

COOK COUNTY
HEALTH



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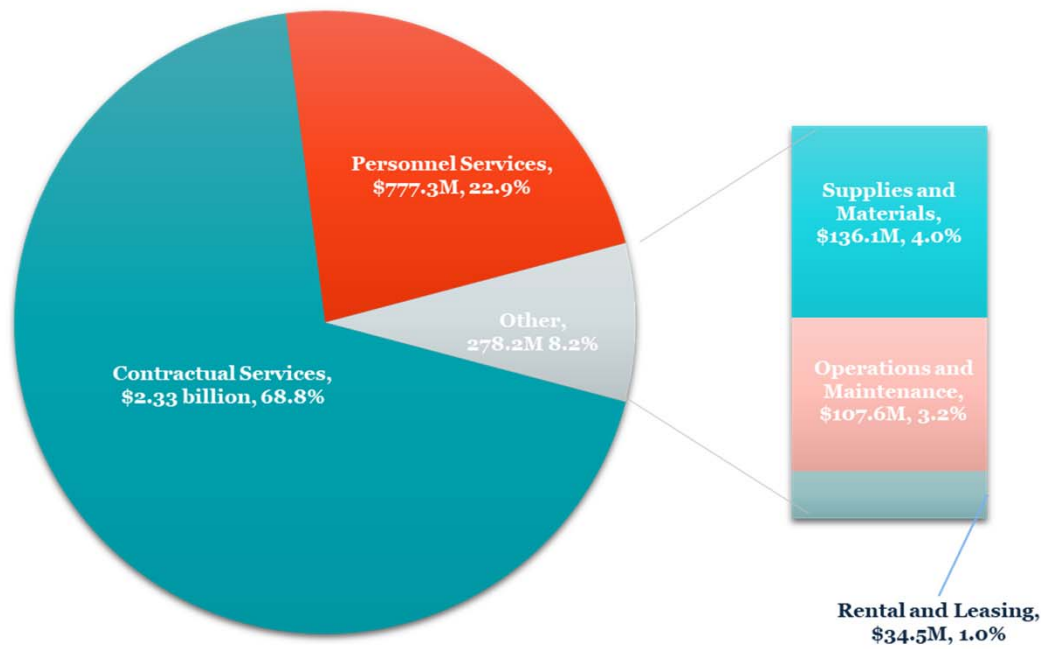


COOK COUNTY
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\$563.4M/20% from FY2020



FY2020 Budget	\$2,824.0
FY2021 Budget	\$3,387.3
Variance	\$563.4



- CountyCare increase in membership to an average of 356,000, \$465 million increase
- Increase in staffing at the Cook County Jail due to distancing requirements
- Continue commitment to provide \$312M in charity care

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In millions	FY2020 Budget	FY2021 Proposed Budget	Variance	FY2020 Budgeted FTEs	FY2021 Proposed FTEs	Variance
Managed Care*	\$1,800	\$2,225	\$425	407	341	(66)
Hospitals (Stroger/Provident)	\$727	\$845	\$118	4,590	4,867	277
Correctional Health	\$89	\$104	\$15	637	728	91
Health Administration	\$44	\$50	\$	328	305	(23)
Ambulatory Service***	\$114	\$105	(\$9)	521	384	(137)
Public Health	\$10	\$17	\$7	118	118	0
Administration	\$39	\$41	(\$1)	0	0	0
Total	\$2,824	\$3,387	\$563	6,601	6,743	142

*Managed Care in FY2020, includes Integrated Care

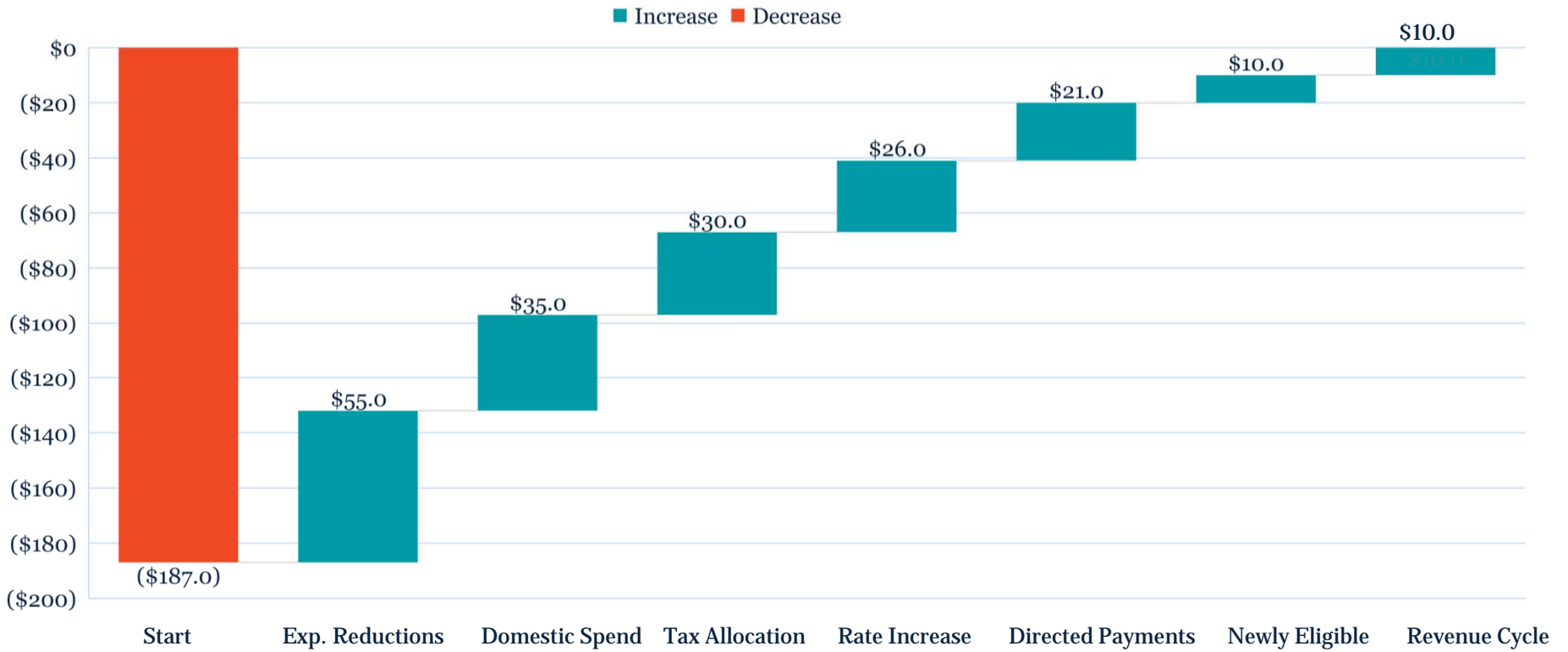
**Does not include grants, including contact tracing

*** Ambulatory service includes ACHN, CORE, Oak Forest



COOK COUNTY HEALTH

Financial Performance: FY2020



Objectives: Key Components of the 2020-2021 Strategic Plan

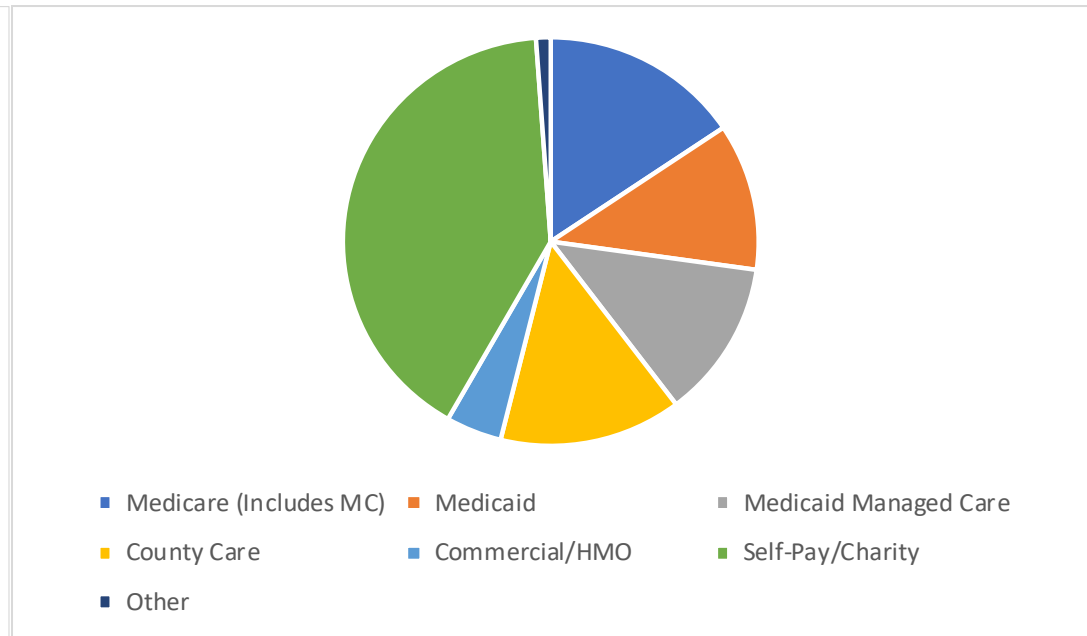
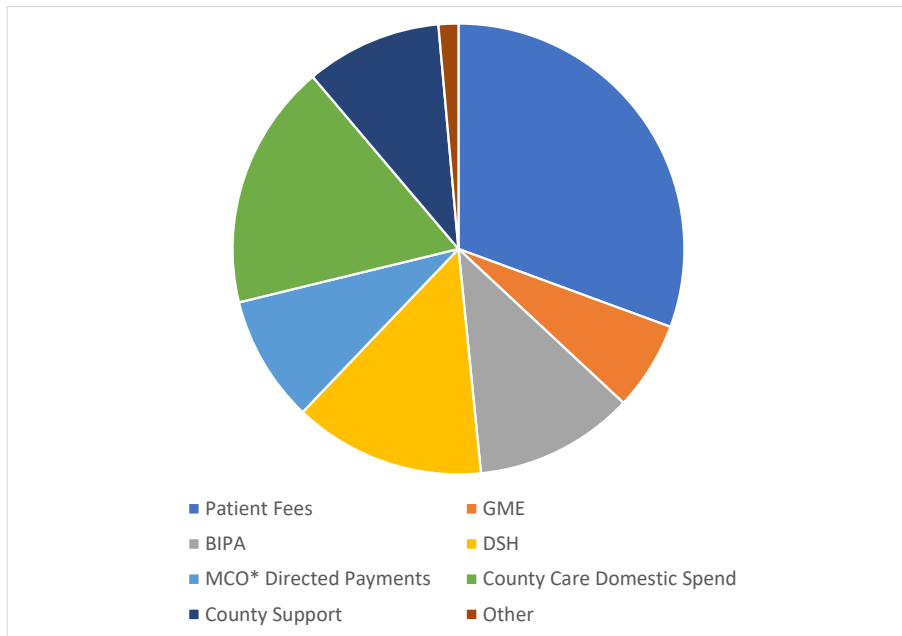
- **CountyCare** membership rising from a budgeted 326,000 membership in FY2020 to projected 356,000 membership due to economy and State Suspension of re-determinations. Expanded coverage for children with special needs. Re-investing \$10M in quality funding to address health equity and underserved communities
- Increase in staffing at **Cermak Health Center** at the jail to comply with Covid-19 distancing
- Implementation of the **Public Health** \$40M contact tracing grant
- **Charity Care** expected to be \$312M
- Investment in the community to address health disparities and healthcare access
 - **Provident**: New dialysis center, lifestyle center, colon cancer prevention; Match resources with community demand
 - **ACHN**: Expand mental health; address health disparities
 - **Stroger**: match resources with community demand, centralize physical therapy, eliminate agency
 - Minimize layoffs due to resignations, retirements and available resources
 - Transition from the **Oak Forest** Campus



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Other
\$1.2 billion

System Payor Mix by Charges

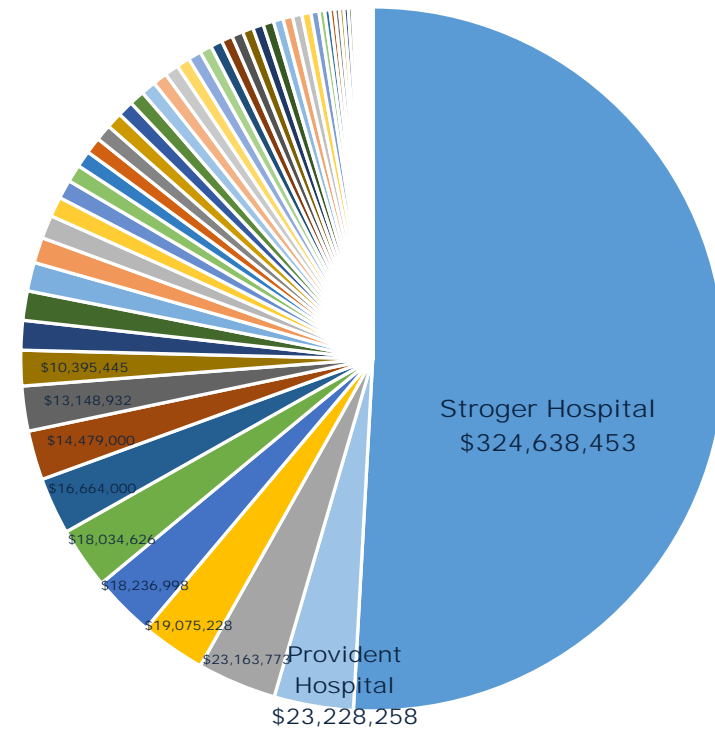
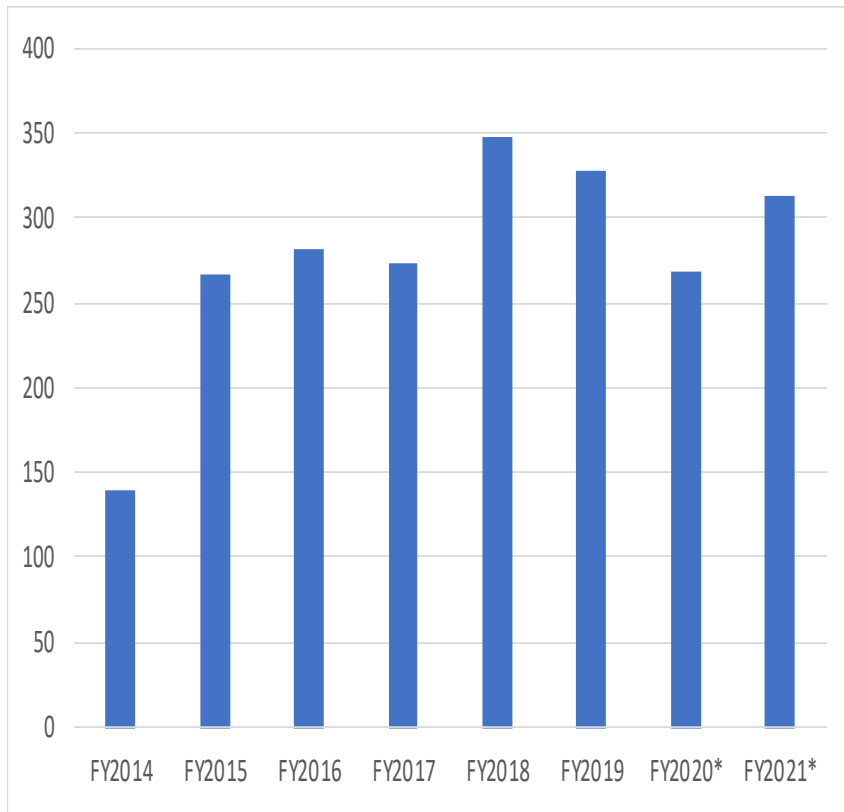


*MCO = Managed Care Organization

GME: Graduate Medical Education Payments
BIPA: Benefits Improvement and Protection Act Payments
DSH: Disproportionate Share Hospital Payments

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Charity Care



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Current Services:

- Primary Care/Family Medicine, Medication Assisted Treatment, WIC - 9,000 patients

Provident Services:

- Primary Care (Behavioral Health, Family Medicine, Gynecology, Internal Medicine, Prenatal)
- Mammography
- Lifestyle Center
- Breast Clinic
- Bariatrics
- General Medicine
- Pathology Services
- Outpatient Specialty Clinic (Addiction Medicine, Cardiology, Colorectal Surgery, Diabetes & Endocrinology, Gastroenterology)
- Diagnostic Imaging
- Cardiac and Pulmonary Diagnostics
- Pharmacy
- Social Services
- Medication Assisted Treatment
- Neurology
- Ophthalmology
- Optometry
- Podiatry
- Psychology/Psychiatry
- Pulmonary
- Renal
- Sleep Medicine
- Urology
- WIC

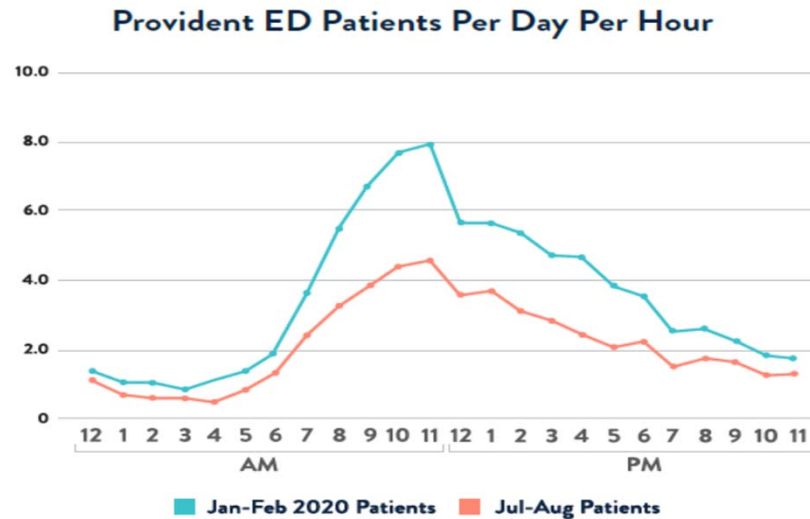
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Emergency Room

- Patients with low acuity
- Most patients come to ED during clinic hours
- No ambulances since 2011

Inpatient Services

- Average daily census 11.8
- Staffing to volumes
- Reflects community demand



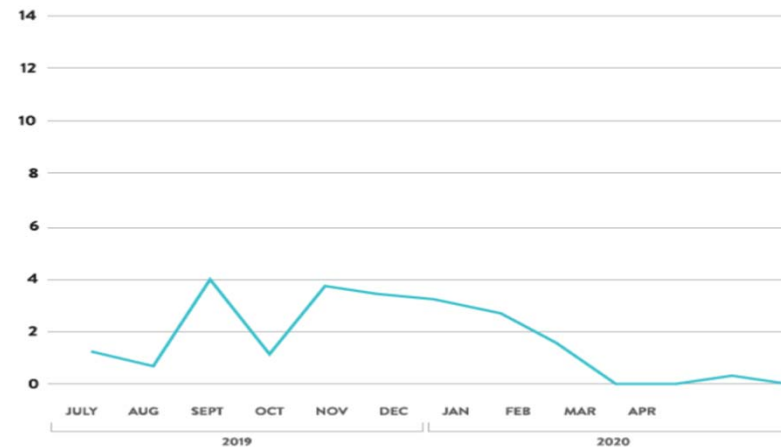
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FY2021 Services Available:

- Pediatric Trauma
- Pediatric Burn Center
- Neonatal Intensive Care Unit
- Pediatric Intensive Care Unit
- Adolescent Medicine
- Allergy & Asthma
- Behavioral Health
- Cardiology
- Child and Family Wellness Clinic
- Child Psychiatry
- Dermatology
- Emergency Medicine
- Endocrinology
- Gastroenterology
- Genetics
- Immunizations
- Nephrology
- Neurology

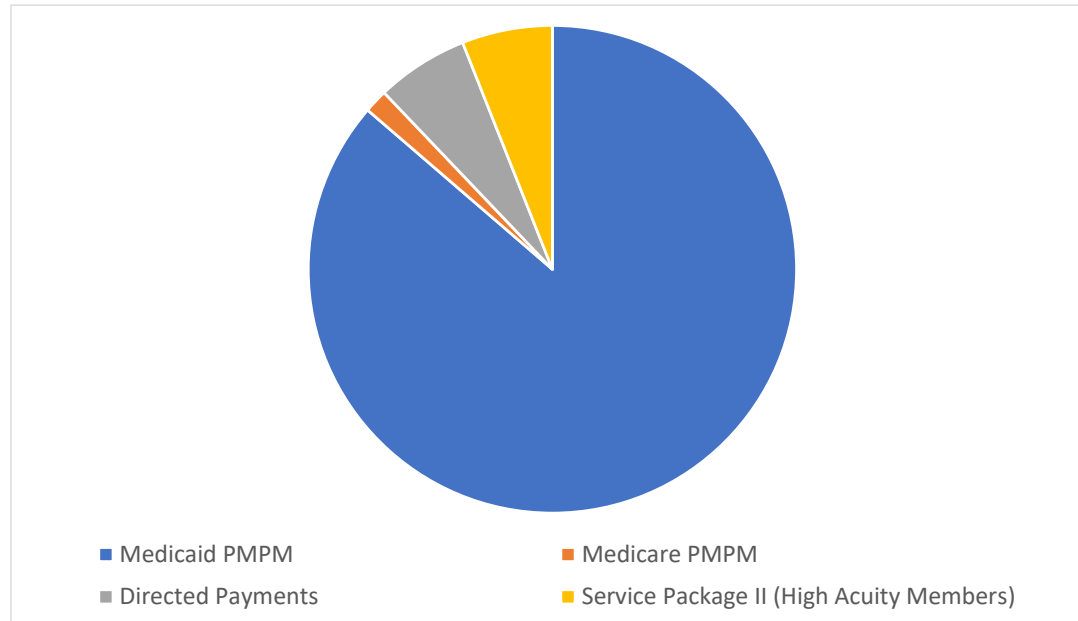
- Oncology/Hematology
- Ophthalmology
- Pediatric Hematology
- Radiology
- Sickle Cell Disease
- Sports Physicals
- Surgery
- Urology
- Primary care at CCH community centers

General Pediatric Inpatient Census

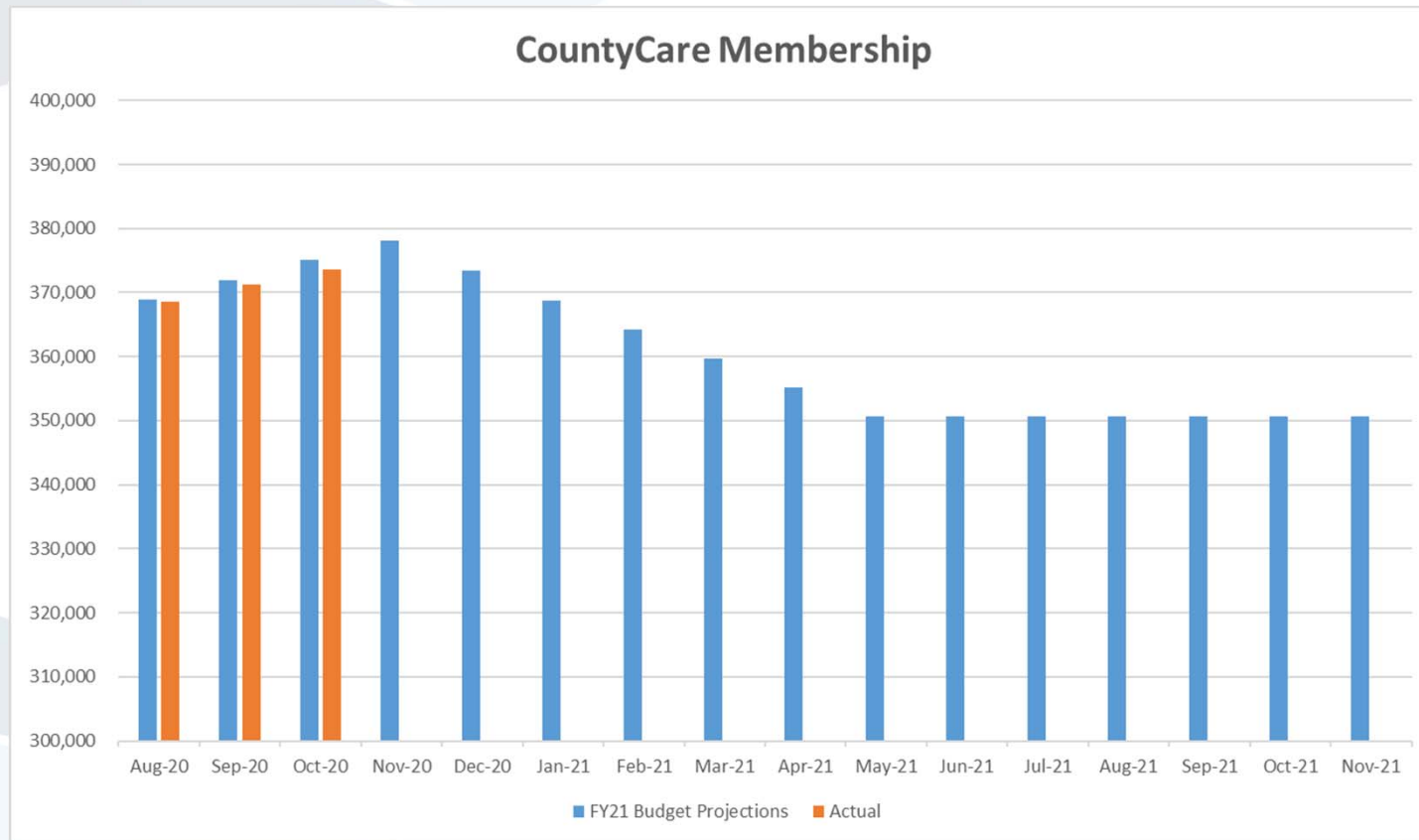


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County Care
\$2.2 billion



FY 21 Budget: Membership



2019 Cook County HCIL Plan Scores & Ratings

Plan	Doctors' Communication	Change	Access to Care	Change	Women's Health	Change	Living With Illness	Change	Behavioral Health	Change	Keeping Kids Healthy	Change
Aetna Better Health*	★★★★	—	★★★★	—	★	—	★★★★	—	★★★★★	—	★	—
Blue Cross Community Health Plans	★★★★★	—	★★★★	—	★★	—	★★★★	—	★★★★★	—	★	—
CountyCare Health Plan	★★★★	—	★★★★	—	★★★★★	—	★★	—	★★★★	—	★★★★★	—
MeridianHealth	★★★★	—	★★★★	—	★★★★	—	★★★★	—	★★★★	—	★★★★	—
Molina Healthcare	★★★★	—	★★★★	—	★★	—	★★★★	—	★	—	★★★★	—

*Formerly known as IlliniCare

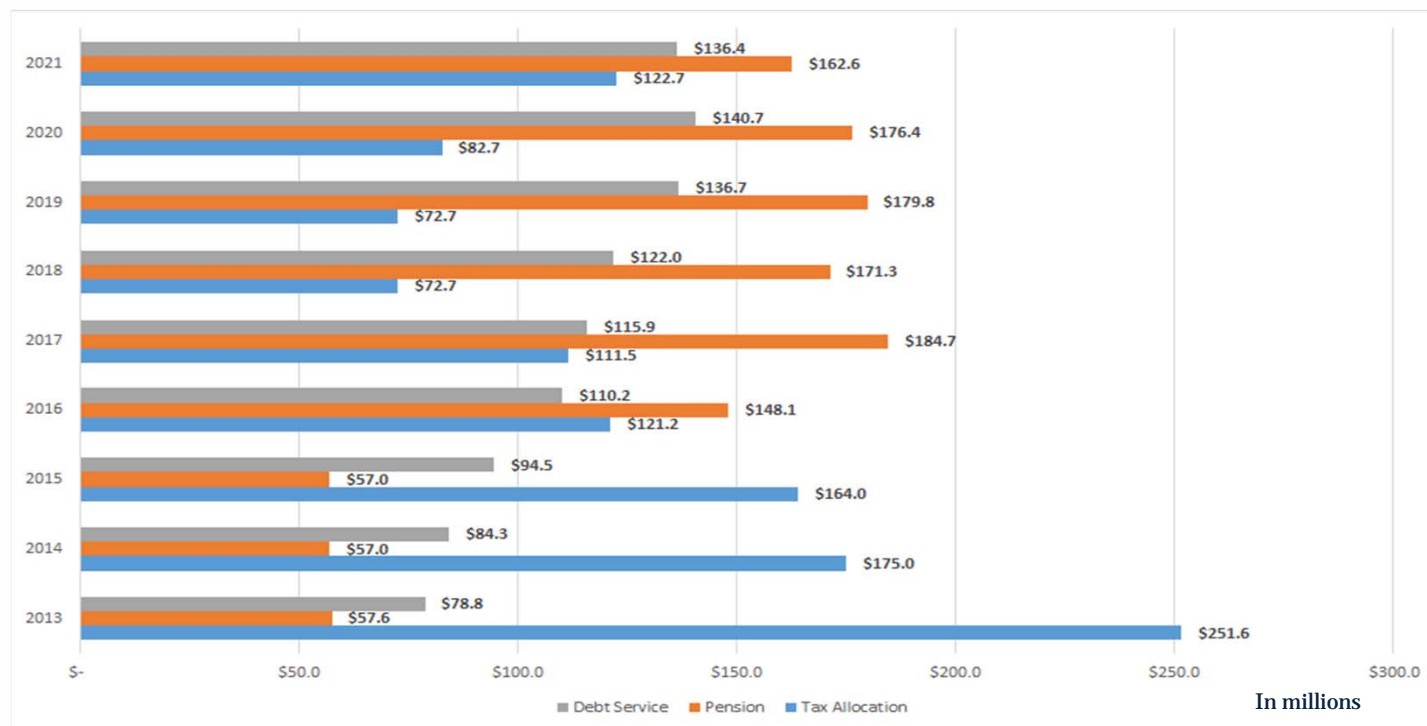
RESULTS

- ✓ CountyCare received **5 Stars** in 2 categories Women's Health and Keeping Kids Healthy
 - Only one other Plan received 5 Stars
- ✓ CountyCare received a total of 21 Stars in the 6 categories, higher than the other four plans





Cook County Pension, Debt Service & Operating Allocation



- In FY2021, the direct tax allocation increased by \$40M to more appropriately underwrite the cost of Correctional and Public Health.

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- **COVID-19**
 - Availability of Federal funds
 - Impact on volumes, routine appointments and non-emergency surgeries
- **Changes to local healthcare environment**
 - Impact of Mercy Hospital closure
 - Other changes to local healthcare environment
- **Affordable Care Act**

Estimated Impact of ACA Repeal on Cook County Health

Elimination of Medicaid Reimbursement for Care of Medicaid Expansion/ACA Adults

Increased Uncompensated Care Costs

Approximately **\$600M annually** in CountyCare capitation revenue

At least **\$100M annually** in reimbursements from Medicaid Managed Care Organizations for ACA members CCH cares for but could be as high as \$140M

Approximately **\$700M annually** in bad debt & charity care for those ACA adults who lose coverage but is likely higher if individuals with marketplace plans and other covered populations lose coverage and turn to CCH

Preliminary & Conservative Estimate of the Annual Impact of ACA Repeal on Cook County Health is at least \$1.4B (\$600M + \$100M + \$700M)

Unknowns



Sustainability of local health care safety nets: The ACA has stabilized FQHCs and safety net hospitals. CountyCare alone reimbursed safety net hospitals and FQHCs more than \$48M for ACA adults in FY19. These organizations also have contracts with the other MCOs in the region. Without these reimbursements, it is likely some organizations will close.



- Number of individuals covered by Marketplace plans who could turn to CCH if marketplace is eliminated
- Number of individuals under 26 currently covered by parent's insurance who may lose coverage and turn to CCH
- Number of individuals with preexisting conditions who could turn to CCH
- Migration of newly uninsured patients from other systems to CCH due to lack of insurance