

Minutes of the Meeting of the Audit and Compliance Committee of the Board of Directors of the Cook County Health and Hospitals System (CCHHS) held Monday, October 24, 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 Koetting called the meeting to order.

Present: Chair Mike Koetting and Director and Robert G. Reiter, Jr. (2)
Directors Joseph M. Harrington; Sam A Robinson, III, PhD; and Otis L. Story, Sr.

Absent: * Hon. Dr. Dennis Deer, LCPC, CCFC (1)

*Director Deer had an excused absence from this meeting as he had a conflicting Cook County Board/Finance Committee Budget meeting that he had to attend.

Additional attendees and/or presenters were:

Nicole Almiro - Chief Corporate Compliance and
Privacy Officer
Jeff McCutchan – General Counsel
Israel Rocha, Jr. – Chief Executive Officer

Deborah Santana – Secretary to the Board
Tom Schroeder – Director of Internal Audit

The Audit and Compliance Committee’s regular meeting schedule for 2023 has not yet been determined; however, it is expected that the Committee will begin holding their quarterly meetings starting in January 2023.

II. Public Testimony

There was no public testimony submitted.

III. Report from Chief Corporate Compliance and Privacy Officer (Attachment #1)

- CCH Compliance Program Overview
- Structure of the CCH Compliance Program – Formalized Controls and Activities
- CountyCare Compliance Plan – Policies/Code & Training & Communications
- CountyCare Compliance Plan – Accountability/Auditing/Responsiveness and Reporting
- Metrics – System Compliance Program Q1-Q3 County FY2022
- Metrics – CountyCare Compliance Program SFY2022
 - Recoveries

Nicole Almiro, Chief Corporate Compliance and Privacy Officer, provided an overview of the Report. The Committee reviewed and discussed the information.

IV. Action Items

A. Accept Minutes of the Audit and Compliance Committee Meeting, July 10, 2022

Chair Koetting inquired whether any corrections were needed to be made to the Minutes.

B. Any items listed under Sections IV and V

Director Reiter, seconded by Chair Koetting, moved to accept the July 19, 2022 Audit and Compliance Committee Meeting Minutes. On the motion, a roll call vote was taken, the votes of yeas and nays being as follows:

Yeas: Chair Koetting and Director Reiter (2)

Nays: None (0)

Absent: Director Deer (1)

THE MOTION CARRIED UNANIMOUSLY.

V. Closed Meeting Items

A. Report from Director of Internal Audit

B. Discussion of Personnel Matters

Chair Koetting, seconded by Director Reiter, moved to recess the open meeting and convene into a closed meeting, pursuant to the following exceptions to the Illinois Open Meetings Act: 5 ILCS 120/2(c)(1), regarding “the appointment, employment, compensation, discipline, performance, or dismissal of specific employees of the public body or legal counsel for the public body, including hearing testimony on a complaint lodged against an employee of the public body or against legal counsel for the public body to determine its validity,” and 5 ILCS 120/2(c)(29), regarding “meetings between internal or external auditors and governmental audit committees, finance committees, and their equivalents, when the discussion involves internal control weaknesses, identification of potential fraud risk areas, known or suspected frauds, and fraud interviews conducted in accordance with generally accepted auditing standards of the United States of America.”

On the motion to recess the open meeting and convene into a closed meeting, a roll call was taken, the votes of yeas and nays being as follows:

Yeas: Chair Koetting and Director Reiter (2)

Nays: None (0)

Absent: Director Deer (1)

THE MOTION CARRIED UNANIMOUSLY and the Committee convened into a closed meeting.

Chair Koetting declared that the closed meeting was adjourned. The Committee reconvened into the open meeting.

Cook County Health and Hospitals System
Minutes of the Audit and Compliance Committee Meeting
October 24, 2022

ATTACHMENT #1

Corporate Compliance Report

Audit & Compliance Committee of the CCH Board of Directors

October 24, 2022



COOK COUNTY
HEALTH

Meeting Objectives

Review

- CCH Compliance Program Overview
- Metrics
 - System Compliance Program 1st through 3rd Q County FY 2022
 - CountyCare Compliance Program SFY 2022
 - Recoveries

CCH Compliance Program



Compliance Program Overview



COOK COUNTY
HEALTH

Structure of the CCH Compliance Program

Formalized Controls and Activities

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

PREVENTION CONTROLS AND ACTIVITIES

Written Policies & Standards

Compliance Program Oversight

Education and Training

DETECTION CONTROLS AND ACTIVITIES

Effective Lines of Communication

Internal Monitoring & Auditing

Enforcement of Standards and
Disciplinary Guidelines

CORRECTION CONTROLS AND ACTIVITIES

Response to Offenses and
Corrective Actions



CountyCare Compliance Plan

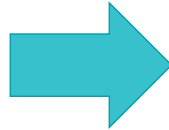
Policies/Code & Training & Communications

Written Policies and Standards



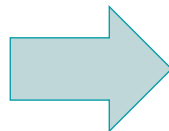
- CCH Code of Ethics
- CCH Compliance & Privacy Policies
- CountyCare specific Compliance & Privacy Policies

Compliance Program Oversight



- Chief Compliance Officer
- CountyCare Executive Compliance Committee
- Reports to CCH Board / Audit & Compliance Committees
- CCH & CountyCare Annual Reports

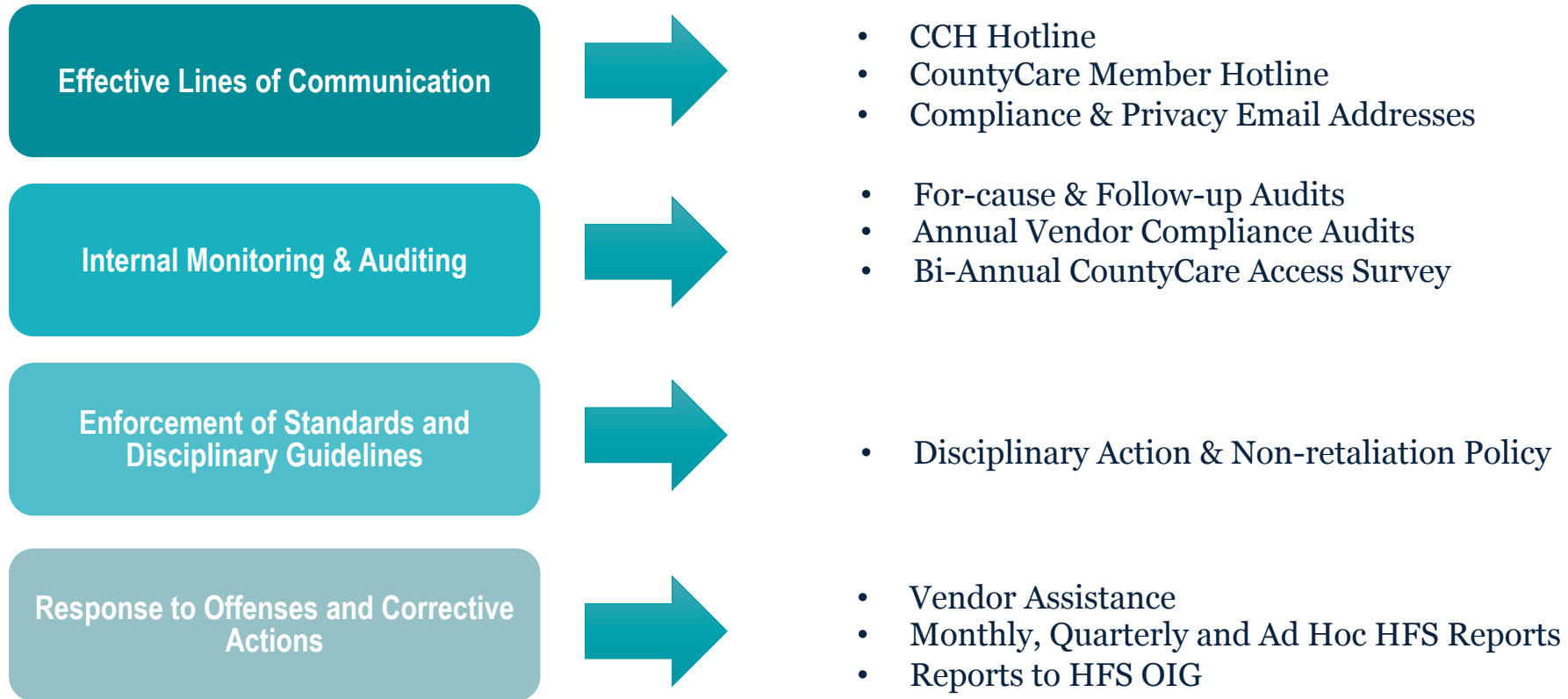
Education and Training



- New Employee Orientation
- CCH Code of Ethics Training
- CCH HIPAA Training
- CCH FWA Training
- Ad Hoc

CountyCare Compliance Plan

Accountability/Auditing/Responsiveness and Reporting



CCH Provider Metrics



For County Q1 through Q3 2022

(December 1, 2021 to August 31, 2022)

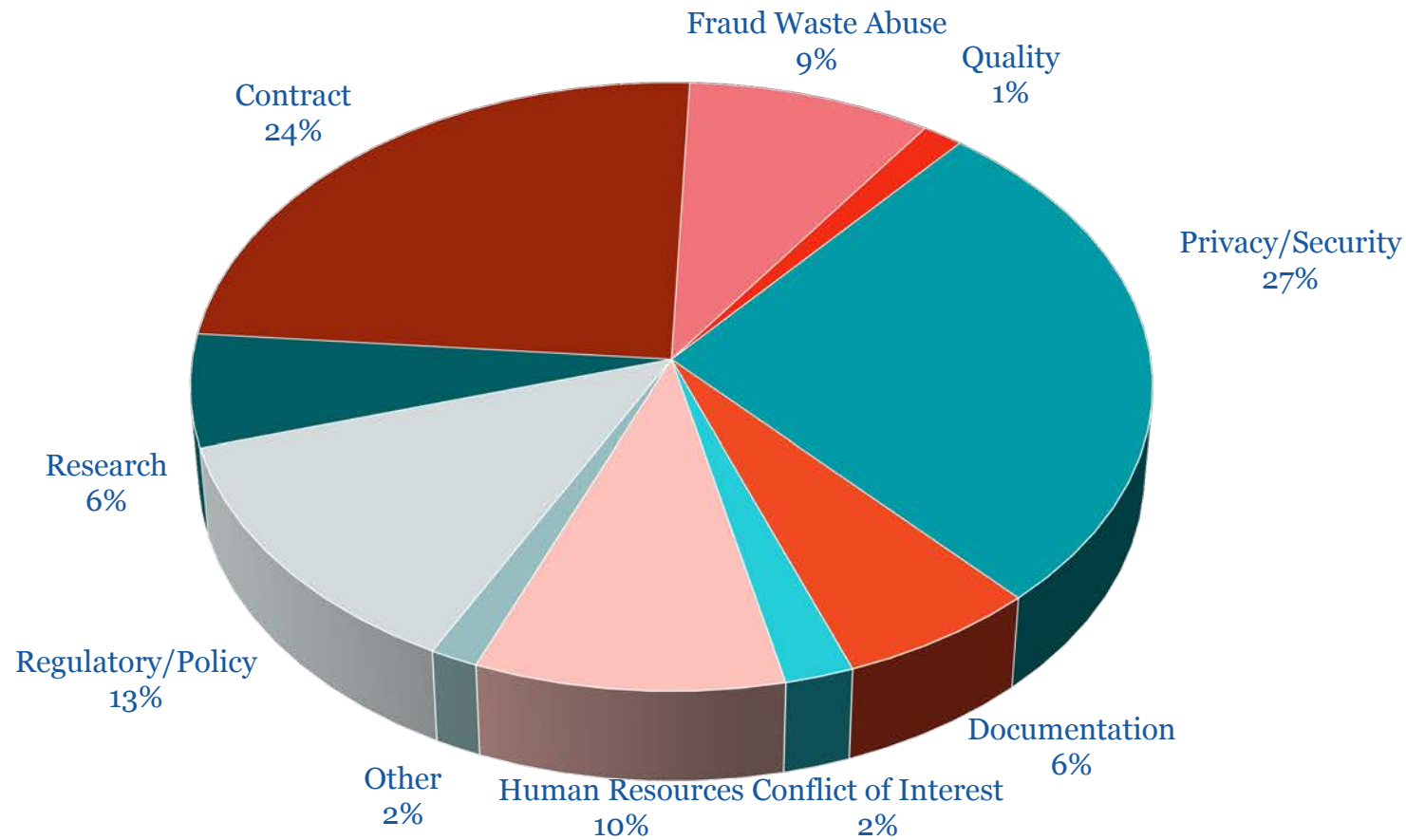


COOK COUNTY
HEALTH

FY 2022 Contacts by Category

CCH System Compliance Program Q1 through Q3

12/01/2021 – 08/31/2022



Categories	2022	2021	
Privacy/Security (HIPAA)	127	32%	↓
Documentation	29	6%	↓
Regulatory/Policy	60	13%	↓
Human Resources	45	10%	
Contracts	114	24%	↑
Conflict of Interest	10	2%	
Fraud Waste & Abuse	42	9%	↑
Research	28	6%	
Quality	7	1%	
Other	7	1%	
	469		

CountyCare Metrics

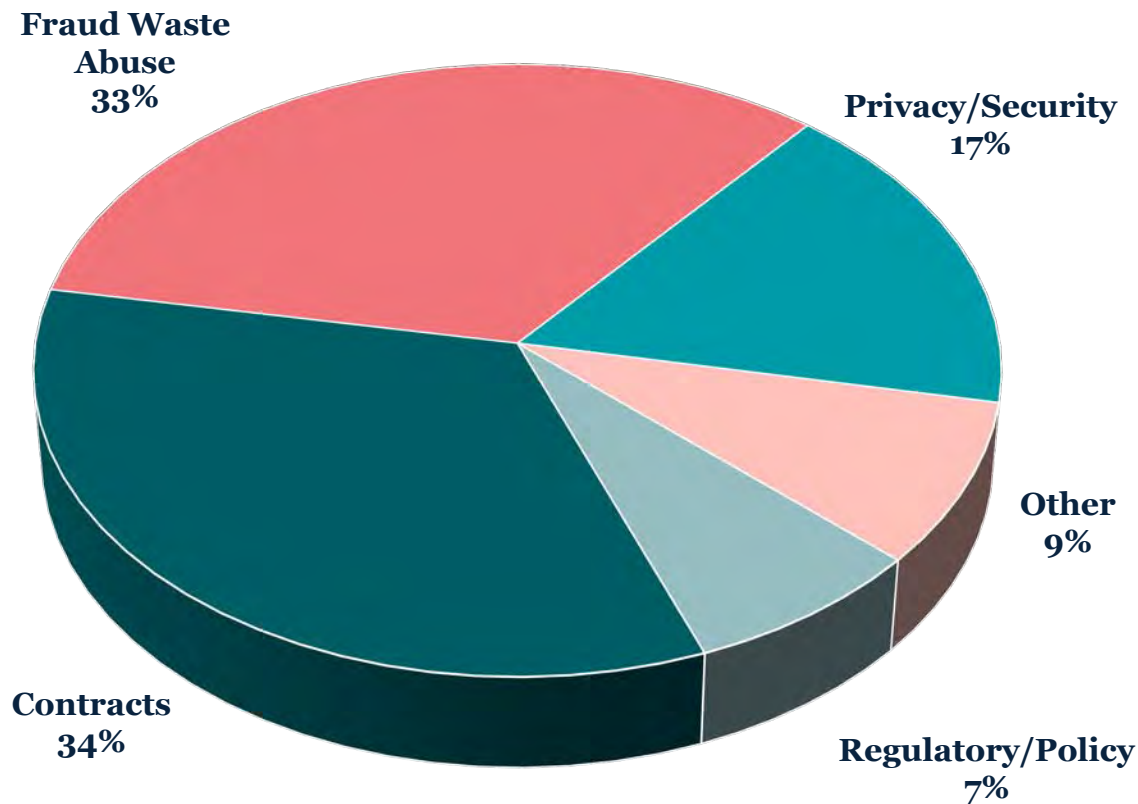
For State FY 2022 (July 1, 2021 to June 30, 2021)



COOK COUNTY
HEALTH

CountyCare Compliance Metrics

CountyCare Compliance Program during SFY 2022 (July 1, 2021 – June 30, 2022)



State Fiscal Year 2022*

Categories		
Fraud Waste & Abuse	235	↑
Privacy/Security (HIPAA)	120	↑
Contracts	238	↑
Regulatory/Policy	53	↑
Other	61	↑
	707	

State Fiscal Year 2021 (Compare)

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

*Increases due to enhanced tracking capabilities & Compliance's review of contracts

CountyCare Recoveries

State Fiscal Year 2022 Recoveries

Reporting Period	Overpayments Identified	Overpayments Collected
Q1 07/01 – 09/30/21	\$ 704,372	\$ 66,066
Q2 10/01 – 12/31/21	\$ 1,046,935	\$ 522,453
Q3 01/01 – 03/31/22	\$ 1,276,050	\$ 3,016,460
Q4 04/01 – 06/30/22	\$ 966,366	\$ 3,534,742
Total 2022	\$ 3,993,723	\$6,956,921
Total 2021 + 2022	\$10,317,838	\$8,656,380

State Fiscal Year 2021 Recoveries

Reporting Period	Overpayments Identified	Overpayments Collected
Q1 07/01 -09/30/20	\$ 1,277,500	\$ 196,600
Q2 10/01 – 12/31/20	\$ 1,697,500	\$ 304,000
Q3 01/01 – 03/31/21	\$ 1,970,360	\$ 713,020
Q4 04/01 – 06/30/21	\$ 1,378,755	\$ 485,839
Total	\$ 6,324,115	\$ 1,699,459

Questions? ↗



COOK COUNTY
HEALTH