

Minutes of the Special Meeting of the Finance Committee of the Cook County Health (CCH) Board of Directors, held for the purpose of introducing the proposed CCH FY2026 Preliminary Budget on Tuesday, August 5, 2025 at the hour of 10:00 A.M. and holding public hearings on Monday, August 11, 2025 at the hour of 6:00 P.M. and Wednesday, August 13, 2025 at 1:00 P.M. The meeting and hearings were held at 1950 West Polk Street, Room 5301, in Chicago, Illinois.

I. Attendance/Call to Order

Acting Chair Lowry called the meeting to order.

Members Present: Acting Chair Commissioner Bill Lowry and Directors Joseph M. Harrington and Sam A Robinson, III, PhD (3)

Remotely Present: Director Maya Green, MD, MPH, FACHE (1)

Also Present: Board Chair Raul Garza and Directors Tanya R. Sorrell, PhD, PMHNP-BC (remote)

Absent: Chair Robert G. Reiter, Jr. (1)

Additional attendees and/or presenters were:

Ellie Bane – Chief Legal Officer
Pamela Cassara - Chief Financial Officer
Joseph Franzwa – Budget Director
Erik Mikaitis, MD – Chief Executive Officer
Alisha Patel – Assistant General Counsel
Deborah Santana – Secretary to the Board
Scott Spencer – Associate Chief Financial Officer

II. Public Speaker Testimony

There were no public speakers who provided testimony on August 5, 2025.

III. Introduction and review of proposed CCH FY2026 Preliminary Budget

Dr. Erik Mikaitis, Chief Executive Officer, provided introductory comments regarding the proposed CCH FY2026 Preliminary Budget (Attachment #1).

The following individuals reviewed the presentation on the proposed CCH FY2026 Preliminary Budget (Attachment #2): Pamela Cassara, Chief Financial Officer; Scott Spencer, Associate Chief Financial Officer; and Joseph Franzwa, Budget Director. The Directors reviewed and discussed the information.

Acting Chair Lowry recessed the meeting to Monday, August 11, 2025 at 6:00 P.M.

IV. August 11, 2025 Public Hearing – 6:00 P.M.

Attendees

Chair Reiter called the reconvened meeting to order.

Present: Chair Robert G. Reiter, Jr. and Directors Joseph M. Harrington and Sage J. Kim, PhD

Remotely Present: Director Commissioner Bill Lowry and Gina Massuda Barnett, MPH

Additional attendees and/or presenters were:

Ellie Bane – Chief Legal Officer
Joseph Franzwa – Budget Director
Erik Mikaitis, MD – Chief Executive Officer
Deborah Santana – Secretary to the Board
Scott Spencer – Associate Chief Financial Officer

A. Review proposed CCH FY2026 Preliminary Budget

Note: review of the presentation took place after public testimony was received. The following individuals reviewed the presentation (Attachment #2): Scott Spencer, Associate Chief Financial Officer; and Joseph Franzwa, Budget Director.

B. Receive Public Speaker Testimony

The following individuals provided testimony on August 11, 2025:

	Organization	Name	Title	Type of testimony
1	Enlace Chicago	Sahida Martinez		In Person
2	Cook County 7th District	Alexa Rosales	Intern for Commissioner Anaya	In Person
3	AFSCME Council 31	Anne Irving		In Person
4	National Kidney Foundation of Illinois	Monica Fox	Vice President of Government Relations and External Affairs	In Person
5	La Rabida Children's Hospital	Dr. Natasha Bhayani	Complex Primary Care, Premier Kids, and Adolescent Outpatient Physician	In Person
6	Greater Chicago Food Depository	Beth Kenefick	Senior Policy Advisor	In Person
7	Lawndale Christian Health Center	Chris Dons	CFO	In Person
8	Collaborative for Health Equity Cook County	Susan Avila		In person
9	Follow Up Caseworker Team/All Caseworkers	Paula Hollingsworth	Caseworker	In person
10		Coretta Boykins	Caseworker	In person
		Dr. Kenneth Soyemi		Written
	Big Brothers Big Sisters of Metro Chicago	Jeremy Foster	President & CEO	Written
	Center for Housing & Health	Dominique Chew	Housing Policy & Advocacy Manager	Written

Written Testimony received for the August 11, 2025 Public Hearing is included as Attachment #3.

Chair Reiter recessed the meeting to Wednesday, August 13, 2025 at 1:00 P.M.

V. August 13, 2025 Public Hearing – 1:00 P.M.

Attendees

Chair Reiter called the reconvened meeting to order.

Present: Chair Robert G. Reiter, Jr., Board Chair Raul Garza and Directors Jay Bhatt, DO, MPH and Gina Massuda Barnett, MPH

Remotely Present: Directors Commissioner Bill Lowry; Tanya R. Sorrell, PhD, PMHNP-BC; and Mia Webster Cross, MSN, RN

Additional attendees and/or presenters were:

Ellie Bane – Chief Legal Officer
Joseph Franzwa – Budget Director
Erik Mikaitis, MD – Chief Executive Officer
Alisha Patel – Assistant General Counsel
Deborah Santana – Secretary to the Board
Scott Spencer – Associate Chief Financial Officer

A. Review proposed CCH FY2026 Preliminary Budget

Note: review of the presentation took place after public testimony was received. The following individuals reviewed the presentation (Attachment #2): Scott Spencer, Associate Chief Financial Officer; and Joseph Franzwa, Budget Director.

B. Receive Public Speaker Testimony

The following individuals provided testimony on August 13, 2025:

	Organization	Name	Title	Topic	Type of testimony
1	Center of Concern	Kristy Garceau	Director of Advancement and Outreach	CCDPH's programs.	In Person
2	YWCA Metropolitan Chicago	Debra Perry		BH's Stronger Together Initiative.	In Person
3	Trilogy Inc.	Sarah Fletcher	Chief Clinical Officer	BH's Stronger Together Initiative.	In Person
4	Erie Family Health Centers	Dalia Morales	Associate Director of Strategy & Government Relations	CountyCare partnership and redetermination.	In Person
5	AHS Family Health Center	Muhammad Paracha, MD	CEO	CountyCare partnership and redetermination.	In Person
		Rev. Terry Weston			Written

Written Testimony received for the August 13, 2025 Public Hearing is included as Attachment #4.

VI. Adjourn

Chair Reiter noted that the Finance Committee will review and consider the proposed CCH FY2026 Preliminary Budget at its next regular meeting on Friday, August 15, 2025 at 10:00 A.M.

As the agenda was exhausted, Chair Reiter declared the meeting ADJOURNED.

Respectfully submitted,
Finance Committee of the
Board of Directors of the
Cook County Health and Hospitals System

XXXXXXXXXXXXXXXXXXXXXXXXXXXX
Robert G. Reiter, Jr., Chair

Attest:

XXXXXXXXXXXXXXXXXXXXXXXXXXXX
Deborah Santana, Secretary

Schedule for CCH Proposed FY2026 Preliminary Budget:

8/5/25 at 10:00 A.M.	Special Finance Committee Meeting	Preliminary Budget Introduction
8/11/25 at 6:00 P.M.	Special Finance –Public Hearing	Receive Testimony
8/13/25 at 1:00 P.M.	Special Finance –Public Hearing	Receive Testimony
8/15/25 at 10:00 A.M.	Regular Finance Committee Meeting	Consideration/Recommend Approval
8/22/25 at 9:00 A.M.	Board Meeting	Consideration

Cook County Health and Hospitals System
Minutes of the Special Finance Committee Meeting
Convened August 5, 2025, recessed and reconvened
on August 11, 2025 and August 13, 2025

ATTACHMENT #1



CCH FY2026 Proposed Budget Introduction

August 5, 2025

Remarks as prepared

Dr. Erik Mikaitis

Today, we are presenting the Board with Cook County Health's proposed Fiscal Year 2026 budget. To say that the upcoming year presented a budgeting challenge is an understatement.

As you know, we are already feeling the impacts of reduced reimbursements related to the sunset of the health coverage program for immigrant adult. Looming large are the planned federal cuts to Medicaid and other social service programs that are expected to take effect in 2027.

This budget demonstrates our efforts to prepare ourselves for upholding our mission in a time with fewer resources and greater need. Our budget planning was centered not just on our bottom line, but on preserving and reinforcing the key services on which our patients, members and communities rely.

During this fiscal year, the team rallied together to identify cost-saving opportunities: meeting our goal to reduce expenses by 10%, including a temporary hiring freeze for select positions. These efforts, although difficult, will carry over into 2026.

At the same time, we have also made important progress in reducing our agency utilization. Cook County Health is committed to our labor workforce and collaborating with our union partners. We have reduced agency FTE positions by more than 400 since last fall and now are under 1,000 agency workers, further reducing costs. More than 230 agency staff members have accepted offers of employment with the health system. While our work is far from over, we will continue to build on this positive momentum.

As we step into the coming year, we are prepared to meet the challenges that 2026 will inevitably bring, and prepared to reinforce our foundation for the even larger storms on the horizon.

Despite these threats, we are not without hope.

This hope is grounded in the work our team is doing to transform Cook County Health into a more nimble and modern organization. We are approaching our work with both vision and urgency. We see an opportunity to build a more equitable, more efficient, and more compassionate health system, not just for today, but for generations to come.

In the coming year, we will continue enhancing care quality and improving patient and member satisfaction, while building on recent progress in employee recruitment and retention. We are also preparing for continued, sustainable growth in public health and sponsored programs.



CCH FY2026 Proposed Budget Introduction

August 5, 2025

Remarks as prepared

Dr. Erik Mikaitis

We are embracing technology to modernize care delivery, strengthening our revenue cycle operations to ensure financial sustainability, and entering into more value-based and risk-based agreements to drive both quality and revenue.

There is no doubt Cook County Health's work as a provider of care, steward of public health, and health plan will only be more essential in the coming years. As I continue to say: we will do as much as we can for as long as we can.

We are pushing ahead with the unwavering commitment that has always defined Cook County Health- to protect the health, dignity and well-being of every person who walks through our doors, regardless of their ability to pay or immigration status.

Before I turn it over to Pam, I would like to extend my gratitude to this Board for your leadership and guidance, and to President Preckwinkle and the County Board for their support. I would also like to thank Chief Financial Officer Pam Cassara, Associate Chief Financial Officer Scott Spencer, Budget Director Joe Franzwa, and the entire finance department for preparing this budget in a time of great uncertainty.

Of course, this work would not be possible without our entire Cook County Health team and their exceptional contributions to the health system on behalf of the patients, members and residents we serve. Thank you.

Cook County Health and Hospitals System
Minutes of the Special Finance Committee Meeting
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ATTACHMENT #2

FY2026 Proposed Budget

Erik Mikaitis, CEO

Pamela Cassara, CFO

July 2025



**COOK COUNTY
HEALTH**

Agenda



01



**FY25
Accomplishments
& FY26 Key
Initiatives**

02



**Historical
Trends**

03



**FY2026 Budget
Health Fund**

04



**Special Purpose
Funds**

05



Appendix



**COOK COUNTY
HEALTH**

2025 Accomplishments



- CountyCare earned NCQA re-accreditation
- Provident achieved “Top General Hospital” designation from Leapfrog
- **Converted close to 200 agency positions to fill vacancies**
- **New Bronzeville Health Center opened**
- **Opened Clinical Triage and Stabilization Center at Provident Hospital**
- CCH earned the Equity Certification from The Joint Commission
- Established food pantries at Belmont Cragin and Provident
- Launched expansion of care coordination for all CCH patients
- Successful Primary Stroke Center recertification by the Joint Commission
- **Opened dental services at North Riverside**
- **Executed agreement with Loyola Health System to expand CountyCare network and add 700 new providers**
- Cermak's Outpatient Treatment Program was highlighted in the National Commission on Correctional Health Care's guidance on substance use disorder treatment
- The Illinois Department of Juvenile Justice reported Juvenile Temporary Detention Center medical services exceeded standards
- **Launched Birthday Health Screenings to promote streamlined access to low/no cost mammograms and prostate cancer screenings**
- CCDPH co-hosted 20th annual Chicago Food Justice Summit
- Finalized & adopted Nursing Professional Governance Model
- **Added a new primary care slot utilization metric to value-based care measures**
- **Improved IT service ticket management system**
- CCH won two national awards for Total Health Talks, a consumer podcast
- Received 19 National Association of Counties awards across many categories
- Conducted staff training on immigration enforcement activities and promoted welcoming messages and distributed “Know Your Rights” information to patients
- Held five behavioral health strategic plan community forums with more than 500 attendees
- Family Medicine Department added more support and access to same-day treatment for Medication Assisted Treatment for substance use disorder care
- CCDPH developing Community Health Worker pipeline with Bremen High School District
- **Increased the number of CountyCare members filling their prescriptions with CCH pharmacy**
- Stroger Hospital team recognized by The Chicago Health Executives Forum for initiatives that improved throughput, reduced turnaround time and increased patient satisfaction



2026 Key Initiatives



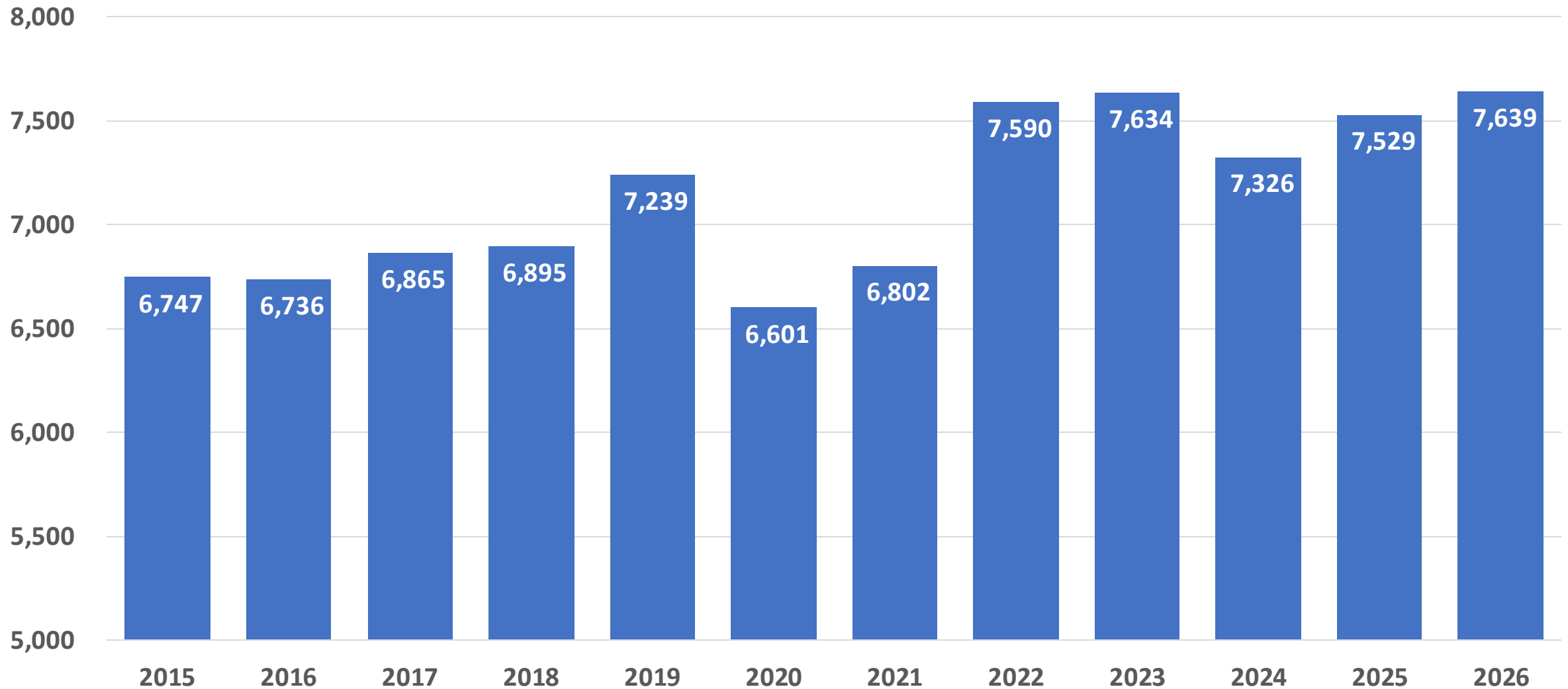
- Continue to improve quality ratings and metrics
- Increase patient and member satisfaction scores
- Make progress in achieving American Nurses Credentialing Center Pathways to Excellence Accreditation
- Ensure access to care is maintained/improved
- Achieve the NCQA Health Equity Accreditation for CountyCare
- Make progress in reducing the vacancy rate and reduce agency utilization
- Continue successful retention programs to maintain low turnover
- Implement pathway programs to help build a future CCH workforce
- Implement performance and process improvement initiatives throughout the organization. (e.g. hiring, procurement, surgical optimization, throughput improvements, etc.)
- Make continue progress aligning productivity and operational metrics with national benchmarks
- Continue the development of a plan for future growth for CCDPH
- Continue to scale the Office of Life Sciences to support growth in research and sponsored programs
- Leverage emerging technologies and continue to improve electronic medical records
- Maximize ARPA expenditures and sustainability plans
- Enter into additional value-based care contracts to drive higher quality outcomes and to yield positive financial impact.
- Improve and maintain a positive operating margin through denial reduction, increased claims submissions, note closures and improved billing technology
- Progress towards Healthcare Financial Management Association MAP awards through Key Performance Indicator Improvement



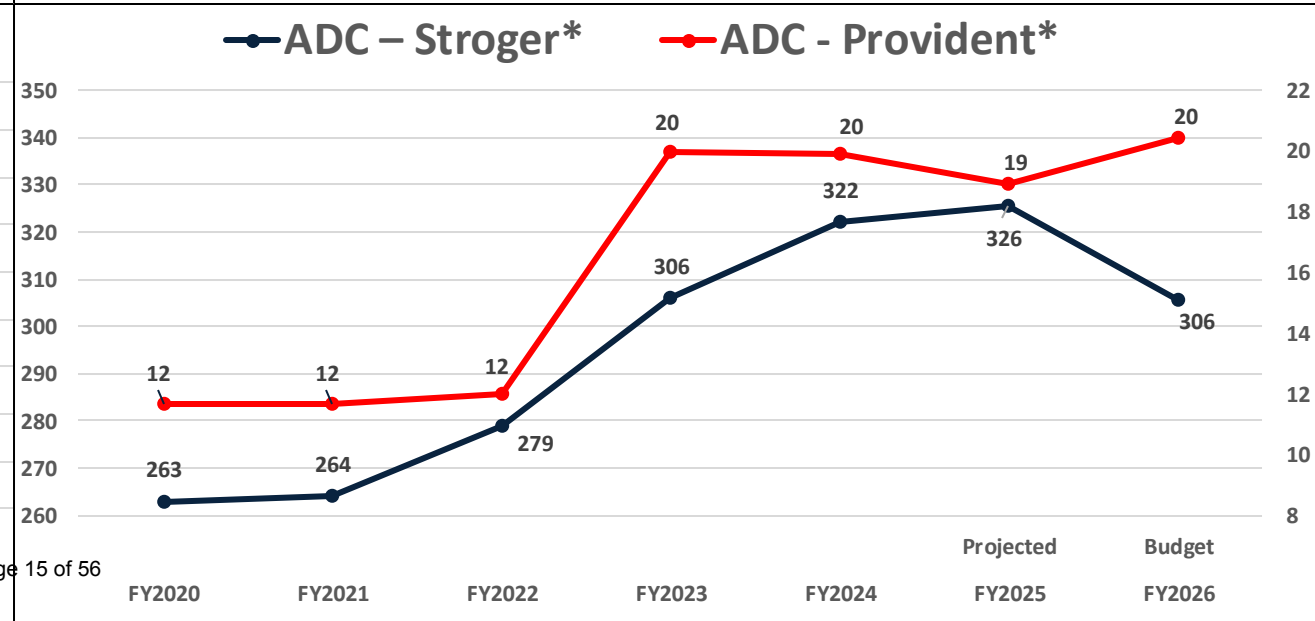
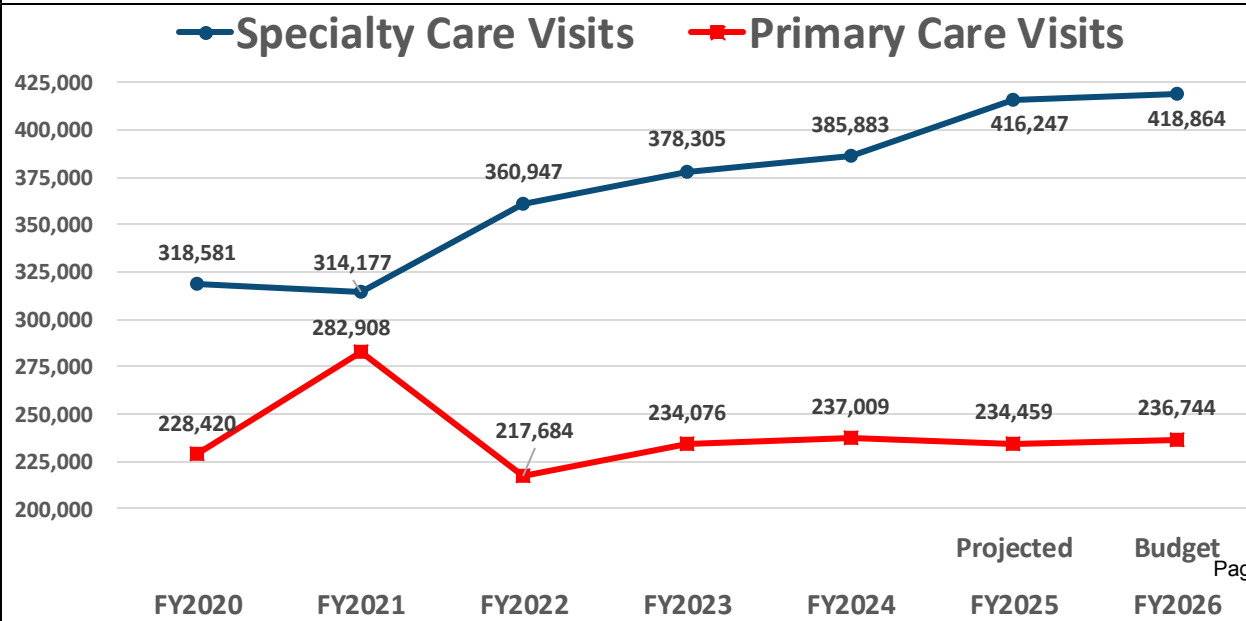
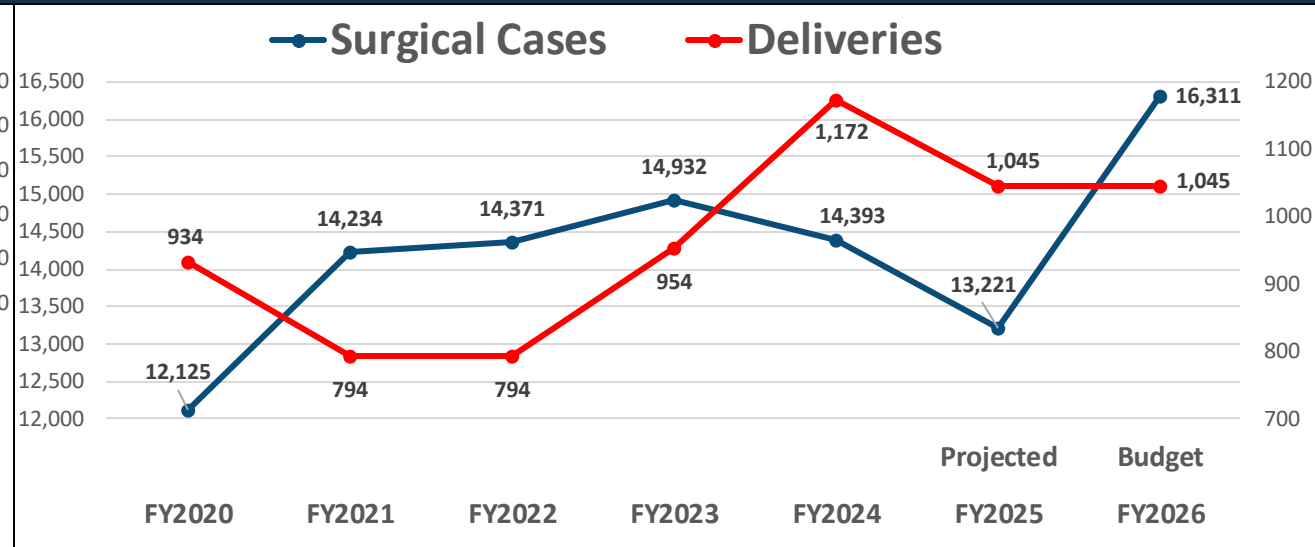
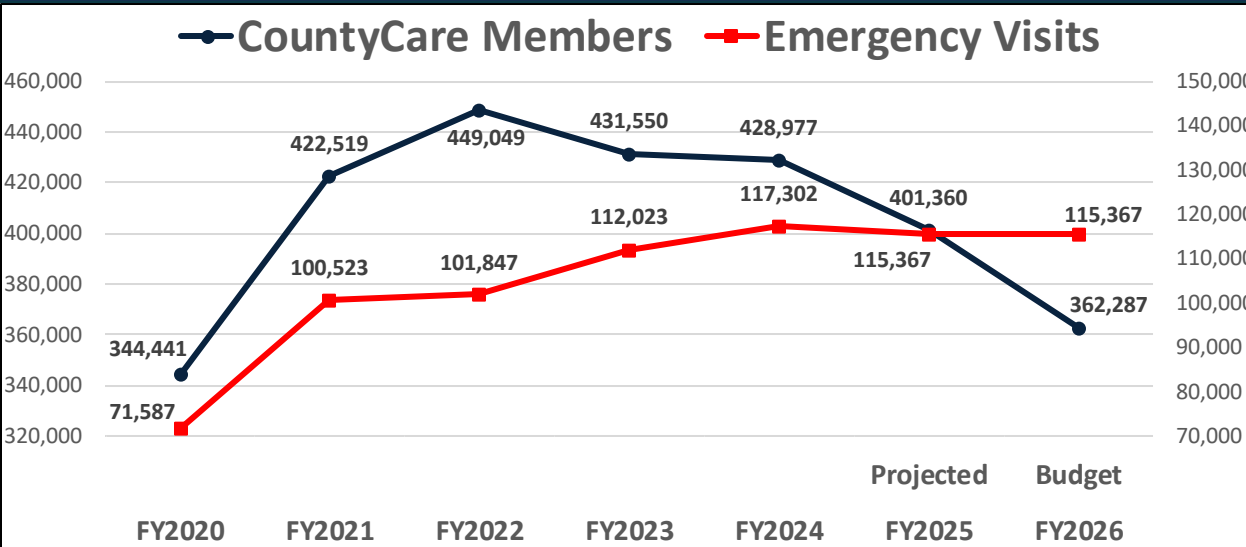
Historical Trends



CCH FTE Trend



CCH Volume Trend



Federal & State Funding Cuts

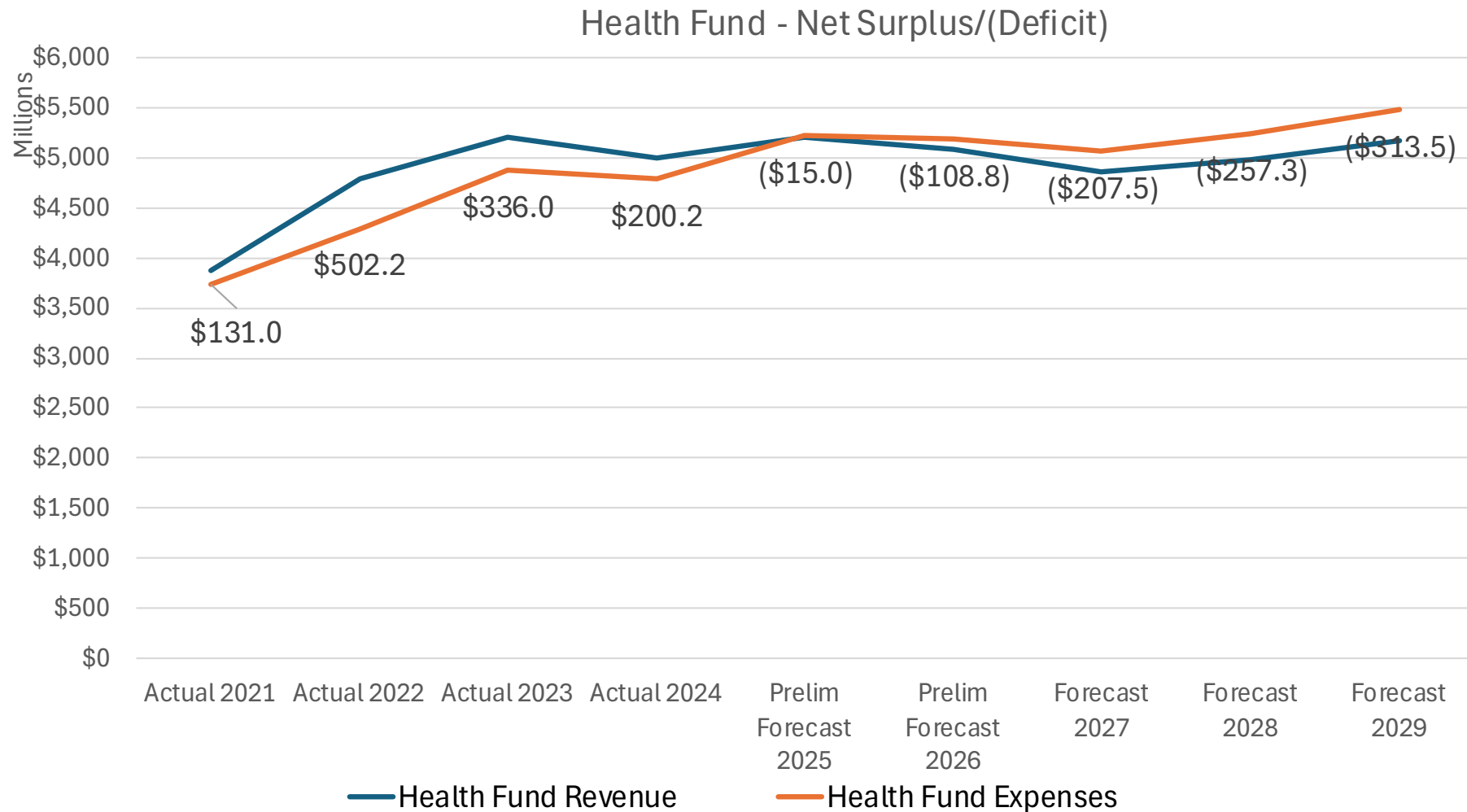
**Estimated
Impact:**

State <i>Effective June 30, 2025</i>	DSH Cut <i>Effective October 2025</i>	Federal Budget Bill <i>Est. Effective 2027</i>	
Illinois Health Benefits for Immigrant Adults Program sunsets 8,000 CCH patients lose coverage \$111 million reduction in provider reimbursement to CCH	Federal Disproportionate Share Hospital (DSH) funding is slated to be reduced <i>if no Congressional action is taken</i> \$120 million reduction to CCH	Medicaid work requirements implemented 10% of individuals lose Medicaid coverage \$88 million reduction in provider reimbursement to CCH	Medicaid redetermination every 6 months (currently every 12) for select groups Between 5-12% of individuals lose coverage, may be eligible to reenroll \$50 million reduction in provider reimbursement to CCH

Compounding Effects



CCH Surplus(Deficit) Projection



Note: FY2020 through FY2023 includes directed payments and domestic claims that CountyCare passes through to CCH in the revenues and expenses of both Health Plan Services and Health Care Services. Beginning in FY2024, directed payments will only be accounted for in the budget for Health Care Services while domestic claims will be offset in a separate account.

- Salary increases, supply cost inflation and additional proposed Medicaid cuts over the next decade will lead to an increased loss of revenue and rise of uncompensated care.
- Expenses projected to outpace revenues.

FY2026 Proposed Budget



Health Care Services
Health Plan Services



FY26 Budget Assumptions

+/- denotes impact to net income



FY2025 Actual/Projected volume run rate as baseline

- + 10% expense reduction plan carryover**
- + Additional Gastroenterology/Crisis Triage Stabilization Center volume at Provident**
- + 4% chargemaster increase to market rates for select services**
- + Medicare IPPS Proposed Rule Net Impacts/Medicaid rate increase**
- + 5.8% increase in CountyCare PMPM capitation rate**
- Natural salary progression based on historical trends**
- CountyCare average membership reduced to 362,000 due to HBIA and State program changes**

FY26 Volume Assumptions

Statistic		FY2023	FY2024	FY2025 Budget	FY2025 Projected	FY2026 Budget
Surgical Cases	↑	14,932	14,393	15,166	13,221	16,311
Emergency Visits	↓	112,023	117,304	118,393	115,367	115,367
Primary Care Visits	↓	234,076	237,009	241,000	234,459	236,744
Specialty Care Visits	↑	378,305	385,883	380,000	416,247	418,864
Deliveries	↑	954	1,172	950	1,045	1,045
ADC – Stroger*	↓	306	321	317	326	306
ADC - Provident*	↓	20	20	29	19	20
CountyCare Members	↓	450,311	428,977	392,301	401,360	362,287

* Inpatient & Observation

FY26 Health Fund Revenue - \$5.144B



COOK COUNTY
HEALTH

In millions	FY2025 Budget	FY2025 Projected	FY2026 Proposed Budget	Variance (FY25B vs FY26B)
CCH Net Patient Revenues	\$845	\$565	\$581	\$(264)
DSH/BIPA/GME/Directed Payments	\$743	\$858	\$837	\$94
Health Plan Services	\$3,332	\$3,568	\$3,500	\$168
Tax Allocation	\$158	\$158	\$168	\$10
Other	\$68	\$59	\$59	\$(9)
Total	\$5,146	\$5,207	\$5,144	\$(2)

FY26 Health Fund Expense - \$5.144B



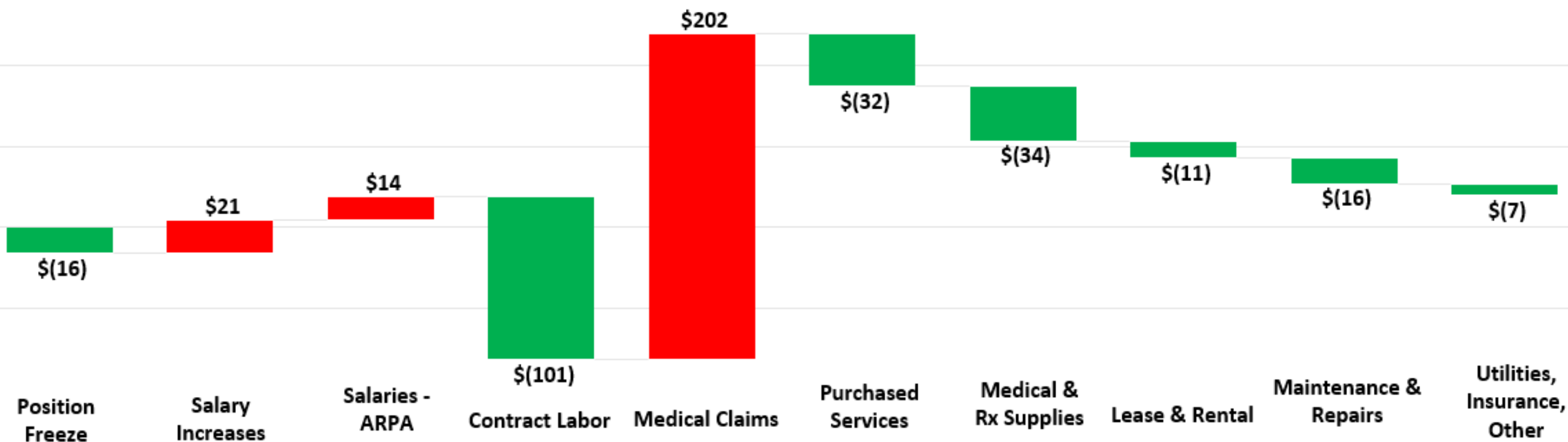
COOK COUNTY
HEALTH

In millions	FY2025 Budget	FY2026 Proposed Budget	Var	FY2025 Budgeted FTEs	FY2026 Proposed FTEs	Var
240 – Cermak	\$115	\$100	\$(15)	590	585	(5)
241 – JTDC	\$11	\$11	\$0	61	63	2
890 – Health Admin	\$166	\$155	\$(11)	483	518	35
891 – Provident	\$113	\$93	\$(20)	435	426	(9)
893 – ACHN	\$210	\$172	\$(38)	866	881	15
894 – CORE	\$31	\$32	\$1	74	72	(2)
895 - Public Health	\$24	\$28	\$4	126	167	41
896 - Health Plan Services	\$3,189	\$3,399	\$210	428	425	(3)
897 – Stroger	\$1,245	\$1,116	\$(129)	4,466	4,502	36
899 - Fixed Charges	\$42	\$38	\$(4)	0	0	0
Total	\$5,146	\$5,144	\$(2)	7,529	7,639	110

FY26 Budget at a Glance

FY25 \$5.146B  **FY26 \$5.144B**

FY25 to FY26 Expense Budget Waterfall



In millions	FY2025 Budget	FY2026 Proposed Budget	Variance	FY2025 FTEs	FY2026 FTEs Proposed	Variance
Stroger	\$1,245	\$1,116	\$(129)	4,466	4,502	36

Expense Drivers:

- 10% expense reduction plan carried over to FY2026
- Targeted focus on reducing Agency utilization in Nursing, Pharmacy, EVS, Telecommunications, and Laboratory Services
- Continued service line investment for OBGYN, Cardiology, Neurology, and Oncology/Cancer Center
- Replacement of MRI equipment; renovation of Sterile Processing, Interventional Radiology (IR) Room, and parking garage

In millions	FY2025 Budget	FY2026 Proposed Budget	Variance	FY2025 FTEs	FY2026 FTEs Proposed	Variance
Provident	\$113	\$93	\$(20)	435	426	(9)

Expense Drivers:

- 10% expense reduction plan carried over to FY2026
- Ramp up of Crisis Triage Stabilization Center (CTSC)
- Expansion of OBGYN, Urology, GI, Oral/Maxillofacial and General Surgery services
- Planning for a Neurology/Stroke program that includes a new MRI facility
- Facility infrastructure upgrades and investments for the aging campus

Outpatient (ACHN/CORE)

In millions	FY2025 Budget	FY2026 Proposed Budget	Variance	FY2025 FTEs	FY2026 FTEs Proposed	Variance
ACHN / CORE Outpatient Services	\$241	\$204	\$(37)	940	953	13

Expense Drivers:

- 10% expense reduction plan carried over to FY2026 including focus on Agency utilization
- Demobilizing of New Arrivals intake center
- Maintenance of facilities contracts for repair/upgrades of clinics
- Addition of Oral Health Services at select ACHN locations
- Continued ramp up of Bronzeville/31st Street Clinic

Correctional Health

In millions	FY2025 Budget	FY2026 Proposed Budget	Variance	FY2025 FTEs	FY2026 FTEs Proposed	Variance
Cermak	\$115	\$100	\$(15)	590	585	(5)
JTDC	\$11	\$11	\$0	61	63	2

Expense Drivers:

- 10% expense reduction plan carried over to FY2026 including focus on Agency utilization
- Telehealth service phasing continues, maximizing use of technology to provide efficient, effective, and safe services

In millions	FY2025 Budget	FY2026 Proposed Budget	Variance	FY2025 FTEs	FY2026 FTEs Proposed	Variance
Public Health	\$24	\$28	\$4	126	167	41

Expense Drivers:

- New positions moving from Grant, ARPA and Lead Fund
- Communications initiatives for expansion of advertisement of CCDPH services to the public
- New community immunization program

Health Administration

In millions	FY2025 Budget	FY2026 Proposed Budget	Variance	FY2025 FTEs	FY2026 FTEs Proposed	Variance
Health Administration	\$166	\$155	\$(11)	483	518	35

Expense Drivers:

- 10% expense reduction plan carried over to FY2026
- Revenue Cycle activities to manage denial reductions, increase claims submissions, and utilization of improved billing technology and electronic medical records system
- Continued expansion of Life Sciences department to support research operations
- Increase in FTE's due to converted positions to the Position Control Committee

Health Plan Services: CountyCare



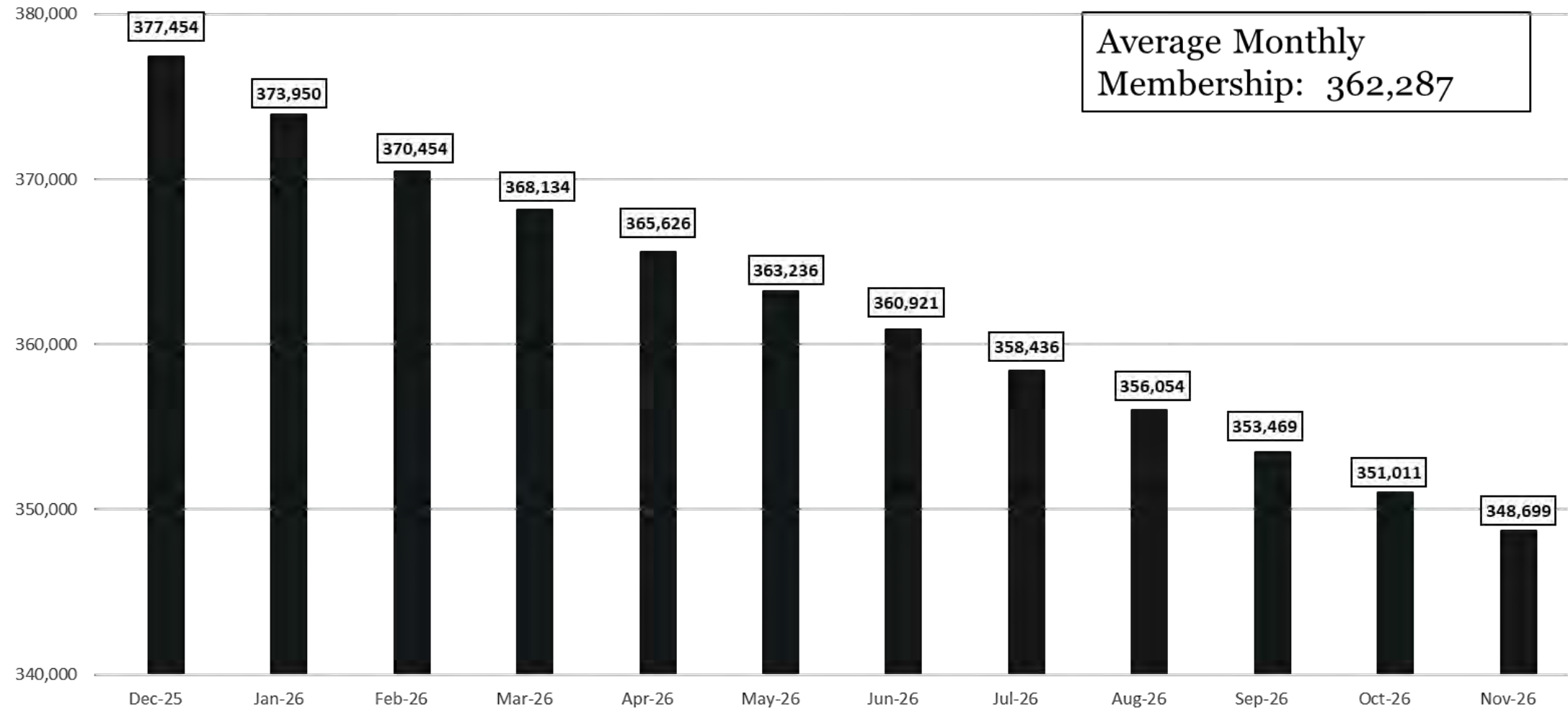
In millions	FY2025 Budget	FY2026 Proposed Budget	Variance	FY2025 FTEs	FY2026 FTEs Proposed	Variance
Health Plan Services	\$3,189	\$3,399	\$210	428	425	(3)

Expense Drivers:

- Overall claims expense set to increase by 5.8% offset by revenue per member per month increase based on State program changes and rate trends
- Projected membership to decrease from prior year budget due to State program changes and the elimination of the Health Benefits for Immigrant Adults population (average budgeted membership per month is estimated at 362,000)

FY2026 Membership Projections: CountyCare

CountyCare Membership



FY2026 Proposed Health Plan Services Financial Summary



<i>In millions</i>	ACA Adult	FHP	SPD	MLTSS/ LTSS/IMD	SNC	HBIS/IC	Total
Projected 2026 Membership	88,169	205,279	32,905	12,034	7,414	16,486	362,287
CountyCare Capitation Revenue	\$821	\$874	\$1,028	\$562	\$112	\$102	\$3,499
Medical Expense (CCH)	\$33	\$31	\$32	\$.15	\$.19	\$6	\$102
Medical Expense (Network)	\$761	\$812	\$975	\$533	\$66	\$85	\$3,232
Administrative Expense	\$28	\$31	\$21	\$28	\$46	\$10	\$164
Total CountyCare Expenses	\$822	\$874	\$1,028	\$561	\$111	\$102	\$3,498
Health Plan Net Income (Loss)	\$(.4)	\$.7	\$.2	\$.5	\$.3	\$.2	\$1
Total CCH Contribution	\$32	\$31	\$32	\$.66	\$.49	\$7	\$103

NOTE: Some numbers are rounded to nearest million for display purposes and could result in small arithmetical differences.

ACA – Affordable Care Act, FHP – Family Health Program, SPD – Seniors and Persons with Disabilities, MLTSS – Maternal, Infant, Child and Long-Term Services and Supports, LTSS - Long Term Services and Supports, IMD – Institution for Mental Disease, SNC – Special Needs Children, HBIS – Health Benefits for Immigrant Seniors, HBIC – Health Benefits for Immigrant Children

Grant & ARPA Funds

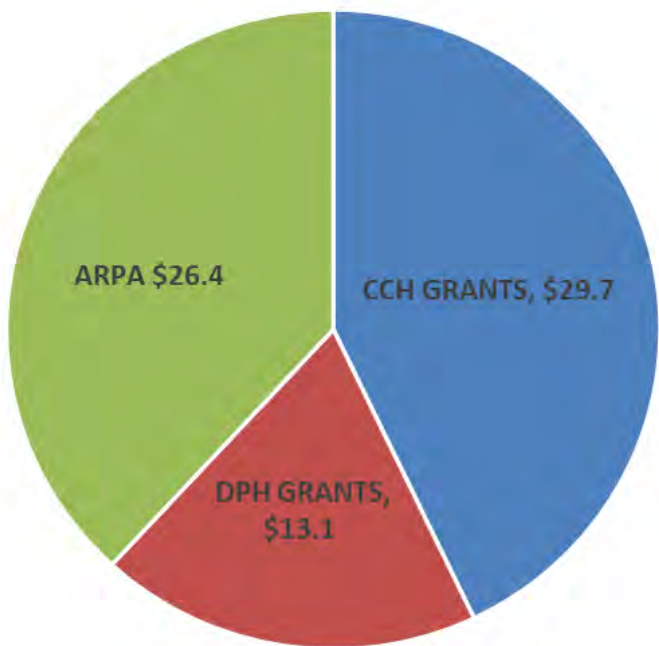


Grants & ARPA: \$69.2 Million

American Rescue Plan Act (ARPA): \$26.4M

CCH & DPH Grants: \$42.8M comprised of over **99** separate grants

- Behavioral Health
- Opioid & Substance abuse
- Food as Medicine
- Emergency Preparedness
- Trauma Informed Treatment
- Healthy Children & Families



**In millions*



ARPA Progress to Date

CCH ARPA Expenses and Budgets



■ Total Expenses to date

▨ Remaining Expenditures

Updated Guidelines:

- The County corporate fund will cover FY2025 personnel

Next Steps:

- Cash flow estimates complete, accelerating expenditures
- Progress addressing payment backlog to sub-recipients
- Monitoring monthly expenditures against goal
- Developing an updated sustainability plan post-ARPA

Appendix: Acronyms

- 340B – federal drug pricing control program
- ACA – Affordable Care Act
- ACHN – Ambulatory and Community Health Network of Cook County (CCH Outpatient Services)
- BIPA – Benefits Improvement and Protection Act (in terms of revenue source)
- CORE – Ruth M. Rothstein CORE Center of Cook County
- DSH – Disproportionate Share Hospital (in terms of revenue source)
- DNFB – Discharged Not Final Billed
- FMAP – Federal Medical Assistance Percentage
- FMLA – Family Medical Leave Act
- FTE – Full Time-Equivalent Employee
- GME – Graduate Medical Education (in terms of revenue source)
- IBNR – Incurred But Not Received
- JTDC – Juvenile Temporary Detention Center
- MBE/WBE – Minority and Women-Owned Business Enterprise
- MCO – Managed Care Organization
- MLR – Medical Loss Ratio
- PMPM – Per Member Per Month

Questions?



COOK COUNTY
HEALTH

Cook County Health and Hospitals System
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ATTACHMENT #3



Leadership

Toni Preckwinkle
President
Cook County Board of Commissioners
Erik Mikaitis, MD, MBA
Chief Executive Officer
Cook County Health

Board of Directors

Raul Garza
Chair of the Board
Commissioner Bill Lowry • 3rd District
Vice-Chair of the Board
Jay Bhatt, DO, MPH, MPA
Maya Green, MD, MPH, FACHE
Joseph M. Harrington

Sage J. Kim, PhD
Gina Massuda Barnett, MPH
Robert G. Reiter, Jr.
Sam A. Robinson, III, PhD
Tanya R. Sorrell, PhD, PMHNP-BC
Heather Steans
Mia Webster Cross, MSN, RN

Date: 8/11/2025

To: Finance Chair Robert G. Reiter, Jr.

Board Chair Raul Garza

Members, Finance Committee and Board of Directors

From: Erik Mikaitis, MD – Chief Executive Officer


Below is my response to a communication received from Dr. Kenneth Soyemi, regarding the proposed CCH FY26 Preliminary Budget. Dr. Soyemi also submitted his communication in the form of written public testimony (attached) for the CCH Finance Committee's Public Hearing on the Preliminary Budget on Monday, August 11, 2025. This memo is submitted to the Board to be included in the public record for the public hearing, for informational purposes. My response to Dr. Soyemi follows.

Thank you for your thoughtful and detailed questions regarding Cook County Health's proposed Fiscal Year 2026 budget. Your insights and questions are reflective of the very areas where we are focusing significant planning and improvement efforts. We believe that this work reflects the gravity of the moment we are navigating and the criticality of the work we do.

I am grateful that with the support of our department-level leaders, we were able to achieve the 10% system-wide cost reduction, focusing on efficiency and sustainability while mitigating the impact on clinical care as best possible. Key decisions were made collaboratively with department leadership, grounded in data and guided by the principle of minimizing impact to patient services.

These reductions were necessary and successful in closing our budget gap, yet we are all keenly aware that they simply may not be enough. As a result, the executive team is having weekly discussions about sustainability, service priorities, and bluntly, worse-case scenario planning. We do not take these challenges lightly, nor do we underestimate the stakes. Our system is the underpinning of the region's healthcare safety net.

The immediate budgetary impacts we are just beginning to experience are related to the HBIA program. If there is any silver lining, it is that we have more than a year to prepare for the more significant cuts to Medicaid reimbursement, which will take effect in 2027 at the earliest. That's why we are focusing so intently on opportunities to optimize processes across the system- from hiring and supply chain, to surgical



throughput and clinical productivity- to ensure we are best positioned to weather this storm and maintain access as best we can.

As you noted, it is essential that we don't leave any dollars on the table. Our revenue cycle turnaround project is ongoing. While we have made some progress, clinical effort, documentation and claims processing continue to be key priorities. This work is being further supported by our new risk-based/value-based care contracts, where we are already experiencing some upside.

CountyCare continues to be an important part of the health system. While the membership is projected to decline, we are also projecting a commensurate decline in claims and an approved increase in capitation rates. That being said, there are still opportunities to better manage costs, utilization, and quality that the team is actively working on.

Targeted but measured investments in clinical services and across sponsored programs and public health are central to our strategy. The Stroger increase you noted is related to the onboarding of many ARPA-funded positions, primarily related to behavioral health and food security, that are not revenue generating yet have a marked impact on the health of the individuals we serve.

There is no doubt that we must continue pursuing seismic, data-driven improvements and optimizations across the entire enterprise in order to mitigate the structural threats facing providers. Hand-in-hand must come a renewed culture of accountability to ensure these initiatives not only take root, but are sustained and result in measurable impact.

Meanwhile, our commitment to equitable access remains unwavering. Preserving access for our patients is paramount. We will do as much as we can for as long as we can.

We will be hosting an all staff town hall on the budget tentatively at noon on Thursday, August 21. More details will be sent by email soon and I hope you will be able to participate.

I will share this email with Deb Santana, Secretary to the CCH Board of Directors, for guidance on including in the public remarks on the budget.

Thank you again for your engagement and continued support.

Attachment: Written testimony from Dr. Kenneth Soyemi for 8/11/25 Finance Public Hearing

Public Testimony Regarding the Cook County Health FY2026 Proposed Budget

Wednesday, August 6, 2025August 2025.

Commissioners, and members of the Finance Committee,

Thank you for the opportunity to offer public testimony on Cook County Health's proposed FY2026 budget. My name is Dr. Kenneth Soyemi. I am both a practicing physician with Cook County Health and I reside in both Westchester and Addison, Illinois. I have followed Cook County Health's work closely over the years. I commend the system for recent accomplishments, including NCQA re-accreditation for CountyCare, the expansion of triage services at Provident Hospital, and recognition from the National Commission on Correctional Health Care for its substance use disorder treatment program.

Still, the FY2026 proposed budget raises critical questions. I hope the following observations will support a robust and transparent discussion of how CCH intends to meet its mission during a time of fiscal pressure.

First, the proposed \$264 million decline in net patient revenue is deeply concerning. This reduction represents a structural shift in financial assumptions. I respectfully ask how leadership intends to mitigate this drop while maintaining access and quality. What operational levers will be pulled, and what risks are associated with those adjustments?

Second, the cumulative impact of state and federal funding cuts is projected to exceed \$350 million. This includes the termination of the Health Benefits for Immigrant Adults (HBIA) program and looming federal DSH reductions. How does the organization plan to absorb these losses without jeopardizing safety-net obligations? If services are at risk, which ones?

Third, CountyCare remains a core financial engine, yet membership is projected to fall to 362,000. This decline, driven in part by state-level redeterminations and policy shifts, puts added pressure on administrative and claims costs. What strategies are in place to preserve the plan's solvency and ability to fund CCH operations?

Fourth, the budget assumes a 5.8% increase in CountyCare's capitation rate. Has this increase been confirmed by the State, and if not, what contingency plans exist to avoid mid-year shortfalls?

Fifth, the continuation of the 10% expense reduction plan from FY2025 is prudent. But it raises equity concerns, especially in areas like nursing, pharmacy, and clinical staffing. What performance measures will the administration use to evaluate the plan's impact, and how will they safeguard care quality while reducing expenditures?

Sixth, I note that Stroger Hospital's budget is down \$129 million even as its FTE count grows. This suggests substantial internal restructuring. I ask for clarification: which services are being streamlined, and how will that affect throughput, wait times, and staff workload?

Seventh, the long-term outlook for Cook County Health must be considered. Salary progression, supply inflation, and growing uncompensated care pose existential risks. What is the administration's plan for long-term fiscal sustainability—beyond short-term cuts and temporary grants?

Eighth, the presentation references improvements in the revenue cycle. These efforts—aimed at denial reduction, better claims management, and EMR upgrades—are critical. What specific KPIs will be tracked to show measurable progress in these areas?

Ninth, I am especially interested in the expansion of the Office of Life Sciences. I support investment in research and innovation but ask how return on investment will be tracked. What grant revenue or academic partnership goals justify the increased costs?

Lastly, I appreciate the proposed investments in public health communications, community immunization, and youth outreach. These reflect a forward-thinking vision. I encourage the Board to prioritize these as essential, not ancillary.

In closing, I recognize that Cook County Health remains a cornerstone of equity in our region. This budget reflects difficult tradeoffs, but transparency, accountability, and community partnership must guide every decision. I thank you for your service and respectfully submit these questions to support fiscal prudence and health justice.

Thank you.

Kenneth Soyemi, MD

JEREMY FOSTER, PRESIDENT & CEO

Big Brothers Big Sisters of Metro Chicago
130 S. Jefferson St, Suite 200, Chicago, IL 60661
E: foster@bbbschgo.org | O: 312.207.5610 | M: 712.301.7469



August 8, 2025

Dear Cook County Health Board of Directors,

I am respectfully submitting this testimony to thank Cook County Dept. of Public Health (CCDPH) for taking a broad, multi-tiered approach to addressing behavioral health, especially when it comes to supporting children and young adults.

Big Brothers Big Sisters of Metro Chicago (BBBS), in partnership with CCDPH, was able to establish roots in Southland, thanks to a multi-year grant from Building Healthier Communities: Behavioral Health Initiative. This award allowed BBBS to reinvest 100% of the funds back into the community by opening a regional office in Homewood (serving all zip codes in Southland), hiring a Regional Director from the community, and starting multiple mentoring programs (Calumet City, Dolton, Glenwood, Harvey, Richton Park), via local partnerships, which were previously non-existent.

Mentorship has been studied and proven to have a transformative impact on behavioral health, especially for youth navigating crucial developmental stages and facing challenges. Nearly 40% of young people face isolation and anxiety, impacting their well-being and hindering their ability to thrive. Having a Big Brother or Big Sister can be a lifeline, providing a trusted source of support and guidance when it is needed most.

POSITIVE BEHAVIORAL OUTCOMES

Benefits extend beyond emotional well-being to tangible behavioral improvements:

- **Reduced Risky Behaviors:** Independent studies, using randomized control groups, show mentored youth through BBBS are less likely to engage in risky behaviors, such as substance abuse or dropping out of school.
- **Increased Civic Engagement:** Mentored youth are inspired to give back to their communities, volunteering and becoming mentors.
- **Improved School Performance and Engagement:** Mentoring improves academic outcomes by improving attendance, scholastic competence, and positive attitudes toward learning.
- **Enhanced Social Skills and Goal Setting:** Mentored youth show stronger social competence and an improved ability to set and pursue goals.

Thank you, Cook County Health, for understanding the value of mentoring relationships in promoting positive behavioral health outcomes. By investing in and supporting BBBS, you are helping empower young people to navigate life's challenges, develop essential skills, and build a strong foundation for a healthier and happier future.

Sincerely,

A handwritten signature in blue ink, appearing to be 'J. Foster'.

Jeremy Foster



Dear Commissioners and President Preckwinkle,

My name is Dominique Chew and I'm the Housing Policy & Advocacy Manager at the Center for Housing & Health and AIDS Foundation Chicago. I'm here today to ask for your support for funding the Flexible Housing Pool at \$6.3 million for fiscal year 2026.

The Flexible Housing Pool, or FHP, is a multi-agency program which helps people who are experiencing homelessness and who cycle through public crisis systems – think jails, shelters, ER's - to find permanent housing. FHP has served over 1,400 people, 500 of whom are children, since the program's inception. Among FHP participants, we have seen reductions in emergency room visits, inpatient days, jail registrations, and mortality. We have a 94% success rate in retaining people in stable housing for at least 12 months. To be blunt, we keep people housed and alive. Not only that, but over a two-year period, we have reduced the costs of crisis systems by \$1.4 million.

Cook County is FHP's second largest funder and your support in the past has been instrumental in ensuring that every resident of Cook County can thrive. Without this funding from Cook County, our program participants are at risk of returning to homelessness. Our ask of \$6.3 million will ensure that those **currently** housed through the FHP are able to remain securely housed and continue to have the opportunity to thrive. Put another way, the \$6.3 million ask for FY26 is to ensure those Cook County residents currently housed through the FHP continue to be housed and avoid a return to homelessness.

Across the country, we are seeing an increase in people experiencing homelessness, and Cook County is no different. Now, more than ever, when we are seeing increased attacks on marginalized groups and the criminalization of homelessness, it is essential for us to invest in solutions to provide a safe, stable home for every resident of Cook County, and to get closer to the goal of ending homelessness. I urge you to support fully funding FHP at \$6.3 million for FY26.

Thank you.

Dominique Chew

Housing Policy & Advocacy Manager

Center for Housing & Health

dchew@aidsschicago.org | 620.217.6916



Cook County Health and Hospitals System
Minutes of the Special Finance Committee Meeting
Convened August 5, 2025, recessed and reconvened
on August 11, 2025 and August 13, 2025

ATTACHMENT #4

Rev. Terry Weston {T.W.}

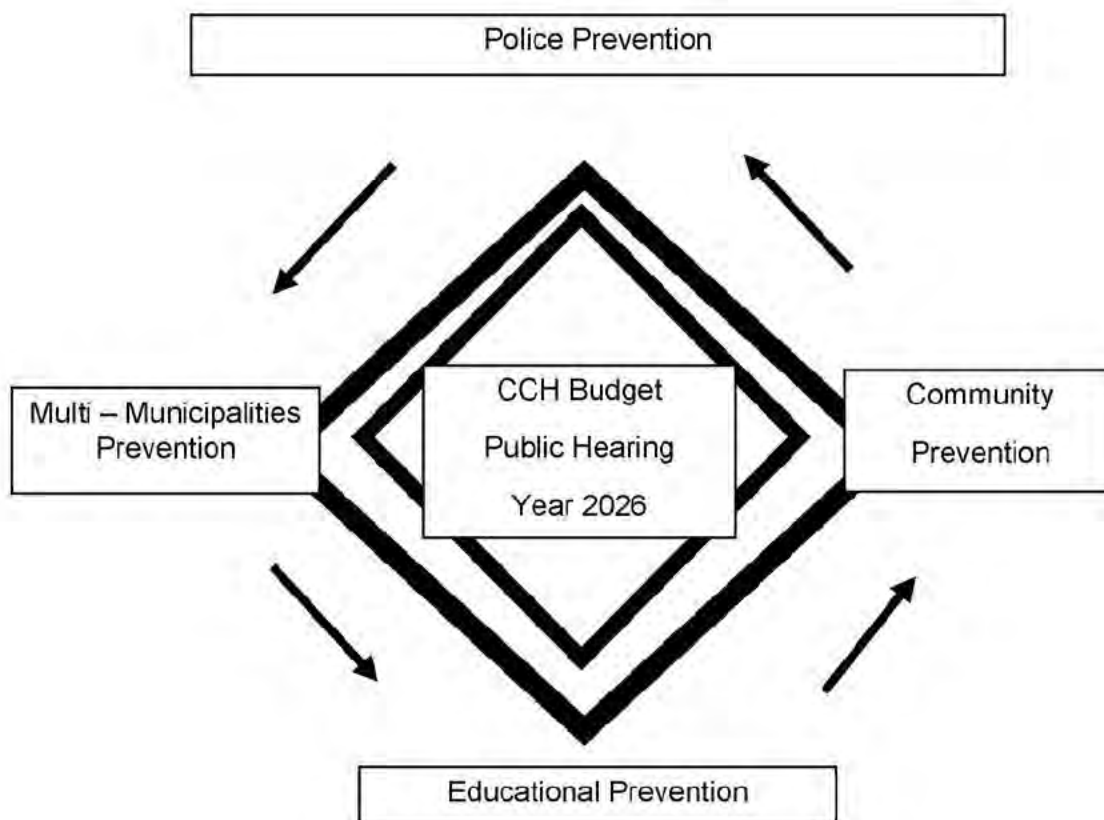


August 12, 2025

Something to "Consider & Think About"

CCH Budget Year 2026 and Year 2027 - Public Comments

Greetings CCH Budget 2026 Public Hearing Committee :



Faith Based Practitioner, Coach, Mentor, Tutor and Author Terry {T.W.} Weston, Proviso East Alumni {PE 1989}

[Persecution vs Popularity | BAND](#) : [Persecution Or Popularity As An Individual | Page Publishing](#)

Greeting CCH Budget Year 2026 Public Comments Committee:

Thanks for allowing Cook County residents to participate.

Here is my Public Comments for the CCH Year 2026 Budget:

After attending and participating in the first {1} every Cook County Gov & Cook County Health - Behavioral {adults and students and student athletes} Summit back in February 2024:

- [Agenda - Behavioral Health Summit.pdf - Google Drive](#)
- [Session Descriptions - Behavioral Health Summit.pdf - Google Drive](#)

I would like for the committee to explore this suggestion and model recommendations for the CCH Year 2026 and Year 2027 Budget - Behavioral {Social, Emotional, Physical} Health:

A) Cook Gov - Cook County Health: will design, developed and deploy at Behavioral Support Educational Prevention unit to Work with each one hundred {133} and thirty three municipalities in Cook County out of the 44 million Impact Grant Budget:

- One {1 per municipalities} Behavioral Educational Support Prevention unit Worker for Pre K to 8th grade {\$ 35 K - per year} & One {1 per municipalities} Behavioral Educational Support Prevention unit Worker for 9th to 12th grade {\$ 35 k - per year} for a four {4} year program for each one hundred {133} and thirty three municipalities in Cook County out of the 44 million Impact Grant Budget:
- The role & responsibilities are to work with all schools in that particular municipality to coach/teach Behavioral specialist and/or Behavioral Support staff and/or Paraprofessional in the school building.
- The role & responsibilities are to work with all schools in that particular municipalities to create a Behavioral Student Committee to discuss behavior and/or behavior issues taking place in the classroom and/or campus {meet once a month}
- The role & responsibilities are to work with all schools in that particular municipalities to create a Behavioral Student Athlete Committee to discuss behavior and/or behavior issues taking place in sports and/or in the locker room {meet once a month}

B) Cook Gov - Cook County Health: will design, developed and deploy at Behavioral Support Community Engagement Prevention unit to Work with each one hundred {133} and thirty three municipalities in Cook County out of the 44 million Impact Grant Budget:

- One {1 per municipalities} Behavioral Support Community Engagement Prevention unit Worker {\$ 35 K - per year} for all { community organizations and congregations } for a four {4} year program for each one hundred {133} and thirty three municipalities in Cook County out of the 44 million Impact Grant Budget:
- The role & responsibilities are to work with all { community organizations and congregations } that is need-of assistance dealing with social - behavioral issues in their congregations and/or members.

C) Cook Gov - Cook County Health: will design, developed and deploy at Behavioral Support Community Policing Prevention unit to Work with each one hundred {133} and thirty three municipalities in Cook County out of the 44 million Impact Grant Budget:

- **One {1 per municipalities} Behavioral Support Community Policing Prevention unit Worker {\$ 35 K - per year} for all municipalities law enforcement facility for a four {4} year program for each one hundred {133} and thirty three municipalities in Cook County out of the 44 million Impact Grant Budget:**
- **The role & responsibilities are to asses & evaluate all individuals {children, youth and adults} being detained for social - behavioral disturbance and/or issues for that situations causing them {children, youth and adults} to be detained. If individuals {children, youth and adults} are charged ?? - forward information to Judge on the case & forward to Cook County Corrections to assist & follow-up with their Behavioral Correction Prevention Unit with that individual {children, youth, adult} until they leave.**
- **The role & responsibilities are to asses & evaluate all individuals {children, youth and adults} being detained for social - behavioral disturbance and/or issues for that situations causing them {children, youth and adults} to be detained. If individuals {children, youth and adults} are not charged ?? - forward information to appropriate agency, organizations, school, congregation and/or parent{s}.**

D) Cook Gov - Cook County Health: will design, developed and deploy at Behavioral Support Multi - Sites - Collaboration Prevention unit to Work with District 209/Proviso Township/Austin Community/Lawndale Community school districts in Cook County IL from third {3} grade to twelfth {12} grade to design, develop and deploy a systemic behavioral curriculum for its students in Cook County out of the 44 million Impact Grant Budget:

National Students & Youth Behavioral Data Reports = Students to Juvenile Justice situations:

[Youth Risk Behavior Survey Data Summary & Trends Report: 2011-2021 \(cdc.gov\)](https://www.cdc.gov/youthrisk/youth-risk-behavior-survey-data-summary-and-trends-report-2011-2021)

[2022 National Report \(ojp.gov\)](https://www.ojp.gov/2022-national-report)

[Gang Toolkit FINAL 5 9 2023.pdf \(mcusercontent.com\)](https://mcusercontent.com/592023.pdf)

[Impact SEAD Brief V13.pdf \(edtrust.org\)](#)

[Lifeline \(988lifeline.org\)](#)

Cook County Gov & Cook County Health **Behavioral Support Multi - Sites - Collaboration Prevention unit** is for District 209/Proviso Township/Austin Community/Lawndale Community school districts from third {3} grade to twelfth {12} grade is to design, develop and deploy a systemic behavioral curriculum for its students and parents that is monitored by State of IL Cook County Judges that grew up in the areas of Proviso Township/Austin Community/Lawndale Community of Cook County IL; such as the Honorable Judge Owens Shelby, Honorable Judge ShawnTe Raines Welch, and many more.....

All school Districts – Informing & Updating assigned Judges per grade level on the students Behavioral Curriculum progress once {1} a month via Zoom.

3 rd	4 th	5 th	6 th	7 th	8 th	9 th	10 th	11 th	12 th
Tues	Tues	Tues	Tues	Tues	Tues	Tues	Tues	Tues	Tues
Zoom at	Zoom at	Zoom at	Zoom at	Zoom at	Zoom at	Zoom at	Zoom at	Zoom at	Zoom at
7:00 PM	7:00 PM	7:00 PM	7:00 PM	7:00 PM	7:00 PM	7:00 PM	7:00 PM	7:00 PM	7:00 PM
Judge	Judge	Judge	Judge	Judge	Judge	Judge	Judge	Judge	Judge

Tuesday = Informing & Updating assigned Judges per grade level on the students Behavioral Curriculum progress once {1} a month via Zoom at 7:00 PM

Cook County Gov & Cook County Health **Behavioral Support Multi - Sites - Collaboration Prevention unit** is for District 209/Proviso Township/Austin Community/Lawndale Community school districts in Cook County IL from third {3} grade to twelfth {12} grade is to design, develop and deploy a systemic behavioral curriculum for its students.

All school Districts – teaching students the same Behavioral Curriculum three {3} times a week.

3 rd	4 th	5 th	6 th	7 th	8 th	9 th	10 th	11 th	12 th
Monday	Monday	Monday	Monday	Monday	Monday	Monday	Monday	Monday	Monday
Age level	Age level	Age level	Age level	Age level	Age level	Age level	Age level	Age level	Age level
Tues	Tues	Tues	Tues	Tues	Tues	Tues	Tues	Tues	Tues
Wed	Wed	Wed	Wed	Wed	Wed	Wed	Wed	Wed	Wed
Age level	Age level	Age level	Age level	Age level	Age level	Age level	Age level	Age level	Age level
Thurs	Thurs	Thurs	Thurs	Thurs	Thurs	Thurs	Thurs	Thurs	Thurs
Friday	Friday	Friday	Friday	Friday	Friday	Friday	Friday	Friday	Friday
Age level	Age level	Age level	Age level	Age level	Age level	Age level	Age level	Age level	Age level

Tuesday & Thursday = Study Hall for 1st Period.

Monday, Wednesday, Friday = Behavioral Curriculum for 1st Period.

Cook County Gov & Cook County Health **Behavioral Support Multi - Sites - Collaboration Prevention unit** is for District 209/ Proviso Township/Austin Community/Lawndale Community school districts in Cook County IL from third {3} grade to twelfth {12} grade is to design, develop and deploy a systemic behavioral curriculum for its students parents.

All school Districts – Educating Parents on their students Behavioral Curriculum progress one {1} times a week via Zoom.

3 rd	4 th	5 th	6 th	7 th	8 th	9 th	10 th	11 th	12 th
Thurs	Thurs	Thurs	Thurs	Thurs	Thurs	Thurs	Thurs	Thurs	Thurs
Zoom at	Zoom at	Zoom at	Zoom at	Zoom at	Zoom at	Zoom at	Zoom at	Zoom at	Zoom at
7:00 PM	7:00 PM	7:00 PM	7:00 PM	7:00 PM	7:00 PM	7:00 PM	7:00 PM	7:00 PM	7:00 PM

Thursday = Educating Parents on their students Behavioral Curriculum progress one {1} times a week via Zoom at 7:00 PM

Field Observation = Year 2023 : **Due to PostCov-19 recovery, I walked several municipalities everyday due to PostCov-19 Doctors {Pulmonary, Neurology , General Surgeon } encouraging me to get involved to challenge my entire human anatomy {due to Cold-Winter and/or Extreme Winter-Wind Chills Months; keeps be in the house-bound from January to March} during Spring & Summer Months for Fresh-Oxygen Air.**

From Memorial Day Weekend {May 26th} to August 17th; I have walked eight hundred {600} miles plus through Proviso Township/Austin Community/Lawndale Community which also includes a section of DuPage County {Elmhurst IL; to use as a comparison model} Illinois as well.

By growing a beard, afro hair style, not really sheaving and carrying a huge back-sack, to appear homelessness as an old man; walking through community neighborhoods; our adolescents {children & youth} "truly" need assistance. Funny Note: Meridian Health Advocate who participated at the IL Speaker of House Fatherhood/June 19teeth event back in June 2023; seen me at Your event {Behavioral Summit} on yesterday; communicate: Wow, you really clean-up nice; I do not look the same from Memorial Day weekend to Labor Day weekend.....

Also, by working on my golf game in the local park by the house from May 29th to June 9th {as they walked home from school} and July 31st to August 4th {Summer Vacation}; our adolescents {children & youth} "truly" needs assistance; their words to each other; was mostly words adults do not use.

I was raised by a single parent mom, who worked the second {2nd} shift from 2:00 PM to Midnight; could not really afford a baby-sitter while growing up {we were mostly own our own; watched by family & friends} in the most roughest, dangerous and drug infested area in Maywood IL {19th and St. Charles} at that time from 1970's until 1995:

- Me and Brother did not act and/or did not behave and/or did not respond like today's adolescents {children & youth} with a single parent mom.

Therefore, the problem for today's adolescents {children & youth} is not mostly related to a single parent household.

According to the U.S. Census Bureau, 18.4 million children, 1 in 4, live without a biological, step, or adoptive father in the home {hundred's of from HS to Div 1 to 3 student athletes have no father in the home}. **That's enough children to fill New York City twice or Los Angeles four times over.** Research shows that a father's absence affects children in numerous unfortunate ways, while a father's presence makes a positive difference in the lives of both children and mothers. That's why communities, libraries and school districts, sport programs needs Tutoring & Mentoring programs + Behavioral Support Prevention on it's HS campus and/or facilities.....

[NFIFatherAbsenceInfoGraphic032322 \(hubspotusercontent-na1.net\)](#)

[involved-dads-good-for-moms \(hubspotusercontent-na1.net\)](#)

[strengths-of-father-presence \(hubspotusercontent-na1.net\)](#)

Forwarded by:

TW executing **Intellectual Best Practice Knowledge & Wisdom**, [Coach Lynn talks with Rev. Terry Weston about faith-based re-entry fatherhood programs - YouTube](#)

A) Coach Terry Weston, One of the **Best** Coaches in the State from Proviso Township that **believe** in the Math equation $F\{\text{force}\} = M\{\text{mass}\} \times A\{\text{acceleration}\}$; have **developed**, **designed** and **deployed** another **massive** Summer {June & July} Football **Performance** Program; **remember** to become the best; you must work as hard as the best:

- Progress, <https://www.dropbox.com/sh/g47py3t3rm6fd5x/AAApD1PiqEYLtxnE5N-fb6Fua?dl=0> to Power, https://www.dropbox.com/sh/f2bofeou67k7w09/AABqr1cLad_vymxO5BiW0tjsa?dl=0 to Performance, [Tatum Weston - Hudl](#)

· As a family our son's combined is the only High Student Athletes to have over a combined viewing of 27,000 viewers on Hudl; which means as student athletes and a coaching family; we understand football equals discipline, dedication and determination from Strength & Conditioning to the Football field to the Classroom.

[Tatum Weston - Hudl](#)

[Khali Saunders - Hudl](#)

[Khalil Saunders - Hudl](#)

B) Academics & Football engagement experience with-in my own family; Coaching starts at home, first : The Big 3 Cousin's { Highschool to College to working on Master Degree's } :

· As a family our son's combined is the only High Student Athletes that played against each other in High School football to create one of the **Best** HS {ACS vs IC} rivalries and then **move** on to play NCAA College Football; which means as student athletes and a coaching family; we understand football equals discipline, dedication and determination from Strength & Conditioning from HS Football to College Football

Working on Masters and Finished Playing Football

[Tatum Weston - Concordia University Wisconsin](#)

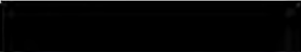
[Khalil Saunders - Football - Georgetown University Athletics \(guhoyas.com\)](#)

Finished Masters & Finished Playing College Football at Wingate:

[Khalil Saunders - Football - Wingate University Athletics \(wingatebulldogs.com\)](#)

[Khali Saunders - Football - Purdue Boilermakers \(purduesports.com\)](#)

[Khali Saunders - Football - Kent State Golden Flashes \(kentstatesports.com\)](#)

Author / Mentor / Tutor / Coach Terry Weston : 

[Persecution vs Popularity | BAND](#) : [Persecution Or Popularity As An Individual | Page Publishing](#)

"one the Best Coach-Mentor-Tutor-Teacher in the State of IL" - sacrificed his professional career to assist minority {Urban and Hispanic} students since April 2008 as a substitute teacher, **"We Rise by Lifting Others who is overlooked"**

<https://app.air.inc/a/b/WaozZde/b/5ca5e8a6-f232-4e7d-9d33-1b5e45dfbc66/c/034e314e-e399-4383-8220-90455d50198d>

Terry Weston a Proviso Native from PE-1989 receives the **State of IL Education 2024** Teacher/Administrator Award - [2024 Those Who Excel & Teacher of the Year Awards.](#); award for his dual initiatives : coach-mentor-tutor & mentor-tutor-teacher as it relates to education initiatives:

- [TWE-TOY-Awardee-List-2024.pdf \(isbe.net\)](#)

Rev. Terry Weston {T.W.}



August 12, 2025

Something to "Consider & Think About"

CCH Budget Year 2026 and Year 2027 - Public Comments

Greetings CCH Budget 2026 Public Hearing Committee :

