

CCH Monthly Report

Item #: 25-4110

Presented to the Cook County Health Board on 10/23/25



COOK COUNTY
HEALTH

Legislative Update



COOK COUNTY
HEALTH

CEO Report Legislative Updates

Local



The **week of September 15**, CCH leadership appeared before the following Cook County Board committees to provide testimony and respond to questions from Commissioners.

- **Finance Committee** – Pam Cassara, Chief Financial Officer addressed questions related to the County’s *Monthly Revenues and Expenses Report* as well as *CCH’s July 2025 Monthly Report* which is a compilation of the metrics and presentations made to the CCH Board of Directors from the previous month. The Finance Committee also approved a *Resolution Calling for the Elimination of Unnecessary Degree Requirements from Cook County Employment Practices*.
- **Health & Hospitals Committee** – A Special Health & Hospitals Committee meeting was held to hear testimony on Black Maternal Mortality & Morbidity and the regular Health & Hospitals Committee meeting was held to receive CCDPH’s Q3 presentation.
 - Special Meeting – Dr. Kiran Joshi-CCDPH COO, Dr. Fidel Abrego-OB/Gyne Department Chair, Dr Partick Ennis-Cermak Attending Physician and Dr. Yvonne Collins, CountyCare Associate Chief Medical Officer presented in response to a *Resolution calling for a Hearing of the Health & Hospitals Committee to Receive an Update on the Full Spectrum of Maternal Health Care and Morbidity & Mortality Rates in Cook County*. A CCH Doula also presented public testimony speaking to the merits of CCH’s Doula program.
 - Regular Meeting – Dr. Kiran Joshi, CCDPH COO and George Papadopoulos, CCDPH Environmental Public Health Director presented *CCDPH’s 3rd Quarterly Report on Environmental Health*.
- **Human Relations Committee** – A *Resolution Denouncing the Tactics of Federal Agents Including U.S. Immigration and Customs Enforcement Agents* was approved. The Resolution requests official communication of interactions related to immigration enforcement that occur within County buildings, on County property, or with County staff from all Cook County agencies, departments, and bureaus.
- **Legislation Committee** – The Committee approved a *Resolution Calling for Evaluation and Reform of the Cook County Mosquito Abatement Districts* and to present a report and recommendation to the Cook County Board by June 2026.

CEO Report Legislative Updates Local



The **Cook County Board of Commissioners met on September 17, 2025**. The following items pertaining to CCH appeared on the agenda:

- CCH's grant award renewal with the Illinois Administrative Perinatal Centers (APC) Grants Program was approved
- CCH's grant award with the University of Cincinnati for the Evaluation of Tirzepatide as an Adjunct Buprenorphine (TAB) was approved.
- CCH's CountyCare budget transfer was approved.
- CCH's FY26 Preliminary Budget was approved for inclusion in the Cook County *Executive FY26 Budget Recommendation*.
- CCH's *Strategic Plan 2026-2028-Transforming Care Together*, which includes a 3-year financial plan, was referred to the Cook County Health & Hospital Committee for consideration.

CEO Report Legislative Updates State



The House and Senate are scheduled to return to Springfield October 14-16 and 28-30 for the Fall/Veto Session. The Spring 2026 calendar has not yet been published.

Governor Pritzker issued an [Executive Order](#) that “enhances access to life-saving vaccines”. The Order establishes the State Vaccine Access Initiative, led by the Illinois Department of Public Health (IDPH), which will work in partnership with other state agencies to ensure that Illinois residents can get vaccines based on science-based guidance. It also directs the IDPH Director to issue a standing order to allow eligible providers in pharmacy and other appropriate clinical settings to administer vaccines recommended by IDPH after consultation with its expert Immunization Advisory Committee (IAC). Cook County Department of Public Health Chief Operating Officer, Dr. Kiran Joshi is a member of the IAC.

CEO Report Legislative Updates State

1115 Medicaid Waiver

In July 2024, the Illinois Department of Healthcare and Family Services (HFS) received federal approval for its [Medicaid 1115 waiver](#). Federal CMS has approved the 1115 waiver contract, protocols, and plans necessary for implementation.

The 1115 waiver permits Illinois Medicaid to cover new health related social needs including food/nutrition, housing and housing supports, medical respite, violence prevention/intervention, non-emergency transportation, and supported employment. These new benefits will be administered through Medicaid Managed Care. Additionally, the waiver will allow individuals residing in state prisons or the Cook County Jail to be covered by Medicaid up to 90 days pre-release, to support these individuals in their re-entry efforts.

CCH has been actively engaged in several HFS workgroups and planning discussions. The first phase of waiver services include food/nutrition, medical respite, housing, and re-entry. Internal waiver readiness meetings have also been taking place at CCH since early 2023, and stakeholders include leaders from strategy, finance, operations, clinical, and managed care.

While HFS still intends to eventually launch the waiver services, HFS notified stakeholders that they are pausing their external workgroups. HFS shared that the passage of the federal budget reconciliation bill/OBBBA has made the waiver planning process more complex, and HFS needs to understand the impact on budget, timing, and roll-out of waiver services.

HFS is hosting a [virtual public forum on the 1115 waiver on October 3, 11am-1pm](#). The purpose of the forum is to provide an update on progress of the waiver and solicit comments.

CEO Report Legislative Updates Federal

Highlights of Meetings in Washington, D.C.

President Toni Preckwinkle and Dr. Erik Mikaitis, along with Commissioner Bill Lowry, Commissioner Alma Anaya and other County and CCH officials met with 12 of the 13 offices of the Cook County congressional delegation including both U.S. Senators and 10 of 11 U.S. House members on September 10 and 11

Asks were:

- **Delay the Medicaid DSH cuts that expire on October 1, 2025, and sign onto a bipartisan House letter [see next slide]**
 - Without congressional action, \$120 million annual reduction in funding to CCH
- **Address impact of H.R. 1, the One Big Beautiful Bill Act (OBBBA) on CCH**
 - Medicaid work requirements: 10% of individuals will lose Medicaid coverage and an \$88 million reduction in provider payment to CCH
 - Medicaid redetermination every 6 months: 5-12% loss of coverage and a \$50 million reduction in provider payment to CCH



CEO Report Legislative Updates Federal



COOK COUNTY
HEALTH

Medicaid DSH Advocacy Results

All 11 members of the Cook County House delegation signed onto a bipartisan letter to House leadership urging them to support a delay of the DSH cuts

House GOP continuing resolution released days later included a delay to the DSH cuts through November 21



Congress of the United States

Washington, DC 20515

September 19, 2025

The Honorable Mike Johnson
Speaker of the House
U.S House of Representatives
Washington, D.C. 20515

The Honorable Hakeem Jeffries
Democratic Leader
U.S House of Representatives
Washington, D.C. 20515

Dear Speaker Johnson and Democratic Leader Jeffries:

We write to ask you to prevent reductions to the Medicaid Disproportionate Share Hospital (DSH) program, which are scheduled to take effect on October 1, 2025. The Medicaid DSH program is a vital resource for hospitals treating low-income patients in our communities. The funds are used to support critical hospital services in both rural and urban areas of the country, including burn and trauma unit services and maternal and child health care.

The Medicaid DSH program was established to ensure that hospitals which serve the nation's most vulnerable, including children, the elderly and the disabled, would have the essential financial assistance available to continue their commitment to our communities. Medicaid DSH payments are used to help offset underpayments and uncompensated care to those facilities that qualify for the program. These payments are capped through annual state allotments as well as hospital-specific limits.

Under current statute, the Medicaid DSH program will be reduced by \$8 billion in FY 2026. Cuts of this magnitude would decimate the program, reducing the size of the annual allocation by more than half. Our hospitals are already under increasing financial strain, and reductions of this size would push vulnerable rural and other safety net hospitals—and the patients they serve—into peril.

Congress has prevented these cuts from going into effect in many prior years, recognizing importance of maintaining Medicaid DSH payments. We encourage you and all our colleagues to once again act to ensure hospital payments are not reduced at a time of financial uncertainty for the nation's hospitals.

We look forward to working with you to ensure our hospitals can continue to provide care for the most vulnerable among us.

Sincerely,

Dan Crenshaw
Member of Congress

Yvette D. Clarke
Member of Congress

Gus M. Bilirakis
Member of Congress

Diana DeGette
Member of Congress

CEO Report Legislative Updates

Federal



Fiscal Year 2026 (FY26) Appropriations State-of-Play

Government funding expires on September 30th and no FY26 appropriations bills have been enacted

House GOP released a “clean” continuing resolution (CR) to fund the government and extend the following through November 21

- Medicaid DSH cut delays
- Medicare telehealth flexibilities
- Community Health Centers, National Health Service Corps and teaching health centers that operate GME programs

Democratic leaders in the House and Senate immediately announced their opposition to the House GOP proposal

- Democratic leaders say the partisan bill “does nothing to stop the looming healthcare crisis” and are urging repeal of healthcare provisions in H.R. 1, the One Big Beautiful Bill Act in the funding bill

House planning to vote on the continuing resolution this week followed by the Senate

- Failure to pass a continuing resolution will result in a government shutdown on October 1

House committee considered the FY26 Labor-HHS appropriations bill in early September and passed it along party lines

CEO Report Legislative Updates

Federal



FY26 House Labor-HHS-Education (LHHS) Bill Highlights (now includes House levels)

Substance Use Prevention, Treatment, and Recovery Services Block Grant - FY25 enacted level: \$2.008 billion; FY26 President's Budget Request (PBR): \$4 billion for a newly created Behavioral Health Innovation Block Grant; FY26 Senate LHHS: \$2.028 billion; FY26 House LHHS: \$2.013 billion

Community Mental Health Services Block Grant - FY25 enacted level: \$1 billion; FY26 PBR: \$4 billion for a newly created Behavioral Health Innovation Block Grant; FY26 Senate LHHS: \$1 billion; FY26 House LHHS: \$1.018 billion

988 and Behavioral Health Crisis Services - FY25 enacted level: \$602 million; FY26 PBR: \$520 million; FY26 Senate LHHS: \$534.618 million (restores \$33 million for LGBTQ+ youth specialized services line); FY26 House LHHS: \$519.618 million (does not restore funding for LGBTQ+ youth specialized services line)

Maternal and Child Health Block Grant - FY25 enacted level: \$814 million; FY26 PBR: \$767 million; FY26 Senate LHHS: \$799.700 million; FY26 House LHHS: \$603.584 million

Public Health Emergency Preparedness Cooperative Agreements - FY25 enacted level: \$735 million; FY26 PBR: \$350 million; FY26 Senate LHHS: \$735 million; FY26 House LHHS: \$735 million

Ryan White HIV/AIDS Program - FY25 enacted level: \$2.571 billion; FY26 PBR: \$2.497 billion; FY26 Senate LHHS bill: \$2,571,041,000 (Minority HIV/AIDS Fund and SAMHSA Minority AIDS Initiative restored); FY26 House LHHS bill: \$2.046 billion including elimination of Early Intervention Program, the Ending the HIV Epidemic Initiative and the SAMHSA Minority AIDS Initiative

Title X Family Planning - FY25 enacted level: \$390 million; FY26 PBR: Eliminated; FY26 Senate LHHS bill: \$286.479 million; FY26 House LHHS bill: Eliminated

CEO Report Legislative Updates

Federal

H.R. 1, the One Big Beautiful Bill Act Implementation Updates

- **Rural Health Transformation Fund**

- States have until November 5, 2025 to apply for funding; CMS will announce awardees by December 31, 2025
 - \$5 billion/year will be distributed equally to states with approved applications and \$5 billion/year will be distributed at the discretion of the CMS Administrator (at least 25% must go to states with approved applications)
- NOFO and webinars are available to interested parties
- The program has 5 strategic goals: make rural America healthy again, sustainable access, workforce development, innovative care and tech innovation

- **State Directed Payments (SDPs)**

- CMS issued preliminary guidance for state on implementation of new federal payment limits for Medicaid managed care SDPs
- Rulemaking still under development

CEO Report Legislative Updates

Federal

Trump Administration News

CDC Director Susan Monarez fired and Jim O'Neill, the HHS Deputy Secretary is named Acting CDC Director

Legal challenges to Trump Administration announcements have successfully paused enforcement in Illinois of:

- Reinterpretation of public benefits in ways that aim to restrict eligibility for programs that were previously available to immigrant communities.
- Information sharing by CMS with ICE for immigration enforcement purposes

CMS sending Medicaid data to states for individuals who immigration status they cannot verify

- All states receiving this data and a letter from CMS including Illinois reportedly in early September

Secretary Kennedy released the MAHA Strategy as a follow-up to the MAHA Commission Report

- Contains a wide range of executive action and policy reforms aimed at tackling chronic disease among children with little detail on how the recommendations would be achieved

New Hires and Promotions

New Leadership Hires

Frankie Shipman-Amuwo, Senior Director of Community Health

Anabel Bedoya, Director of Nursing Operations, Maternal Child Health

LaKeeta Conti, Nursing Director, Ambulatory Specialty Care Clinical Practice

Cullen Ferguson, Assistant General Counsel

Amy Helmer, Manager of Cardiac Catheterization & Electrophysiology Labs

Tracy Taylor, Clinical Nurse Navigator, Cancer Center

Congratulations

Promotions

Jafar Hasan, Chief Clinical Integration and Innovation Officer

Letitia Close, Chief of Staff and Government Affairs

Vanessa Davis, Director of Pediatrics Subspecialty Services, Medicine

Francisco Angulo, IT Applications Development Director

Erica Navarro, Clinical Behavioral Health Manager

Latoya McClain, Manager of Complex Care Coordination

Karen Jones, Manager of Complex Care Coordination

Yolanda Ellis, Manager of Operations, Community Health Center, Cottage Grove Medical Center

Recognition & Announcements

CountyCare Earns 4-Star Quality Rating

CountyCare received a four-star rating from the National Committee for Quality Assurance!

This achievement makes CountyCare the highest rated among all Medicaid plans in Illinois. Every other plan received 3.5 stars.

Highlights of our report card include:

- Five stars for members' rating of their overall plan services
- Five stars for providing information on members' race and ethnicity as well as their language preferences
- Four stars for members' rating of their care overall
- Four stars for child and adolescent well-care



ACS Trauma Certification

Stroger Hospital's Trauma & Burn Unit recently earned Level I Trauma verification from the American College of Surgeons (ACS)—a first in the unit's nearly 60-year history.

This designation is one of the most rigorous recognitions a trauma program can achieve and affirms the exceptional quality, timeliness, and impact of our trauma care.

The unit now stands as one of only two ACS Level I verified trauma centers in Illinois. Congratulations!



ACS Accreditation for Bariatric Surgery Quality

Stroger Hospital is now accredited by the American College of Surgeon's Metabolic and Bariatric Surgery Quality Improvement Program.

This is a comprehensive, nationwide surgical quality program aimed at ensuring the safe and effective performance of metabolic and bariatric surgery.

Congratulations!



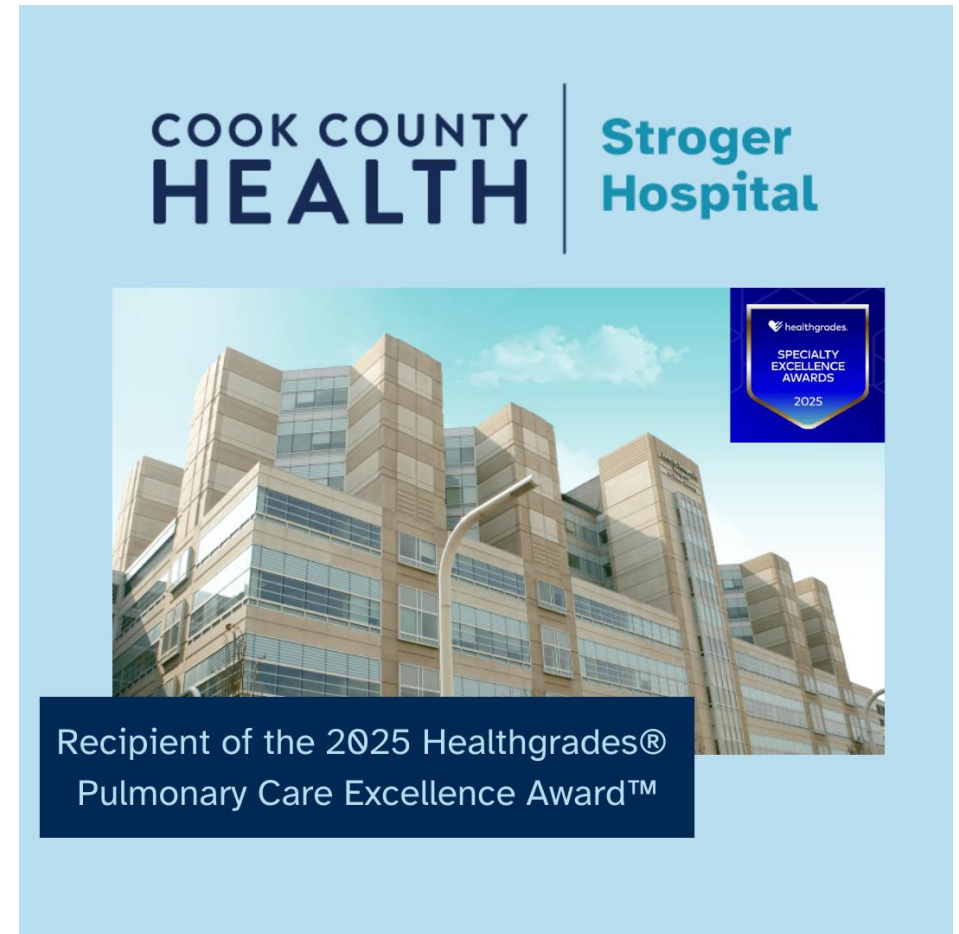
Stroger Hospital Recognized by Healthgrades



Stroger Hospital has been recognized by Healthgrades with the Pulmonary Care Excellence Award.

The award recognizes hospitals with top-tier clinical outcomes in pulmonary care.

Congratulations!



Get Naloxone to Stop an Overdose and Save a Life

On September 3, CCDPH joined Cook County officials at Corazón Community Services in Cicero to announce the launch of its Get Naloxone campaign.

The campaign educates suburban Cook County residents about naloxone and includes strategic distribution sites.

More than 40 naloxone boxes have been installed in local businesses and community partner sites in visible, public locations across suburban Cook County for anyone to access for free.



CCH/CTA Naloxone Vending Machine Press Conference



On September 15, Cook County Health was proud to join the Chicago Transit Authority, Cook County leaders and community partners to launch a new initiative to combat opioid overdoses.

CCH has invested in Narcan vending machines to be installed at five CTA rail stations.

The goal of the vending machines is to increase access to naloxone and meet people where they are with harm-reduction resources.



Strategic Partner Award for CCDPH

Congratulations to the CCDPH Community Engagement and Health Education team for being honored at the Sisters Working It Out annual gala with the Strategic Partner Award!

CCDPH and CCH partner with Sisters Working It Out to advance health equity and uplift communities across Cook County.



Marketing Awards

Cook County Health won four Pinnacle Awards from the Illinois Society for Healthcare Marketing & Public Relations!

★ Best in Show

- Total Health Talks Podcast
 - *Highest-scored submission in 2025 across all categories*

★ Award of Excellence

- Podcasting: Total Health Talks

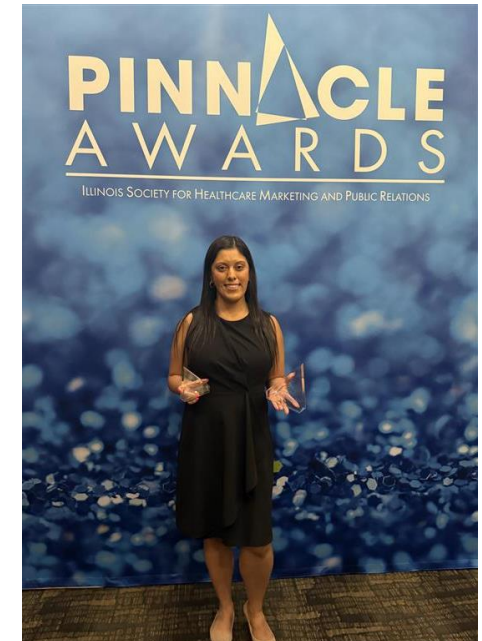
★ Award of Merit

- Advertising Campaign: CountyCare Rewards You

★ Honorable Mention

- Cook County Health Brand Refresh

These awards recognize creativity and excellence in promoting the important work happening at CCH. Congratulations!



International Overdose Awareness Day

On August 29, Cook County Health and CountyCare participated in the West Side Heroin/Opioid Task Force annual International Overdose Awareness Day event. This year's global theme was “One Big Family, Driven by Hope”.

The team was also joined by CCH Director Tanya Sorrell, PhD, PMHNP-BC.

The event served as a powerful reminder of the lives lost, the urgency of prevention, and the strength of a community driven by hope.



Walk with a Doc

Cook County Health's Englewood Health Center was proud to host its first Walk With A Doctor (WWAD) event of the year at the Red Shield Salvation Army.

It was a great opportunity to bring community members and staff together and inspire them through movement and conversation.

Thanks to the community relations and health center teams for their work on this event series!



ACS Genitourinary Trauma Guidelines

Dr. Courtney M.P. Hollowell, Chair of the Division of Urology, was selected to help lead a panel of internationally regarded experts to develop the American College of Surgeons Best Practice Guidelines for the Management of Genitourinary Trauma.

These guidelines will serve as the internationally accepted “gold standard” of care for providers managing complex urologic injuries in both a civilian and wartime setting.



Congratulations to Dr. Ayokunle Abegunde, Chair for the Division of Gastroenterology and Hepatology, for being one of 15 gastroenterologists nationally selected to participate in the 2025 American Society for Gastrointestinal Endoscopy GI Organization Leadership Development Program!

This 12-month integrated leadership program focuses on the business and operational side of medicine.



Strategic Plan Update



COOK COUNTY
HEALTH

Strategy Initiatives September 2025



Accomplished



CountyCare ranked highest-quality Medicaid in Illinois; The Metabolic/Bariatric Surgery Quality Improvement Program obtained accreditation; The Pulmonary team was awarded the Pulmonary Care Excellence Award for COPD/Pneumonia Care from Healthgrades; Launched Safety Coach pilot in Stroger 8th Floor units



Birthday screenings have resulted in a 54% increase in completed mammograms for uninsured patients and 17% increase in completed mammograms for all populations; CCDPH coordinated webinars on “Building a Lead-Free Cook County”; The CCDPH West Nile Virus media campaign drove 27.2M impressions, 449.5K in reach, 181.8K in video views, and 89.9K clicks. PACE bus shelters continued to serve as the main out-of-home driver of awareness, with 15.7M impressions.



Cook County Emergency Medicine Residency named a top 10 emergency medicine ranking per resident from online platform; Employee engagement activities including, a staff art exhibit and Bronzeville paint party



Achieved a 38% reduction in agency spend since last September; A new system “Transaction for Returns for Medications” has been implemented to obtain financial credit for unused meds. Successfully restored the revenue stemming from loss of “date of onset” field for services that include rehab services



Public Health Emergency Preparedness (PHEP) funding from IDPH to CCDPH was restored and received two awards by Cities Readiness Initiative and PHEP. The first linear accelerator installation is complete. New security platform to ensure visibility, risk management and compliance without disruption to clinical operations;



Partnership and transfer agreements resulted in an estimated \$5M in annual revenue to the system; CountyCare Choice campaign has been launched. Nursing Strategic Plan is complete and in print

Coming Soon



Launching a Speak Up campaign to promote patient safety culture; Annual Culture of Safety survey to be conducted January 2026.



Preparing to open Belmont Cragin and Blue Island dental clinics; Food as Medicine marketing campaign in development; Expansion of food programming to Robbins Health Center



Planning for E-sitter rollout at end of September



Continued progress on attestation completion, targeting backlog elimination by the end of the 2025



Stroger cafeteria renovation started to provide better offerings/service



CCH Food Waste Audit started to assess waste and make recommendations on food waste prevention and diversion strategies; Implementation of the Vizient Operational Database now that the final data submission is complete



Developing Provident marketing campaign; CountyCare to respond to the State Managed Care RFP

ARPA Update



COOK COUNTY
HEALTH

ARPA Progress to Date

CCH ARPA Expenses and Budgets*



Notes:

- Focus is on accelerating expenditures before end of ARPA at the end of CY2026
- Employees being charged to the County Corporate Fund in FY2025

Sustainability:

- Filled positions moved to Health Fund in FY2026
- Created pro forma for Social Work, Healing Hurt People, BH Clinical work for sustainability
- Created pro forma for Food as Medicine, Housing for Health, pending 1115 timing

*Expenditure as of 9/12/2025

ACHN Update



COOK COUNTY
HEALTH

1. Arlington Heights Health Center • Arlington Heights, IL
2. Belmont-Cragin Health Center • Chicago, IL
3. Austin Health Center • Chicago, IL
4. North Riverside Health Center • North Riverside, IL
5. Dr. Jorge Prieto Health Center • Chicago, IL
6. Bronzeville Health Center • Chicago, IL (**COMING SOON**)
7. Englewood Health Center • Chicago, IL
8. Robbins Health Center • Robbins, IL
9. Cottage Grove Health Center • Ford Heights, IL

10. John Sengstacke Health Center at Provident Hospital • Chicago, IL
11. Blue Island Health Center • Blue Island, IL
12. Central Campus • Chicago, IL
 - Professional Building
 - Harrison Square
 - General Medicine Clinic (GMC)
 - Specialty Care Center (Clinics A-V)
 - Women & Children's Center at Stroger Hospital
13. Ruth M. Rothstein CORE Center • Chicago, IL
14. Provident Dialysis Center • Chicago, IL

- ### 15. Morton East Health Center • Cicero, IL

16. John H. Stroger, Jr. Hospital • Chicago, IL
17. Provident Hospital • Chicago, IL

Cook County Department of Public Health (CCDPH)

18. CCDPH Main Office • Forest Park, IL
19. CCDPH at Bridgeview Courthouse • Bridgeview, IL
20. CCDPH at Rolling Meadows Courthouse • Rolling Meadows, IL

Correctional Health Services

21. Cook County Jail • Chicago, IL
22. Juvenile Temporary Detention Center • Chicago, IL

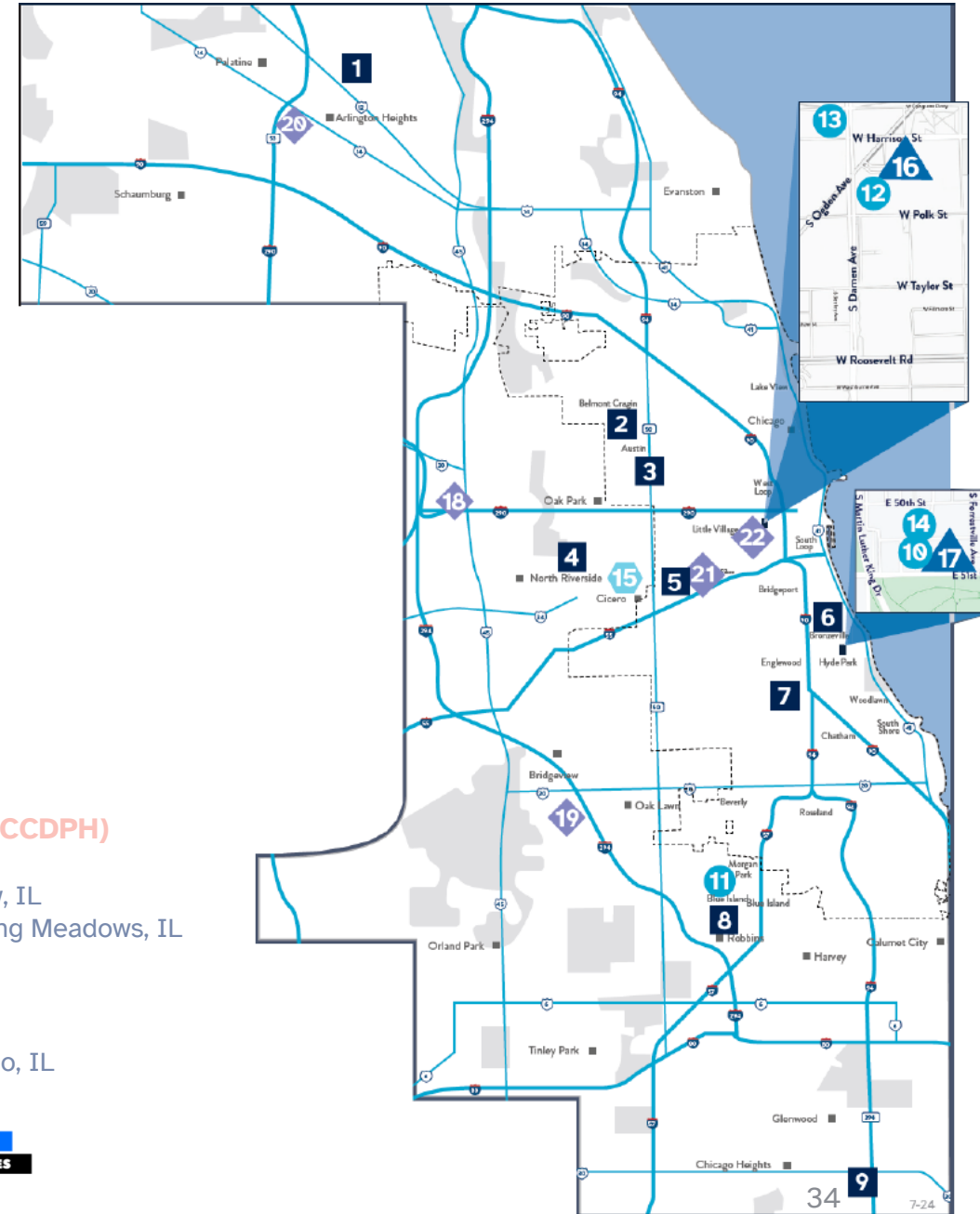


**COOK COUNTY
HEALTH**



Cook County DEPT. of
Public Health

**BUILDING
HEALTHIER
COMMUNITIES**



ACHN Update – Patient Volumes



COOK COUNTY
HEALTH



Fiscal Resilience

Ambulatory Visits	Primary Care				Specialty				Total Visits			
	Target	Actual	Variance	Var%	Target	Actual	Variance	Var%	Target	Actual	Variance	Var%
Amb of Prov			0	0%	0	1,282	1,282	0%	0	1,282	1,282	0%
Arlington Heights Health Center (ARN)	11,414	11,009	(405)	-4%	5,290	4,551	(739)	-14%	16,704	15,560	(1,144)	-7%
Austin Health Center (AUS)	13,277	13,062	(215)	-2%	6,725	6,851	126	2%	20,002	19,913	(89)	0%
Belmont Cragin Health Center (BCN)	6,139	7,752	1,613	26%	2,533	1,729	(804)	-32%	8,672	9,481	809	9%
Belmont Cragin New Arrival Health	19,561	1,367	(18,194)	-93%			0	0%	19,561	1,367	(18,194)	-93%
Blue Island Health Center (BIN)	12,254	12,676	422	3%	26,167	23,717	(2,450)	-9%	38,421	36,393	(2,028)	-5%
Bronzeville Health Center (BHN)	7,941	6,047	(1,894)	-24%	0	4,575	4,575	0%	7,941	10,622	2,681	34%
CDPH	0	0	0	0%	0	729	729	0%	0	729	729	0%
CORE	8,416	8,054	(362)	-4%	7,939	7,640	(299)	-4%	16,355	15,694	(661)	-4%
Cottage Grove Health Center (CGN)	7,923	7,394	(529)	-7%	441	487	46	10%	8,364	7,881	(483)	-6%
Englewood Health Center (EHN)	11,183	11,205	22	0%	1,037	628	(409)	-39%	12,220	11,833	(387)	-3%
Harrison Bldg (HB)			0	0%	0	8,347	8,347	0%	0	8,347	8,347	0%
John Sengstacke Health Center (SHN)	13,535	13,439	(96)	-1%	16,820	17,699	879	5%	30,355	31,138	783	3%
Morton East Health Center (MEN)	887	717	(170)	-19%	734	835	101	14%	1,621	1,552	(69)	-4%
North Riverside (NRN)	9,203	10,327	1,124	12%	3,698	3,622	(76)	-2%	12,901	13,949	1,048	8%
Prieto Health Center (PHN)	8,355	9,971	1,616	19%	2,991	2,953	(38)	-1%	11,346	12,924	1,578	14%
Professional Building (PBN)	37,047	38,965	1,918	5%	79,803	79,016	(787)	-1%	116,850	117,981	1,131	1%
Robbins Health Center (RHN)	9,890	9,191	(699)	-7%	1,945	1,943	(2)	0%	11,835	11,134	(701)	-6%
Express Care	0	1,864	1,864	0%			0	0%	0	1,864	1,864	0%
SHCC Clinics	0	0	0	0%	12,044	16,827	4,783	40%	12,044	16,827	4,783	40%
Specialty Care (SCN)	0	0	0	0%	111,502	120,078	8,576	8%	111,502	120,078	8,576	8%
Grand Total	177,025	163,040	(13,985)	-8%	279,669	303,509	23,840	9%	456,694	466,549	9,855	2%

New Arrival Healthcare

- The reduction of new arrivals to the City of Chicago and increased Immigration Enforcement activity has resulted in a drastic reduction in patient volume from this patient population. Comparing Year To Date August for FY25 vs. FY24:

	August 2025 Year to Date			
	FY25	FY24	Variance	%
New Arrival Intake Clinic	164	14,321	-14,157	-99%
Other Outpatient Visits	16,284	47,736	-31,452	-66%
Total Ambulatory Visits	16,448	62,057	-45,609	-73%

- While we are concerned about the decline in volume from this population, overall, in both Primary Care and Specialty we have been able to absorb this decline with patients in our market.
- We would also note that ambulatory volume drives downstream impact to our Hospital operations. For example, we have seen similar declines in volume from this patient population in our Hospital volumes:

	August 2025 Year to Date			
	FY25	FY24	Variance	%
Emergency Visits	2,460	4,905	-2,445	-50%
Hospital Admissions	482	845	-363	-43%
Surgical Volume	1,807	3,428	-1,621	-47%

ACHN Update



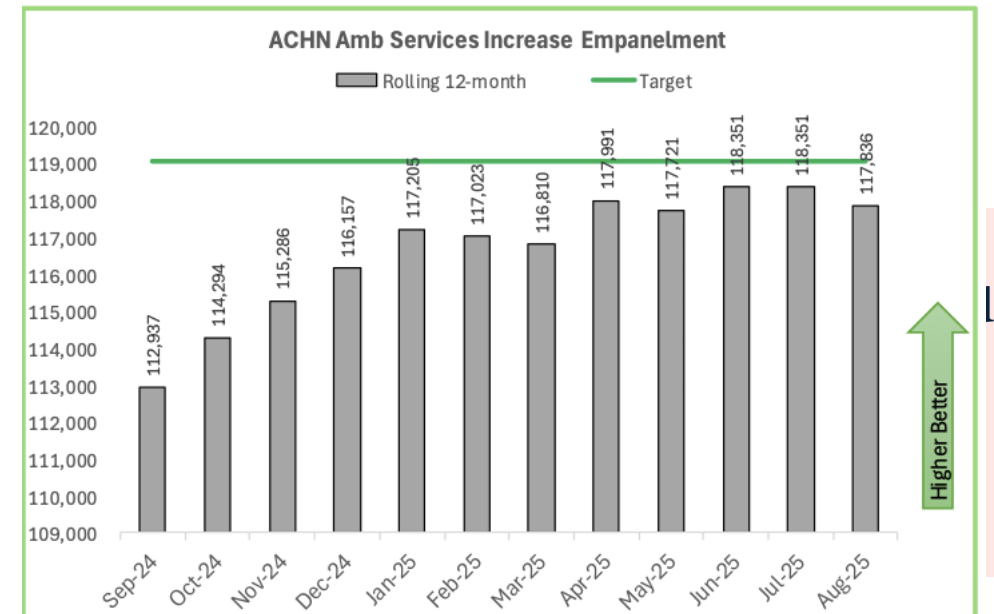
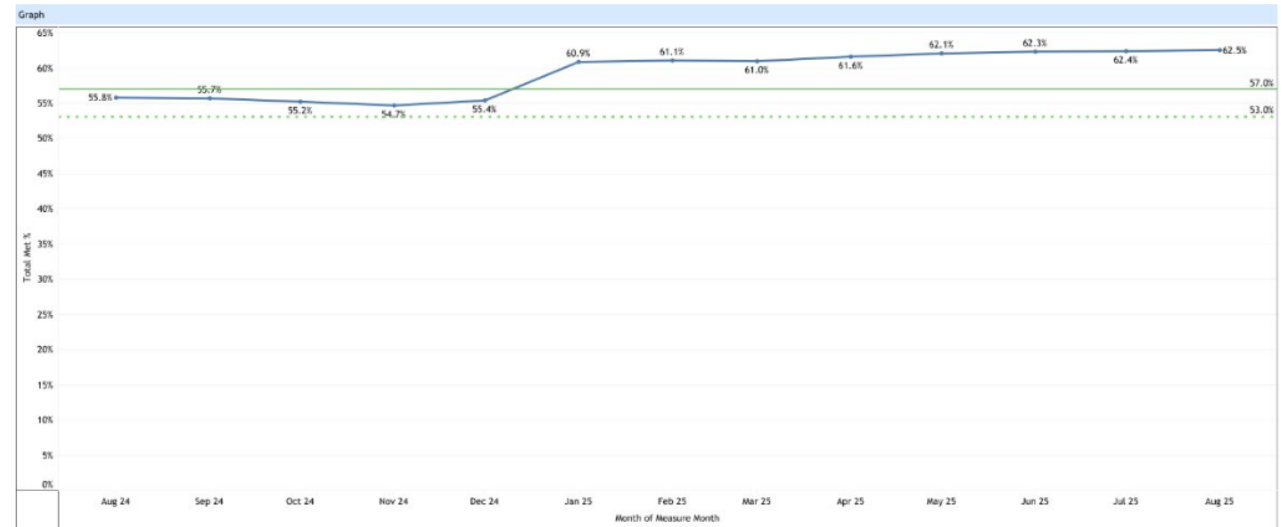
Quality, Safety and Experience

- Breast Cancer Screening for women 45-75 exceeds stretch at 62.5%
- Hypertension Blood Pressure <140/90 continues to trend upward, exceeding goal and close to stretch at 60%
- Birthday Screenings: CCH has completed nearly 22,000 mammograms and PSA in 2025, a 17% increase in completed screenings compared to the same time period for 2024

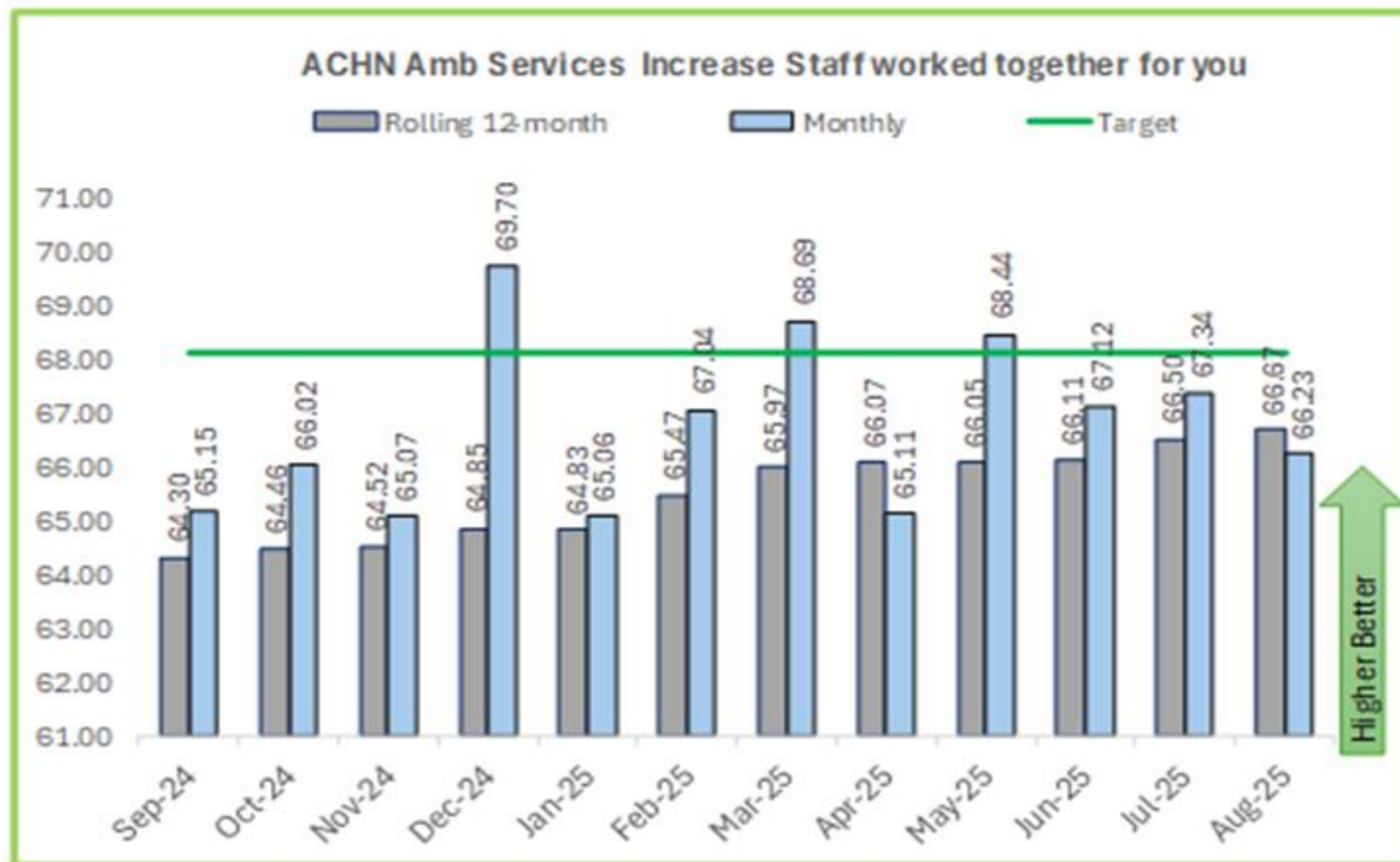


Transformation and Growth

- Empanelment in Primary Care has increased over last year by ~ 5000 patients



Patient Experience: “Staff worked together for you”



Patient Experience & Employee Engagement

Focus has been on improving overall score 'Staff worked well together'



Task Force created in April 2025 to focus on improving 'staff worked together for you' score



Clinic leaders developed specific action plans for their areas and presented at ACHN Leadership meetings



Employee Survey results recently shared with ACHN leadership and are reviewing key indicators and identified focus areas

Future State



Where we are: Rolling 12 month score 66.67% as of August 2025

Where we want to be: Goal 68.08% and Stretch Goal 69.07% by Nov 2025



ACHN will be holding quarterly “Thriving Together” listening sessions beginning in October 2025



Taking what we learn to ensure our action plans are productive, and provide favorable impact for the Patient and Employee Engagement

Media Dashboard



COOK COUNTY
HEALTH

Earned Media Dashboard



Total Media Placements

696



Total Reach

1.2B



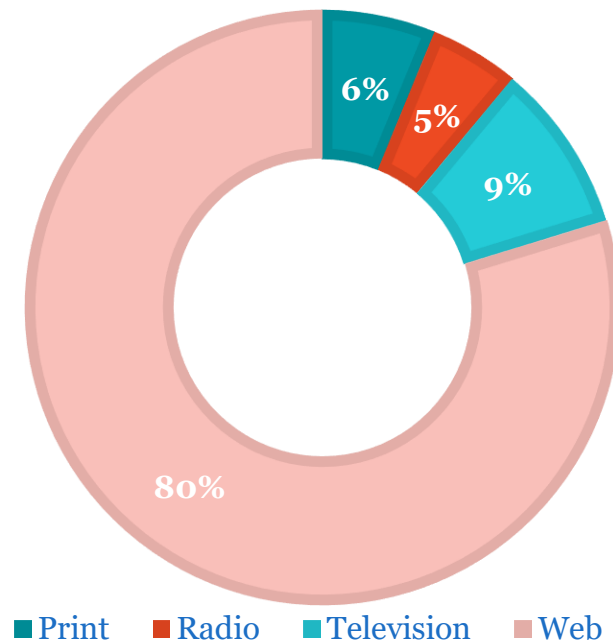
Total Media Value

\$11.2M

Top Local Media Outlets

1. *WBBM Radio*
2. *Fox 32 Chicago*
3. *WGN Radio*
4. *Lawndale News*
5. *ABC 7 Chicago*

Media by Outlet Type



Most Common Topics

1. ACHN/Prieto 50th anniversary
2. Value Based Payments
3. Measles
4. COVID Vaccines

Top Headlines



Celebrando 50 Años de Salud Comunitaria



Free health care clinic moves to shield patients from ICE ahead of surge



Cook County launches "Get Naloxone" campaign to fight overdoses



These Chicago residents welcome extra help fighting crime but don't want Trump to send the National Guard



Cook County Health Embraces New Payment Models with First Value-Based Care Contracts and Medicare Shared Savings ACO



Cook County Health seeks transitions to value-based care contracts



'Lifesaving' Narcan newsstands aim to combat overdoses in Uptown



Vaccine rates on the decline: What doctors want parents to know as kids head back to school



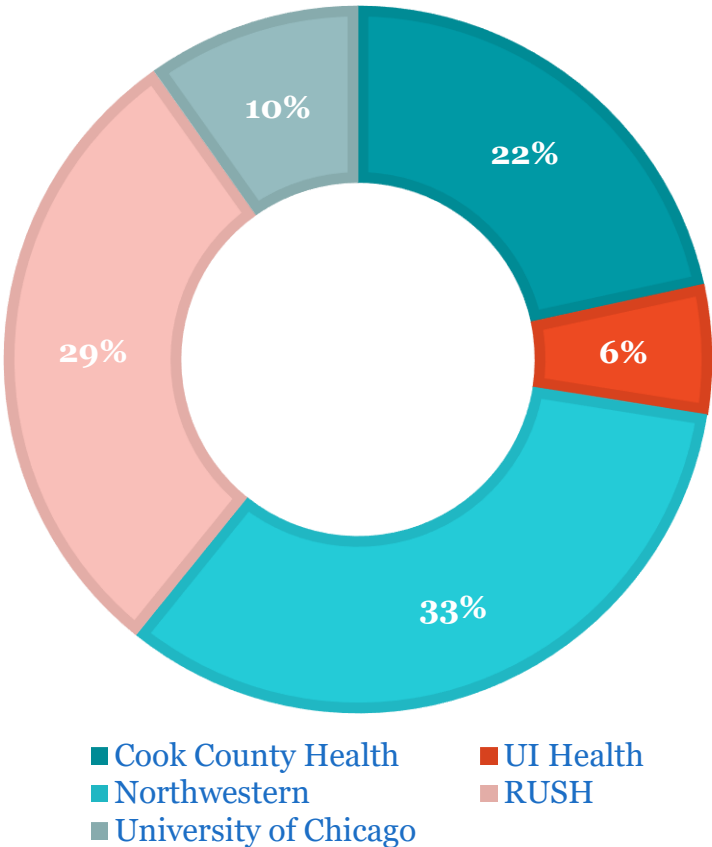
Cook County health officials launch campaign encouraging measles vaccine



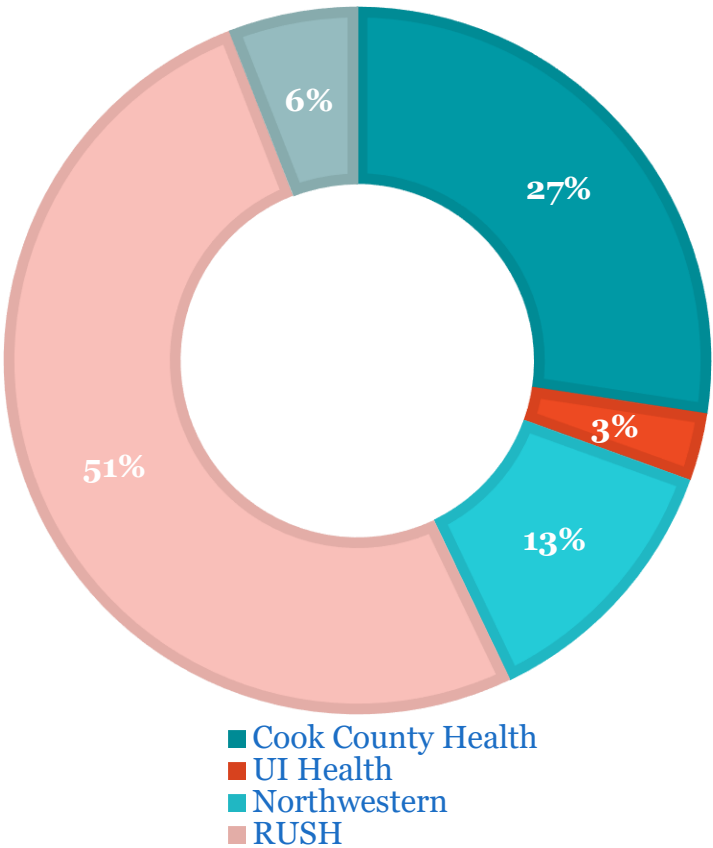
Chicago experts address COVID vaccine confusion: Illinois does not require doctor's prescription

Media Benchmarking (Top Outlets)

Share of Voice



Share of Reach



Social Media Summary

During August 11 – September 7, 2025, the communications team posted content on Facebook, Twitter, Instagram and LinkedIn for Cook County Health.

Facebook – 36 posts

<https://www.facebook.com/Cookcountyhhs/>

Twitter – 35 posts

<https://twitter.com/CookCtyHealth>

Instagram – 35 posts (includes stories and IGTV)

<https://www.instagram.com/cookcountyhealth/>

LinkedIn – 29 posts

<https://www.linkedin.com/company/cook-county-health/>

Social Media Summary

(In comparison to last year during the same time period)

Twitter

- Impressions: **3.1K**
- Post Link Clicks: **11**
- Engagements: **42**
- Followers: **4.6K**

LinkedIn

- Impressions: **46.7K** (up **44%**)
- Page Views: **4.3K** (up **2%**)
- Engagements: **4.2K** (up **83%**)
- Followers: **19.1K** (up **3%**)

Facebook

- Total impressions: **93.4K** (up **112%**)
- Post engagement: **5.7K** (up **123%**)
- Page Clicks: **1.64K** (up **1702%**)
- Page followers: **9.8K** (up **29** from previous report)

Instagram

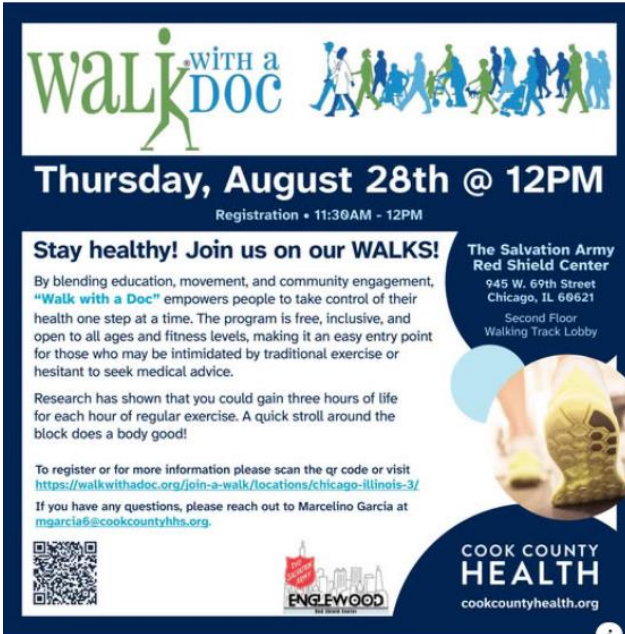
- Impressions: **40.3K** (up **13%**)
- Engagement: **284**
- Followers: **4.1K** (up **1%**)

Facebook Insights

Top Boosted Posts

Cook County Health
Published by Meltwater Engage · August 21 at 9:00 AM · 🌐

Cook County Health is excited to host our next Walk With A Doc event Thursday, August 28 at noon. This doctor-led walking group is a safe, fun, and FREE community event where you'll take a walk (or roll) at your own pace, learn about a health topic, and meet new people.
Learn more at [https://walkwithadoc.org](#)



walk WITH a Doc

Thursday, August 28th @ 12PM
Registration • 11:30AM - 12PM

Stay healthy! Join us on our WALKS!

By blending education, movement, and community engagement, "Walk with a Doc" empowers people to take control of their health one step at a time. The program is free, inclusive, and open to all ages and fitness levels, making it an easy entry point for those who may be intimidated by traditional exercise or hesitant to seek medical advice.

Research has shown that you could gain three hours of life for each hour of regular exercise. A quick stroll around the block does a body good!

To register or for more information please scan the qr code or visit <https://walkwithadoc.org/join-a-walk/locations/chicago-illinois-3/>
If you have any questions, please reach out to Marcelino Garcia at mgarcia@cookcountyhhs.org.

The Salvation Army Red Shield Center
945 W. 69th Street
Chicago, IL 60621
Second Floor
Walking Track Lobby

COOK COUNTY HEALTH
cookcountyhealth.org

ENGLEWOOD
The Division of Pulmonary, Critical Care, and Sleep Medicine at Cook County H...

[Learn more](#)

Impressions: 24.5K
Reach: 17.7K
Engagement Rate: 8.1%

Cook County Health
Published by Meltwater Engage · August 12 at 1:13 PM · 🌐

Cook County Health is proud to announce that Stroger Hospital has been recognized by U.S. News & World Report as a high-performing organization in COPD care. Thank you to our physicians and care teams for their hard work in ensuring our patients have access to high-quality care when they need it the most.



COOK COUNTY HEALTH

Congratulations to Stroger Hospital

HIGH PERFORMING HOSPITALS

U.S. News & World Report
2025-2026

COPD

Pulmonary (Lung Health)
The Division of Pulmonary, Critical Care, and Sleep Medicine at Cook County H...

[Learn more](#)

Impressions: 14.8K
Reach: 10.4K
Engagement Rate: 10.3%

Facebook Insights

Top Organic Posts

 **Cook County Health** •
Published by Meltwater Engage · August 19 at 9:00 AM · 🌐

Cook County Health is hiring! Join us on Thursday, August 21 for a Pharmacy job fair!
Submit an online application prior to the event and visit the link below to find out more information.
<https://cookcountyhealth.org/join-our-team>



PHARMACY JOB FAIR

WHEN:
THURSDAY,
August 21st
9:00 AM – 3:00 PM CST

WHERE:
COOK COUNTY HEALTH PROFESSIONAL BUILDING
1950 West Polk Street
5th Floor
Chicago, IL 60612

MUST SUBMIT AN ONLINE APPLICATION TO BE CONSIDERED!

Questions? Call 312-864-0430

 **APPLY TODAY**
cookcountyhealth.org/join-our-team

 **COOK COUNTY HEALTH**
cookcountyhealth.org

ADDITIONAL PARKING: Candidates can park at the Cook County Juvenile Temporary Detention Center garage located at 1100 S. Hamilton for \$2.00 and may use the CCH Employee Shuttle service to 1900 W. Polk St. (across from Professional Building driveway) free of charge. The shuttle runs every 15 – 20 minutes. When you arrive, please look for Job Fair signage and CCH staff.

Reach: 3.2K
Impressions: 3.8K
Engagement Rate: 5.6%

 **Cook County Health** •
Published by Meltwater Engage · August 12 at 9:00 AM · 🌐

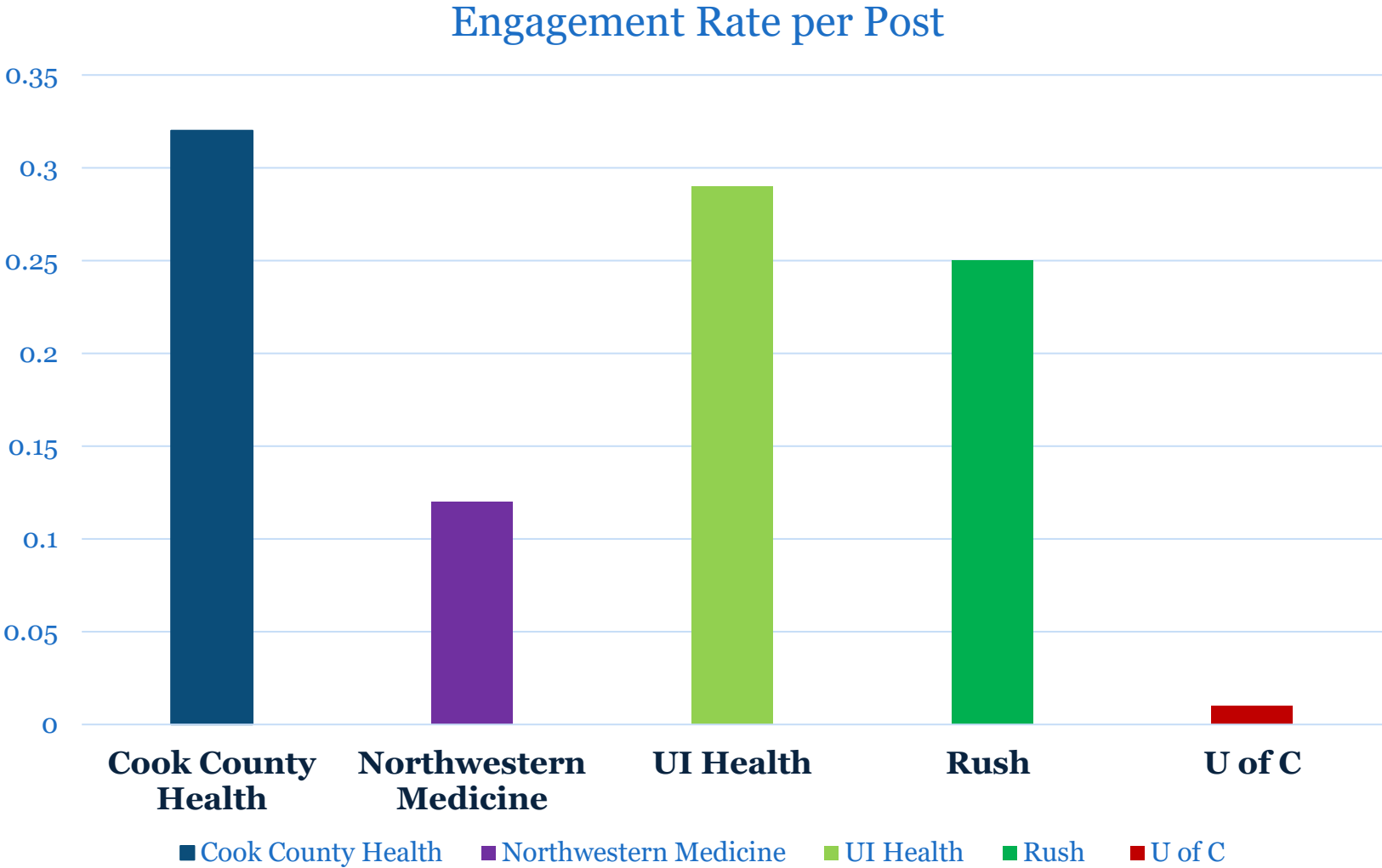
Are you getting your kids ready for back-to-school? Dr. Whitney Lyn sat down with WGN to break down trending health concerns and share expert tips. <https://wgntv.com/daytime-chicago/back-to-school-health-tips>



WGNTV.COM
Back-to-School Health Tips
As parents gear up for a new school year, many may feel overwhelmed by the usual and unexpect...

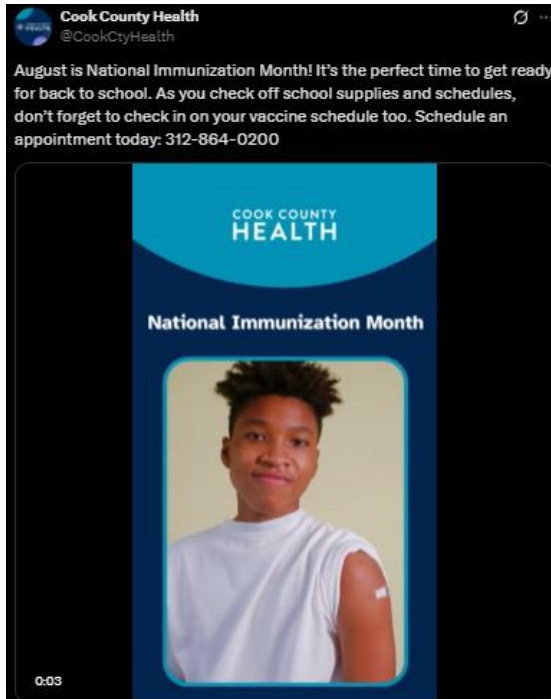
Reach: 1.4K
Impressions: 1.6K
Engagement Rate: 35.9%

Facebook Benchmarking

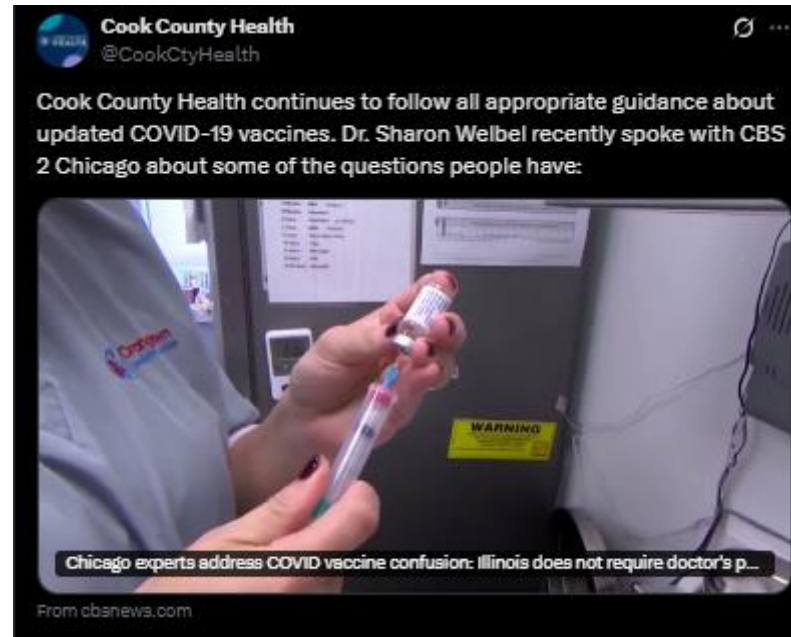


Twitter Insights

Top Posts



Impressions: 141



Impressions: 139

Instagram Insights

Top Posts



Impressions: 1.9K
Reach: 906
Likes: 28



Impressions: 1.7K
Reach: 593
Likes: 31

LinkedIn Insights

Top Posts



Impressions: 5.3K
Engagement Rate: 29.1%
Likes: 139



Impressions: 2.2K
Engagement Rate 19%
Clicks: 334

Finance Metrics



COOK COUNTY
HEALTH

Executive Summary: Statement of Financial Condition - July 31, 2025

- On an accrual basis, interim financials show that CCH ended July with a **\$64.1M unfavorable** variance to budget. County's preliminary cash report on revenues and expenses, which is cash-based accounting, shows that CCH is **favorable** to budget by **\$170.2M**.
- Revenue Commentary:
 - **Unfavorable** NPSR variance to Budget due to lower than budgeted volumes and increase in Charity Care
 - **Favorable** capitation variance to Budget due to higher than budgeted CountyCare membership
- Expenditures:
 - CountyCare claims **unfavorable** variance to budget due to higher than budgeted membership
- CountyCare:
 - CountyCare financials \$33.2M **unfavorable** to budget driven by medical loss ratio 1% higher than expected
 - Membership is 412,000 which is 4.5% greater than budgeted

Financial Results – July 31, 2025



COOK COUNTY
HEALTH

Dollars in 000s	FY2025 Actual	FY2025 Budget	Variance	%	FY2024 Actual
Revenue					
Net Patient Service Revenue (1)	\$632,703	\$778,535	(\$145,831)	-18.73%	\$773,828
Government Support (2)	\$287,384	\$264,218	\$23,166	8.77%	\$254,490
Adjusted NPSR	\$920,087	\$1,042,753	(\$122,666)	-11.76%	\$1,028,318
CountyCare Capitation Revenue	\$2,477,855	\$2,226,337	\$251,518	11.30%	\$2,238,731
Other	\$42,998	\$46,097	(\$3,099)	-6.72%	\$37,039
Total Revenue	\$3,440,940	\$3,315,188	\$125,753	3.79%	\$3,304,088
Operating Expenses					
Salaries & Benefits	\$526,206	\$611,251	\$85,045	13.91%	\$506,947
Overtime	\$40,136	\$36,326	(\$3,810)	-10.49%	\$37,086
Supplies & Pharmaceuticals	\$176,283	\$168,057	(\$8,226)	-4.89%	\$165,525
Purchased Services & Other	\$521,474	\$555,004	\$33,530	6.04%	\$474,250
Medical Claims Expense (1)	\$2,310,398	\$2,021,701	(\$288,697)	-14.28%	\$2,057,817
Insurance	\$22,400	\$20,232	(\$2,168)	-10.71%	\$19,926
Utilities	\$9,273	\$9,998	\$725	7.25%	\$8,877
Total Operating Expenses	\$3,606,170	\$3,422,570	(\$183,600)	-5.36%	\$3,270,428
Operating Margin	(\$165,230)	(\$107,383)	(\$57,847)	53.87%	\$33,660
Non-Operating Revenue	\$98,843	\$105,137	(\$6,294)	-5.99%	\$113,199
Net Income (Loss)	(\$66,387)	(\$2,246)	(\$64,141)	2855.56%	\$146,860

Notes:

- (1) CountyCare Elimination represents the elimination of intercompany activity – Patient Service Revenue and Medical Claims Expense for CountyCare patients receiving care at Cook County Health.
- (2) Government Support includes DSH, BIPA, & Graduate Medical Education payments.
- (3) Does not reflect Pension, OPEB, Depreciation/Amortization, or Investment Income.

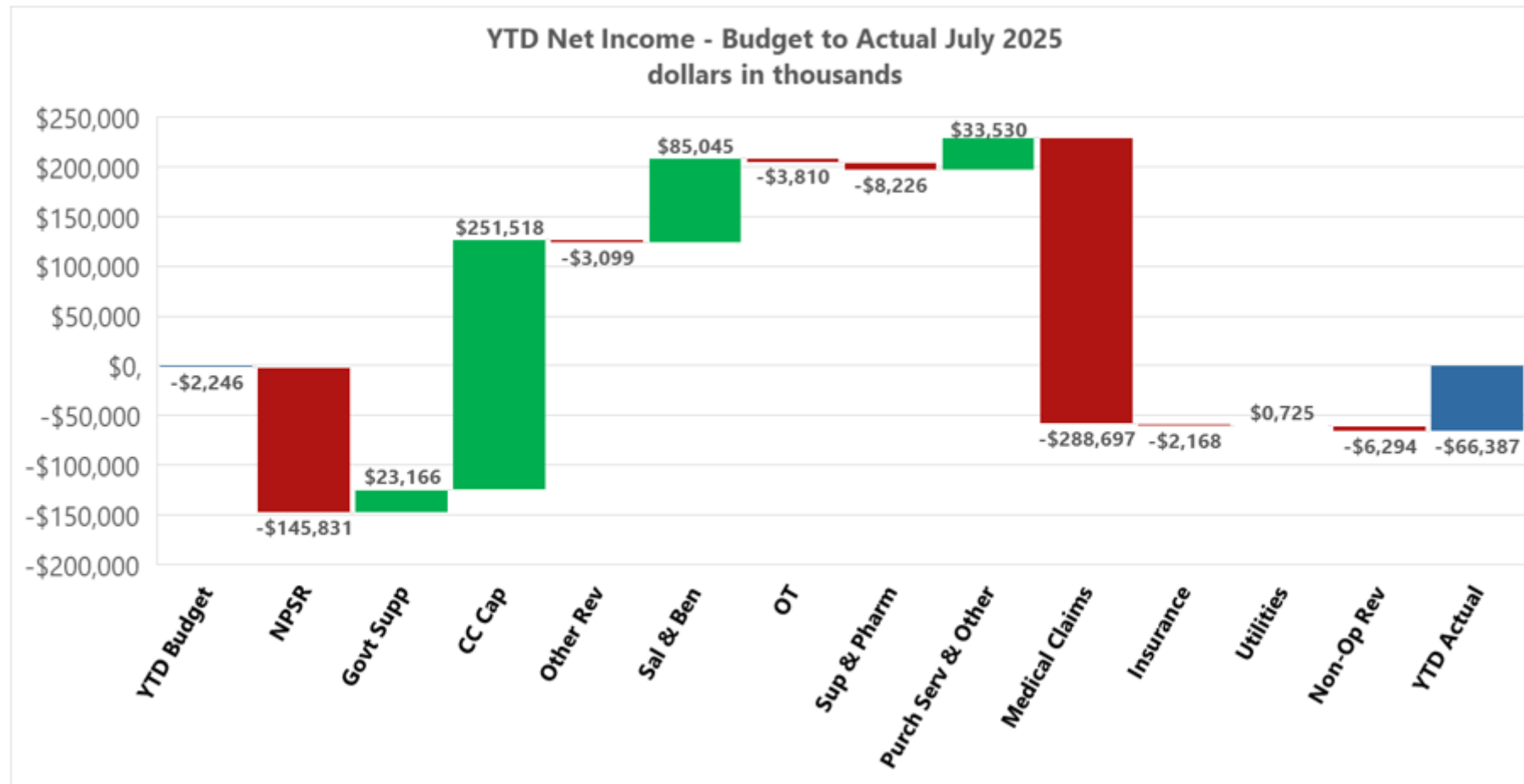


COOK COUNTY
HEALTH

YTD Net Income Waterfall Report



COOK COUNTY
HEALTH



COOK COUNTY
HEALTH

Key Volume and Revenue Indicators

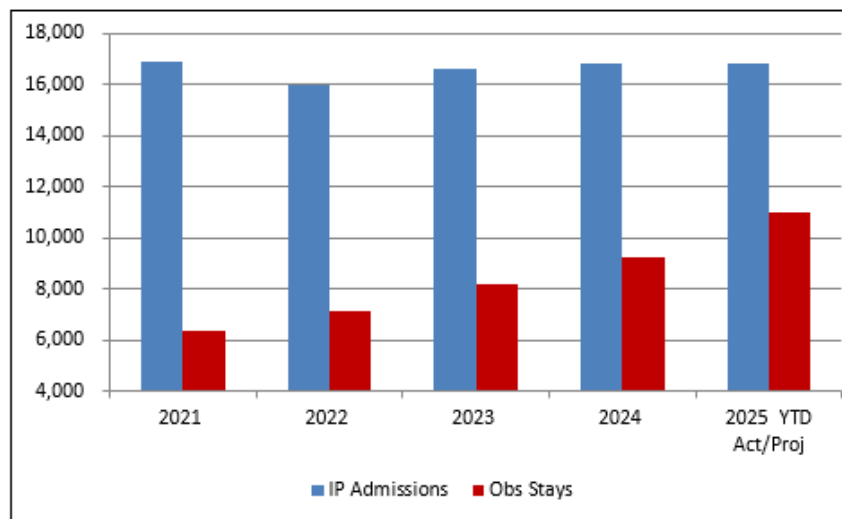
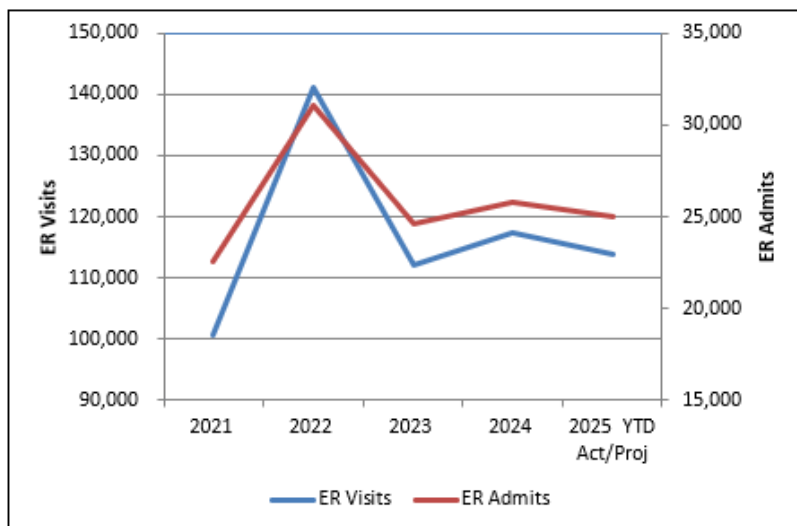
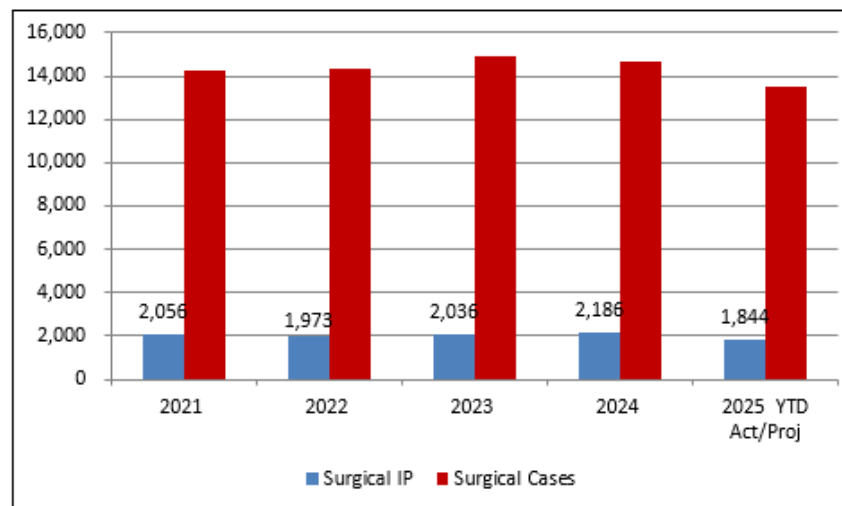
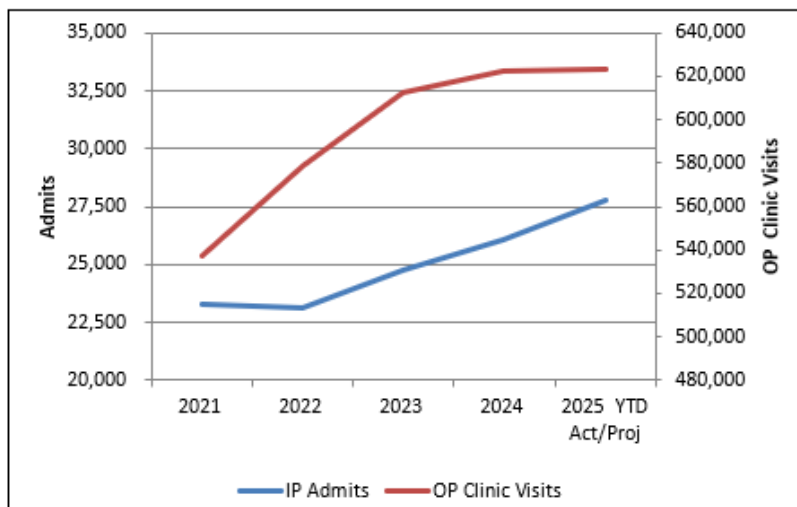
Patient Activity Stroger	2025 YTD Actual	2025 YTD Budget	%	2024 YTD Actual	2023 YTD Actual		Jul 2025 Actual	Jul 2024 Actual
Average Daily Census	306	317	-3.3%	325	317		294	326
Emergency Room Visits	59,242	61,261	-3.3%	60,323	55,415		7,763	7,667
Surgeries	7,454	8,092	-7.9%	7,731	7,477		1,046	1,069
Patient Activity Provident	2025 YTD Actual	2025 YTD Budget	%	2024 YTD Actual	2023 YTD Actual		Jul 2025 Actual	Jul 2024 Actual
Average Daily Census	16	29	-44.2%	21	20		12	22
Emergency Room Visits	16,572	17,559	-5.6%	17,511	17,587		1,997	2,220
Surgeries	1,565	2,005	-22.0%	2,030	2,394		242	247
Patient Activity ACHN	2025 YTD Actual	2025 YTD Budget	%	2024 YTD Actual	2023 YTD Actual		Jul 2025 Actual	Jul 2024 Actual
Primary Care Visits	149,527	160,988	-7.1%	159,406	157,801		19,570	19,542
Specialty Care Visits	266,047	253,840	4.8%	257,591	250,067		34,639	33,109
CountyCare Membership	2025 YTD Actual	2025 YTD Budget	%	2024 YTD Actual	2023 YTD Actual		Jul 2025 Actual	Jul 2024 Actual
Membership Count	412,204	394,467	4.5%	433,308	452,848		400,338	425,933

* Includes IP + Observations

Operating Trends

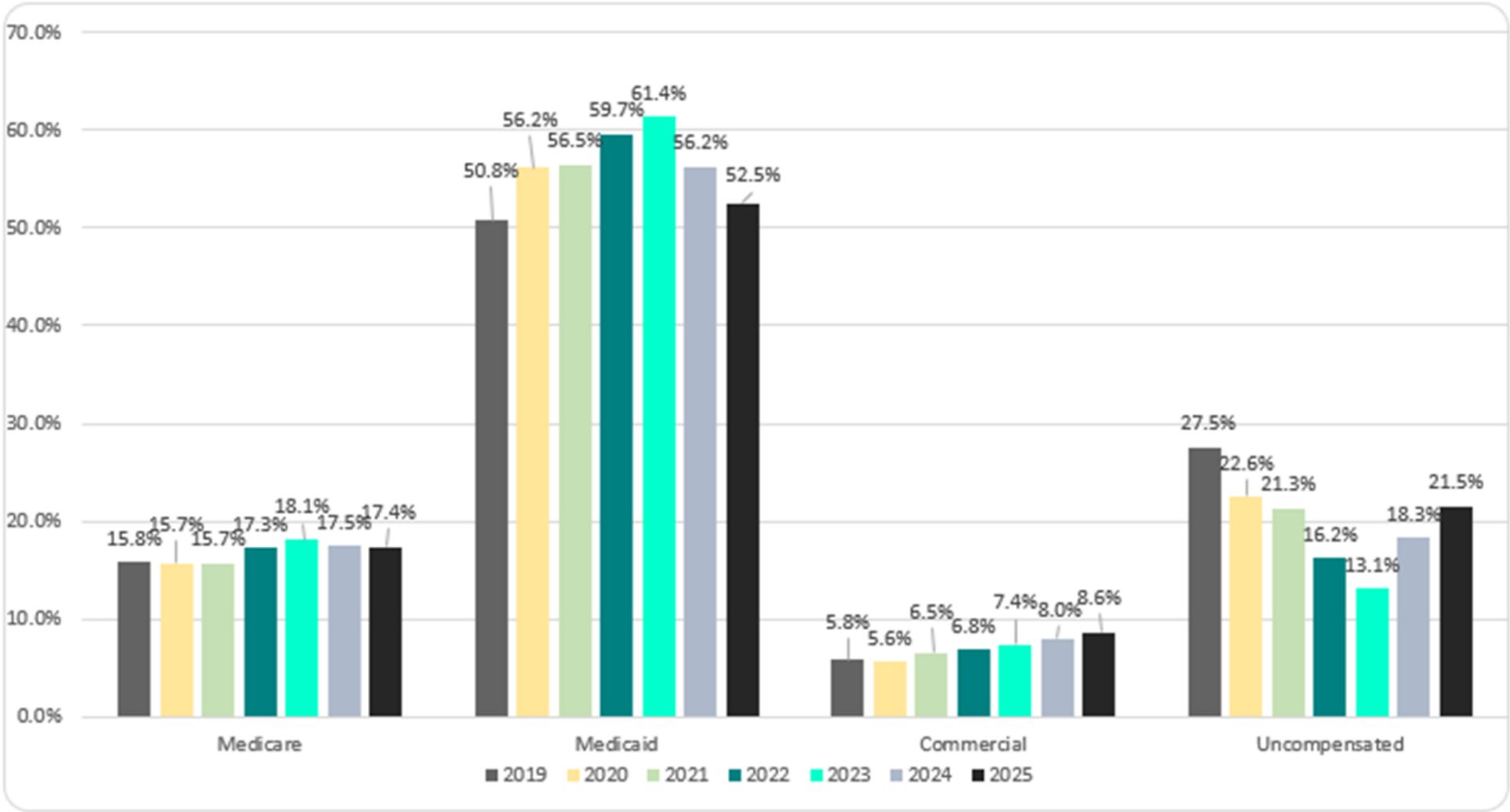


COOK COUNTY
HEALTH

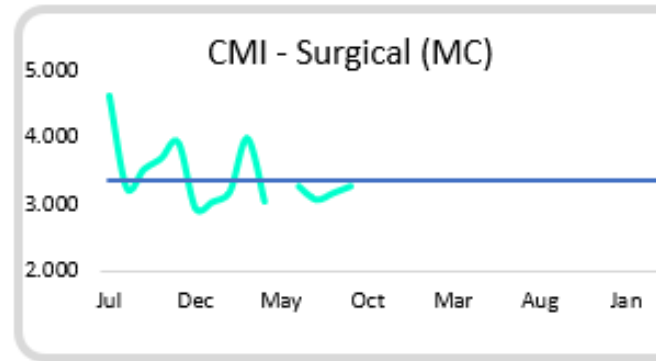
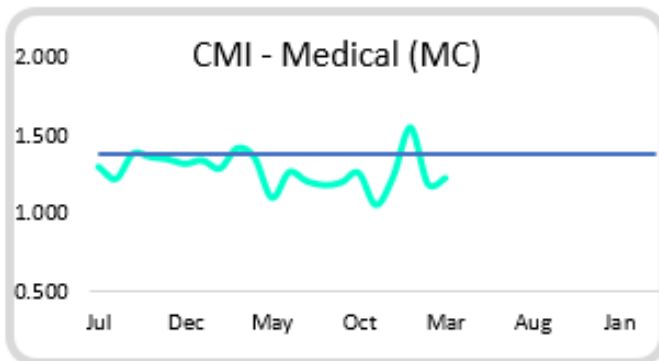
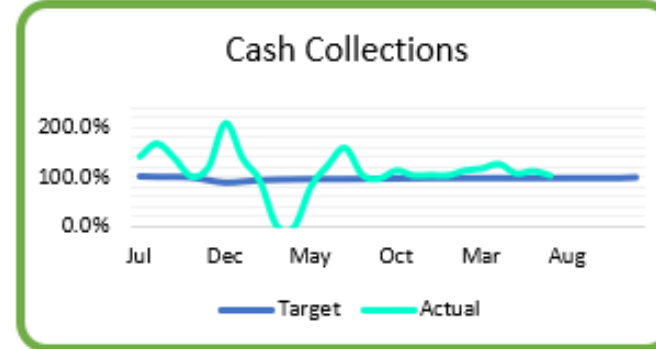
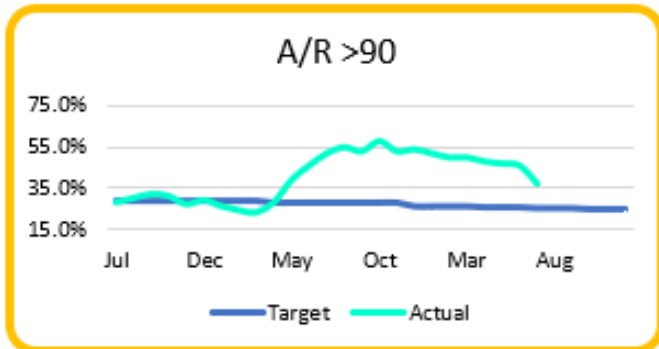
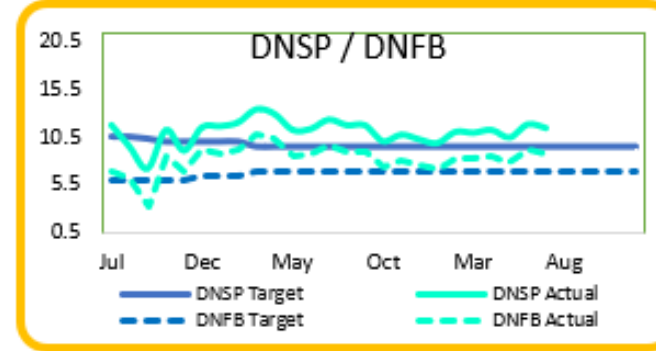
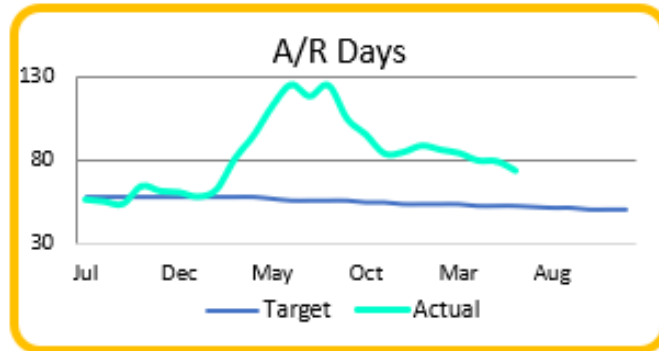


COOK COUNTY
HEALTH

Payer Mix



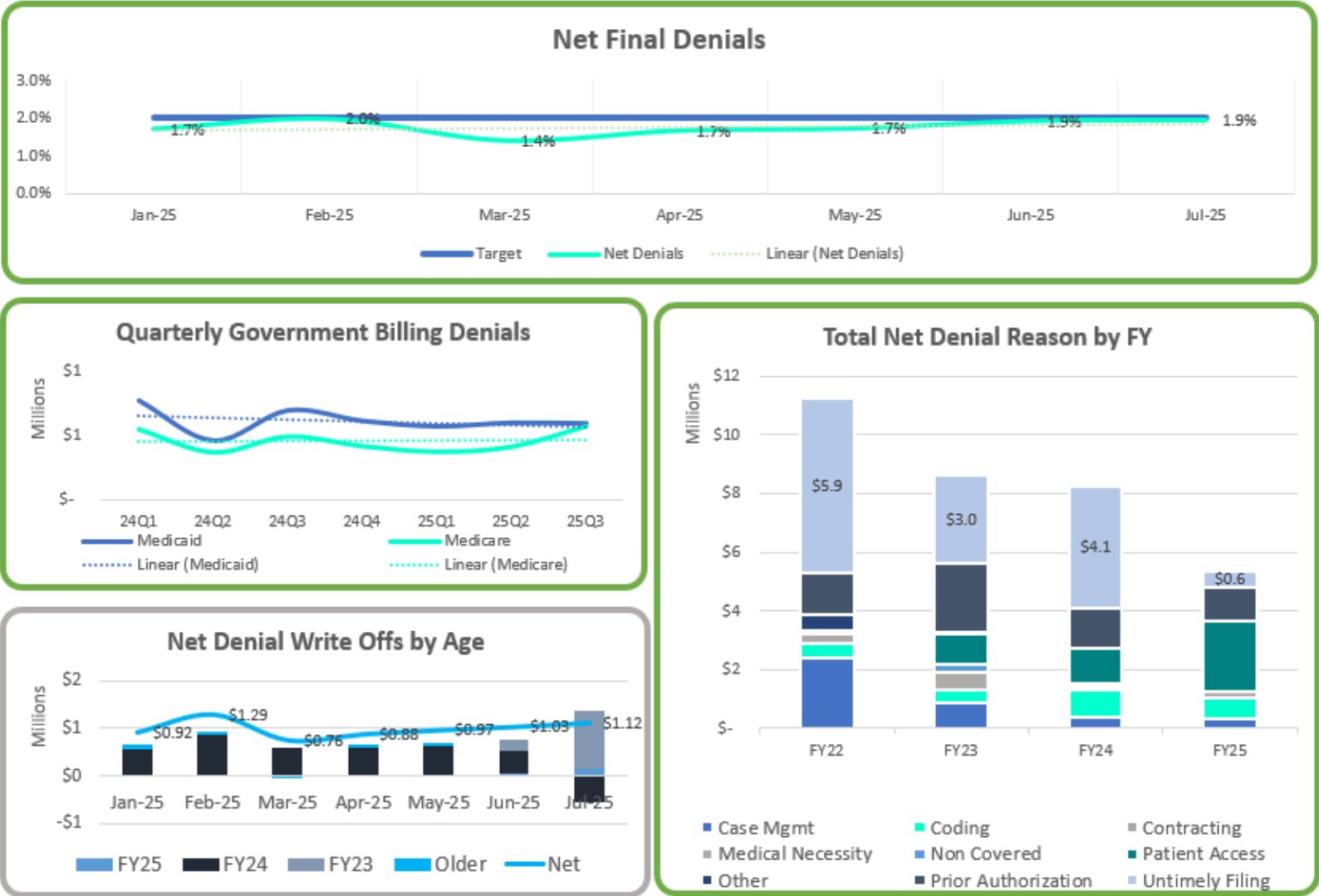
Revenue Cycle KPIs



Accounts Receivable Update:

Our AR metrics continue to improve following the Change Healthcare cyber-attack. The primary area still requiring recovery is aged AR over 90 days. We are actively working with payers to provide the necessary documentation and ensure resolution of these impacted claims.

Denials



Charitable & Public Program Expenditures

<u>Charitable Benefits and Community Programs</u>	2023 Actual	2024 Actual	2025 Budget	2025 Projected
Traditional Charity Care	\$ 105,040	\$ 201,962	\$ 232,719	\$ 306,915
Other Uncompensated Care	135,655	80,164	88,500	128,202
Cermak & JTDC Health Services	100,779	116,223	143,621	128,707
Department of Public Health	12,712	22,113	27,553	25,726
Other Public Programs & Community Services	66,321	71,600	52,870	52,870
Totals	\$ 420,506	\$ 492,062	\$ 545,263	\$ 642,420
% of Revenues *	38.8%	30.5%	32.6%	42.0%
% of Costs *	23.1%	28.5%	24.2%	32.7%

* Excludes County Care Health Plan Services

Savings Initiatives



Current Activities in Progress	Budgeted FY25 Impact	YTD Achieved	Status
<u>Revenue Cycle:</u>			
CDM Annual Pricing Review	2,650,000	1,821,875	●
Revenue Recovery	3,400,000	2,337,500	●
Point of Service Collections	300,000	221,250	●
<u>County Care:</u>			
Vendor Contract Negotiations- (term eff July)	2,400,000	2,400,000	●
<u>Health System:</u>			
Vendor Contract Negotiations	20,000,000	13,852,000	●
	<u>\$ 28,750,000</u>	<u>\$ 20,632,625</u>	72%
		Goal 8/12ths	67%

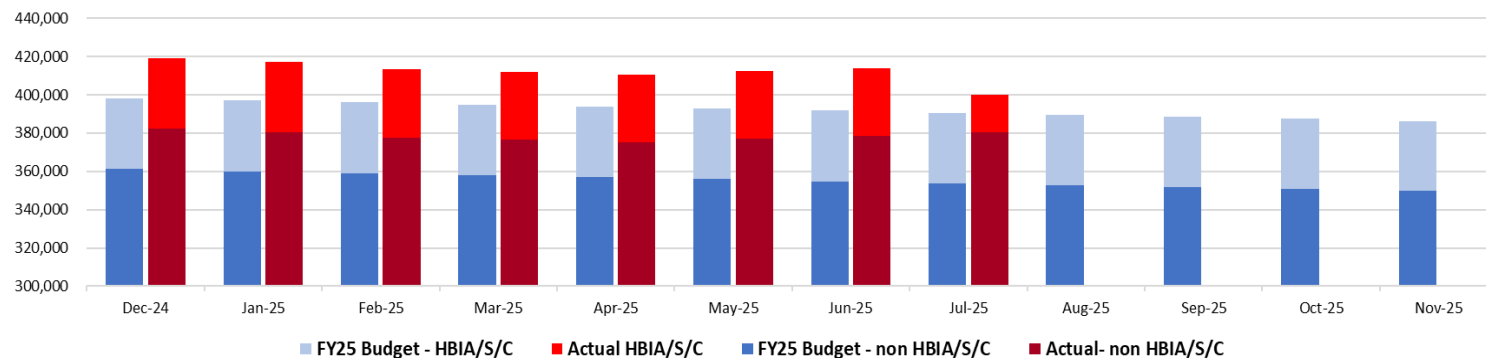


Dollars in 000s except PMPM amounts	FY2025 Actual	FY2025 Budget	Variance	%	Fy24 Actual
Capitation Revenue	\$2,488,966	\$2,232,666	\$256,299	11.48%	\$2,252,151
Operating Expenses					
Clinical - CCH	\$85,295	\$93,530	\$8,236	8.81%	\$87,636
Clinical - External	\$2,309,536	\$2,031,757	(\$277,780)	(13.67%)	\$2,048,444
Administrative	\$125,059	\$105,113	(\$19,946)	(18.98%)	\$113,517
Total Expenses	\$2,519,890	\$2,230,400	(\$289,490)	(12.98%)	\$2,249,598
Operating Gain (Loss)	(\$30,924)	\$2,266	(\$33,190)		\$2,552
Activity Levels					
Member Months	3,298,934	3,155,732	143,202	4.54%	3,468,641
Monthly Membership	400,266	390,659	9,607	2.46%	426,113
CCH CountyCare Member Months	244,424	N/A	N/A	N/A	281,243
CCH % CountyCare Member Months	7.41%	N/A	N/A	N/A	8.11%
Operating Indicators					
Revenue Per Member Per Month (PMPM)	\$754.48	\$707.50	\$46.98	6.64%	\$649.29
Clinical Cost PMPM	\$725.94	\$673.47	(\$52.47)	(7.79%)	\$615.83
Medical Loss Ratio (1)	96.2%	95.2%	(1.03%)	(1.08%)	93.8%
Administrative Cost Ratio	5.0%	4.7%	(0.25%)	(5.40%)	5.0%
Total FTEs	388	429	41		359

Commentary

- Total YTD member months are exceeding budget by 143,202 members.
- Revenue and claims expense are higher than budget due to higher than budgeted membership.
- CountyCare's reimbursement to CCH for domestic spend is under budget.
- Operating Loss of \$30.9M
- Operating loss driven by 1% higher medical loss ratio than expected.

CountyCare Membership



Notes:

- (1) Medical Loss Ratio is a measure of the percentage of premium that a health plan spends on medical claims.

Human Resources Metrics



COOK COUNTY
HEALTH

FY25 CCH HR Activity Report

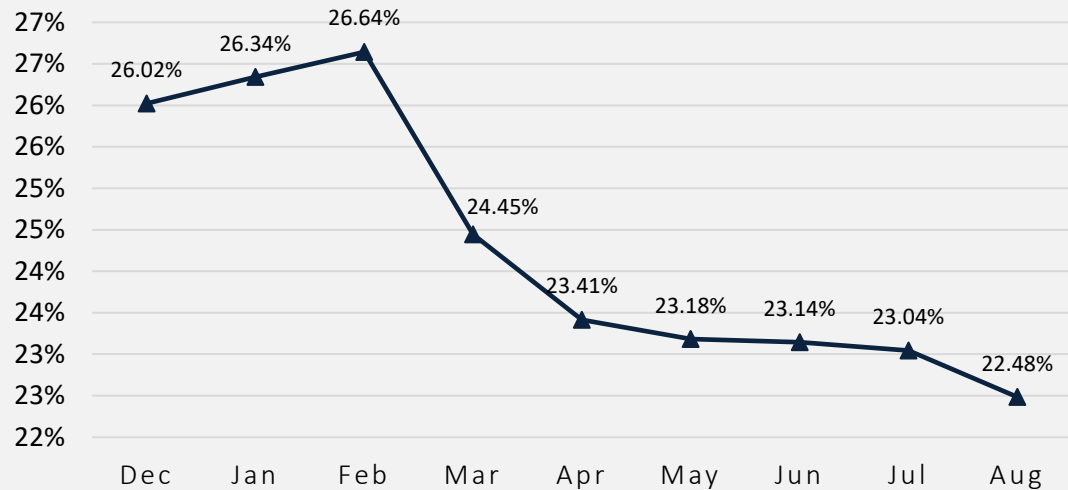
Vacancy Rate and Vacant Positions (Dec-Aug)

As of 08/31/2025



Vacancy Rate

- **22.5%** YTD vacancy rate

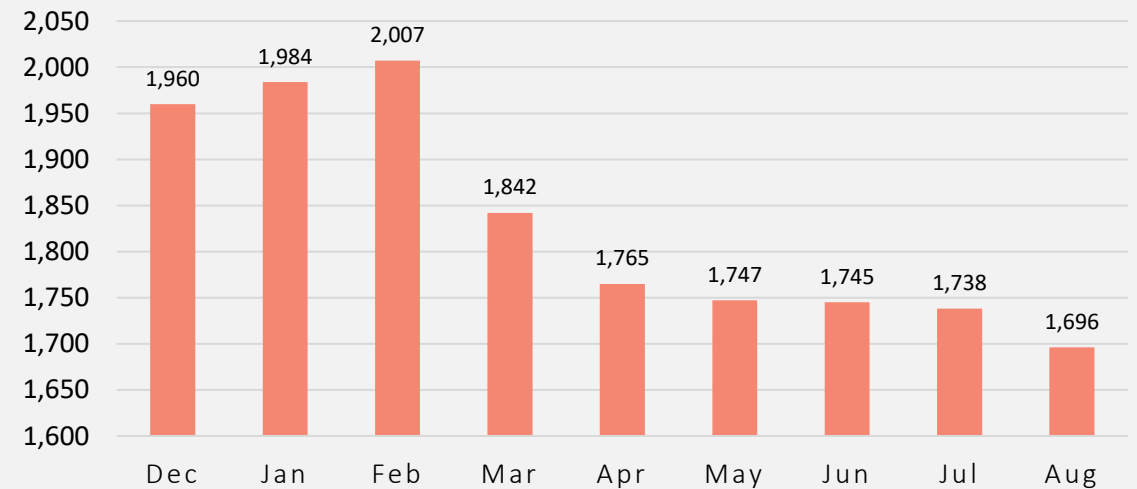


- **13.6%** decrease in vacancies between December and August

Vacancy Source: Budget

Vacant Positions

- **1,696** YTD vacancies



- **15.5%** vacancy decrease from December to August.

Current State Of Hiring & Separation

YTD Net New Hires Activity



COOK COUNTY
HEALTH

August 2025

12/01/2024 - 08/31/2025

1,460



FY25
Offers
Made

1,072



FY25
Accepted
Offers

1,010



FY25
Total Filled
Positions

739



FY25
External New
Hires

381



FY25
Separations

358



FY25
Net Hires

FY24
821

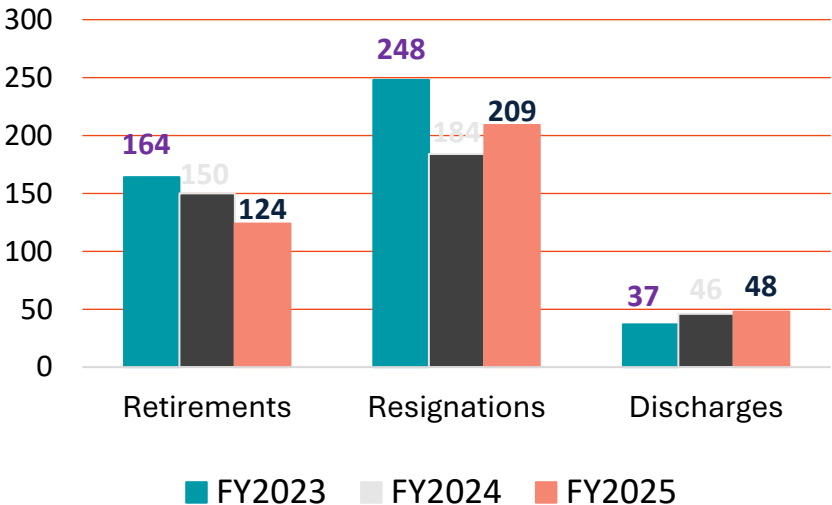
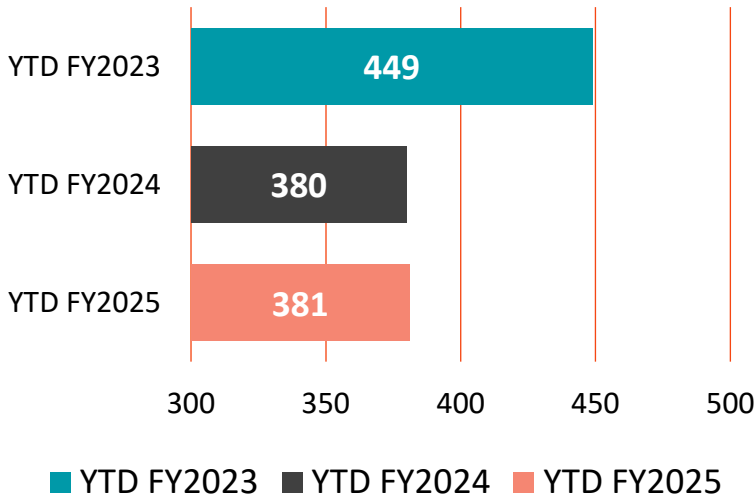
(Point in Time Variations)

FY24
553

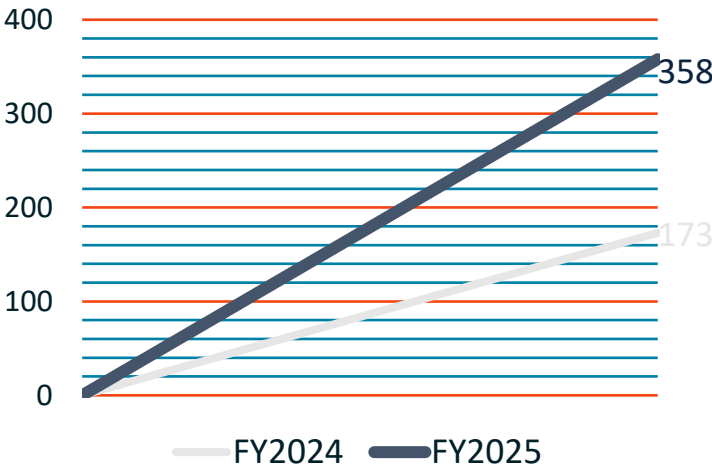
FY24
380

FY24
173

YTD Separations



YTD Net New Hires Activity



Nursing Hiring Activity

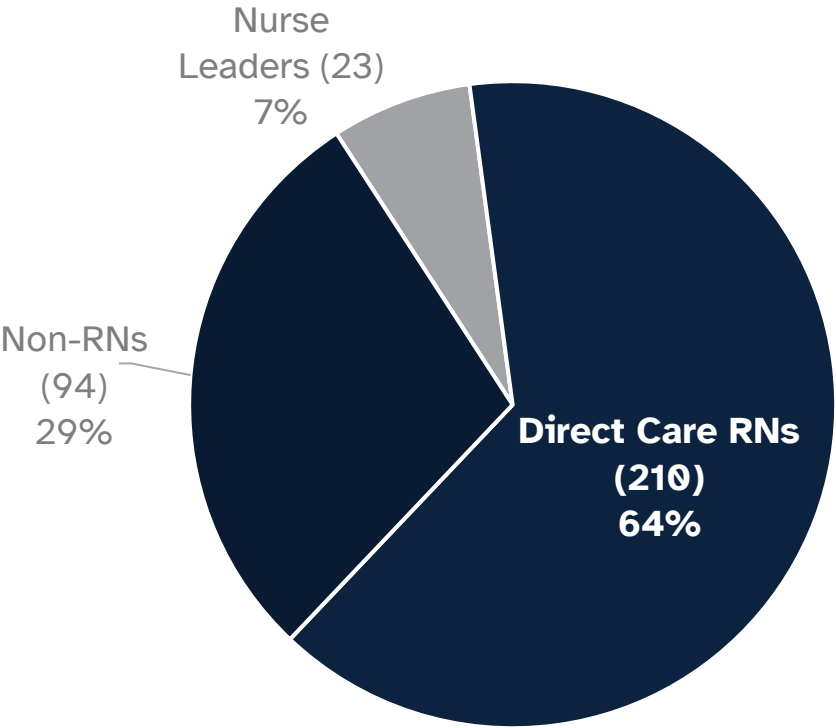
12/01/2024 thru 08/31/2025



Filled Positions

327

Total Filled Positions YTD



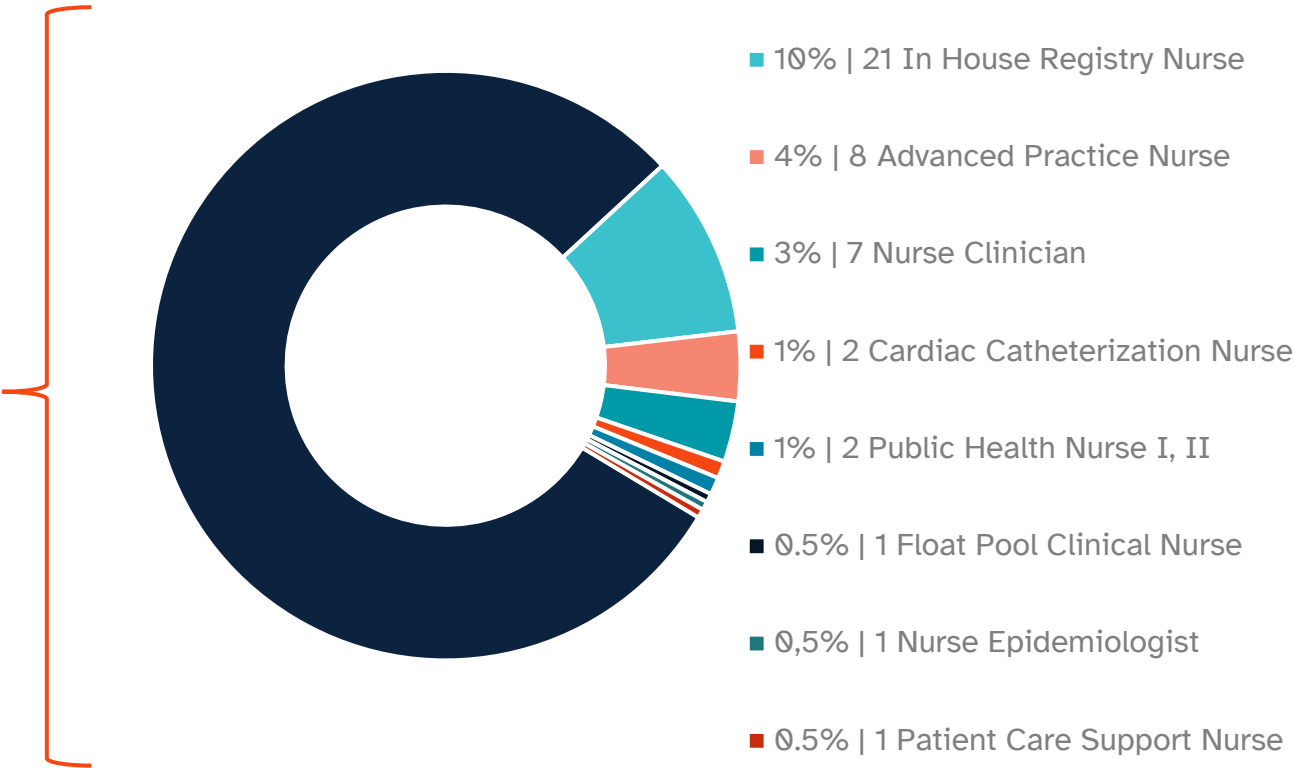
(179), 64% External | (102), 36% Internal



Direct Care RN Filled Velocity

210

Internal & External Filled Positions

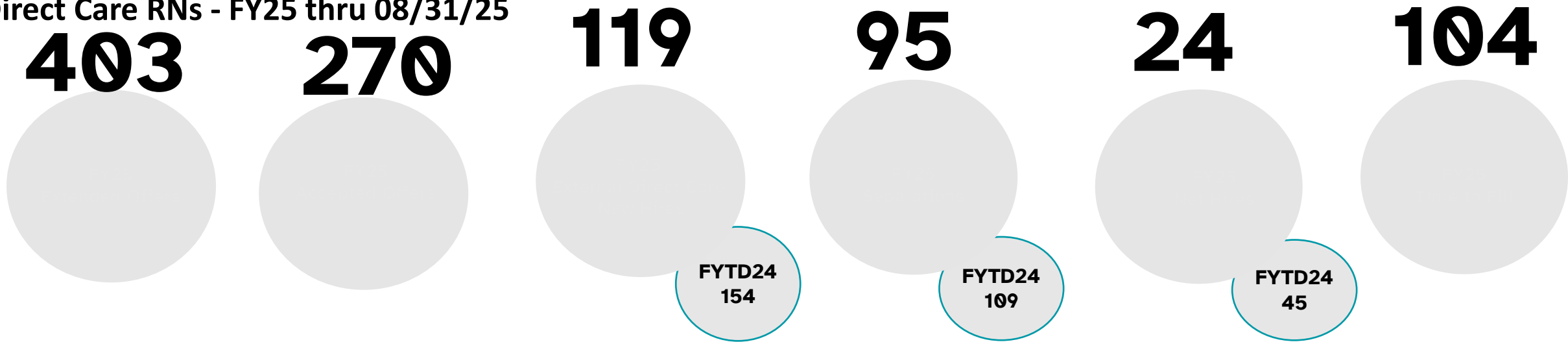


(119), 57% External | (91), 43% Internal

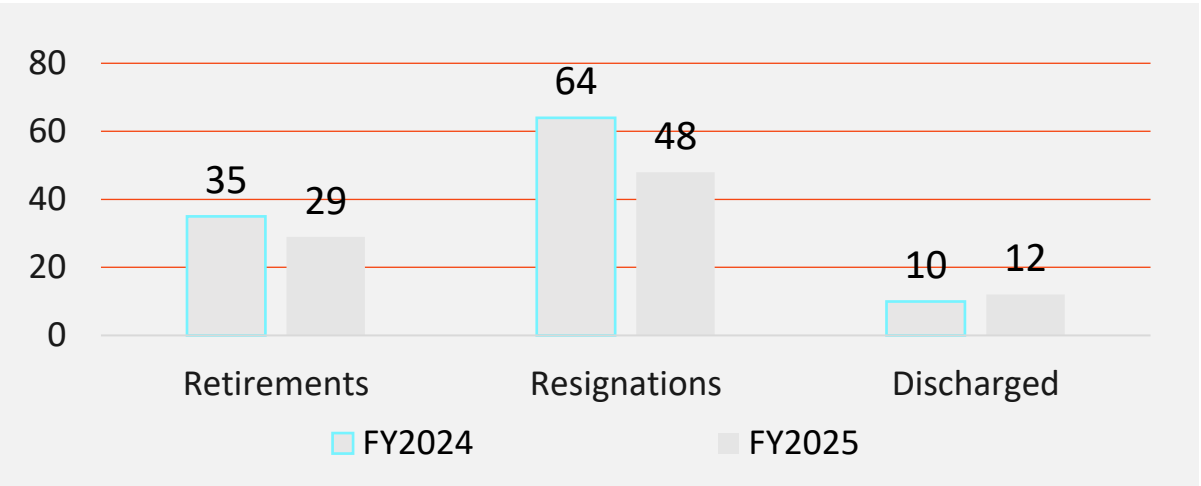
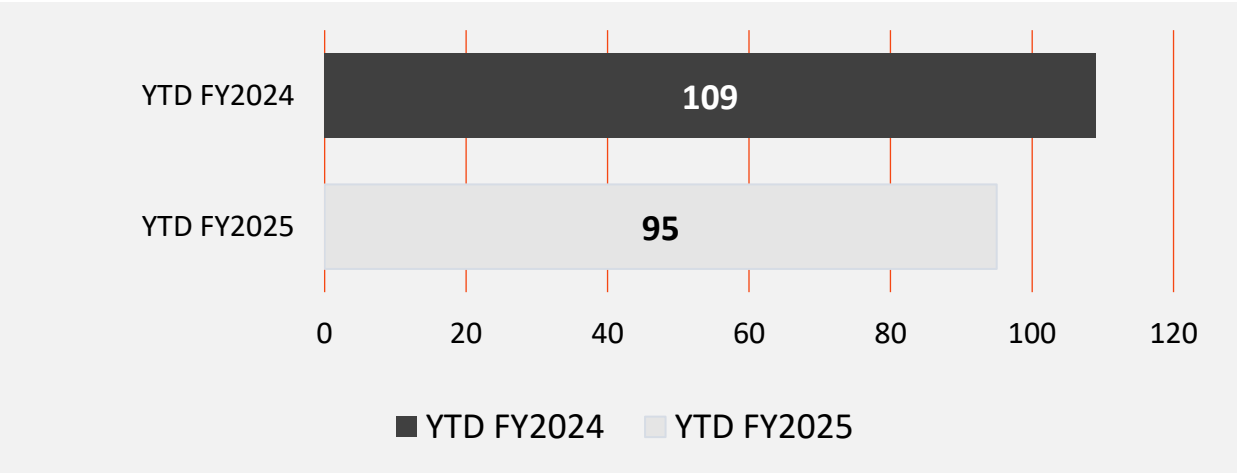
RN Nursing Hiring Velocity & Attrition



Direct Care RNs - FY25 thru 08/31/25



Direct Care RN Separations – December thru August Year-Over-Year



Managed Care Metrics



COOK COUNTY
HEALTH

Current Membership

Monthly Membership as of September 15th, 2025



COOK COUNTY
HEALTH

Category	Total Members	ACHN Members	% ACHN
FHP	223,718	9,956	4.45%
ACA	105,315	10,647	10.11%
ICP	31,464	4,535	14.41%
MLTSS	11,058	-	0.00%
SNC	8,082	334	4.13%
HBIS	3,827	1,119	29.24%
HBIC	15,522	1,558	10.04%
Total	398,986	28,149	7.06%

ACA: Affordable Care Act

FHP: Family Health Plan

ICP: Integrated Care Program

MLTSS: Managed Long-Term Service and Support (Dual Eligible)

SNC: Special Needs Children

HBIS/HBIC: Health Benefit for Immigrant Seniors/Children

Managed Medicaid Market

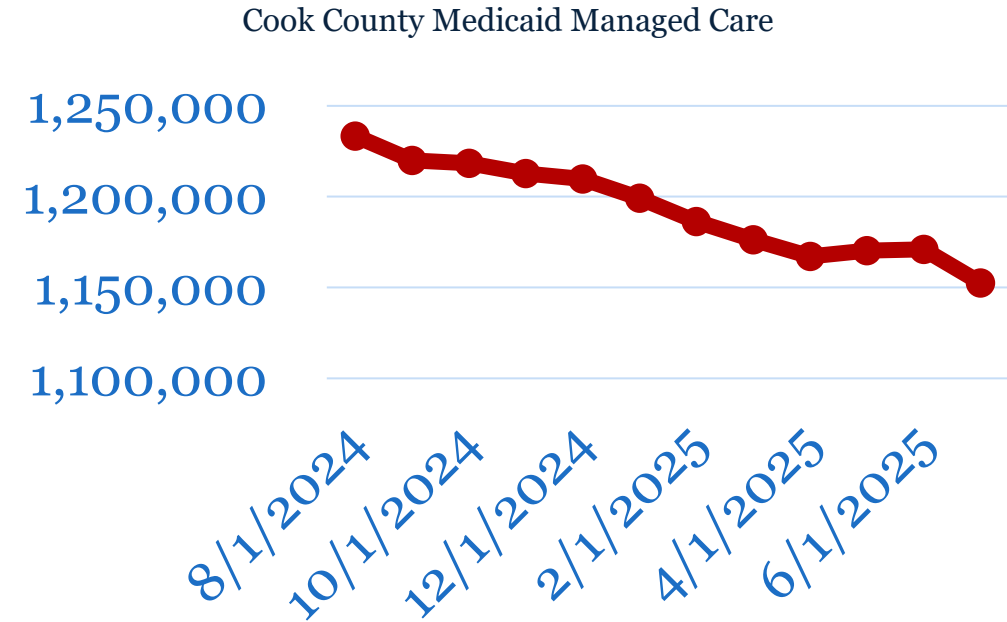
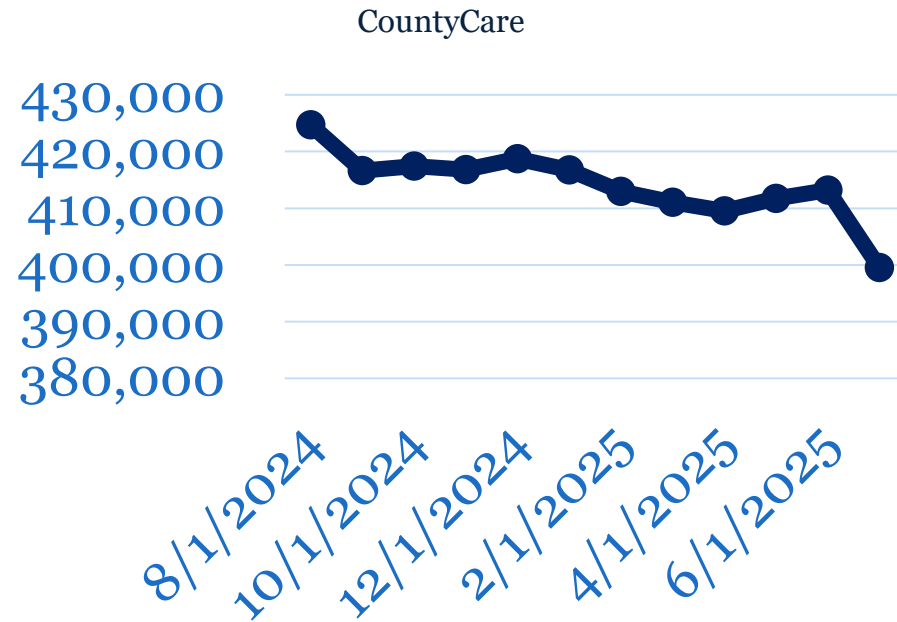
Illinois Department of Healthcare and Family Services July 2025 Data

Managed Care Organization	Cook County	Cook Market Share
*CountyCare	399,526	34.7%
Blue Cross Blue Shield	326,064	28.3%
Meridian (a WellCare Co.)	236,175	20.5%
IlliniCare (Aetna/CVS)	104,508	9.1%
Molina	78,404	6.8%
YouthCare	7,887	0.7%
Total	1,152,564	100.0%

IL Medicaid Managed Care Trend in Cook County



Charts not to scale

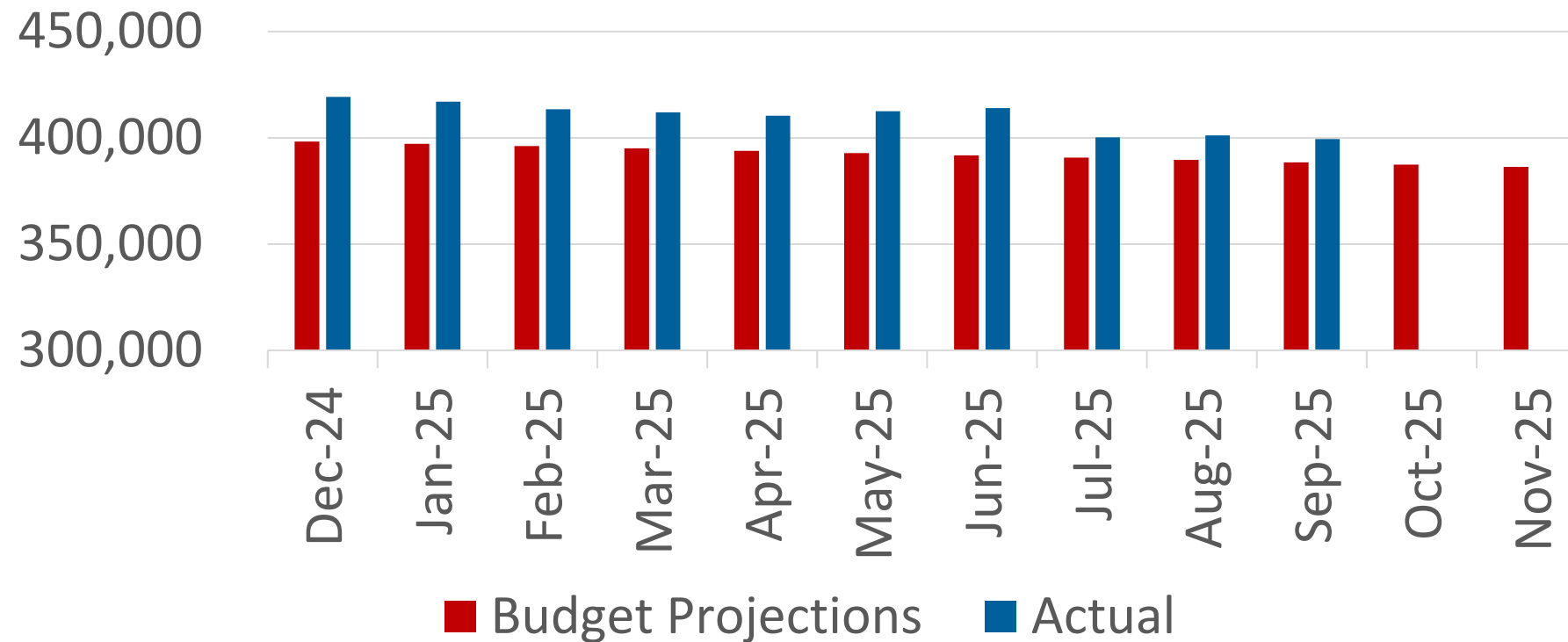


- CountyCare's enrollment **decreased** 3.30% in July 2025, falling from 413,211 in June to 399,526. This decline is larger than Cook County's **decrease** of 1.58%, with enrollment dropping from 1,171,050 to 1,152,564 over the same period.

Source: [Total Care Coordination Enrollment for All Programs](#) | [HFS \(illinois.gov\)](#)

FY25 Budget | Membership

CountyCare Membership



Operations Metrics: Call Center & Encounter Rate

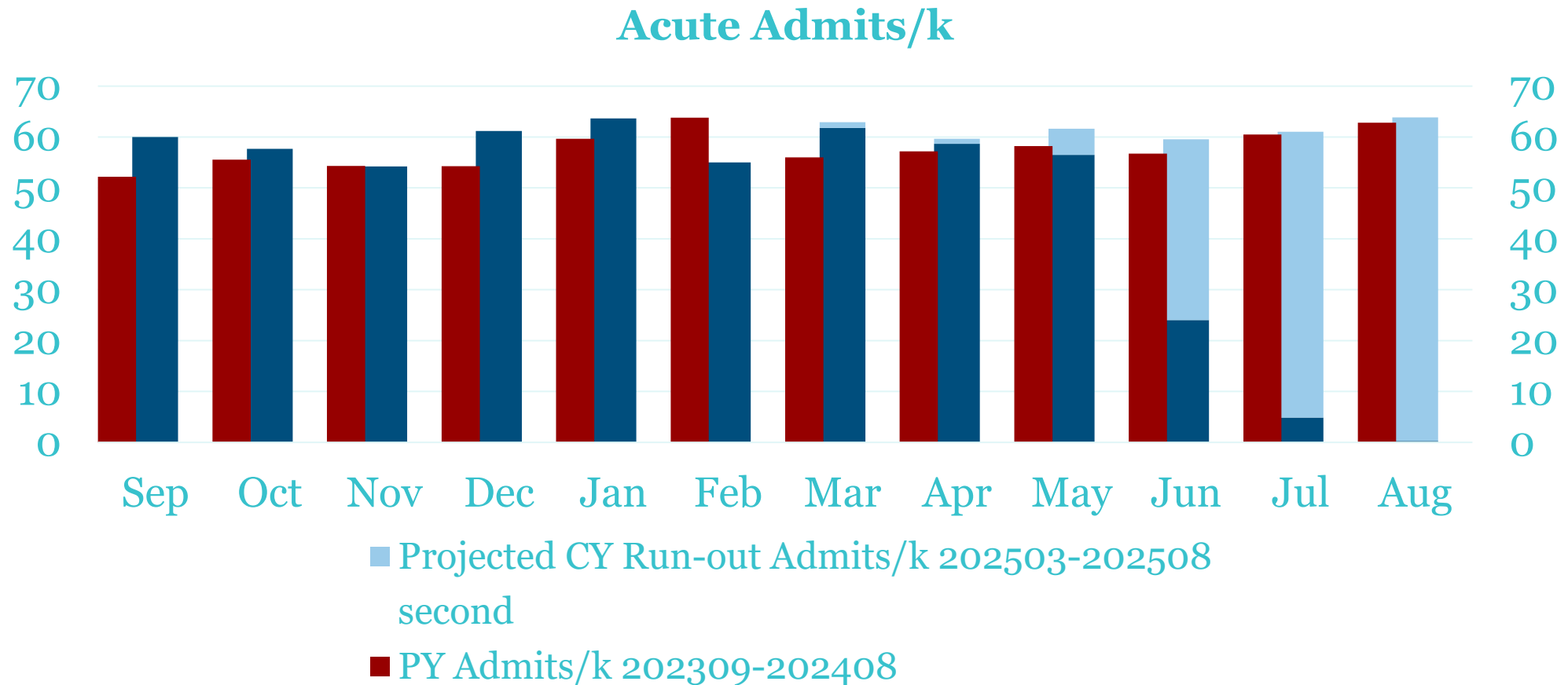


		Performance		
Key Metrics	State Goal	Jun 2025	Jul 2025	Aug 2025
Member & Provider Services Call Center Metrics				
Inbound Call Volume	N/A	48,304	50,606	48,088
Abandonment Rate	< 5%	0.61%	0.56%	0.84%
Average Speed to Answer (minutes)	1:00	0:06	0:07	0:10
% Calls Answered < 30 seconds	> 80%	96.6%	96.9%	95.7%
Quarterly				
Claims/Encounters Acceptance Rate	98%	98.4%		

Current v Prior Year: IP Acute Admits/1000



COOK COUNTY
HEALTH



Updated monthly, paid through August 2025

All acute and surgical cases + approved acute authorizations

Domestic admissions are not included since they do not require Prior Authorization

Claims Payments

Received but Not Yet Paid Claims

Aging Days	0-30 days	31-60 days	61-90 days	91+ days	Grand Total
Q1 2020	\$ 109,814,352	\$ 53,445,721	\$ 46,955,452	\$ 9,290,569	\$ 219,506,093
Q2 2020	\$ 116,483,514	\$ 41,306,116	\$ 27,968,899	\$ 18,701,664	\$ 204,460,193
Q3 2020	\$ 118,379,552	\$ 59,681,973	\$ 26,222,464	\$ 71,735	\$ 204,355,723
Q4 2020	\$ 111,807,287	\$ 73,687,608	\$ 61,649,515	\$ 1,374,660	\$ 248,519,070
Q1 2021	\$ 111,325,661	\$ 49,497,185	\$ 4,766,955	\$ 37,362	\$ 165,627,162
Q2 2021	\$ 131,867,220	\$ 49,224,709	\$ 566,619	\$ 213,967	\$ 181,872,515
Q3 2021	\$ 89,511,334	\$ 25,733,866	\$ 38,516	\$ 779,119	\$ 116,062,835
Q4 2021	\$ 125,581,303	\$ 90,378,328	\$ 112,699	\$ 1,114,644	\$ 217,186,974
Q1 2022	\$ 144,241,915	\$ 12,166,101	\$ 2,958,928	\$ 2,183,828	\$ 161,550,772
Q2 2022	\$ 120,267,520	\$ 735,088	\$ 2,476,393	\$ 4,676,897	\$ 128,155,898
Q3 2022	\$ 105,262,634	\$ 16,617,110	\$ 59,407	\$ 15,171	\$ 121,954,322
Q4 2022	\$ 142,815,499	\$ 62,495,024	\$ 2,403,391	\$ 2,056,097	\$ 209,770,011
Q1 2023	\$ 110,831,299	\$ 7,841,360	\$ 3,067,736	\$ 443,885	\$ 122,184,280
Q2 2023	\$ 149,387,487	\$ 31,299,177	\$ 1,319,945	\$ 346,575	\$ 182,353,184
Q3 2023	\$ 191,389,015	\$ 38,673,162	\$ 743,469	\$ 97,943	\$ 230,903,588
Q4 2023	\$ 181,111,957	\$ 75,730,673	\$ 1,511,954	\$ 20,819	\$ 258,375,403
Q1 2024	\$ 194,081,254	\$ 5,307,661	\$ 33,846,206	\$ 160,417	\$ 233,395,538
Q2 2024	\$ 187,157,359	\$ 89,900,410	\$ 14,514,430	\$ 124,785	\$ 291,696,984
Q3 2024	\$ 197,855,507	\$ 111,681,778	\$ 31,617,580	\$ 6,927,131	\$ 348,081,997
Q4 2024	\$ 196,233,453	\$ 113,669,848	\$ 21,596,967	\$ 120,655	\$ 331,620,923
Q1 2025	\$ 228,060,043	\$ 114,086,982	\$ 232,197	\$ 5,049,085	\$ 347,428,307
Q2 2025	\$ 228,411,592	\$ 129,793,116	\$ 84,178,091	\$ 105,791	\$ 442,488,590
9/7/2025	\$ 192,792,089	\$ 162,242,070	\$ 78,988,421	\$ 446,991	\$ 434,469,572

*0-30 days is increased for an estimated \$80.5M of received but not adjudicated claims
 *Medical claims only-does not include pharmacy, dental, vision or transportation claims
 *The amounts in the table are clean claims

Quality & Patient Safety Metrics



COOK COUNTY
HEALTH

Stroger Op Ex Committee Dashboard

Met or Exceeded Stretch Goal
Met or Exceeding Target, not meeting Stretch
Improvement from Baseline, not meeting Target
At Baseline, not improving from baseline



COOK COUNTY
HEALTH

Op Ex Steering Committee Dashboard for Stroger Hospital

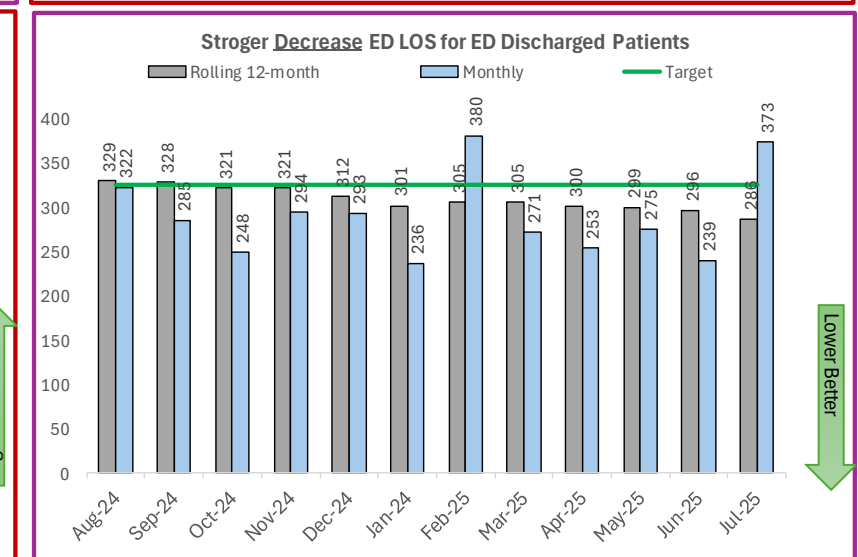
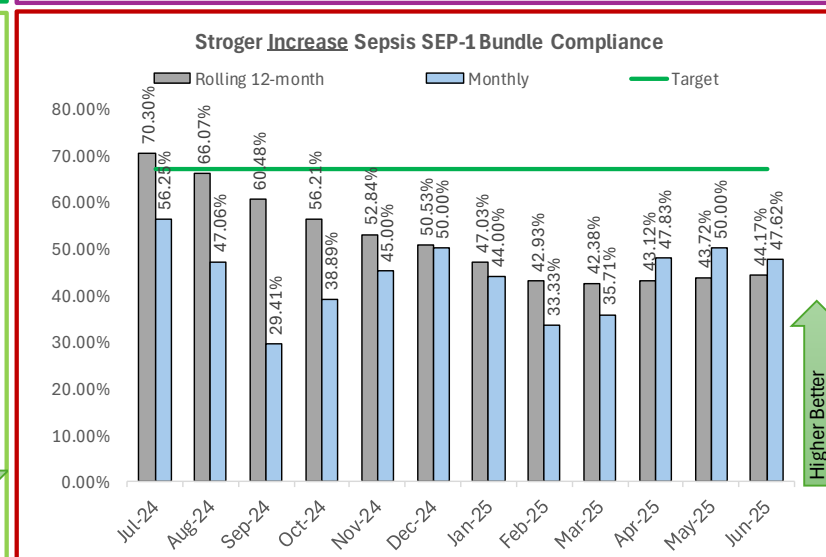
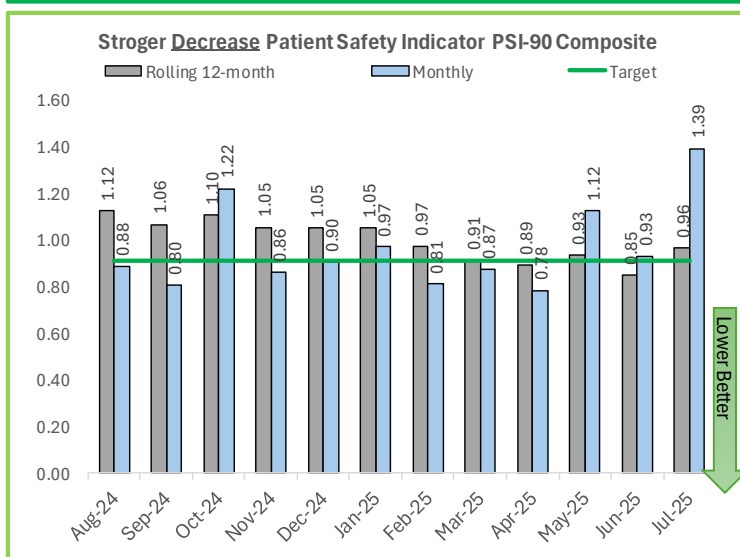
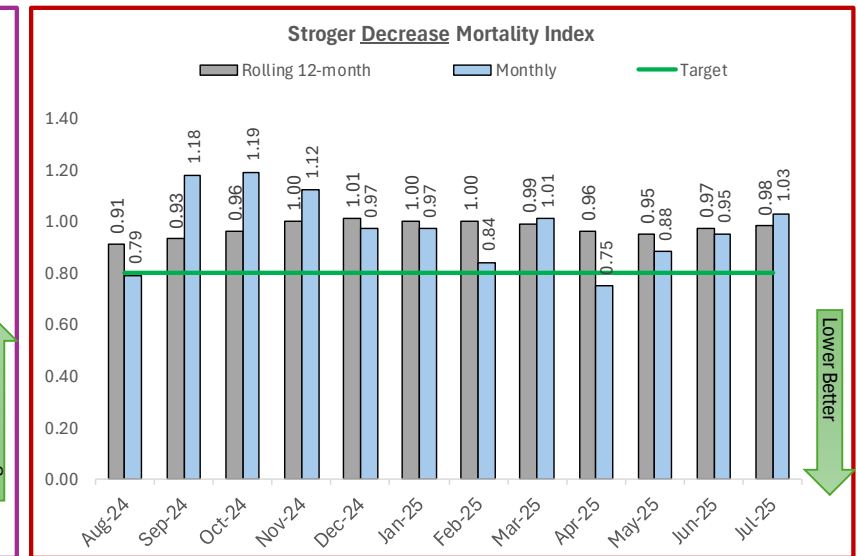
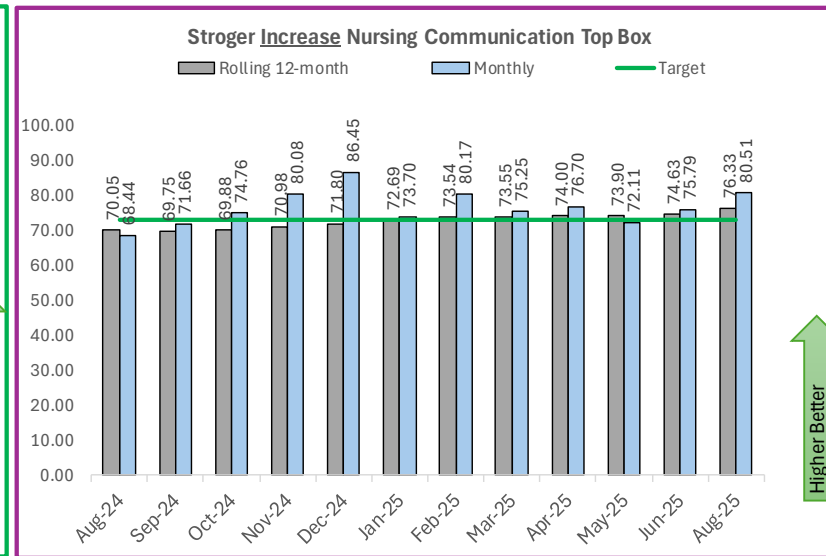
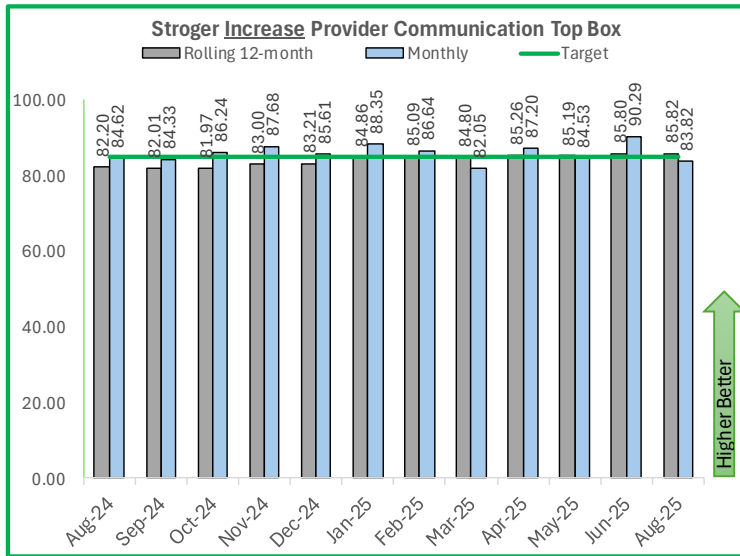


Chart performance monitoring-color based on the most recent rolling 12-month scoring measure results.

Stroger Op Ex Committee Dashboard



COOK COUNTY
HEALTH

Met or Exceeded Stretch Goal
Met or Exceeding Target, not meeting Stretch
Improvement from Baseline, not meeting Target
At Baseline, not improving from baseline

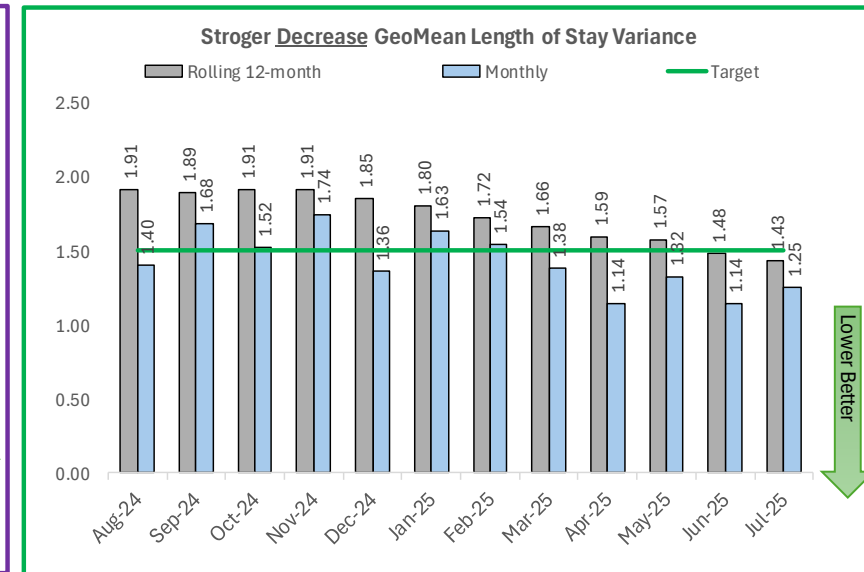
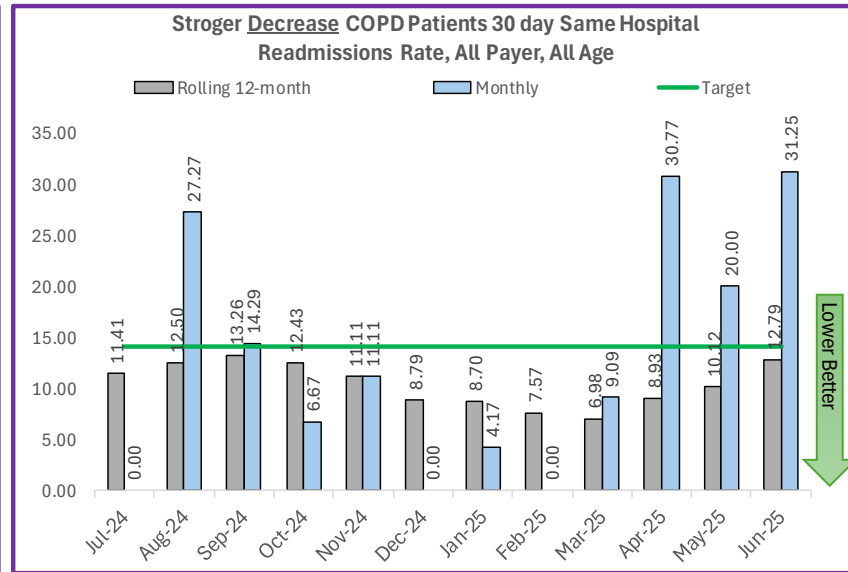
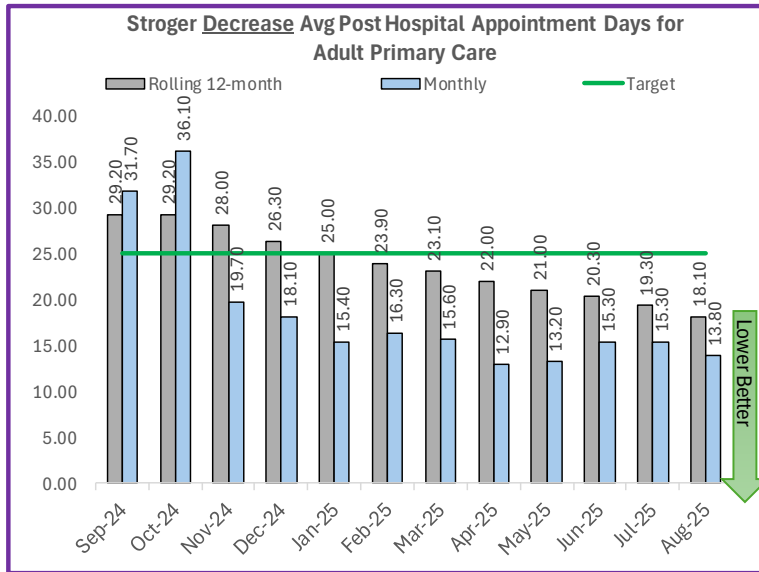


Chart performance monitoring-color based on the most recent rolling 12-month scoring measure results.

Op Ex Steering Committee Dashboard for Stroger Hospital

DOMAIN WORKGROUPS

Metrics

PATIENT EXPERIENCE					Quarterly Improvement Expected														
	Target	Stretch Target	Baseline		Aug-24	Sep-24	Oct-24	Nov-24	Dec-24	Jan-25	Feb-25	Mar-25	Apr-25	May-25	Jun-25	Aug-25	2024	YTD 2025	% in change
Increase Rolling 12-month Top Box Comm w/ Physician Domain	85.00	87.50	82.01	0.75	82.20	82.01	81.97	83.00	83.21	84.86	85.09	84.80	85.26	85.19	85.80	85.82	83.21	85.41	-2.6%
Increase Monthly Top Box Comm w/ Physician Domain					84.62	84.33	86.24	87.68	85.61	88.35	86.64	82.05	87.20	84.53	90.29	83.82			
					Quarterly Improvement Expected														
	Target	Stretch Target	Baseline		Aug-24	Sep-24	Oct-24	Nov-24	Dec-24	Jan-25	Feb-25	Mar-25	Apr-25	May-25	Jun-25	Aug-25	2024	YTD 2025	% in change
Increase Rolling 12-month Top Box Comm w/ Nursing Domain	73.00	75.00	69.75	0.81	70.05	69.75	69.88	70.98	71.80	72.69	73.54	73.55	74.00	73.90	74.63	76.33	71.80	75.66	-5.4%
Increase Monthly Top Box Comm w/ Nursing Domain					68.44	71.66	74.76	80.08	86.45	73.70	80.17	75.25	76.70	72.11	75.79	80.51			
CLINICAL OUTCOMES					Quarterly Improvement Expected														
	Target	Stretch Target	Baseline		Aug-24	Sep-24	Oct-24	Nov-24	Dec-24	Jan-25	Feb-25	Mar-25	Apr-25	May-25	Jun-25	Jul-25	2024	YTD 2025	% in change
Decrease Rolling 12-month Mortality Index	0.80		0.86	-0.02	0.91	0.93	0.96	1.00	1.01	1.00	1.00	0.99	0.96	0.95	0.97	0.98	1.01	0.98	-3.0%
Decrease Monthly Mortality Index					0.79	1.18	1.19	1.12	0.97	0.97	0.84	1.01	0.75	0.88	0.95	1.03			
					Quarterly Improvement Expected														
	Target	Stretch Target	Baseline		Aug-24	Sep-24	Oct-24	Nov-24	Dec-24	Jan-25	Feb-25	Mar-25	Apr-25	May-25	Jun-25	Jul-25	2024	YTD 2025	% in change
Decrease Rolling 12-month Patient Safety Indicator PSI-90 Composite	0.907		1.008	-0.025	1.12	1.06	1.10	1.05	1.05	1.05	0.97	0.91	0.89	0.93	0.85	0.96	1.048	0.997	-4.9%
Decrease Monthly Patient Safety Indicator PSI-90 Composite					0.88	0.80	1.22	0.86	0.90	0.97	0.81	0.87	0.78	1.12	0.93	1.39			
					Quarterly Improvement Expected														
	Target	Stretch Target	Baseline		Jul-24	Aug-24	Sep-24	Oct-24	Nov-24	Dec-24	Jan-25	Feb-25	Mar-25	Apr-25	May-25	Jun-25	2024	YTD 2025	% in change
Increase Rolling 12-month Sepsis SEP-1 Bundle Compliance	67%		56%	2.75%	70.30%	66.07%	60.48%	56.21%	52.84%	50.53%	47.03%	42.93%	42.38%	43.12%	43.72%	44.17%	50.53%	43.85%	-13.2%
Increase Monthly Sepsis SEP-1 Bundle Compliance					56.25%	47.06%	29.41%	38.89%	45.00%	50.00%	44.00%	33.33%	35.71%	47.83%	50.00%	47.62%			

2024	YTD 2025	% in change	Q1-2025	Q2-2025	Q3-2025
83.21	85.41	-2.6%	2.9	3.8	-1.8

2024	YTD 2025	% in change	Q1-2025	Q2-2025	Q3-2025
71.80	75.66	-5.4%	5.7	3.6	3.7

2024	YTD 2025	% in change	Q1-2025	Q2-2025	Q3-2025
1.01	0.98	-3.0%	0.1	0.1	0.2

2024	YTD 2025	% in change	Q1-2025	Q2-2025	Q3-2025
1.048	0.997	-4.9%	-0.24	-0.02	0.46

2024	YTD 2025	% in change	Q1-2025	Q2-2025	Q3-2025
50.53%	43.85%	-13.2%	-20%	-13%	

READMISSIONS					Quarterly Improvement Expected																	
	Target	Stretch Target	Baseline	Improvement Expected	Jul-24	Aug-24	Sep-24	Oct-24	Nov-24	Dec-24	Jan-25	Feb-25	Mar-25	Apr-25	May-25	Jun-25	2024	YTD 2025	% in change	Q1-2025	Q2-2025	Q3-2025
Decrease Rolling 12-month COPD Readmission Rate (all ages, all payers)	14.00	13.00	15.40	-0.35	11.41	12.50	13.26	12.43	11.11	8.79	8.70	7.57	6.98	8.93	10.12	12.79	8.79	16.09	83.0%	-10.4	13.5	
Decrease Monthly COPD Readmission Rate (all ages, all payers)					0.00	27.27	14.29	6.67	11.11	0.00	4.17	0.00	9.09	30.77	20.00	31.25						
					Quarterly Improvement Expected																	
	Target	Stretch Target	Baseline	Improvement Expected	Sep-24	Oct-24	Nov-24	Dec-24	Jan-25	Feb-25	Mar-25	Apr-25	May-25	Jun-25	Jul-25	Aug-25	2024	YTD 2025	% in change	Q1-2025	Q2-2025	Q3-2025
Decrease Rolling 12-month Post Hospital Appointment Days for Adult	25.00	20.00	32.50	-1.88	29.20	29.20	28.00	26.30	25.00	23.90	23.10	22.00	21.00	20.30	19.30	18.10	26.3	15.20	-42.2%	-14.4	-14.7	-12.0
Decrease Monthly Post Hospital Appointment Days for Adult Primary Care					31.70	36.10	19.70	18.10	15.40	16.30	15.60	12.90	13.20	15.30	15.30	13.80						
THROUGHPUT					Quarterly Improvement Expected																	
	Target	Stretch Target	Baseline	Improvement Expected	Aug-24	Sep-24	Oct-24	Nov-24	Dec-24	Jan-25	Feb-25	Mar-25	Apr-25	May-25	Jun-25	Jul-25	2024	YTD 2025	% in change	Q1-2025	Q2-2025	Q3-2025
Decrease Rolling 12-month Geometric Mean Length of Stay (GMLOS)	1.50	1.30	1.87	-0.09	1.91	1.89	1.91	1.91	1.85	1.80	1.72	1.66	1.59	1.57	1.48	1.43	1.85	1.35	-27.0%	-0.3	-0.5	-0.3
Decrease Monthly Hospital Geometric Mean Length of Stay (GMLOS)					1.40	1.68	1.52	1.74	1.36	1.63	1.54	1.38	1.14	1.32	1.14	1.25						
					Quarterly Improvement Expected																	
	Target	Stretch Target	Baseline	Improvement Expected	Aug-24	Sep-24	Oct-24	Nov-24	Dec-24	Jan-24	Feb-25	Mar-25	Apr-25	May-25	Jun-25	Jul-25	2024	YTD 2025	% in change	Q1-2025	Q2-2025	Q3-2025
Decrease Rolling 12-month Median ED LOS for ED Discharged Patients	324	288	360	-9	329	328	321	321	312	301	305	305	300	299	296	286	312	289	-7.4%	-56.0	-87.0	40.0
Decrease Monthly Median ED LOS for ED Discharged Patient					322	285	248	294	293	236	380	271	253	275	239	373						

Provident Op Ex Committee Dashboard

Met or Exceeded Stretch Goal
Met or Exceeding Target, not meeting Stretch
Improvement from Baseline, not meeting Target
At Baseline, not improving from baseline



COOK COUNTY
HEALTH

Op Ex Steering Committee Dashboard for Provident Hospital

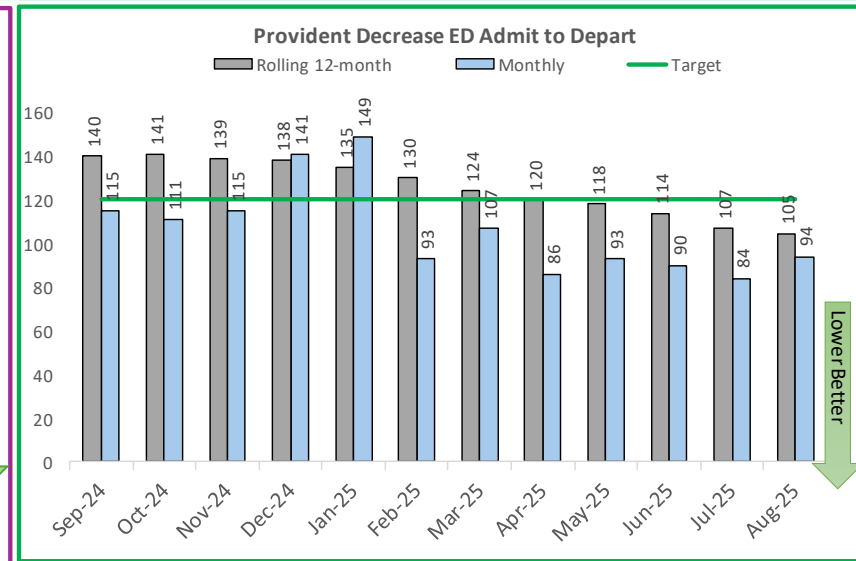
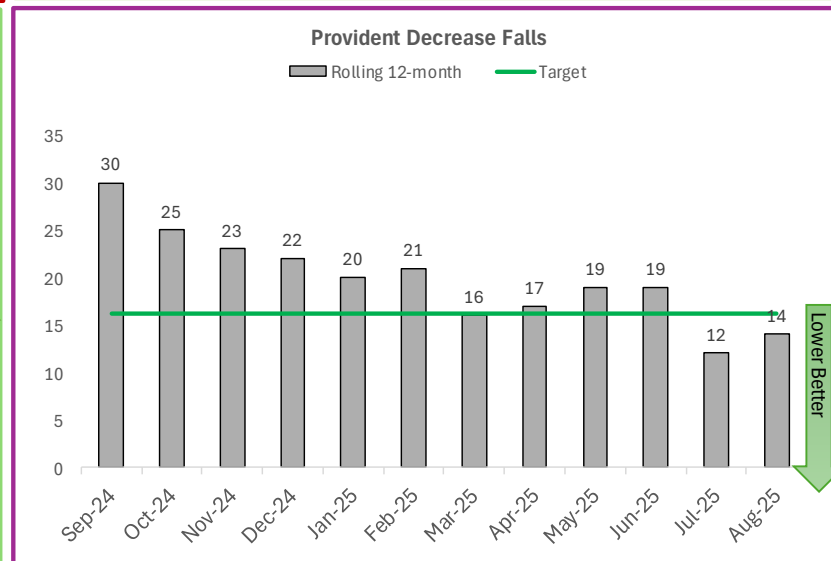
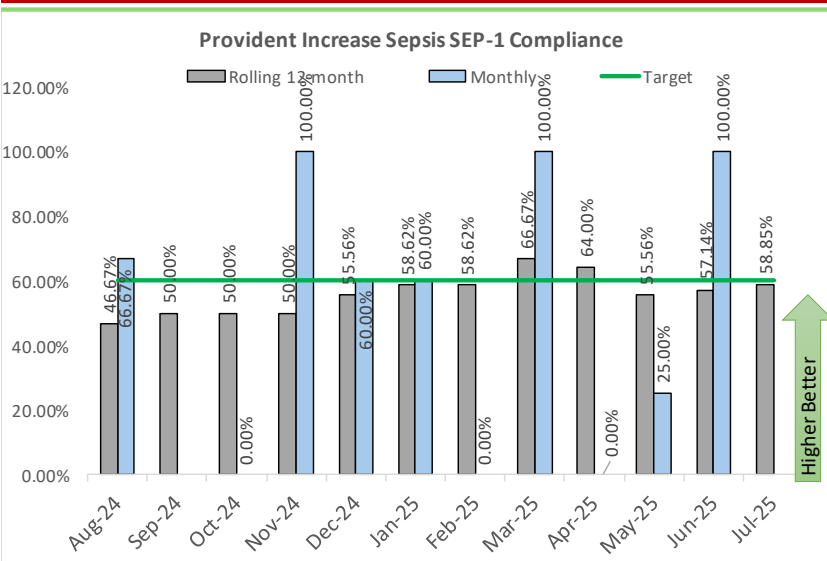
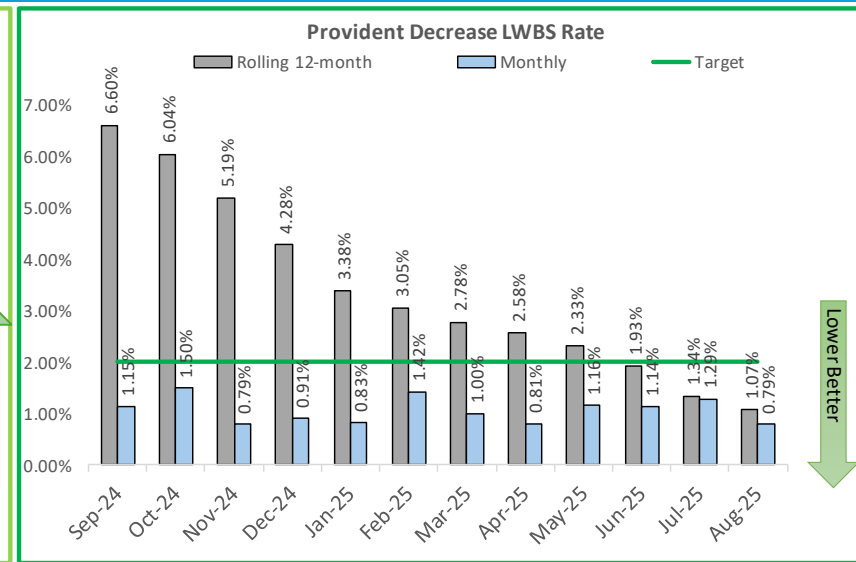
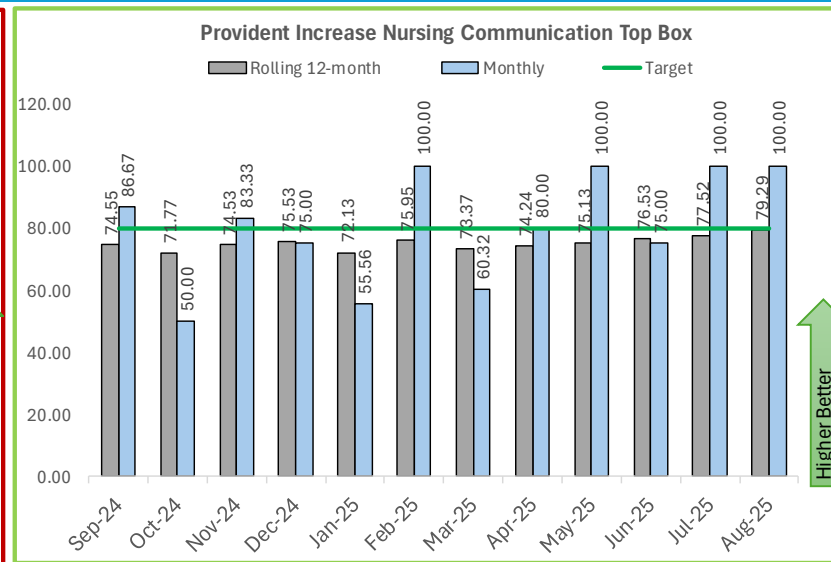
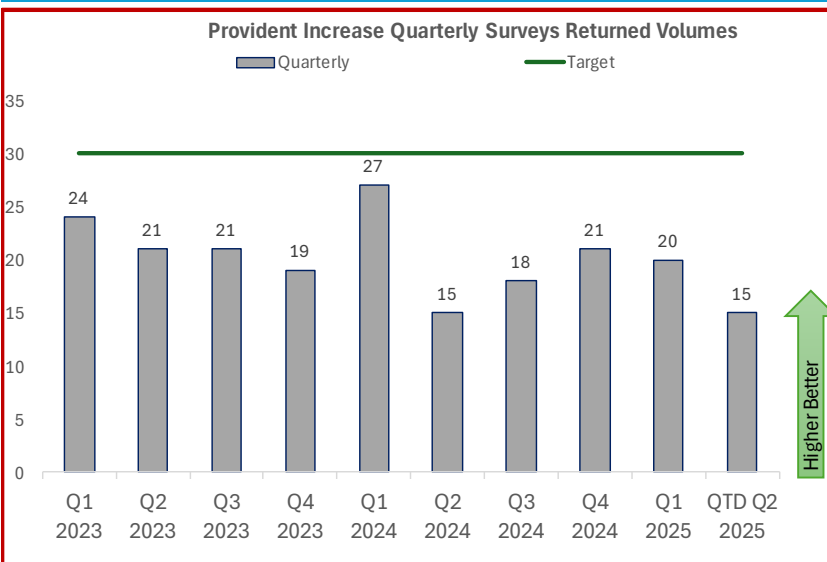


Chart performance monitoring-color based on the most recent rolling 12-month scoring measure results.

Met or Exceeded Stretch Goal
Met or Exceeding Target, not meeting Stretch
Improvement from Baseline, not meeting Target
At Baseline, not improving from baseline



**COOK COUNTY
HEALTH**

DOMAIN WORKGROUPS	Metrics
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PATIENT EXPERIENCE	Stretch			Quarterly Improvement	Q1 2023	Q2 2023	Q3 2023	Q4 2023	Q1 2024	Q2 2024	Q3 2024	Q4 2024	Q1 2025	QTD Q2 2025	QTD Q3 2025	QTD Q4 2025
	Target	Target	Baseline	Expected												
Increase Qtrly Survey Return Volumes	30	35	19	3	24	21	21	19	27	15	18	21	20	15		
Data lagging updated often																
	Target	Stretch Target	Baseline	Quarterly Improvement Expected	Sep-24	Oct-24	Nov-24	Dec-24	Jan-25	Feb-25	Mar-25	Apr-25	May-25	Jun-25	Jul-25	Aug-25
Increase Rolling 12-month Top Box Comm w/ Nursing Domain	80.00	83.00	74.55	0.613	74.55	71.77	74.53	75.53	72.13	75.95	73.37	74.24	75.13	76.53	77.52	79.29
Increase Monthly Top Box Comm w/ Nursing Domain					86.67	50.00	83.33	75.00	55.56	100.00	60.32	80.00	100.00	75.00	100.00	100.00
CLINICAL OUTCOMES	Target	Stretch Target	Baseline	Quarterly Improvement Expected	Aug-24	Sep-24	Oct-24	Nov-24	Dec-24	Jan-25	Feb-25	Mar-25	Apr-25	May-25	Jun-25	Jul-25
Increase Rolling 12-month Increase Sepsis SEP-1 Compliance	60%	65%	47%	3.33%	46.67%	50.00%	50.00%	50.00%	55.56%	58.62%	58.62%	66.67%	64.00%	55.56%	57.14%	58.85%
Increase Monthly Increase Sepsis SEP-1 Compliance					66.67%	no data	0.00%	100.00%	60.00%	60.00%	0.00%	100.00%	0.00%	25.00%	100.00%	no data
	Target	Stretch Target	Baseline	Quarterly Improvement Expected	Sep-24	Oct-24	Nov-24	Dec-24	Jan-25	Feb-25	Mar-25	Apr-25	May-25	Jun-25	Jul-25	Aug-25
Decrease Rolling 12-month Inpatient Falls	16	15	18	-0.45	30	25	23	22	20	21	16	17	19	19	12	14
Decrease Monthly Inpatient Falls					0	2	1	0	0	2	1	2	2	2	0	2
THROUGHPUT	Target	Stretch Target	Baseline	Quarterly Improvement Expected	Sep-24	Oct-24	Nov-24	Dec-24	Jan-25	Feb-25	Mar-25	Apr-25	May-25	Jun-25	Jul-25	Aug-25
Decrease Rolling 12-month Median ED Admit Decision to Depart ED	120.00	100.00	139.00	-4.75	140	141	139	138	135	130	124	120	118	114	107	105
Decrease Monthly Median ED Admit Decision to Depart ED					115	111	115	141	149	93	107	86	93	90	84	94
	Target	Stretch Target	Baseline	Quarterly Improvement Expected	Sep-24	Oct-24	Nov-24	Dec-24	Jan-25	Feb-25	Mar-25	Apr-25	May-25	Jun-25	Jul-25	Aug-25
Decrease Rolling 12-month LWBS Rate	2.0%	1.0%	4.3%	-0.6%	6.60%	6.04%	5.19%	4.28%	3.38%	3.05%	2.78%	2.58%	2.33%	1.93%	1.34%	1.07%
Decrease Monthly Decrease LWBS Rate					1.15%	1.50%	0.79%	0.91%	0.83%	1.42%	1.00%	0.81%	1.16%	1.14%	1.29%	0.79%

2024	Linear Trend 2025	% in change	Q1- 2025	Q2- 2025	Q3- 2025
77	70	-0.1	-1.9	-9.6	

2024	YTD 2025	% in change	Q1-2025	Q2-2025	Q3-2025
75.53	83.05	10.0%	-0.6	7.6	23.6

2024	YTD 2025	% in change	Q1-2025	Q2-2025	Q3-2025
55.56%	42.86%	-22.9%	0.0%	-13.3%	

2024	Linear YTD 2025	% in change	Q1- 2025	Q2- 2025	Q3- 2025
22	11	-50.0%	-1.6	1.9	-2.7

2024	YTD 2025	% in change	Q1-2025	Q2-2025	Q3-2025
138	98	-29.0%	-18.3	-41.0	-38.8

2024	YTD 2025	% in change	Q1-2025	Q2-2025	Q3-2025
4.28%	1.06%	-75.2%	-2.63%	-2.11%	-1.55%

ACHN Op Ex Committee Dashboard

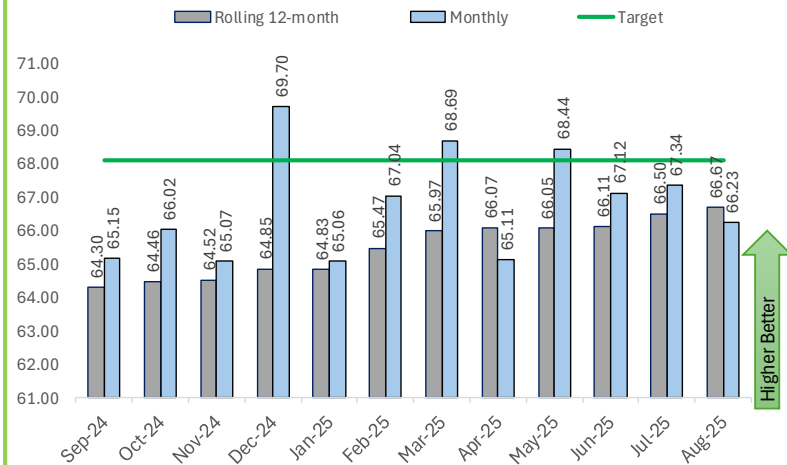


COOK COUNTY
HEALTH

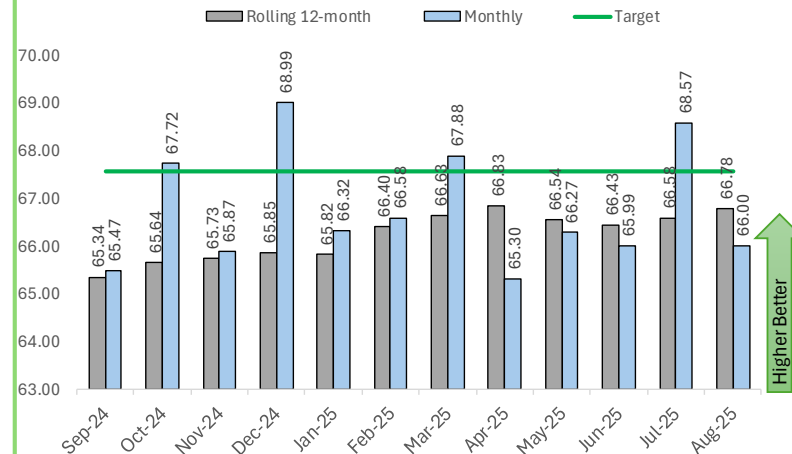
Met or Exceeded Stretch Goal
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Op Ex Steering Committee Dashboard for ACHN

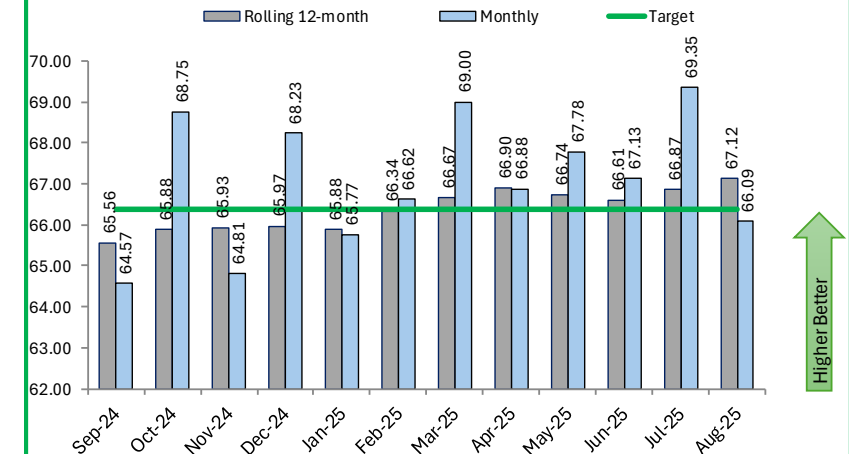
ACHN Amb Services Increase Staff worked together for you



ACHN Amb Services Increase Top Box Care Provider Addressing Concerns/Worries



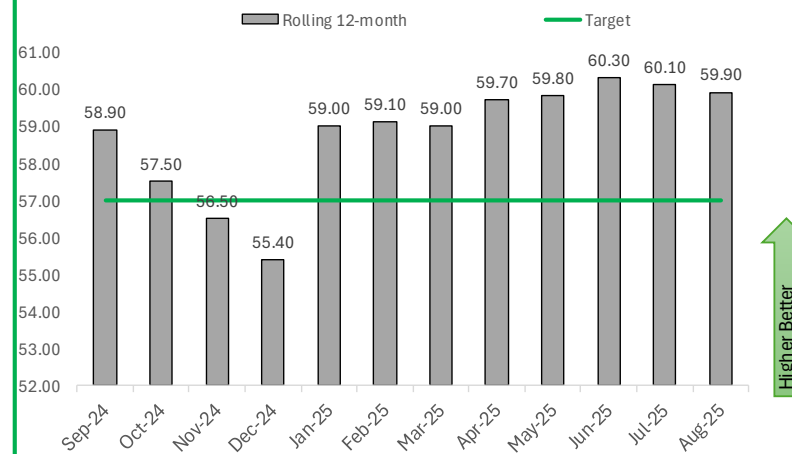
ACHN Amb Services Increase Top Box Care Provider Explains Prob/Condition



ACHN Amb Services Increase Breast Cancer Screening Rates



ACHN Amb Services Increase Hypertension Management Blood Pressure <140-90



ACHN Amb Services Increase Empanelment

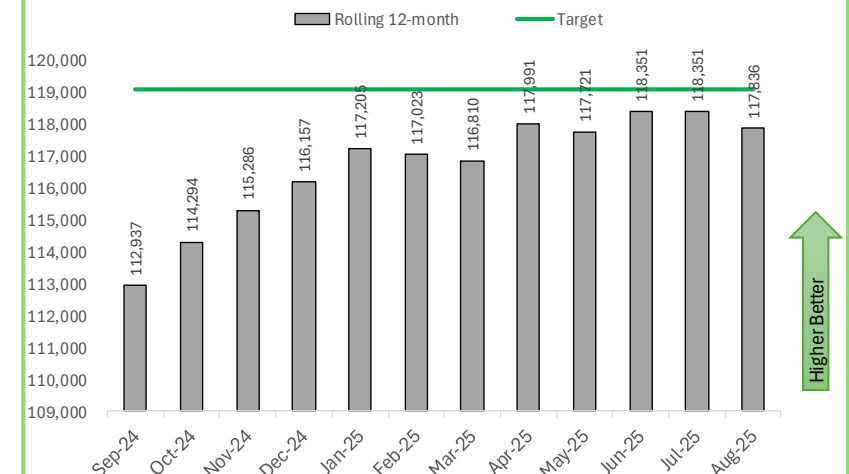


Chart performance monitoring-color based on the most recent rolling 12-month scoring measure type

Op Ex Steering Committee Dashboard for ACHN

DOMAIN WORKGROUPS				Metrics																					
PATIENT EXPERIENCE TOP BOX SCORING				Quarterly Improvement				Sep-24	Oct-24	Nov-24	Dec-24	Jan-25	Feb-25	Mar-25	Apr-25	May-25	Jun-25	Jul-25	Aug-25	2024	YTD 2025	% in change	Q1-2025	Q2-2025	Q3-2025
				Target	Stretch Target	Baseline	Expected																		
Increase Rolling 12-month Top Box - Staff worked together for you				68.08	69.78	65.66	0.61	64.30	64.46	64.52	64.85	64.83	65.47	65.97	66.07	66.05	66.11	66.50	66.67	64.85	66.79	3.0%	0.7	-0.2	-0.8
Increase Monthly Staff worked together for you								65.15	66.02	65.07	69.70	65.06	67.04	68.69	65.11	68.44	67.12	67.34	66.23						
				Quarterly Improvement				Sep-24	Oct-24	Nov-24	Dec-24	Jan-25	Feb-25	Mar-25	Apr-25	May-25	Jun-25	Jul-25	Aug-25	2024	YTD 2025	% in change	Q1-2025	Q2-2025	Q3-2025
				Target	Stretch Target	Baseline	Expected																		
Increase Rolling 12-month Top Box - Care Provider Addr.				67.54	69.13	65.62	0.48	65.34	65.64	65.73	65.85	65.82	66.40	66.63	66.83	66.54	66.43	66.58	66.78	65.85	66.72	1.3%	0.9	-0.8	0.4
Increase Monthly Care Provider Addressing Concerns/Worries								65.47	67.72	65.87	68.99	66.32	66.58	67.88	65.30	66.27	65.99	68.57	66.00						
				Quarterly Improvement				Sep-24	Oct-24	Nov-24	Dec-24	Jan-25	Feb-25	Mar-25	Apr-25	May-25	Jun-25	Jul-25	Aug-25	2024	YTD 2025	% in change	Q1-2025	Q2-2025	Q3-2025
				Target	Stretch Target	Baseline	Expected																		
Increase Rolling 12-month Top Box - Care Provider Explains				66.39	68.36	64.47	0.48	65.56	65.88	65.93	65.97	65.88	66.34	66.67	66.90	66.74	66.61	66.87	67.12	65.97	67.44	2.2%	2.2	1.8	2.0
Increase Monthly Care Provider Explains Prob/Condition								64.57	68.75	64.81	68.23	65.77	66.62	69.00	66.88	67.78	67.13	69.35	66.09						
HEDIS				Quarterly Improvement				Sep-24	Oct-24	Nov-24	Dec-24	Jan-25	Feb-25	Mar-25	Apr-25	May-25	Jun-25	Jul-25	Aug-25	2024	YTD 2025	% in change	Q1-2025	Q2-2025	Q3-2025
				Target	Stretch Target	Baseline	Expected																		
Increase Rolling 12-month Breast Cancer Screening Rate				55.00	58.40	53.30	0.43	54.40	53.90	53.30	53.90	60.90	61.10	60.90	61.60	62.00	62.30	62.30	62.50	50.50	57.50	13.9%	6.1	6.5	7.2
				Quarterly Improvement				Sep-24	Oct-24	Nov-24	Dec-24	Jan-25	Feb-25	Mar-25	Apr-25	May-25	Jun-25	Jul-25	Aug-25	2024	YTD 2025	% in change	Q1-2025	Q2-2025	Q3-2025
				Target	Stretch Target	Baseline	Expected																		
Increase Rolling 12-month Hypertension Management Blood Pressure Rate <140/90 for patients				57.00	61.00	55.00	1.58	58.90	57.50	56.50	55.40	59.00	59.10	59.00	59.70	59.80	60.30	60.10	59.90	52.80	54.80	3.8%	0.6	-0.1	-0.7
Empanelment				Quarterly Improvement				Sep-24	Oct-24	Nov-24	Dec-24	Jan-25	Feb-25	Mar-25	Apr-25	May-25	Jun-25	Jul-25	Aug-25	2024	YTD 2025	% in change	Q1-2025	Q2-2025	Q3-2025
				Target	Stretch Target	Baseline	Expected																		
Increase Empanelment of Engaged / Affiliated Patients				119,061	121,965	116,157	1,452	112,937	114,294	115,286	116,157	117,205	117,023	116,810	117,991	117,721	118,351	118,351	117,836	116,157	117,836	1.4%	-757.0	-1224.9	
																							117609	119061	120513