funds
- Growing uninsured



FY2020-2022

Ambulatory Health Centers



Deliver High Quality Care

FY2020-2022 Strategic Planning Recommendations

Primary Care

- Increase Access
- Improve Quality of Chronic Disease Management
- Optimize Operations Management
- Strengthen Leadership

Maternal Child Health

- Re-build prenatal program
 - prenatal medical care
 - prenatal education
 - support staffing
- Improve preventive screenings
 - depression, smoking, partner violence, etc.
- Optimize link between health center and Stroger Hospital Labor & Delivery
- Improve linkage to Women, Infants and Children (WIC) and social supports
- Develop child development services
- Improve quality metrics



Grow to Serve and Compete

- Provide More Care
 - Primary Care
 - Specialty Care
 - Imaging Services
 - Hours of Operation
 - Residency Program
- Serve More Communities
 - Location Analysis
 - Service Analysis
 - Physical Site Evaluation
- Provide Maternal Child Services
 - FQHC Partnership
 - Investment in Stroger Labor & Delivery
- Grow Community Partnerships
 - Community Organizations
 - Schools
 - Churches



Foster Fiscal Stewardship

- Increase Medicaid Managed Care Competency
- Increase Benefits Enrollment
- Expand Grant Funding
- Launch Cost Containment Strategies

Invest in Resources / Leverage Valuable Assets

- Strengthen Brand
- Become Prenatal and Maternity Care Provider of Choice
- Renovate Health Centers
- Invest in People & Information Technology



Impact Social Determinants/Advocate for Patients

- Hiring Reflects our Patients & Communities
- Shape our Health Centers to be Culturally & Linguistically Sensitive
- Launch Culturally Tailored Health Promotion Programming and Interventions
- Engage More Patients through Community Advisory Councils



Thank you.



APPENDIX



Deliver High Quality Care

FY2020-2022 Strategic Planning Recommendations

INCREASE ACCESS

Appointment Availability
Show Rate
Slot Utilization
Phone Access
Virtual Visits
Portal Access



IMPROVE QUALITY OF CHRONIC DISEASE MANAGEMENT

Diabetic Care Childhood Immunizations Behavioral Health Screenings Entry into Prenatal Care



OPTIMIZE OPERATIONS MANAGEMENT

Cycle Time
Patient Panel Management
Competency of Staff
Cross-Site Staff Deployment
Care Coordination Integration
Optimize Decision-Support
Health IT Tools

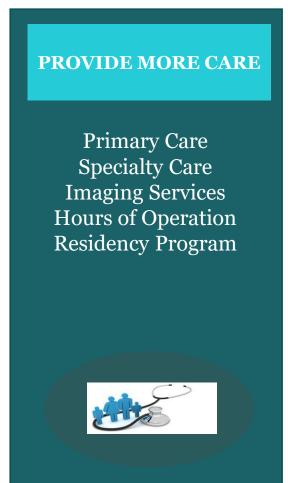


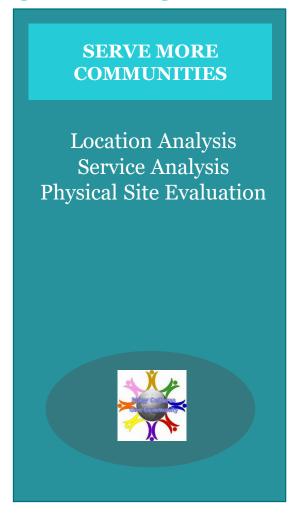
STRENGTHEN LEADERSHIP

Clinic Leadership Development
Matrix Reporting
Top Talent Recruitment

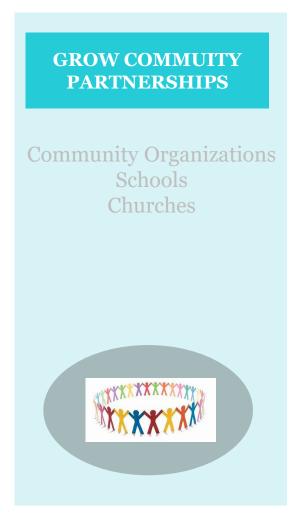


Grow to Serve and Compete



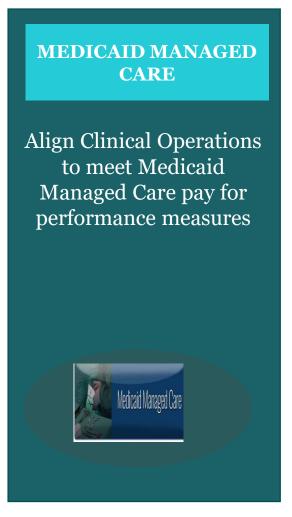






Foster Fiscal Stewardship

FY2020-2022 Strategic Planning Recommendations







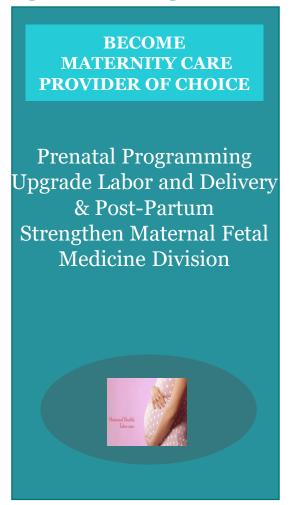
COST CONTAINMENT

Develop strategies to
contain temporary
staffing costs and
overtime use, and partner
with HR to quicken the
hiring process



Invest in Resources / Leverage Valuable Assets









Impact Social Determinants/Advocate for Patients

FY2020-2022 Strategic Planning Recommendations



Focused strategy to hire staff that is culturally and linguistically reflective of communities we serve



SHAPE OUR PRACTICES

Evaluate and implement practices that are culturally and linguistically sensitive, to yield better health outcomes



LAUNCH HEALTH PROMOTION

Develop culturally tailored interventions and programming to reduce racial and ethnic disparities in health



ENGAGING PATIENTS

Continue to develop Community Advisory Councils and other means to engage patient input on care delivery

