AMBULATORY SERVICES

Lead Executive: Craig Williams, Chief Administrative Officer, Operations and Development

Reporting Period: August, 2024

Report Date: September 20, 2024

Strategic Initiatives • OKR Highlights • Status Updates



Patient Safety, Clinical Excellence & Quality

- The Primary and Specialty Care Clinic's Quality team updated the Joint Commission audit tools for Infection Control, Environment of Care, Rights and Responsibilities, Provision of Care, Medication Management, National Patient Safety Goals, Record of Care, and Information Management.
- To ensure compliance and ongoing preparedness, monthly Environment of Care rounding audits and Joint Commission weekly audits will continue in the clinics through December/2024 before all shifting to monthly in January/2025. These audits help maintain compliance across various areas (*Patient Care, Infection Control, Environment of Care, Medication Management, Lab, etc.*).
- The Joint Commission Evidence of Standards Compliance (ESC) report (*details corrective actions for citations*) has been successfully submitted and approved by Joint Commission.
- Monday Breakfast Briefings, designed to enhance system leadership's understanding of the Joint Commission's standards and compliance commenced on August 19, 2024, and will continue for 13weeks.



Health Equity, Community Health & Integration

- In August/2024, the Patient Support Center handled over 55,000 patient calls with an average response time under 60 seconds, and 3,100 Nurse Triage calls with an average response time of 30 seconds.
- The CCH Transportation Survey for August received over 4,000 respondents with an average rating of 3.7/4 (93%). Additionally, 87% of patients reported they would be unable to attend their appointments without CCH transportation assistance.
- HealthViewX, the new referral platform for CCH partners, has achieved a significant milestone with over 17,000 referrals processed and 468 active users. Ophthalmology continues to be the most requested specialty, and Ultrasound remains the top diagnostic request. Phase II of the Cerner Provider Portal is underway and will incorporate Lab, Radiology, and Pathology functionalities.
- Outreach in the Ambassadors Program have been successful: distributing 36 car seats and 8 parking vouchers. Vouchers are given to new mothers or their families upon discharge from Labor and Delivery. In total, 107 patients were served at Stroger, 8 at Belmont-Cragin, and 6 at North Riverside.

















AMBULATORY SERVICES

- Cook County Health vaccinated a total of 441 individuals for COVID-19 in August. All ACHN clinics are equipped to screen, test, and vaccinate community members. The CORE Center administered 41 MPox vaccinations.
- Belmont Cragin New Arrival Health Center reported 31,208 New Arrivals program visits to date.
- Since April 8, 2024, the Mobile Care Coordination team registered 8,238 patients at the Landing zone: 5,620 vaccinated with MMR and 3,166 with varicella. 50% received same-day initial medical screening at the New Arrival Clinic, which started in May for CCH, while 30% were scheduled the next day. The Mobile Care Coordination team remains dedicated to following up on positive lab results for returning patients.
- To enhance support for New Arrivals, the Care Coordination staff have maintained a daily presence at each city shelter while providing services on Sundays at the Landing Zone.
- The operations team continues to meet to strategize on expanding awareness of available care options for patients. Concurrently, mass email announcements about the Virtual Immediate Care program are being sent via the patient portal to increase provider visits.
- The Cancer Center Service Line team is working with Revenue Cycle leadership to enhance patient
 experience with Financial Counseling services. Additionally, they are collaborating with Health
 Information Systems and the Prior Authorization team to streamline prior authorization management
 for the infusion center through the development of a new dashboard. This dashboard will enable the
 team to monitor the status of requests throughout the process, facilitate efficient scheduling, and
 boost our revenue stream by ensuring prior authorization is received prior to moving forward with
 treatment.



Patient Experience

• This month, ACHN's overall "Likelihood to Recommend" score increased by 0.14% from July, bringing the year-to-date score to 65.89%. ACHN leadership is actively enhancing communication during patient visits to encourage survey completion and gather valuable feedback. Additionally, staff have undergone retraining on the CI-Care model, and managers are incorporating CI-Care presentations into monthly huddles as a continuous engagement strategy to achieve our target of 67.55%. Meanwhile, the Specialty Care task force remains dedicated to improving the clerk experience to drive better outcomes.

















AMBULATORY SERVICES



- Specialty Care's patient experience metric, "*Likelihood of Recommending*," increased from 65.77% to 66.08% year-to-date resulting in a 31% increase.
- The overall trend for Primary Care's "Likelihood of Recommending" increased from 64.58% to 67.41% year-to-date resulting in a 14% increase with a continued upward trend. The plan is to maintain patient engagement by informing patients from check-in to discharge about completing the feedback survey. This approach has brought us closer to our target, and we look forward to reviewing the September data to assess our progress.

















AMBULATORY SERVICES



Growth Innovation & Transformation

- CORE leadership has implemented team-building meetings held to focus on quality improvement, program revitalization, and program growth.
- CORE/Cook County HIV Integrated Programs (CCHIP) Long-Acting Antiretroviral program has expanded to 393 active patients. Options are provided to patients to switch from daily oral medications to an injectable formulation which is given every other month to keep HIV levels undetectable.
- This month 165 individuals in the community received a rapid test through targeted HIV screening. Additionally, we identified 6 newly diagnosed clients through routine & rapid screening and 5 clients were linked to care. A total of 41 patients were re-engaged this month to ambulatory care and social services after being lost over a year.
- The Neurophysiology department received training on conducting evoked potential studies and engaged with leaders from St. Bernard Hospital and Franciscan Health to discuss transfer agreements for providing tele-neurology services.
- The workflow to connect CountyCare patients after psychiatric hospital discharge to behavioral health visits was finalized this month. The staff members were trained and the go live date is set for September 23, 2024.
- Trainings and schedules were coordinated for all behavioral health and psychiatry staff on the
 new behavioral health oracle module upgrade. The go live date is scheduled for October 17, 2024.
 This module will assist with clinical documentation to assure we meet with state and federal
 regulations.



Optimization, Systemization & Performance Improvement

- The Primary and Specialty Care Clinic's Quality team educated the North Riverside leadership team on performing chart reviews related to self-management goals to enhance their ability to effectively monitor and support patient progress towards these objectives, ensuring better patient outcomes and adherence to care plans.
- Trainings occurred for all Licensed Behavioral Health Therapists in specialty clinics on the Cerner
 power order referrals. These referral orders went live on August 5, 2024. The power order
 referrals will improve access and efficiency. The next step is to provide trainings to the clinics and
 providers to promote usage across specialty.
- The Columbia Suicide Severity Rating Scale (C-SSRs) audits were conducted on positive ambulatory suicidal prevention screenings. Results from the screenings were presented to the Suicide Prevention Committee. Action Plan included implementation of new clinical form for physicians on all parameters that met with joint commission regulations.

















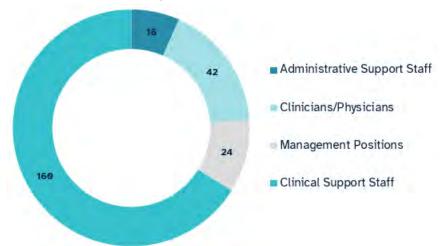
AMBULATORY SERVICES

• Specialty Care saw an increase this quarter in the Registration Quality Assurance (RQA) standard designed to help the clinics reach a goal of 98% final past accuracy when registering patients. Stroger saw an increase of 3.26% along with Sengstacke and Blue Island with a 19.97% increase. This increase is attributed to the Business Services Supervisors providing in person training with all clerical staff to provide hands-on demonstration of the registration process from start to finish.



Workforce: Talent and Teams

ACHN has 242 vacant positions: 16 Administrative Support Staff, 42 Clinicians/Physicians, 24 Management Positions, and 160 Clinical Support Staff. Of the 242, currently 168 roles are in recruitment (33 posted, 9 pending, 39 validations in progress, 27 interviews underway, 42 decision-to-hire packets under review, 16 offers accepted, and 2 on hold). This fiscal year, we have hired 112 individuals.





Fiscal Resilience

- Primary Care: ACHN is below budgeted volumes for August by 1,015 visits and 3.3% below budget year-to-date totaling 156,238 visits in FY2024.
- The Primary Care team has new providers that will be starting next month and throughout the end of the year and look to see improvements in show rates, and open notes by increasing timely reminders.
- Specialty Care: ACHN is above budgeted volumes for August by 1,908 visits and 8% above budgeted volumes year-to-date totaling 275,260 visits in FY2024.
- As of August 2024, ACHN is meeting expectations, having used 75% of the budgeted spending projections year-to-date.

















AMBULATORY SERVICES

• We have three non-personnel contracts valued at \$500,000 or more. One of these contracts have expired, but amendments are in progress and there are no service gaps.

Human Resources Recruitment

The Primary Care team has made significant progress in recruiting primary care professionals: 5 Advanced Practice Providers (APPs); 8 full-time physicians: Functional Medicine (FM), Internal Medicine (IM), Internal Medicine-Pediatrics (Med/Peds), Pediatrics (Peds); 2 part-time physicians: Functional Medicine (FM), Internal Medicine (IM) with several candidates already onboarded and others currently in the credentialing process. This achievement reflects our commitment to building a strong team and enhancing our primary care services.

Budget

Office / Program / Account	FY24 Budget	Expenses	Obligations (BPA's/PO's)	Expenditures (Expenses + Obligations)	Funds Available	% Expended
4893 - Ambulatory & Community Health						
Network of Cook						
Grand Total	179,227,432	129,288,579	5,666,677	134,955,256	44,272,176	75%

Procurement

	Non Agency Contracts							
Contract Number	Contract Name	Agre	ement Amount	Expiration	Notes/Updates			
H18-72-030	Anchor Mechanical	Ś	959,634.00	6/30/2024	RFP will go out for a 2nd time as there is one proposal for the RFP. The lack of responses will cause a delay in awarding the contract. Amendment in process for six months. There is no anticipation of gaps in service.			
H21-25-012	DaySpring Janitorial Svcs	\$	2,300,000.00	11/30/2024	Contract will be extended for another year as a parallel process to the RFP. Amendment requested to add new clinic at 467 E 31st St. Chicago.			
H17-25-064	Medspeed	\$	3,843,844.06	11/30/2024	•Sponser/Labs has initiated the RFP for a new contract.			



















COOK COUNTY DEPARTMENT OF PUBLIC HEALTH

Lead Executive: LaMar Hasbrouck, MD, MPH, MBA, Chief Operating Officer

Reporting Period: August, 2024

Report Date: September 3, 2024

Strategic Initiatives • OKR Highlights • Status Updates



Patient Safety, Clinical Excellence & Quality

- Suburban Cook County has had several diagnosed or suspected cases of West Nile Virus, including
 neuroinvasive disease, raising the risk level to high. No deaths have yet been reported in
 Suburban Cook County. A messaging campaign is underway to raise awareness about the "3 R's":
 - 1) Use EPA approved insect Repellant;
 - 2) Repair screens; and
 - 3) Remove standing water from around your home.
- The Occupational Safety and Health Administration (OSHA) has fined a stone countertop fabrication establishment \$1 million for poor workplace protections from silica dust resulting in accelerated silicosis, a chronic debilitating lung disease, in two individuals who now require lung transplants. There are over 100 workplaces in Suburban Cook County that may be putting their workers at risk for silicosis. CCDPH is providing information and resources for potentially affected workers on its communication channels.



Health Equity, Community Health & Integration

- CCDPH's Policy Team assisted with organizing a site visit from Harris County Texas Public Health to
 the Cook County Health CORE Center. Harris County requested the visit to inform their planning
 for improved and expanded HIV clinical services. CORE center staff and CCDPH HIV program staff
 presented on the work taking place in Cook County to support people living with HIV.
- The co-enforcement program of the Healthy Work Initiative, which trains and implements public health and community reporting of workplace violations to the appropriate enforcement agency, is moving forward. Workgroup meetings have been set up to discuss aspects of the work with Cook County Department of Public Health (CCDPH), Raise the Floor Alliance, UIC School of Public





















COOK COUNTY DEPARTMENT OF PUBLIC HEALTH

- Health, and the Cook County Department of Human Rights and Ethics. Following the training, sanitarians will incorporate elements that focus on workers' rights and safety to their inspections.
- CCDPH is working with Cook County Health (CCH) to facilitate access to CCH's electronic medical record system for the Evanston Health and Human Services Department. This access will facilitate communicable disease investigations for Evanston residents using CCH for medical care.



Fiscal Resilience

• The Illinois Department of Public Health (IDPH) has announced their yearly non-competitive Comprehensive Health Protection grant awards. CCDPH will receive \$3,646,215, which is a decrease of approximately \$500,000 from last year. IDPH hopes to restore some or all of this increase later in the year. The grant runs annually from July 1 - June 30.

Human Resources Recruitment

As of September 3, 2024, CCDPH has - 41 vacant positions to date (actively recruited) - 3 Requests for Hires (RTH) are awaiting budget approval or to be posted/reposted. The remaining positions are being actively recruited (see table below).

FY24 metrics Snapshot, as of September 3, 2024

RTHs Submitt MTD/ Y		Pre- Recruiting	On Hold	Postings Currently	Validation in Progress	Interviews in Progress	e-DTH Underway	Candidate Offers	Vacancies Filled In August	YTD Position Filled
18/69)	5	1	4	3	2	7	2	3	17

Budget

Office & Account	FY24 Budget	Expenses	Obligations (BPA's/PO's)	Expenditures (Expenses + Obligations)	Funds Available	% Expended
4895 - DPH Total	21,993,575	11,630,849	694,150	12,324,999	9,668,576	56%

9/3/2024

























Procurement

The following vendors or subgrantee \$500K or more are all active contracts.

Contract #	Vendor or Subgrantee Name	Expires On
H21-25-129	AgeOptions	5/31/25
H22-25-154	Flowers Communications Group	5/31/25
H21-25-138	Housing Helpers/Proviso Partners for Health	5/31/25
H21-25-140	Illinois Board of Trustees/UIC School of Public Health	5/31/25
H21-25-182	United Way of Metropolitan Chicago	5/31/25

^{*****}Vendor or Subgrantee contract dates have been updated.























CERMAK HEALTH SERVICES

Lead Executive: Manny Estrada, Chief Operating Officer, Correctional Health

Reporting Period: August 2024

Report Date: September 20, 2024

Strategic Initiatives • OKR Highlights • Status Updates



Patient Safety, Clinical Excellence & Quality

Preparations took place to host a team of 5 AOIC (Administrative Office of the Illinois Courts) auditors who will be at JTDC in the month of September to conduct a survey based on the 2022 standards developed by the AOIC Probation Services Division, the Illinois Supreme Court Probation Policy Advisory Board, and the Illinois Juvenile Detention Center Superintendents. The medical and mental health leadership teams have been pre-interviewed by the auditors to gain an understanding of the health operations at JTDC.



Health Equity, Community Health & Integration

Cermak and the State's Attorney's Office were successful on two cases presented for involuntary medication petitions. Their detailed precision to the procedural process left a lasting impression on the opposing supervising attorney for the Illinois Guardianship and Advocacy Commission. To enhance the petitioning services provided by the States only Maximum-Security Mental Health facility, the supervising attorney for the Illinois Guardianship and Advocacy Commission requested that Dr. Howard in conjunction with Cook County State's Attorney create a formal presentation for involuntary med petitions.

The JTDC Mental Health Department hosted a staff summer wellness event. This event was funded through the Office of Juvenile Justice and Delinquency Prevention (OJJDP) grant, which is focused on the training and wellness of staff. The event included a hot dog stand, ice cream truck, and relaxing chair massages.

The Cermak Leadership Team at the Juvenile Temporary Detention Center attended a 2-day Leadership Training Summit. The theme was 'The Vulnerable Leader who Gets Results' facilitated by internationally recognized expert in child and family welfare, Dr. Sheryl Brissett-Chapman, Senior Advisor of the National Center for Children and Families (NCCF), and Krystal Holland, certified State of Maryland Residential Child Care Program Administrator. Dr. Chapman served NCCF for 32 years where she propelled NCCF from a small local orphanage to a nationally accredited organization with a multimillion-dollar budget.



Patient Experience

















CERMAK HEALTH SERVICES

Juvenile Justice Care Coordination (JJCC) was invited by Juvenile Probation to be a participant at their Backto-School Event for families of justice involved youth. The event had performances from the Southside Drill Team, and the Jesse White Tumblers. Immunizations, physicals and City Key IDs were available for families to utilize. JJCC was able to make connections with other Cook County community resources and also met with several families to talk about care coordination services. Food, prizes, games and bookbags were given away to families who attended the event.



Growth Innovation & Transformation

Cermak Patient Care Services Nursing leadership is finalizing potential submissions for the Spring NCCHC Conference in 2025. Multiple abstract proposals have been submitted for this week's deadline with the hopes that one will be selected for the National Conference in April 2024.

Chicago Department of Public Health has resumed Wastewater Surveillance for viral pathogens at the Cook County Jail. Surveillance includes COVID, influenza, and RSV. Sampling will be collected weekly, and results shared with Cermak Infection Control and Cook County Sherriff's Office officials.

Cermak Health Information Management Department organized Direct Message training with HIS for Social Workers and MH Providers to learn how to send/receive external documents to/from Jesse Brown VA. Cermak Team will be using Direct Message to communicate continuity of care securely and efficiently with VA.



Optimization, Systemization & Performance Improvement

Cermak's Department of Pharmacy and Patient Care Services converted the dispensing of approximately 800 patients with 1450 Orders from a 28-day supply of medications, Keep On Person, to a Daily 24-hour supply of medications, Dose By Dose. The conversion from KOP to DBD will results in better management of patient compliance of medication regimen and better patient outcomes.



Workforce: Talent and Teams

Cermak Mental Health welcomed Psychiatric Advance Nurse Practitioner Ijeoma Ibe. Ms. Ibe earned her BSN from Grand Canyon University and her Master of Science in Nursing from Walden University with a concentration in Psychiatric Mental health Nursing NP. She holds certifications in BLS, ACLS, PALS, NHISS, Crisis Prevention trained and Continuing education certificates in tracheostomy care and respiratory care.























CERMAK HEALTH SERVICES

Cermak Health Services continues to meet with the State of Illinois Department of Healthcare and Family Services (HFS) to discuss the next steps regarding the implementation of the newly approved 1115 Waiver. Five milestones were identified for the successful implementation of the waiver, which will allow Cermak to bill for patients receiving key services 90 days prior to discharge from the Cook County Jail. This program will allow Cermak and Juvenile Detention patients to have improved transitions of care into the community and Cermak is excited to continue these discussions with HFS.



















Human Resources Recruitment

Cermak Health Services













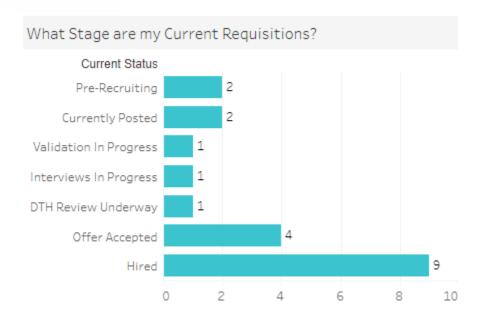






























Budget

Overall, across all accounts, Cermak and JTDC are on track with budgeted expectation through the end of August 2024.

Office / Program / Account	FY24 Budg ▼	Expense 🔻	Obligations (BPA's/PO' ▼	Funds Availabl 🕶	% Expende d 🔻
4240 - Cermak Health Services of Cook County					
0 - DEFAULT (41195.4240.0) Total	-	7,806	-	(7,806)	No Budget
10155 - Administration (41195.4240.10155) Total	12,448,221	10,151,575	1,301,037	995,609	92%
10160 - Administration and Clerical (41195.4240.10160) T	-	568	3,003	(3,571)	No Budget
13500 - Environmental Services (41195.4240.13500) Total	2,762,461	2,086,246	13,417	662,798	76%
13945 - Finance (41195.4240.13945) Total	243,273	186,467	-	56,806	77%
14915 - Human Resources (41195.4240.14915) Total	263,532	132,290	-	131,242	50%
15050 - Information Technology (41195.4240.15050) Tota	231,171	198,041	-	33,130	86%
15435 - Laboratory Services (41195.4240.15435) Total	641,650	422,508	18,024	201,118	69%
15805 - Material Management (41195.4240.15805) Total	462,003	260,987	16,248	184,769	60%
15880 - Med/Surg - Administration (41195.4240.15880) To	-	-	2,810	(2,810)	No Budget
15895 - Medical Administration (41195.4240.15895) Tota	10,761,208	7,325,422	84,257	3,351,530	69%
16480 - Nursing - Administration (41195.4240.16480) Tota	-	140	143	(283)	No Budget
17015 - Oral Health (41195.4240.17015) Total	2,496,986	1,509,585	-	987,401	60%
17170 - Patient Care Services (41195.4240.17170) Total	46,480,058	27,442,428	222,970	18,814,659	60%
17395 - PCS - Emergency Services (41195.4240.17395) Tot	-	1	-	(1)	No Budget
17610 - Pharmacy (41195.4240.17610) Total	9,838,834	6,360,739	(61,279)	3,539,374	64%
18445 - Quality Assurance (41195.4240.18445) Total	776,331	601,048	-	175,283	77%
18485 - Radiology (41195.4240.18485) Total	845,217	616,071	-	229,145	73%
19650 - Storerooms (41195.4240.19650) Total	-	584	(566)	(18)	No Budget
29235 - 240 General Store Inventory (IV) (41195.4240.292	-	463,357	(262)	(463,095)	No Budget
16005 - Health Information Management (HIM) (41195.42	422,736	333,161	-	89,575	79%
16125 - Mental Health Services (41195.4240.16125) Total	17,258,018	10,131,273	31,167	7,095,579	59%
19635 - Store Room (41195.4240.19635) Total		-	141	(141)	No Budget
20475 - Txbl GO Ser 2009B BABS Bond Fd (41195.4240.204		13,466	-	(13,466)	No Budget
29165 - General Store Inventory (IV) (41195.4240.29165)	271,687	249,561	8,170	13,956	95%
15485 - Law Administration (41195.4240.15485) Total	-	-	562	(562)	No Budget
Grand Total	106,203,386	68,493,323	1,639,842	36,070,220	66%



















			Obligations	Funds	% Expende
Office / Program / Account	FY24 Budg ▼	Expense 🔻	(BPA's/PO' ▼	Availabl 🔻	d ▼
4241 - Health Services - JTDC					
10155 - Administration (41197.4241.10155) Total	1,041,815	228,682	694,951	118,182	89%
16015 - Medical Services Administration (41197.4241.16	731,730	588,164	-	143,567	80%
17015 - Oral Health (41197.4241.17015) Total	309,492	282,910	-	26,582	91%
17170 - Patient Care Services (41197.4241.17170) Total	3,629,502	2,516,306	32,050	1,081,146	70%
19815 - Support Services Administration (41197.4241.198	-	356	-	(356)	No Budget
10755 - Behavioral Health (41197.4241.10755) Total	3,971,104	2,754,864	1,171	1,215,069	69%
Grand Total	9,683,643	6,371,283	728,172	2,584,188	73%



















Procurement

<u>Number</u>	Supplier	PO Description	End Date
H17-25-037	CORPORATE CLEANING SERVICES INC	H17-25-037 - Service, Window Cleaning	5/31/2024
77000032606	SCHECK & SIRESS PROSTHETICS, INC	77000032606 - SERVICE, CUSTOM ORTHOTICS	7/31/2024
H22-25-164	AB Staffing	H22-25-164 SERVICE, PROFESSIONAL RADIOLOGY STAFFING SERVICES	9/25/2024
H19-25-077	ODP Business Solution LLC	H19-25-077 - Supplies and Services, Office Supplies	11/21/2024
H19-25-063	W. W. Grainger	H19-25-063 - Supply, Institutional Supplies for Maintenance, Repair, and Operations	11/30/2024
H19-25-103	ALLIED WASTE TRANSPORTATION, INC.	H19-25-103 - Service, Waste Removal Services Throughout CCH	11/30/2024
H18-25-008	MAXIM HEALTHCARE SERVICES INC	H18-25-008 - Service, Temporary Staffing	11/30/2024
H18-25-114	Kore SAE	H18-25-114 - Service, Temporary Staffing	11/30/2024
H20-25-023	Praxair now 'Linde Gas and Equipment In	H20-25-023 - SERVICE, MEDICAL GAS	12/8/2024
H21-25-034	Quest Diagnostics	H21-25-034_SERVICE, REFERENCE LABORATORY TESTING	12/31/2024
H22-25-052	Maxim Physician Resources	H22-25-052_Services_Locum Tenens and AP Staffing	2/14/2025
H20-25-063	Stericycle	H20-25-063 - Waste Removal for Medical, Hazardous, Sharps and Pharma Waste	3/31/2025
H16-72-052	Linde Gas	H16-72-052 - Service, Certification, Maintenance, and Repair of Medical Gas Systems	3/31/2025
H22-25-095	Orkin	H22-25-095 Services, System-Wide Pest Contract Services (Orkin)	5/31/2025

















HEALTH PLAN SERVICES

Lead Executive: Aaron Galeener, Chief Administrative Officer, Health Plan Services

Reporting Period: August, 2024

Report Date: September 20, 2024

Strategic Initiatives • OKR Highlights • Status Updates



Patient Safety, Clinical Excellence & Quality

CountyCare rated a four-star health plan by NCQA

CountyCare is proud to announce that it has been awarded a four-star rating by the National Committee for Quality Assurance (NCQA), making it one of the highest-quality Medicaid health plans for Cook County residents enrolled in HealthChoice Illinois. NCQA health plan ratings cover commercial, Medicare, and Medicaid health plans across the country, and incorporate approximately 50 measures of health care quality, patient outcomes, and member experience into its ratings. NCQA ratings can help potential enrollees evaluate their health plan options.

CountyCare earned four stars both in the rating of plan satisfaction metric and rating of members' health care metric, contributing to the health plan's overall rating. Nationally, only 20% of all Medicaid plans achieve a four-star rating or higher. In May, CountyCare finalized its measurement year 2023 Healthcare Effectiveness Data and Information Set (HEDIS) quality results and its Consumer Assessment of Healthcare Providers and Systems (CAHPS) survey closed. CountyCare's HEDIS and CAHPS results

contribute to the plan comparison quality scores. CountyCare uses these results throughout the year to make improvements to its programming to improve health outcomes and member experience.



Health Equity, Community Health & Integration

















HEALTH PLAN SERVICES

Preventing lead exposure in children

A recently published study in the *Journal of the American Medical Association Pediatrics* estimates that two-thirds of young children in Chicago have been exposed to lead through their home drinking water. In order to prevent lead exposure in children, CountyCare has launched a one-time benefit for approximately 89,000 households to provide lead removing water filters to all families with a CountyCare member 12 or under.

- Educational materials that were developed with the Cook County Department of Public Health and the Chicago Department of Public Health and coupons were mailed to over 31,000 families in August.
- As of early September, over 1,700 families have fulfilled the benefit.
- Two additional mailings to over 55,000 households will be sent in September and October.



Member Experience

Non-emergency medical transportation transition

On July 17, CountyCare executed a soft launch with its new transportation vendor, ModivCare, allowing for them to begin scheduling non-emergency medical transportation for dates of service after July 31. On August 1, 2024, CountyCare completed the full transition to the new transportation vendor.

- CountyCare's new partner, Modivcare, maintains an extensive network of providers that maintain multiple levels of transportation services, including private and public transportation, and mileage reimbursement for caregivers.
- There is no change in the transportation benefit, however CountyCare will have a more extensive network and new modes to request rides.
- In addition to requesting rides by phone, members will be able to use a mobile app or website that will allow for live trip tracking, mileage reimbursement, and the ability to manage and book trips for multiple family members.

During its first month supporting CountyCare, ModivCare met all call center service levels and scheduled over 93,300 trips.



Growth Innovation & Transformation

Redetermination and CountyCare in the community

















HEALTH PLAN SERVICES

Having surpassed the one-year anniversary of the resumption of Medicaid redetermination, CountyCare continues to execute a comprehensive member education and outreach strategy to support members with redetermination, including a communications campaign through mail, text, phone, email, the CountyCare website, social media, and community events.

- CountyCare had over a 90% retention rate in July.
- Between May of 2023 and July 2024, CountyCare hosted 285 Redetermination Events with an attendance of over 12,700 individuals, including over 10,300 CountyCare members.

In September, CountyCare saw a 2% decrease of its membership due to the full Health Benefits for Immigrant Adults and Seniors population going through redetermination simultaneously with an August 15 submission date. CountyCare is doing additional outreach to support these members during the 90-day reinstatement period.

In August, in addition to redetermination events, CountyCare:

- Provided information at over 20 back to school events in partnership with Chicago Public Schools,
 - the CDPH, and local government officials.
- Had a float in the Bud Billiken parade.
- Participated in the Black Women's Expo and several other wellness and health fairs.



In August, in preparation for open

enrollment, CountyCare has also launched its 2024-2025 choice enrollment campaign, "CountyCare Rewards You!" This campaign was selected during five focus groups with members and based on strong positive feelings about CountyCare's rewards program.



Optimization, Systemization & Performance Improvement

















HEALTH PLAN SERVICES

In alignment with its focus on quality, optimization, and performance improvement, in 2023, CountyCare held a competitive request for proposals for a new HEDIS vendor that would be responsible for prospective quality reporting and the health plan's annual HEDIS submission. CountyCare kicked off the implementation with a new HEDIS partner in early 2024 and went live at the beginning of June. Following the submission of our measurement year 2023 HEDIS submission, between June-August, the CountyCare team completed extensive data validation.

For the next phase of this implementation, CountyCare is establishing a partnership with a technology company to integrate with provider electronic health record systems and capture additional supplemental quality data for 2024.



Workforce: Talent and Teams

Staff Engagement Committee

Health Plan Services has an active Staff Engagement Committee that meets throughout the year to plan and implement programming to improve team satisfaction and make Health Plan Services an even better place to work. In 2024, the Staff Engagement Committee introduced new engagement programming, including Professional Headshots, a Field Day, and Midday Mingles (a series of events during the lunch hour that allow staff to connect and unwind). Health Plan Services Staff Townhalls are held four times each year and each month the department hosts a Lunch and Learn on a variety of topics.

In September, the Staff Engagement Committee is hosting a "Spirit Week" event for all Health Plan Services staff in conjunction with Cook County Health's "Staff Appreciation Week" and Food Truck Social. The Staff Engagement (SEC) will have in-office and virtual activities for staff to participate in starting Monday, September 23rd through Friday, September 27th.



Fiscal Resilience

Risk adjustment strategy

CountyCare is performing an analysis in 2024 to assess the gaps and inadequacies in coding to focus on opportunities for improvement in the risk scores, thereby capturing additional revenue for providers and CountyCare. Risk adjustment is a process for quantifying an individual's health status into a risk score and

















HEALTH PLAN SERVICES

is an important element of medical billing which focuses on ensuring that health plans and providers receive appropriate payments for the extent of care they provide to patients.

In the short term, CountyCare will:

- Identify specific providers to facilitate provider education and clear-cut coding policies through increased collaboration.
- Consistently rebalance priorities, monitoring the data to refocus based on leading and lagging performance indicators.

In the long term, CountyCare will:

- Link population health management and risk adjustment through better integrated systems to adjust payments for risk and quality of care.
- Implement risk adjustment mechanisms that rely on automated collection from data sources used for care improvement and population health management.
- Execute an evidence-driven strategy for risk adjustment to improve equity by aligning with risk adjustment incentives and models.

Human Resources Recruitment

Of the 91 FY2024 positions in recruitment, 61 (67%) of requisitions have been hired, 9 positions have interviews in progress, and 9 new hires are on track to start in the coming weeks. Since last month's update, 6 new team members have been hired. Health Plan Services is continuing to prioritize staff recruitment to ensure the continued success of the plan.



Budget

Health Plan Services' August membership of over 425,100 members was higher than the monthly average budgeted projection of 391,000. The net impact of revenue and expenses remains balanced and within budget. Please see the actual expenditures and budget through August 2024 below:

















HEALTH PLAN SERVICES

Office & Account	FY24 Budget	Expenses	Obligations (BPA's/PO's)	Expenditures (Expenses + Obligations)	Funds Available	% Expended
4896 - Health Plan Services						
CONTRACTUAL SERVICE Total	2,886,625,971	2,426,308,118	43,866,578	2,470,174,696	416,451,275	86%
OPERATIONS & MAINTENANCE Total	7,748	5,572	-	5,572	2,176	72%
PERSONAL SERVICES Total	46,192,543	30,665,244	-	30,665,244	15,527,299	66%
4896 - Health Plan Services Total	2,932,826,261	2,456,978,934	43,866,578	2,500,845,511	431,980,750	85%
Grand Total	2,932,826,261	2,456,978,934	43,866,578	2,500,845,511	431,980,750	85%

Procurement

Service	Vendor	Description	Type of contract	Contract end date
Interoperability and Patient Access	1Up Health	In alignment with the Cures Act, Centers for Medicare and Medicaid required interoperability and patient access technology services.	Procurement	02/28/2025



















PROVIDENT OPERATIONS

Lead Executive: Arnold F. Turner, M.D., Chief Hospital Executive Provident Hospital

Reporting Period: August, 2024

Report Date: September 20, 2024

Strategic Initiatives • OKR Highlights • Status Updates



Patient Safety, Clinical Excellence & Quality

Staff received training on the new nurse call system began in August.

The 8 West medical surgical unit had zero patient falls for the entire month of August.

The kickoff meeting of the nursing Professional Shared Governance Council was held on 8/28/2024, launching unit based shared governance that is essential to Magnet and Pathway designations.



Health Equity, Community Health & Integration

Members of the Provident Medical Staff worked the first aid stations along the Bud Billiken Parade route. In addition, for the first time a Provident employee served as a parade judge.

The Provident Women's Auxiliary donated new jogging suits to the Social Service Department to distribute to patient without clothes to wear when being discharged home.



Patient Experience

The elevator modernization project began in August with Public Elevator #1 taken out of service. The cables, brakes, control systems are being replaced with the expected completion of the first car in October. Once certified, the second car will be taken out of service for modernization.

Nineteen sets of bedside tables and recliners were received and distributed to patient rooms in the 8 West med/surg unit.



















PROVIDENT OPERATIONS

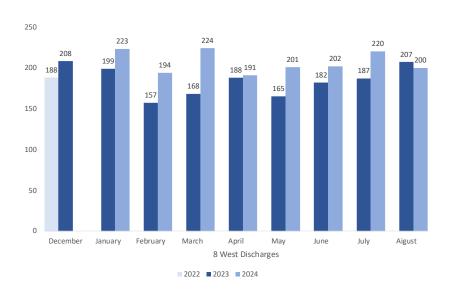


Growth Innovation & Transformation

The construction of the Crisis Triage and Stabilization Center began in August after the asbestos abatement was completed.

The monthly average discharges from 8 West remain above last year's year to date average.







Optimization, Systemization & Performance Improvement

The colonoscopy initiative to address the backlog of colonoscopy cases resulted in an overall 50% reduction of pending cases in the queue for more than 6 months. The team prioritized scheduling the most critical patients (Tier 1 and Tier 2) and is now working on reducing the backlog for remaining patient population.



















PROVIDENT OPERATIONS

GI - Queue



GI Tiers



Time to Access

	April <6m/>6m	August <6m/>6m
Overall	391/429	252/216
Tier One	9/18	0/0
Tier Two	107/124	0/0
Tier Three	275/287	252/216



In August in the ED the Left Without Being Seen (LWBS) rate was 3.79%, exceeding the goal of less than 4%.



Workforce: Talent and Teams

The new Materials Management supervisor started in August.



















PROVIDENT OPERATIONS



Fiscal Resilience

July YTD (In \$000)	Actual	Budget	Variance (Favorable/Unfavorable)
Income	\$58.7	\$40.2	\$18.5 (46%) Favorable
Expense Labor (Salary &	\$75.5	\$76	\$1.4 (2%) Favorable
Contract)	\$37.8	\$35.7	\$2.1 (6%) Unfavorable
Gain (Loss)	(\$9.5)	(\$28)	\$18.5 (66%) Favorable













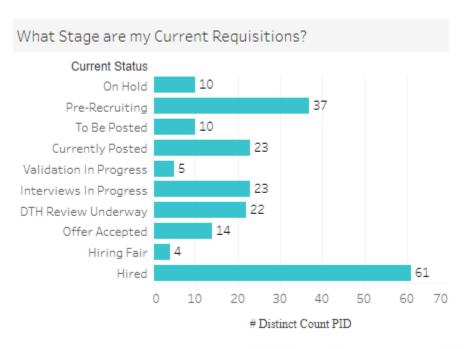




PROVIDENT OPERATIONS

Human Resources Recruitment





Budget

Office -	FY24 Budget	Expenses	Obligations (BPA's/PO's)	Expenditures (Expenses + Obligations)	Funds Available	% Expended
■ 4891 - Provident Hospital of Cook County						
Non- Personnel	20,543,860	8,943,002	(95,005)	8,847,997	11,695,864	43.07%
Personnel	24,156,520	16,515,905	-	16,515,905	7,640,615	68.37%
4891 - Provident Hospital of Cook County Total	44,700,380	25,458,907	(95,005)	25,363,902	19,336,479	56.74%

The actual spend should not exceed 79.51%.



















PROVIDENT OPERATIONS

Procurement

The following contracts for \$500K or more and are set to expire in the next 9 months.

Contract #	Vendor Name	Expires
H22-25-090	Dialysis Care Center Management, LLC	11/30/2024
H22-25-187	ADT Commercial, LLC	11/30/2024
H21-25-011	Dialysis Care Center Management, LLC	11/30/2024



















STROGER OPERATIONS

Lead Executive: Donnica Austin-Cathey, Chief Hospital Executive, Stroger Hospital

Reporting Period: August, 2024

Report Date: September 24, 2024

Strategic Initiatives • OKR Highlights • Status Updates



Patient Safety, Clinical Excellence & Quality

- The Stroger fall rate for the month of August was 2.4/1,000 patient days. We remain below state and national average, but we are currently in a rapid improvement cycle to improve further.
- We have also launched a rapid improvement cycle to improve hand hygiene among all staff who interact with patients.
- Staff education continues in the Neuro ICU related to external ventricular drains to continue providing excellent care to our patients.
- The Laboratory has worked with the Dialysis team to improve the process around ensuring proper chain of custody and correct labeling of times on specimens.
- The Mammography Department is implementing the Mag View Mammography tracking system. The system will automate the current manual process for tracking the mammography patients' findings across Cook County Health by categories, generate reminder letters and follow up appointments.
- To provide additional coverage in intubation operations, Respiratory Therapy is exploring an advanced practitioner role to provide an additional layer of safety in airway emergencies.
- The Laboratory went live on August 20th with new Blood Culture ID (BCID) panel on the BioFire platform. This new test is a rapid multiplex PCR based assay designed for simultaneous detection of 90% of common bacteria and yeast found in positive blood cultures as well as anti-microbial resistance genes.



Health Equity, Community Health & Integration

















STROGER OPERATIONS

- The Mammography Department is participating in a Health Fair at CCH health centers by providing screening mammograms.
- The Mammography Department is preparing for Breast Awareness Month in October. The department will provide gifts for patients presenting for mammography services.
- In support of the respiratory profession, Stroger Hospital will be partnering with local programs to contract respiratory students for an exceptional clinal experience.
- A transfer agreement with Resilience Health (West Suburban/Weiss)I has been completed that would allow the transfer of adult and adolescent sexual assault transfers to Stroger Hospital for care.



Patient Experience

- In the nursing domain for Press Ganey, 4S Obstetrics/Labor and Delivery achieved 100% for the months of June, July, and August for patient experience.
- The Imaging Department continues to extend access to the ACHN clerical staff to schedule patient appointments. The intent is to allow the patients to leave the clinic with a scheduled appointment date and time of their choice.



Growth Innovation & Transformation

- The Labor and Delivery volume is growing and has continued to outpace the budget by 36%. There were one hundred deliveries in August.
- The second mobile MRI unit was delivered and will be operational by Sept. 23rd, 2024. We will discontinue outsourcing MRI referrals to Humboldt Park on Sept. 30, 2024.
- Room for the 2nd PET CT is current being prepared. The completion date is targeted for November 2024.
- The Laboratory kicked off laboratory automation refresh project which will not wrap up until late 2025. The first phase of equipment has been delivered. Also, the lab received a refresh of all new chairs in the department.

















STROGER OPERATIONS



Optimization, Systemization & Performance Improvement

- Obstetrics nursing leadership and physicians have been partnering to expedite the discharge for those patients who have been cleared.
- The Emergency Department has been reinforcing new hand-off report with Tele/Med-Surg Department.
- RN Bed Coordinators have been arranging for the reservation of patient rooms with charge nurses to avoid rooms being blocked for an extended time.
- The Med-Surg Divisions chair alarm committee continue to work together to improve patient safety by installing chair alarms.
- We continue to collaborate with the Medical Records department to standardize the release of information process which will include the release of CD's and legal request which are currently being released by the Imaging PACS team.
- The radiology team has reduced the backlog of reading films by use of a vendor.
- Respiratory has been asked to participate in a workgroup to mitigate 30-day readmissions for COPD patients.
- Phlebotomy AM draws completed by 7 am 72% for August which remains below the benchmark of 75%.
- The Laboratory also continues ongoing work with Cross County to implement electronic timekeeping.



Workforce: Talent and Teams

- The Emergency Department has oriented 20 new employees combined between Trauma/ED and the Child Life Speciality employee has been approved.
- Maternal Child Care has recruited a Clinical Operations Supervisor who started July 29th, 2024.
 Also, the Division currently has 34 positions in the recruitment pipeline.
- The 3rd RN Bed coordinator for nights has started, currently there is one position open.
- The Imaging Services Manager of Interventional Radiology is actively assessing and revising current workflows.



Fiscal Resilience

















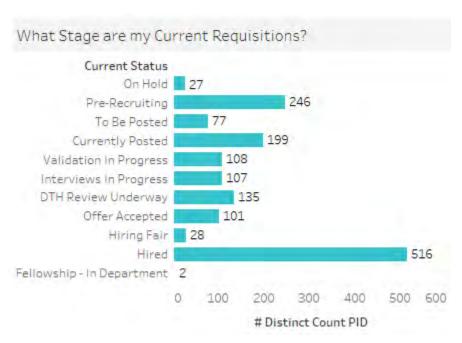


STROGER OPERATIONS

- The Maternal Child Care Division has been onboarding new staff to eliminate agency costs.
- Med/Surg Division has been over the budgeted census for the past 8 months and are closely monitoring overtime and agency use.
- The Radiology Division continues to collaborate with Revenue Integrity to identify a CCH Resource to assist with the charge capture process in the Radiation Oncology Department.

Human Resources Recruitment























STROGER OPERATIONS

Budget

	U	-	U	L		U
			Expenditures			
Office (Department) & Program Area by Major			Obligations	(Expenses +	Funds	%
Account Class	FY24 Budget	Expenses	(BPA's/PO's)	Obligations)	Available	Expended
4897 - John H. Stroger Jr. Hospital of Cook County Total	1,079,234,000	785,353,916	34,357,426	819,711,342	259,522,658	76%
Grand Total	1,079,234,000	785,353,916	34,357,426	819,711,342	259,522,658	76%

















