

# CountyCare Update

*Prepared for: CCH Managed Care Committee*

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# Plan Metrics



# Current Membership

Monthly membership as of November 6, 2020

Category	Total Members	ACHN Members	% ACHN
FHP	229,160	17,205	7.5%
ACA	94,788	14,458	15.3%
ICP	30,783	5,689	18.5%
MLTSS	6,392	0	N/A
SNC	13,536	1,302	9.6%
<b>Total</b>	<b>374,659</b>	<b>38,654</b>	<b>10.4%</b>

**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



# Managed Medicaid Market

Illinois Department of Healthcare and Family Services September 2020 Data

Managed Care Organization	Cook County Enrollment	Cook County Market Share
*CountyCare	371,328	31.4%
Meridian (a WellCare Co.)	310,199	25.2%
Blue Cross Blue Shield	297,587	26.3%
IlliniCare (Aetna/CVS)	118,628	10.0%
Molina	83,771	7.1%
<b>Total</b>	<b>1,181,513</b>	<b>100.0%</b>

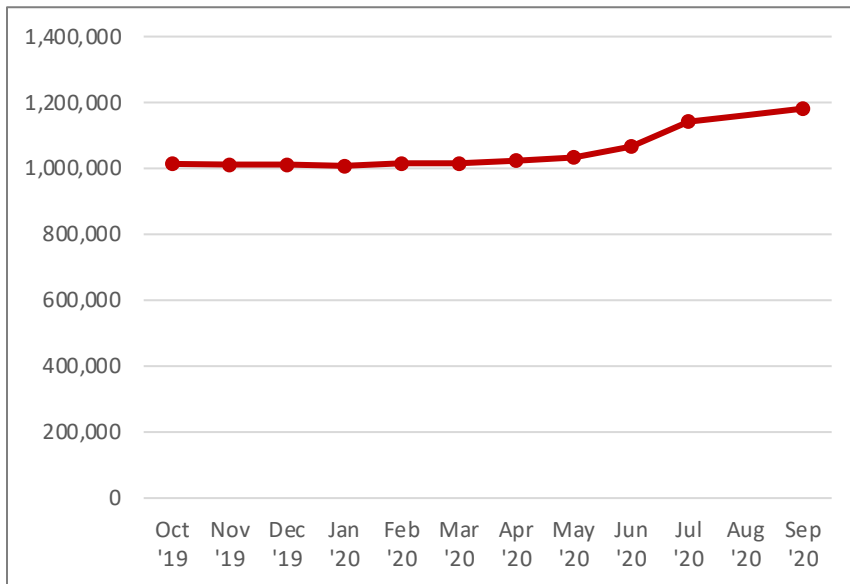
\* Only Operating in Cook County

Meridian and WellCare (dba Harmony) merged as of 1/1/2019. Pending Merger with Centene (dba IlliniCare)

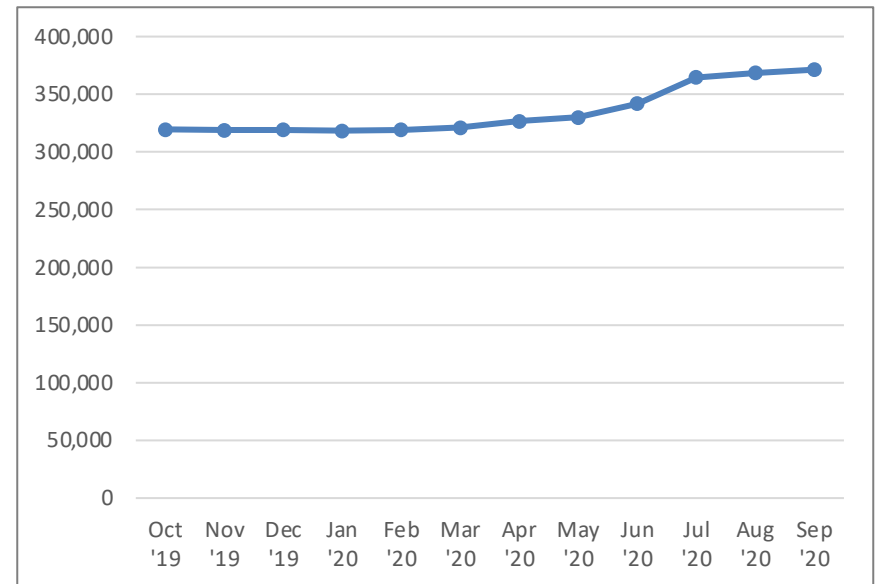


# IL Medicaid Managed Care Trend in Cook County

## Cook County Medicaid Managed Care



## CountyCare



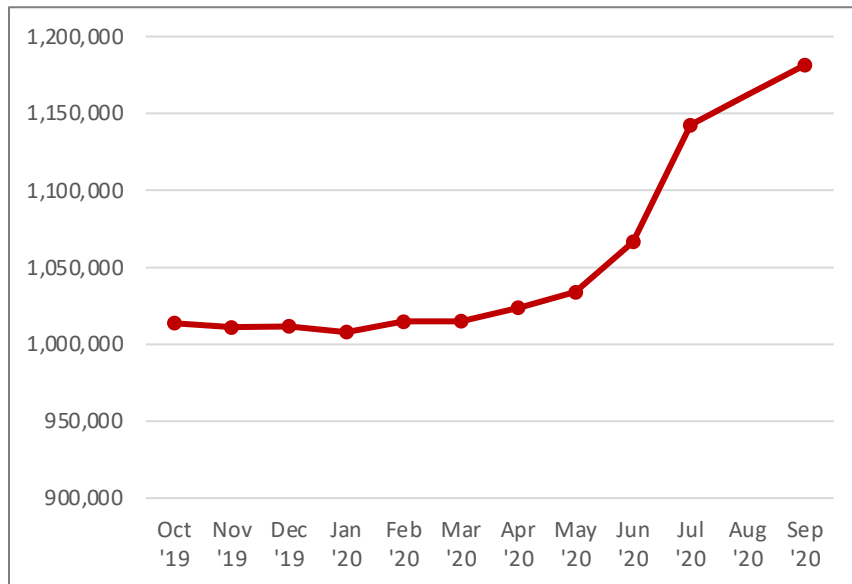
- CountyCare's monthly enrollment trend closely follows the overall Managed Care enrollment trend in Cook County

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

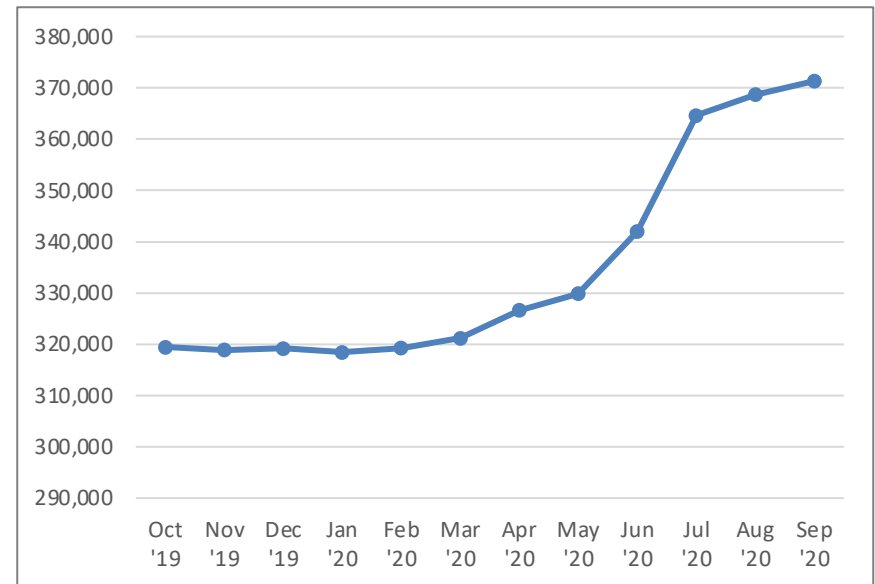
Note: HFS source website did not report August 2020 enrollment

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

### Cook County Medicaid Managed Care

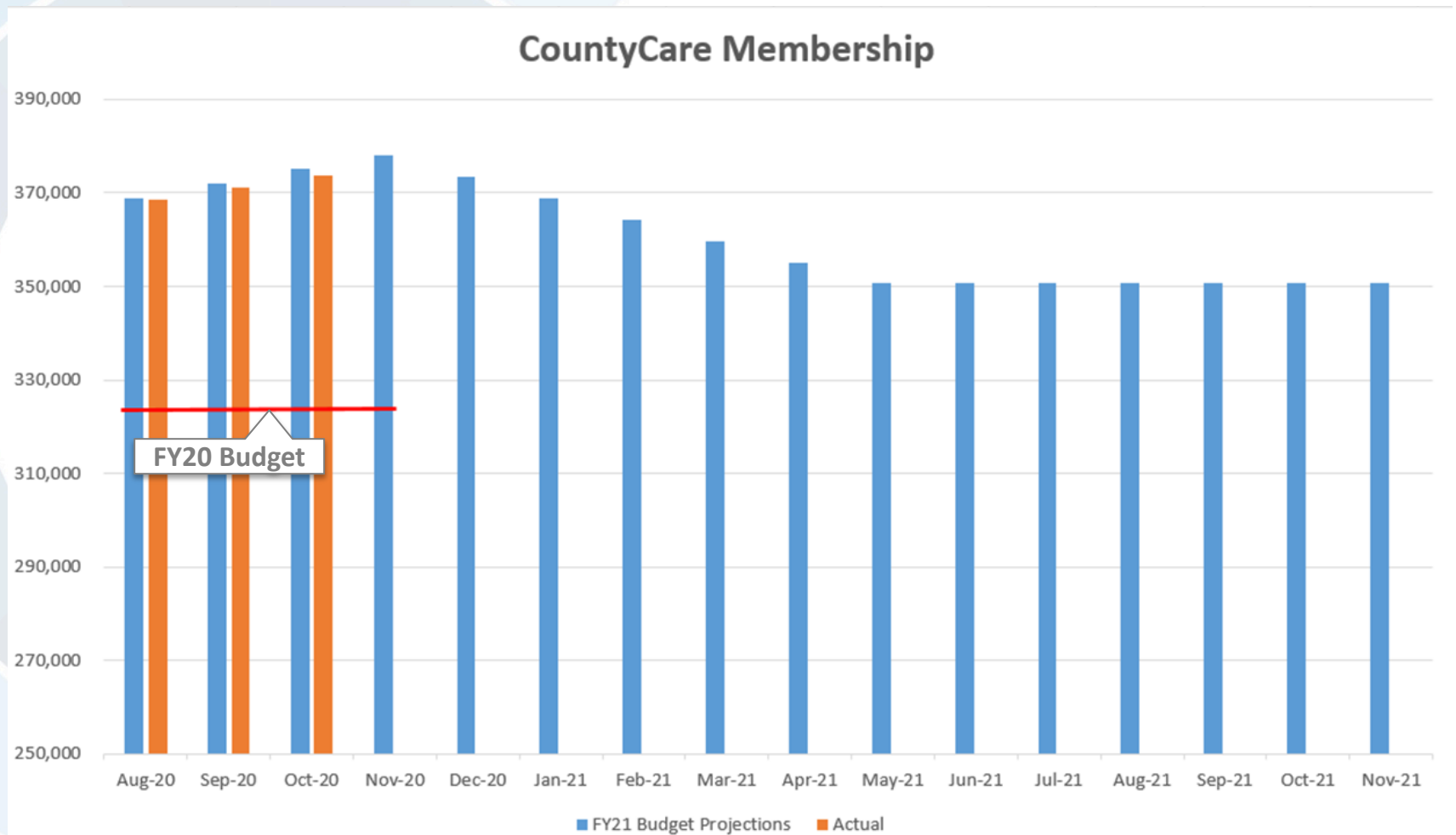


### CountyCare



- CountyCare's enrollment has increased 16.2% over the past 12 months, slightly lagging the Cook County increase of 16.6%
- CountyCare's enrollment increased 0.7% in September 2020 compared to the prior month

# FY 21 Budget: Membership



# 2020 Operations Metrics: Call Center & Encounter Rate

Key Metrics	State Goal	Performance		
		Jun-20	Jul-20	Aug-20
<b>Member &amp; Provider Services Call Center Metrics</b>				
Abandonment Rate	< 5%	2.28%	2.24%	2.19%
Hold Time (minutes)	1:00	0:19	0:26	0:22
% Calls Answered < 30 seconds	> 80%	88.95%	88.88%	89.49%
<b>Quarterly</b>				
Claims/Encounters Acceptance Rate*	98%	96%	N/A	

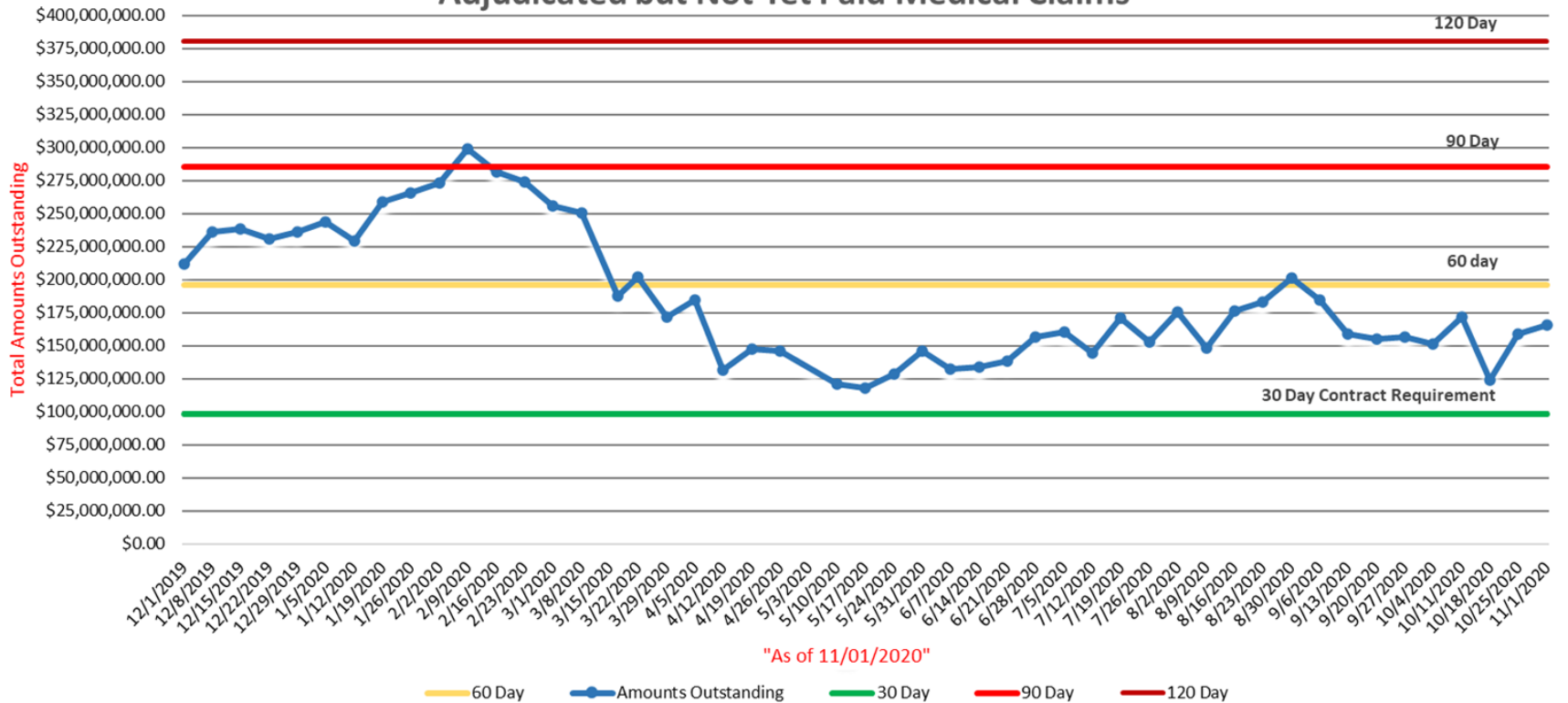
\* Preliminary score





# Claims Payment

## Adjudicated but Not Yet Paid Medical Claims



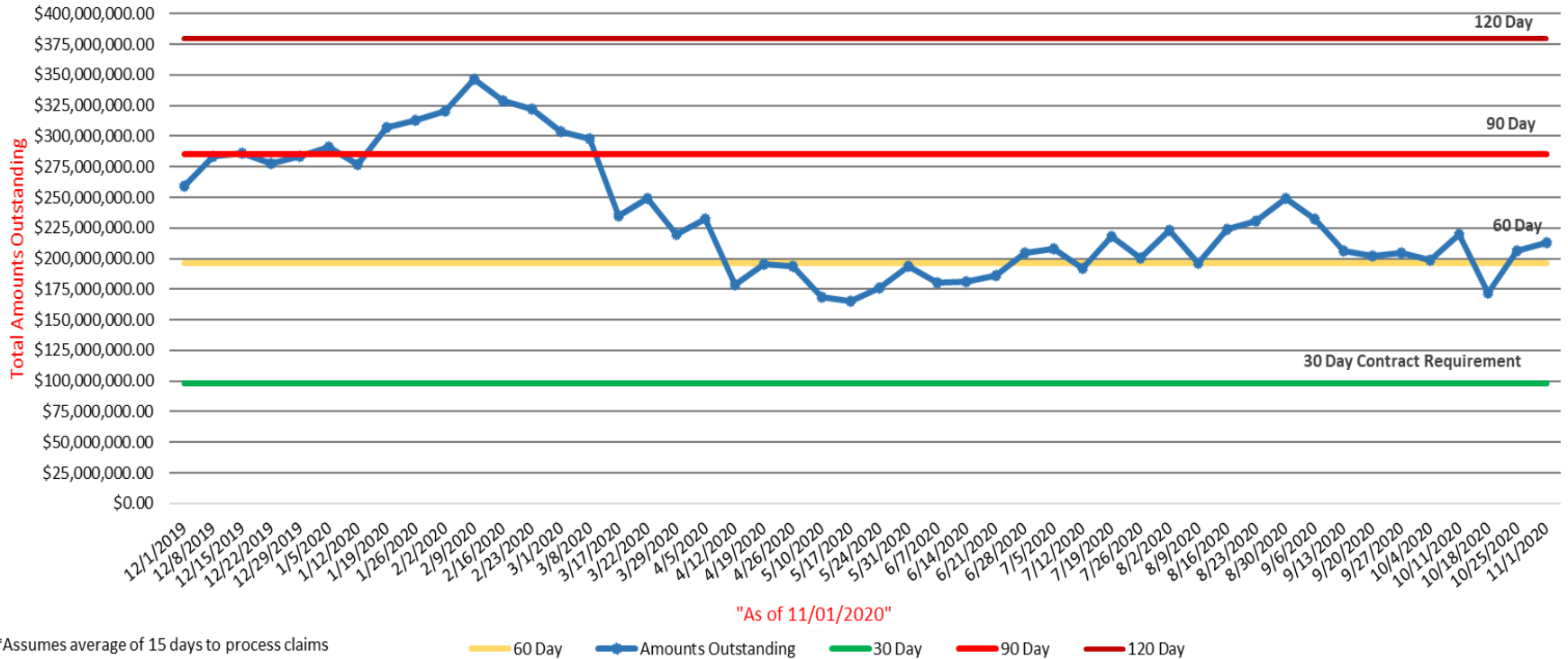
"As of 11/01/2020"

\*Medical claims only-does not include pharmacy, dental, vision or transportation claims



# Claims Payment

## Received but Not Yet Paid Medical Claims



"As of 11/01/2020"

\*Assumes average of 15 days to process claims

\*Assumes \$47.5M in pending claims not yet adjudicated

\*Medical claims only- does not include pharmacy, dental, vision or transportation claims

60 Day    Amounts Outstanding    30 Day    90 Day    120 Day

Source: CCH Health Plan Services Analytics



# COVID-19 Impact



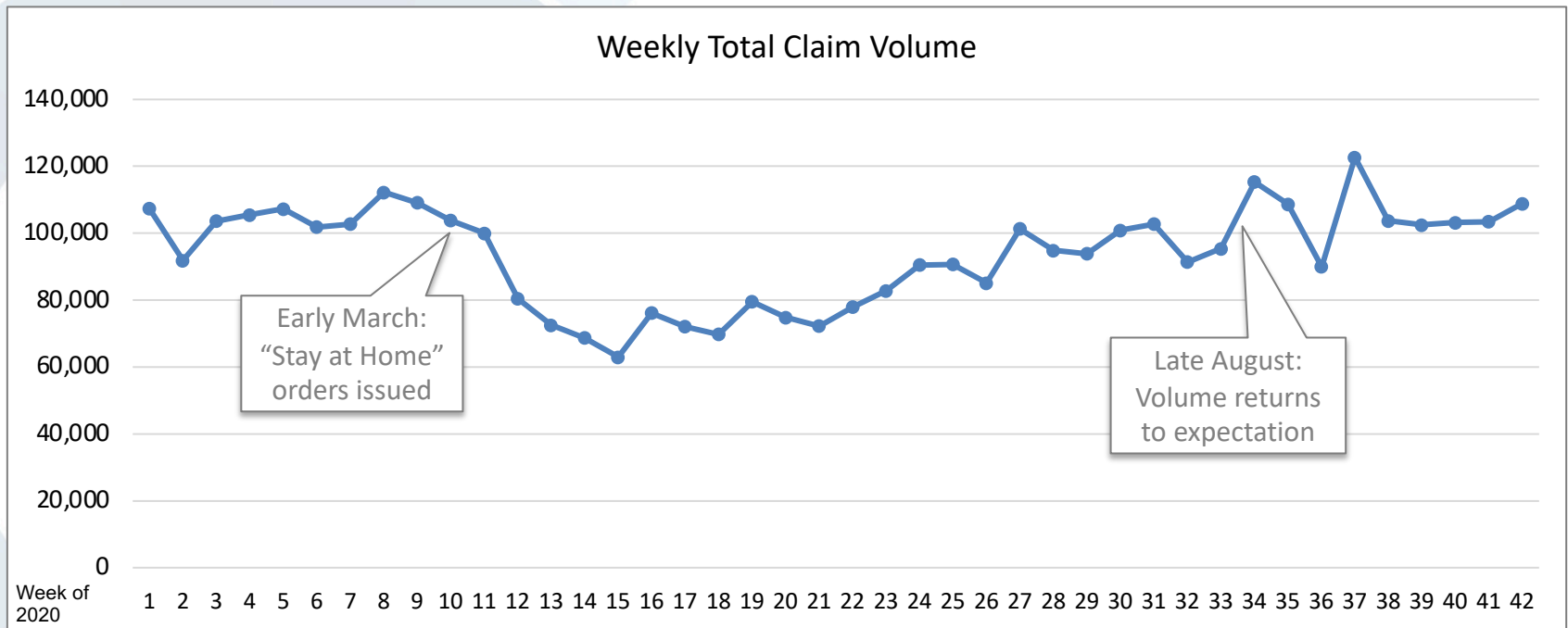
# COVID-19 | By the Numbers

CountyCare experience since March 2020

- 43,000+ members (12.0% of CCH population) with a diagnostic test
- 8,300+ members (2.3% of CCH population) with a positive diagnosis
- 137,000+ claims related to COVID-19 treatment, diagnostic and antibody testing
- \$43M+ medical spend related to COVID-19 treatment
- 2,200+ admissions related to COVID-19

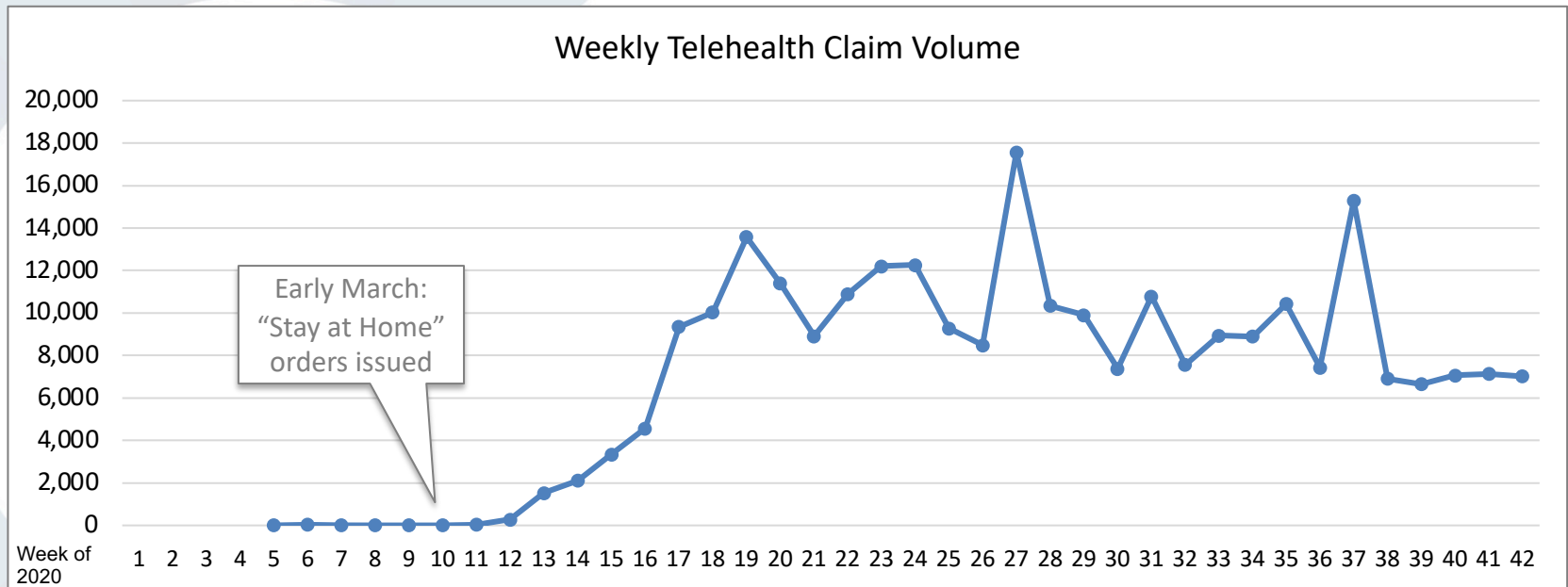


# COVID-19 Impact on Claim Volume



- Claim volume has returned to pre-pandemic levels and been consistent since late August

# Telehealth Plays Important Role during the Pandemic



- Telehealth claims grew rapidly after “Stay at Home” orders were issued
- Telehealth volume has decreased from its peak but remains a meaningful part of overall claim volume (7% of total over the past month)

# COVID-19 Total Treatment Costs

Category	Spend (\$M)	# of Claims
Acute Inpatient	\$30.2	1,530
Long Term Care Facility	\$8.2	723
Outpatient	\$1.0	2,641
Professional	\$4.3	59,790
<b>Total Medical</b>	<b>\$43.7</b>	<b>64,684</b>

- Majority of spend is related to acute admissions for more severe cases, with average cost per admission approaching \$23,000

Claims incurred and paid March 2020 – October 2020



# Open Enrollment and Marketing





# Medicare Open Enrollment

## Medicare Enrollment Periods

If you are currently eligible for Medicare, nearing the age of Medicare eligibility or wish to change your existing Medicare coverage, it's vital you understand Medicare enrollment dates. Missing your enrollment window may lead to costly late enrollment penalties.

Enrollment period	Dates	Actions you can take during this period
<b>Annual Enrollment Period (AEP)</b>	<ul style="list-style-type: none"><li>• Starts October 15</li><li>• Ends December 7</li></ul>	<ul style="list-style-type: none"><li>• Sign up for a plan</li><li>• Switch plans</li><li>• Leave a plan</li></ul>
<b>Open Enrollment Period (OEP)</b>	<ul style="list-style-type: none"><li>• Starts January 1</li><li>• Ends March 31</li></ul>	<ul style="list-style-type: none"><li>• One time switch between MAPD plans or back to Original Medicare</li><li>•</li></ul>
<b>Initial Coverage Election Period (ICEP)</b>	<ul style="list-style-type: none"><li>• Starts 3 months before the month you turn 65</li><li>• Ends 3 months after the month you turn 65</li></ul>	<ul style="list-style-type: none"><li>• Sign up for a plan</li></ul>
<b>Special Enrollment Period (SEP)</b>	All Year for patients with special circumstances like moving, having Medicaid or certain chronic conditions	<ul style="list-style-type: none"><li>• Switch plans</li><li>• Leave a plan</li><li>• Enroll in Part D</li></ul>

More information about [Special Enrollment Periods](#)



# Medicare Current Membership

<b>Product</b>	<b>Members</b>
MoreCare For You (MAPD)	317
MoreCare At Home (IE-SNP)	161
MoreCare + (C-SNP)	23
Plan Total	501

# Medicaid Open Enrollment

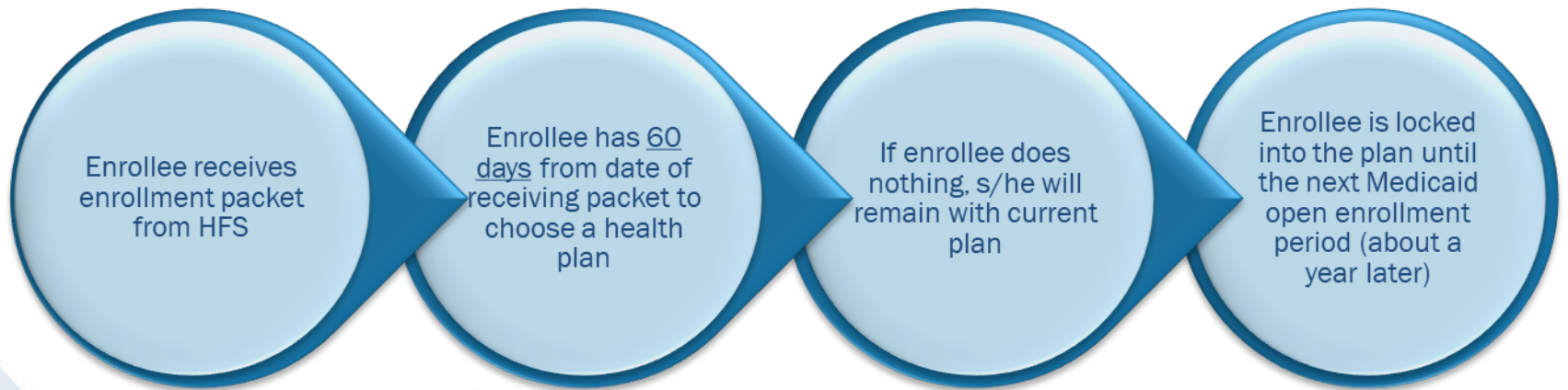
HFS (Healthcare and Family Services) will notify Medicaid recipients of their open enrollment period

HFS Mail Date	Recipient's Anniversary Date
October	01/01/2021
November	02/01/2021
December	03/01/2021
January	04/01/2021
February	05/01/2021

**If members receive their letter from the state and they do nothing, they will stay with current MCO**



# Medicaid Open Enrollment



Source: CCH Health Plan Services Analytics