

Minutes of the meeting of the Managed Care Committee of the Board of Directors of the Cook County Health and Hospitals System held Thursday, December 12, 2019 at the hour of 10:30 A.M. at 1950 W. Polk Street, in Conference Room 5301, Chicago, Illinois.

I. Attendance/Call to Order

Chair Thomas called the meeting to order.

Present: Chair Sidney A. Thomas, MSW and Directors Mike Koetting and David Ernesto Munar (3)
Board Chair M. Hill Hammock and Directors Ada Mary Gugenheim and Layla P. Suleiman Gonzalez, PhD, JD

Absent: None (0)

Additional attendees and/or presenters were:

Yvonne Collins, MD – Chief Medical Officer, Health Plan Services

Luenetta Jackson, PharmD – Pharmacy Director, Health Plan Services

James Kiamos – Chief Executive Officer, Health Plan Services

Jeff McCutchan –General Counsel

Deborah Santana – Secretary to the Board

John Jay Shannon, MD – Chief Executive Officer

II. Public Speakers

Chair Thomas asked the Secretary to call upon the registered public speakers.

The Secretary responded that there were none present.

III. Report on Health Plan Services (Attachment #1)

James Kiamos, Chief Executive Officer of Health Plan Services, provided an overview of the presentation regarding the Report on Health Plan Services. The Committee reviewed and discussed the information.

The presentation included information on the following subjects:

- Metrics:
 - Current Membership
 - Managed Medicaid Market
 - Medicaid Managed Care Trend
 - Overall Care Management Performance
 - Claims Adjudication and Payment
- Fluid Market
 - Big Market Moves
 - CVS/Aetna Purchase of IlliniCare
- Medicare
 - Engagement tactics to enroll CCH patients have shown promising initial results
 - MoreCare Enrollment as of December 2019
 - MoreCare: Strategic Updates and Operational Readiness
- Claims Payment
 - Paid Claims Timing, September to October
 - Hospitals Vary by Cost Per Admission

III. Report on Health Plan Services (continued)

- Value Add Benefits
 - Open Enrollment Value Added Benefits
 - CountyCare Member Rewards Program
- Pharmacy
 - Medication Possession Ratio
 - Domestic Pharmacy Spend

The following individuals provided additional information: Yvonne Collins, MD, Chief Medical Officer, Health Plan Services; and Luenetta Jackson, PharmD, Pharmacy Director, Health Plan Services.

During the discussion of slide 17 of the presentation, regarding Paid Claims Timing, it was determined that the Committee would hold a deep review discussion on the subject at its next meeting.

IV. Action Items

A. Minutes of the Managed Care Committee Meeting, September 19, 2019

Director Munar, seconded by Director Koetting, moved to accept the minutes of the Managed Care Committee Meeting of September 19, 2019. THE MOTION CARRIED UNANIMOUSLY.

B. Any items listed under Section V

V. Adjourn

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

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

XXXXXXXXXXXXXXXXXXXXXXXXXXXX
Sidney A. Thomas, MSW, Chair

Attest:

XXXXXXXXXXXXXXXXXXXXXXXXXXXX
Deborah Santana, Secretary

Requests/Follow-up:

Follow-up: During the discussion of slide 17 of the presentation, regarding Paid Claims Timing, it was determined that the Committee would hold a deep review discussion on the subject at its next meeting. Page 2

Cook County Health and Hospitals System
Managed Care Committee Meeting
December 12, 2019

ATTACHMENT #1

CountyCare Update

Prepared for: CCH Managed Care Committee

James Kiamos

CEO, Health Plan Services

December 12, 2019



Plan Metrics



Current Membership

Monthly membership as of November 5, 2019

Category	Total Members	ACHN Members	% ACHN
FHP	210,567	16,411	7.8%
ACA	72,580	12,612	17.4%
ICP	29,639	5,847	19.7%
MLTSS	6,008	0	N/A
Total	318,794	34,870	10.9%

ACA: Affordable Care Act

FHP: Family Health Plan

ICP: Integrated Care Program

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

Source: CCH Health Plan Services Analytics



Managed Medicaid Market

Illinois Department of Healthcare and Family Services September 2019 Data

Managed Care Organization	Cook County Enrollment	Cook County Market Share
*CountyCare	318,196	31.5%
Blue Cross Blue Shield	238,751	23.7%
Meridian (a WellCare Co.)	226,419	22.4%
IlliniCare (a Centene Co.)	108,391	10.7%
Molina	65,325	6.5%
*Next Level	52,197	5.2%
Total	1,009,279	100.0%

* Only Operating in Cook County

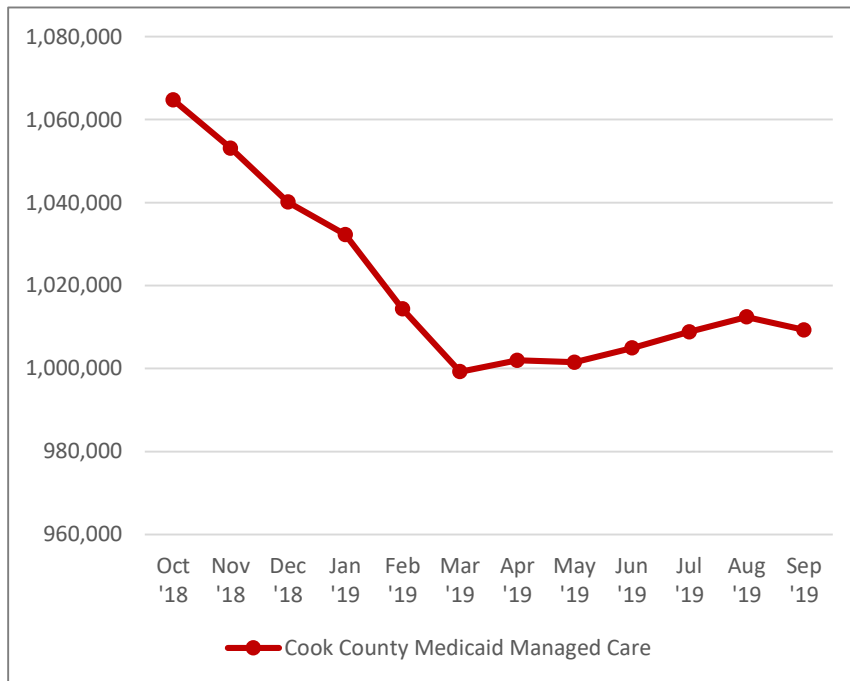
Meridian and WellCare (dba Harmony) merged as of 1/1/2019. Pending Merger with Centene (dba IlliniCare)
CVS/Aetna purchasing IlliniCare legacy Medicaid

Source: <https://www.illinois.gov/hfs/MedicalProviders/cc/Pages/TotalCCEnrollmentforAllPrograms.aspx>

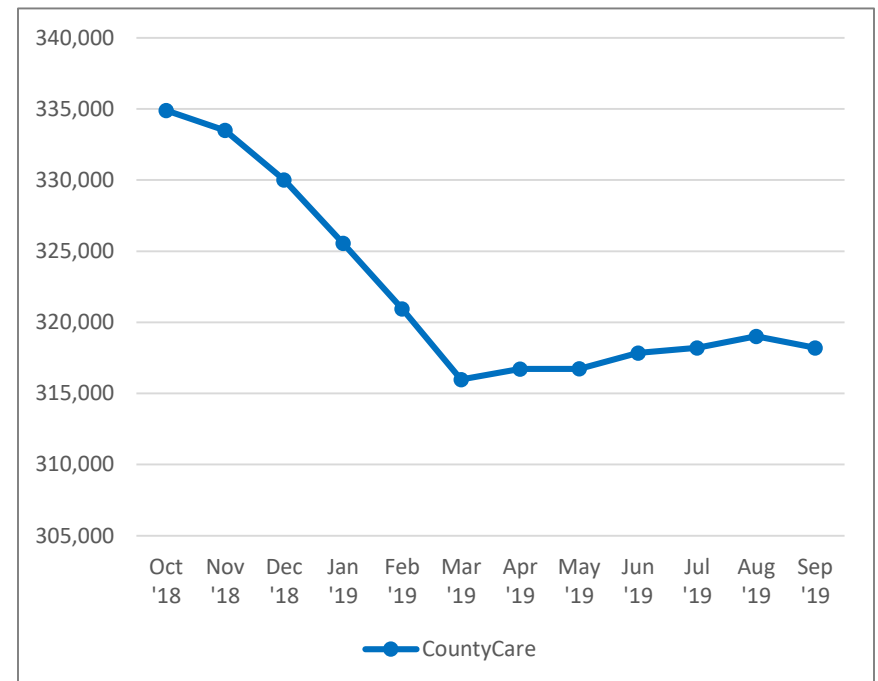


IL Medicaid Managed Care Trend in Cook County (charts not to scale)

Cook County Medicaid Managed Care



CountyCare

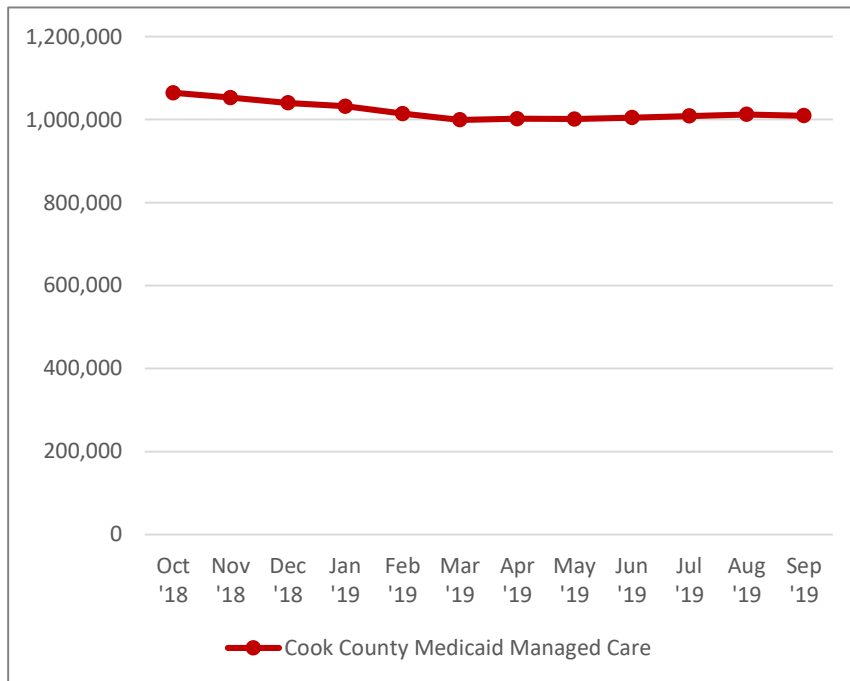


- CountyCare's monthly enrollment trend closely follows the overall Managed Care enrollment trend in Cook County

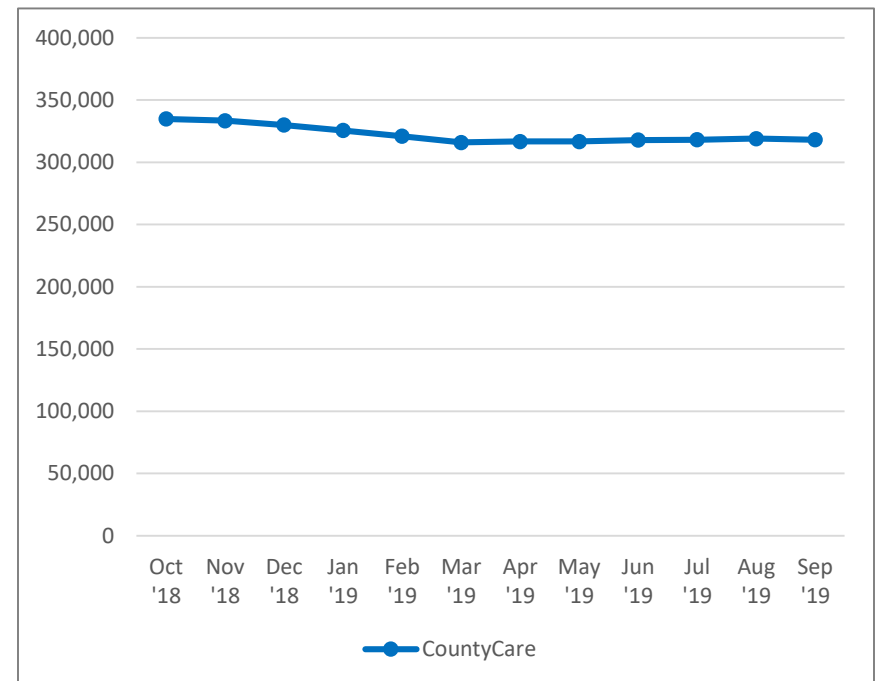
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IL Medicaid Managed Care Trend in Cook County

Cook County Medicaid Managed Care



CountyCare



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Source: <https://www.illinois.gov/hfs/MedicalProviders/cc/Pages/TotalCCEnrollmentforAllPrograms.aspx>

Overall Care Management Performance

		Performance		
Key Metrics	Market %	Jul	Aug	Sep
Completed HRS/HRA (all populations)				
Overall Performance	40%	64.6%	66.3%	67.0%
Completed Care Plans on High Risk Members				
Overall Performance	65%	61.7%	62.2%	62.0%

CountyCare's high-risk percentage exceeds the State's requirement of 2% for Family Health Plan and 5% for Integrated Care Program

Source: CCH Health Plan Services Analytics



Claims Adjudication & Payment

		Performance		
Key Metrics	State Goal	Jul	Aug	Sep
Claims Payment Turnaround Time				
% of Clean Claims Adjudicated < 30 days	90%	97.4%	95.8%	95.9%
% of Claims Paid < 30 days	90%	44.9%	32.2%	34.2%

Source: CCH Health Plan Services Analytics

Fluid Market



Big Market Moves

CVS/Aetna To **Buy** Centene's Illinois Plan



CVS/Aetna Purchase of IlliniCare

- Part of required divestiture for Federal approval of Centene purchase of WellCare
- The transaction entails the sale of Centene's legacy Medicaid and Medicare Advantage lines of business in Illinois
- Centene will retain IlliniCare's Medicare-Medicaid Alignment Initiative ("MMAI") business and IlliniCare's statewide YouthCare foster care contract, set to commence in February 2020



Medicare



Engagement tactics to enroll CCH patients have shown promising initial results

*Enrollment

- 261 successfully enrolled members from a total of 318 completed applications
- **95%** members linked to CCH Primary Care Providers
- Key CCH sites contributing to volume: Stroger Professional Building, Sengstacke Health Center, Near South Health Center

Membership as of Dec 7*

- 261 MAPD* enrolled with 318 applications
- 0 HIV C-SNP
- 12 I-SNP and IE-SNP

Membership Goals: 1250

- 250 MAPD
- 250 HIV C-SNP
- 750 I-SNP and IE-SNP

Oct 15

- Annual Enrollment Period (AEP) begins

Dec 7

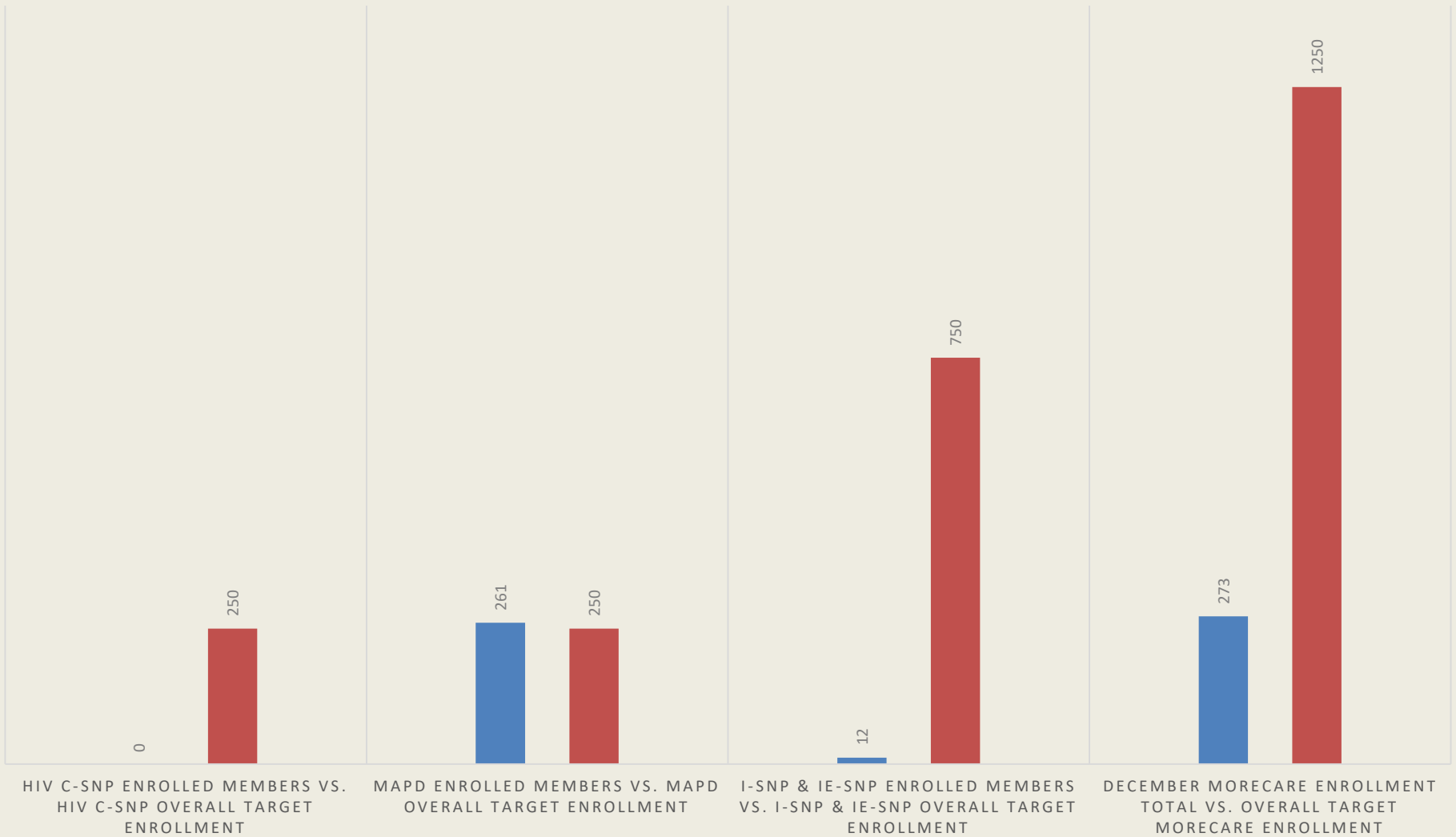
- AEP ends
- Start of Initial Coverage Election Period (ICEP) & Special Enrollment Period (SEP)
- All year enrollment for HIV C-SNP, I-SNP and IE-SNP

Dec 30, 2020

- End of Year 1



MORECARE ENROLLMENT AS OF DECEMBER 2019 GOAL OF 1250 BY DECEMBER 2020



MoreCare: Strategic Updates and Operational Readiness

- ✓ CMS desk audit and formulary audit complete
- ✓ MMAI notice of intent to apply submitted
- ❑ Final signature for Oak Street Health and Pathway to Living supportive living facility partnership for **IE-SNP Transformative Mobile Model of Care** - pending
- ❑ Welcome and retention activities for new members – **underway** (e.g. welcome calls, welcome kits, ID card)
- ❑ Launched care management model and supporting data connectivity - **underway**
- ❑ Launching enrollment events at Ruth Rothstein CORE Center for potential HIV C-SNP qualifying members - **underway**
- ❑ Conducting model of care training for CCH providers - **underway**
- ❑ Operational Launch – Full claims and systems testing **underway**

Claims Payment



Paid Claims Timing, September to October

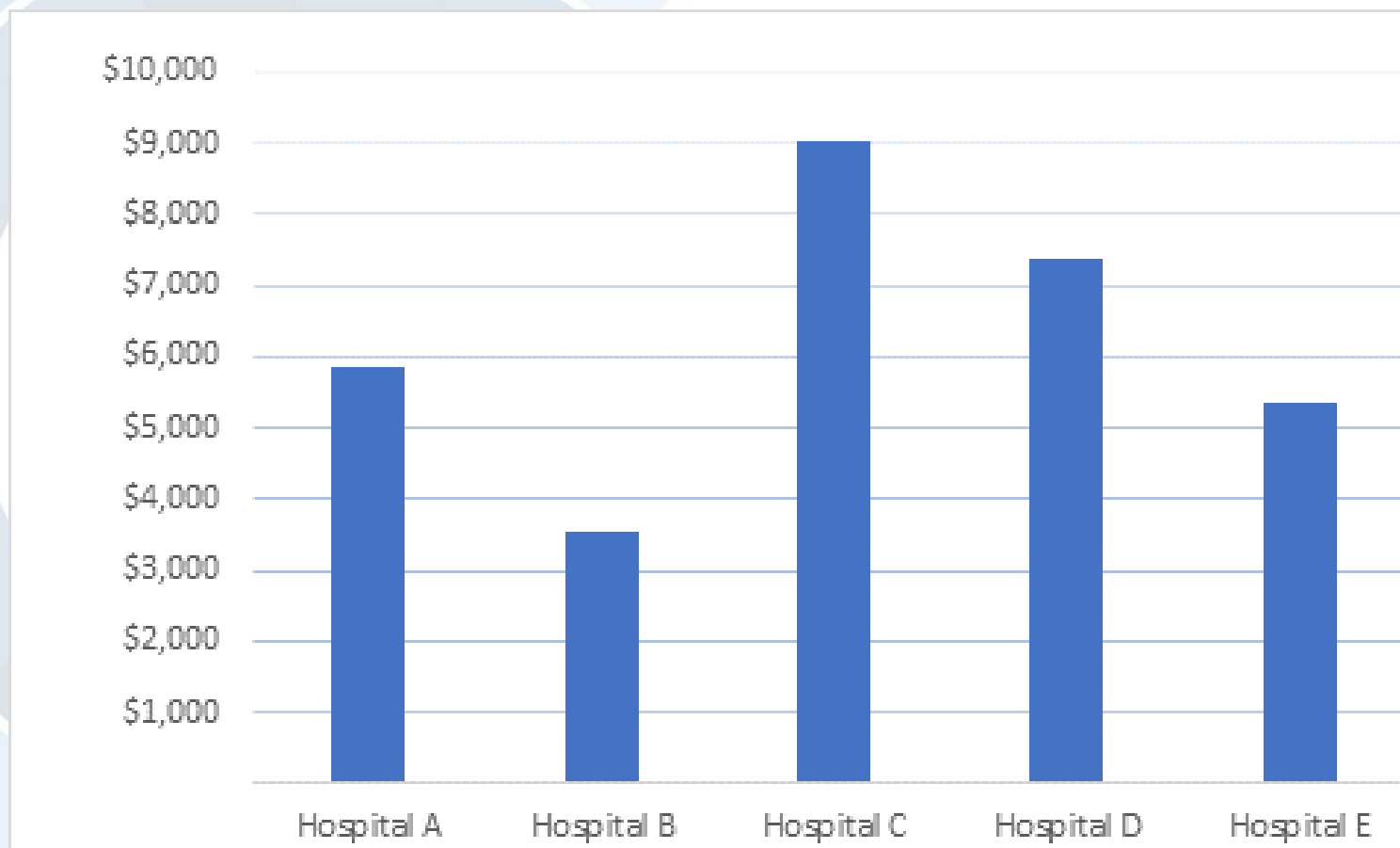
Month	Number of Claims Paid	Dollars Paid	% Paid < 30 Days	% Paid < 90 Days
September	318,090	\$83,923,345	24.5%	43.0%
October	608,768	\$155,453,736	34.2%	53.4%

- Process to catch up on provider payments began with Cook County in October
- Expect trend to continue to improve in November

Source: CCH Health Plan Services Analytics



Hospitals Vary By Cost Per Admission



Average Cost Per Admission Data adjusted for patient acuity on Case Mix Index (CMI)

Source: CCH Health Plan Services Analytics based on State of IL Medicaid Rates



Value
Add
Benefits



Open Enrollment Value Added Benefits

CountyCare offers Value Added Benefits and Rewards during open enrollment focused on expectant families, women's health and adults

Some Benefits and Rewards include:

- Free car seats and diapers
- Free LASIK surgery
- Gift cards for completion of immunizations and well visits
- Gift cards for completed care plans and diabetic screenings



CountyCare Member Rewards Program

Rewards for Expectant Moms and Families

Free Car Seats	WHO QUALIFIES: Children under 8 years old or under 85 pounds	REQUIRED ACTIVITY: Parents call Member Services to request a car seat	REWARD: A car seat will be delivered to your home
Free Diapers	WHO QUALIFIES: Children up to 2 years old	REQUIRED ACTIVITY: Keep children's shots up to date	REWARD: A monthly coupon for a free Jumbo Pack of Baby Basics Diapers will be mailed to your home
Sleep Safe Kit	WHO QUALIFIES: Pregnant women and their newborns	REQUIRED ACTIVITY: Mom calls Member Services to request the kit. She completes at least 14 prenatal visits.	REWARD: Graco portable crib, Halo SleepSac, Baby Sleep board book, Pacifier will be mailed to your home
Post Partum Visit	WHO QUALIFIES: Moms who recently delivered babies	REQUIRED ACTIVITY: Visit your doctor for a follow-up exam 21-56 days after delivery	REWARD: \$25 reward added to your card
Prenatal Visit	WHO QUALIFIES: Pregnant CountyCare members	REQUIRED ACTIVITY: Visit your doctor for prenatal visits	REWARD: \$10 reward for up to 14 prenatal visits
Breast Pumps	WHO QUALIFIES: Pregnant moms and moms who recently delivered babies	REQUIRED ACTIVITY: Talk to your doctor to order breast pump	REWARD: Free breast pump
Childhood Immunizations	WHO QUALIFIES: Members under 2 years old	REQUIRED ACTIVITY: See your doctor to have your child immunized	REWARD: \$10 reward per shot is added to your card, up to 10 total
Well Child Visits	WHO QUALIFIES: Members under 15 months old	REQUIRED ACTIVITY: See your doctor for well-child visits as recommended	REWARD: \$50 for taking your baby to the doctor within 30 days of birth, \$10 for each of the next 5 visits
Toddler and Children's Book Clubs	WHO QUALIFIES: Members ages 3-16	REQUIRED ACTIVITY: Contact Member Services to request a book each quarter	REWARD: One free book, plus \$10 Target gift card for those ages 5-16 will be mailed to your home

Rewards for Women's Health

Annual Mammogram	WHO QUALIFIES: Female members 50-74	REQUIRED ACTIVITY: Get a mammogram from a network provider.	REWARD: \$25 reward added to your card once per year
Free Home Pregnancy tests	WHO QUALIFIES: Female members of childbearing age	REQUIRED ACTIVITY: Contact CountyCare Member Services or your Care Coordinator to request.	REWARD: Free home pregnancy test, 1 per month, is mailed to you

Pharmacy

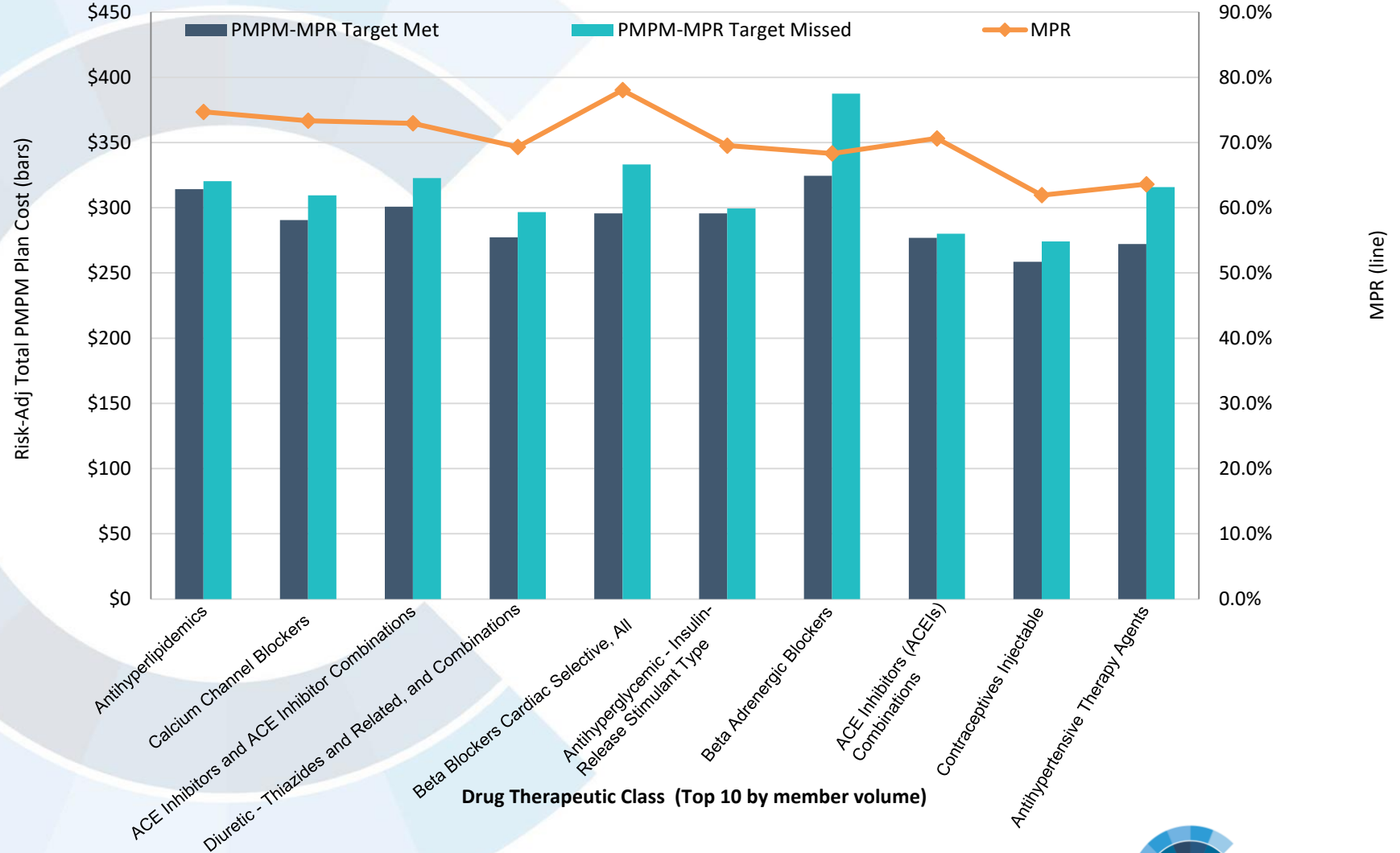


Medication Possession Ratio

Medication Possession Ratio measures the percentage of time a member has access (e.g. adequate days supply) to drugs they are prescribed

- Members with a ratio above 80% show lower overall PMPM costs
- Engaging and educating members below 80% will lead to lower costs and higher quality outcomes

Medication Possession Ratio (MPR)



Source: CCH Health Plan Services Analytics

Domestic Pharmacy Spend

SuperGroup	Member Months	Total Rx Spend	Rx PMPM	% of Total Rx Spend	Domestic Rx %
MHN	1,412,030	\$ 122,686,374	\$ 87	37%	3%
CCSN	524,230	\$ 38,738,957	\$ 74	12%	3%
CCHHS	499,954	\$ 57,087,168	\$ 114	17%	21%
OTHER	411,258	\$ 37,892,401	\$ 92	11%	2%
ACCESS	383,278	\$ 26,520,625	\$ 69	8%	2%
OTHER, NON APOGEE FQHC	231,762	\$ 24,962,432	\$ 108	8%	5%
PRESENCE HEALTH PARTNERS	200,386	\$ 13,333,420	\$ 67	4%	2%
APOGEE	74,946	\$ 4,844,325	\$ 65	1%	5%
MLTSS	66,624	\$ 296,248	\$ 4	0%	8%
CENTURY PHO	25,923	\$ 1,559,541	\$ 60	0%	2%
OAK STREET HEALTH	15,224	\$ 2,687,455	\$ 177	1%	1%
PCP PENDING	11,232	\$ 267,447	\$ 24	0%	4%
IPA	1,462	\$ 168,869	\$ 116	0%	0%
PARTNERS IN HEALTH	1,124	\$ 38,455	\$ 34	0%	16%
MERCY	562	\$ 38,115	\$ 68	0%	0%
Total	3,859,995	\$ 331,121,832	\$ 86	100%	7%

- Analysis shows that members empaneled to CCHHS get their Rx scripts filled at a CCHHS pharmacy 1 out of 5 times (21%)
- We are actively engaged in solutions, such as increased mail order and focus by cost, to increase this and support the Domestic Spend initiative

Source: CCH Health Plan Services Analytics

