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Strategies to Achieving National Standards of Healthcare Access: A Qualitative Analysis of Cook County Health System

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Introduction

- Compared to other developed nations, the United States ranks worst overall in healthcare access while spending the most per capita¹. This study looks at access through an international and national lens.
- Cook County Health (CCH) is part of the healthcare safety net, providing access to healthcare services to over 600,000 people annually in metropolitan Chicago². As one of the largest public health systems in the United States, CCH plays an important role in providing access to healthcare services.
- CCH recently approved its 2023 – 2025 strategic plan. This study aims to evaluate CCH's access strategies compared to national and international metrics for access improvement. As county healthcare systems provide integral care for millions of patients across the nation, this analysis will provide a case analysis of using Healthy People 2030⁴ and The Commonwealth Fund¹ metrics for county health access.



COOK COUNTY HEALTH

Objective

The purpose of this study is to identify the healthcare accessibility gaps in the Cook County Health strategic plan for 2023³ and aim to use it for comparison with Healthy People 2030⁴ and The Commonwealth Fund¹ to understand the correlation between the local, national, and international health metrics.

Methods

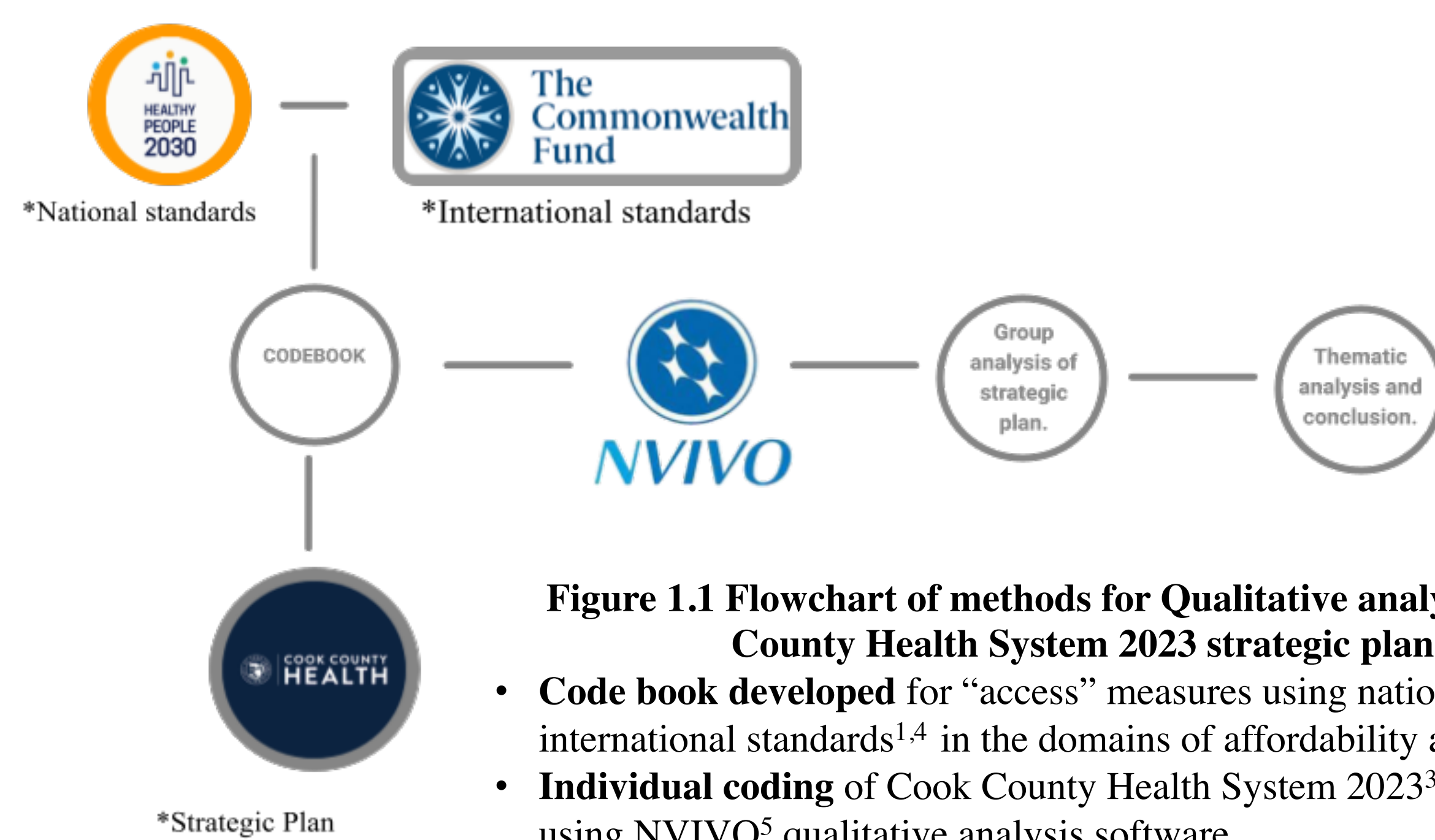


Figure 1.1 Flowchart of methods for Qualitative analysis of Cook County Health System 2023 strategic plan³

- Code book developed for “access” measures using national and international standards^{1,4} in the domains of affordability and timeliness.
- Individual coding of Cook County Health System 2023³ strategic plan using NVIVO⁵ qualitative analysis software
- Research team review of coded document to improve consistency of coding and address the risk of researcher bias.
- Thematic analysis of codes to identify gaps and opportunities.

Results

Affordability	
Codes	Definition
Patients avoid healthcare or dental care because of cost	Person(s) who are unable to obtain or delayed in obtaining necessary medical care ⁴
Having high out of pocket expense	When there is a lack of financial healthcare coverage such as insurance or other modes of payment which can lead to high out of pocket expense ⁴
Facing insurance short falls	When insurance does not fully cover the health care needs of an individual ⁴
Trouble paying med bills	When medical bills become difficult to pay due to various financial factors ⁴

Table 1.1 Codebook definitions for affordability

Timeliness	
Codes	Definition
How quickly patients can obtain information	Timeliness of relaying information about the care that is being delivered to the patient ⁴
Making Appointments	Patients are able to make appointments with their healthcare provider(s) in a timely fashion ⁴
Urgent care after hours	Timeliness and accessibility of obtaining urgent care after hours ⁴
Timely access to mental health services	Ability for patients to obtain mental health services in a timely manner ⁴
Wait times	Amount of time a patient needs to wait before seeing a clinician within a healthcare facility ^{6,7}

Table 1.2 Codebook definitions for timeliness

Affordability			
Codes	Check	Results	Analyze
Patients avoid healthcare or dental care because of cost	X	Not Mentioned	<ul style="list-style-type: none"> This code was not addressed anywhere in the CCHHS 2023 strategic plan This impacts accessibility of health care by preventing a patient's ability to receive care
Having high out of pocket expense	X	Not Mentioned	<ul style="list-style-type: none"> This code was not addressed anywhere in the CCHHS 2023 strategic plan This impacts accessibility of health care by financially straining a patient from receiving future care Having high out of pocket costs is an issue that is not addressed by CCHHS. If similar systematic health gaps are present nationally, then this could lead to nation wide barriers for care.
Facing insurance short falls	~	<ul style="list-style-type: none"> All children in Illinois have the opportunity to be covered by Medicaid Medicaid enrollment is low due to the high amount of patients that are eligible and their redetermination backlogs 	<ul style="list-style-type: none"> Nationally if health care systems offer plans for payment of healthcare then an increased financial accessibility to healthcare would be observed
Trouble paying medical bills	~	<ul style="list-style-type: none"> Cook County offers CountyCare health payment plans for eligible patients Card.Jak program has been expanded over the course of the year for CCHHS Does not mention paying bills after care or the impact that financial burdens play on individuals trying to access healthcare 	<ul style="list-style-type: none"> While CCHHS 2023 offers payment plans for healthcare its limitations are that it only covers eligible patients

Table 1.3 CCH strategic plan accessibility results and thematic analysis

Timeliness			
Codes	Check	Results	Analyze
How quickly patients can obtain information	~	<ul style="list-style-type: none"> Attention to creating just spaces and to empower patients to be involved in decision making and be proactive about their care is discussed in the strategic plan Timeliness of obtaining information is not discussed 	<ul style="list-style-type: none"> While information is offered to patients about their care, there isn't information suggesting how it's delivered in a timely and understandable manner
Making Appointments	✓	<ul style="list-style-type: none"> Addresses self service scheduling for patients and adoption of the patient portal Accessibility to making appointments for care in a timely manner is addressed due to the increased accessibility with telehealth options 	<ul style="list-style-type: none"> The CCHHS strategic plan offers different options for scheduling appointments Solutions such as self service scheduling and adoption of the patient portal offer to fill gaps in healthcare systems across the industry
Urgent care after hours	X	Not Mentioned	<ul style="list-style-type: none"> This code was not addressed anywhere in the CCHHS 2023 strategic plan however, timeliness of urgent care is a prevalent need in public county hospitals such as CCHHS There is a high possibility of similar constraints in public hospital systems nation wide which poses a barrier to the timeliness accessibility of care
Timely access to mental health services	~	<ul style="list-style-type: none"> Created a program for mental healthcare and an initiative to invest in more mental healthcare services This is in a proposed plan but does not focus on the current steps to be taken or the timeline of implementation Does not mention timeliness of mental healthcare services 	<ul style="list-style-type: none"> Pandemic and natural disasters cause strains on healthcare systems that provide health services. However, systems with already weak mental health services struggle more to meet their patients needs. Mental health is growing need among the nations population a lack of mental health services poses additional barriers
Wait times	X	<ul style="list-style-type: none"> Wait times for getting Medicare is extended and causes many to not receive the insurance and therefore not have access to the care they need it Wait times in the healthcare setting and lack of access to timeliness care is not mentioned 	<ul style="list-style-type: none"> This code was not addressed anywhere in the CCHHS 2023 strategic plan Safety net hospitals are recognized for having high traffic, this is a metric that needs to be addressed at a national level Nationally, if wait times are addressed appropriately it could transform the healthcare in America

Table 1.5 CCH strategic plan timeliness results and thematic analysis

Index	
Red	Not achieved or addressed
Yellow	Making progress but not yet achieved
Green	Objectives met

Table 1.4 Key for results and thematic analysis

Discussion

Conclusion

Primary findings included identification of missing codes and a lack of specificity in the CCH Strategic Plan

- Gaps in Affordability codes: avoiding healthcare / dental care due to cost, having high out-of-pocket costs.
- Gaps in Accessibility codes: urgent care after hours, wait times
- Lack of specificity, without structural or financial plans mentioned to achieve those goals.
- Cook County was used as a single case study, but this application reflects the gaps in the United States healthcare system in just one city.

Limitations

- Limitations that impacted this study from achieving more were time constraints and the number of individuals a part of the research team in addition to resources, biases, geographic location. More can be achieved by having a greater number of researchers conducting observations on gaps in other platforms.

Future studies:

- Research the identified gaps through additional data sources and by gaining healthcare leader perspectives
- Understand perspective from Cook County health representatives responsible for creating and drafting CCHHS strategic plan



1.2 Socioecological model demonstrating the correlation between the local health objective, national health standards, and international health standards.

This figure represents the inconsistent correlation between CCHHS objectives and HP 2030 standards. Decreased correlation from HP 2030 between CCHHS objectives and The Commonwealth Fund standards is observed.

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