Case study

How the Egyptian Health Department leverages data to strengthen care coordination for at-risk kids

Egyptian Health Department, Eldorado, Ill.

Organizational profile

The Egyptian Health Department serves clients in all age groups for public health, mental health and substance use services. The organization currently participates in the Centers for Medicare & Medicaid Services (CMS) Innovation Center’s Integrated Care for Kids (InCK) model, which focuses on identifying kids who are at risk for physical and behavioral health issues, providing early intervention and strengthening care coordination.

3M methodologies

- 3M™ Clinical Risk Grouping (CRG) Software
- 3M™ Population-focused Preventables (PFP) Classification Methodology
  - 3M™ Potentially Preventable Admissions (PPAs)
  - 3M™ Potentially Preventable Emergency Department Visits (PPVs)

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– Teresa Pickering, chief information officer, Egyptian Health Department

Health department snapshot

- Founded in 1952 as a public health department
- Began providing mental health services in 1972
- Certified Community Behavioral Health Clinic (CCBHC)
- Serves Medicaid population of more than 11,000 children and adolescents in southern Illinois
- 250 employees
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Capturing the complexities of the patient narrative

In January 2020, the Egyptian Health Department was one of eight organizations across the country to receive the Village InCK model award. The purpose of InCK is to determine if a local integrated health services delivery model paired with a state-specific alternative payment model (APM) can reduce costs while improving quality of care for pediatric Medicaid and Children’s Health Insurance Program (CHIP) beneficiaries.

With the model’s focus on early intervention and holistic health, social determinants of health (SDoH) screening has played a foundational role in the Egyptian Health Department’s efforts. The team rallied to conduct screening by phone or in person for the 11,000 children and adolescents on Medicaid or CHIP within the five-county service area.

It quickly became apparent that self-reporting was not capturing the full story. Caregivers might not have been familiar with clinical terminology, might not have understood why a physician needed specific information or maybe did not want to share for personal reasons. Faced with the need to verify the client narrative and fill in gaps to effectively risk stratify the InCK population, the Egyptian Health Department sought a technology partner.

After learning about 3M from the state of Illinois and another InCK awardee, the Egyptian Health Department decided to implement 3M CRGs. This methodology uses historical claims data – including inpatient and ambulatory diagnosis and procedure codes and pharmaceutical data – to assign each individual to a single, severity-adjusted group. SDoH are factored in, too, once ICD-10 diagnosis codes are assigned to the screening results.

“Using 3M CRGs, we’re able to actually see the claims data,” Pickering said. “If the client says they’ve had some behavioral health issues or physical health issues, we’ve been able to verify that. Sometimes we find more complex medical conditions than are shared with us, and the client really needs to be in a higher risk category. 3M has been extremely valuable in helping us get an accurate picture of the complexity and level of risk for our clients.”

Ultimately, 3M CRGs have helped the Egyptian Health Department validate complexities, meet APM performance measures, uncover risk profiles that would otherwise go under the radar and identify at-risk clients.

Benefits of 3M CRGs for the Egyptian Health Department

- Validates complexities and authenticates the patient narrative
- Uncovers risk profiles that may otherwise be missed
- Identifies at-risk clients
- Helps determine need for proactive education or outreach
- Risk stratifies clients to support appropriate reimbursement
- Helps meet APM performance measures
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Transforming data into actionable insights

Through the InCK initiative, the Egyptian Health Department has been leading a partnership of primary care providers, federally qualified health centers (FQHCs), health systems, specialty providers, rural health clinics, schools and other community organizations that provide resources to improve SDoH. These entities work together to bring forward creative solutions to address the community’s needs, which range from food deserts to affordable housing to a lack of laundry facilities. As one example, the Egyptian Health Department collaborates with community organizations to offer a weekly free laundry night for the InCK population.

The Egyptian Health Department also opened an integrated hub (iHub) facility to serve as a single point of contact for individuals with complex needs. At the iHub, dedicated staff focus on closing care gaps, making closed-loop referrals, addressing health disparities and providing SDoH interventions. “Our emphasis is on health equity and housing, food security and other non-clinical interventions that impact health, quality, outcomes and costs,” Pickering said. InCK wellness coaches are also available to help educate caregivers about complex and chronic medical conditions like asthma, diabetes and childhood obesity.

With the help of 3M CRGs, the Egyptian Health Department can better determine risk level. Lower risk clients can then be targeted with proactive education to prevent them from becoming higher risk, and high risk clients can be connected with additional services. “Egyptian Health Department needs to focus our limited resources on the sickest patients,” Pickering said. “3M CRGs identified many more severe patients we didn’t know about. We would rate 3M CRGs as 10 out of 10, without question. They are perfect for the InCK project and what we’re doing.”

Mitigating unnecessary ED visits

Along with supporting overall health and well-being, another one of InCK’s goals is to reduce unnecessary emergency department (ED) visits. The Egyptian Health Department has leveraged 3M PFP software, including 3M PPVs, to gain insights into this area. The methodology helps identify ED visits for conditions that could otherwise be treated by a care provider in a non-emergency setting or that may result from a lack of adequate care or ambulatory care coordination.

Using this methodology, the Egyptian Health Department determined that approximately 37 percent of its ED visits were potentially preventable. The organization has been using this data to identify patterns and find ways to mitigate avoidable ED visits.

Education has been vital. “We get a lot of clients who say, ‘My parents took me to the emergency room when I had a cold or an earache, so that’s what I do,’” Pickering said. “There’s a generational approach to using the emergency room as a primary care office.” Another contributing factor is a lack of alternatives. This prompted the Egyptian Health Department to partner with urgent care facilities to operate on Saturdays as another care option.

Egyptian Health Department’s goals for InCK

- Improve child health across the population
- Reduce the cost and frequency of ED visits
- Provide education and support for behavioral health and primary care needs
- Increase engagement in substance use prevention, treatment and recovery services

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In addition to increasing clients’ understanding of when to use the ED, the Egyptian Health Department’s InCK wellness coaches also proactively connect with families to help them better manage kids’ health – especially when it comes to medical conditions like asthma or diabetes that often lead to ED visits. “A lot of our parents aren’t educated with how to help them,” Pickering said. “We use the 3M PPV tool to drill down into the data and see if they’re going to the emergency room a lot for their condition. Then we reach out to them and provide some education.”

**Reviewing results and iterating for impact**

The Egyptian Health Department has been making great strides to deliver better health outcomes in southern Illinois. The organization is taking lessons learned from the InCK initiative and working with the state to implement a similar model – Integrated Care for Adults (INCA) – for the adult Medicaid population.

Moving forward, the Egyptian Health Department plans to regularly conduct screenings and review data to monitor the impact of proactive interventions and education on the whole health of the InCK and INCA populations. “3M is an integral tool for our model and will continue to provide valuable insights into our population health and management initiatives,” Pickering said.

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