Human Resources Metrics
CCH Board of Directors

Barbara Pryor

Chief Human Resources Officer

February 28, 2020

COOK COUNTY HEALTH

Metrics

COOK COUNTY HEALTH

CCH Open Vacancies

Important Performance Data

CCH has approximately 597 vacancies with 369 in process:

1. CCH vacancies are rolling; not budgeted placeholders.
2. Currently 369 of those vacancies are in the hiring process
3. 60% (222) of the 369 positions in process, are in the post-validation phase:
   - (17%) 62 are interviewing
   - (25%) 94 vacancies have a candidate selected
   - (16%) 58 have start dates set

FY 2020 Vacancy	Count
Fiscal Year 2020 Approved Positions:	526
Current Vacancy Number:	597
# of Positions in Process:	369

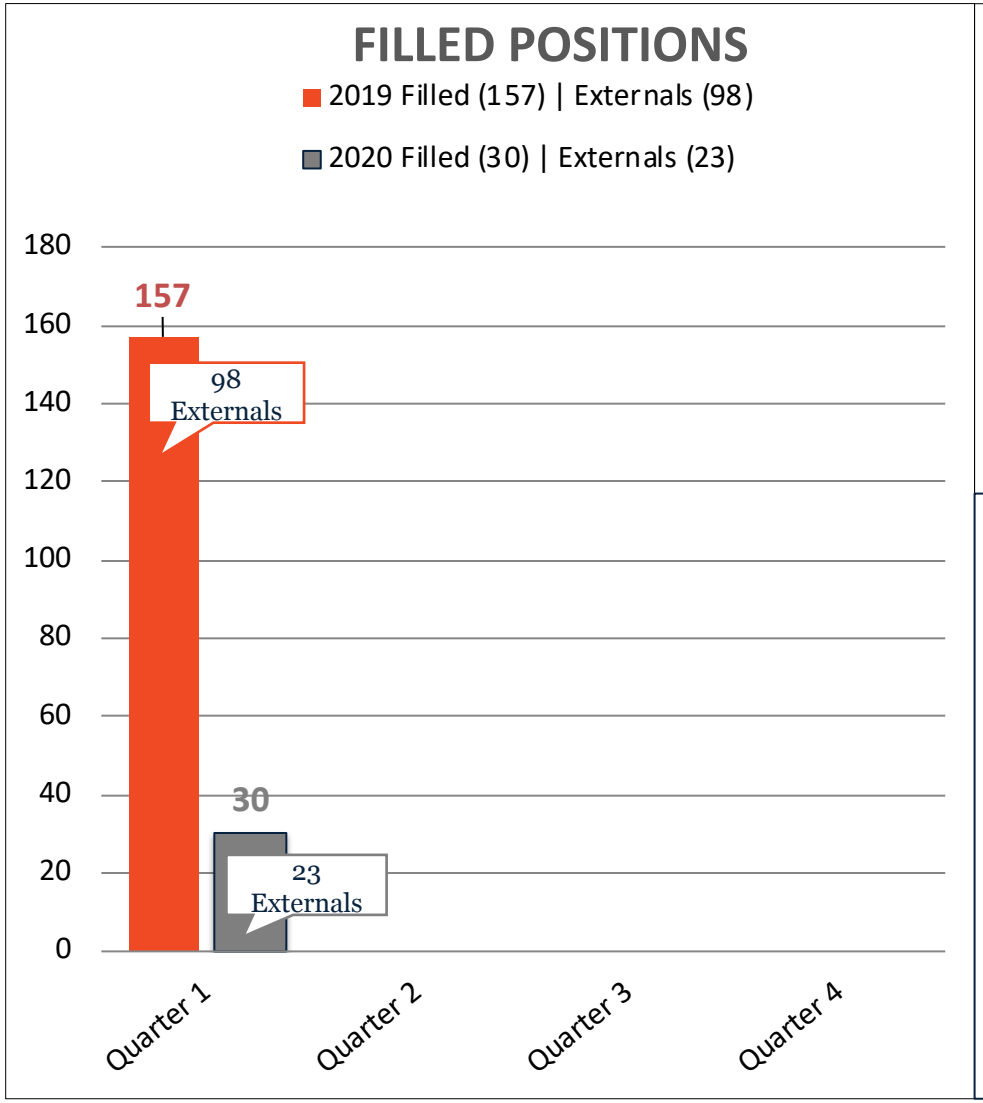
Thru 01/31/2020

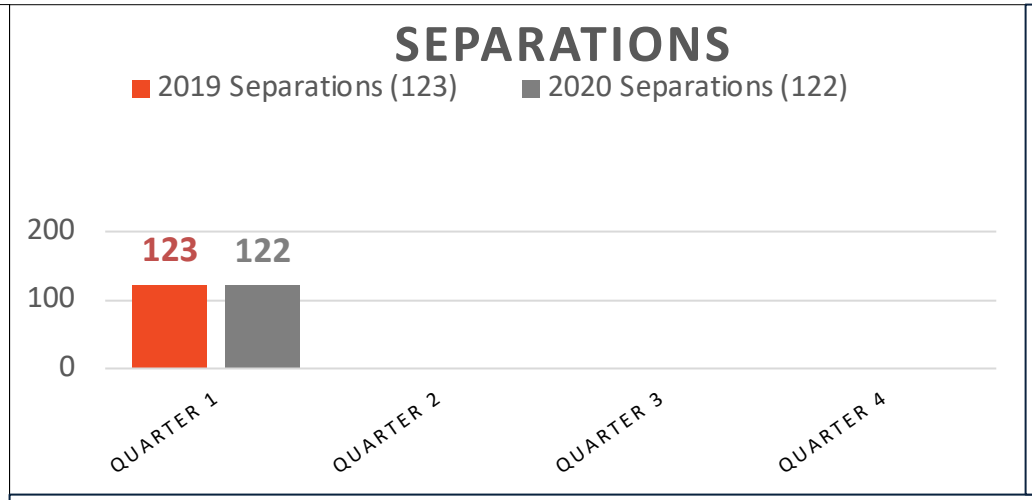
Does not include Consultants, Registry and House Staff

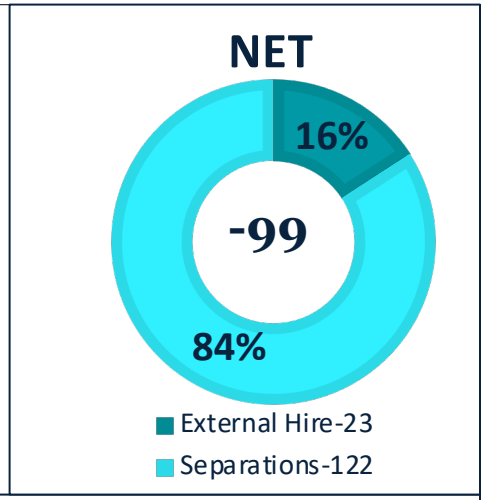
COOK COUNTY HEALTH

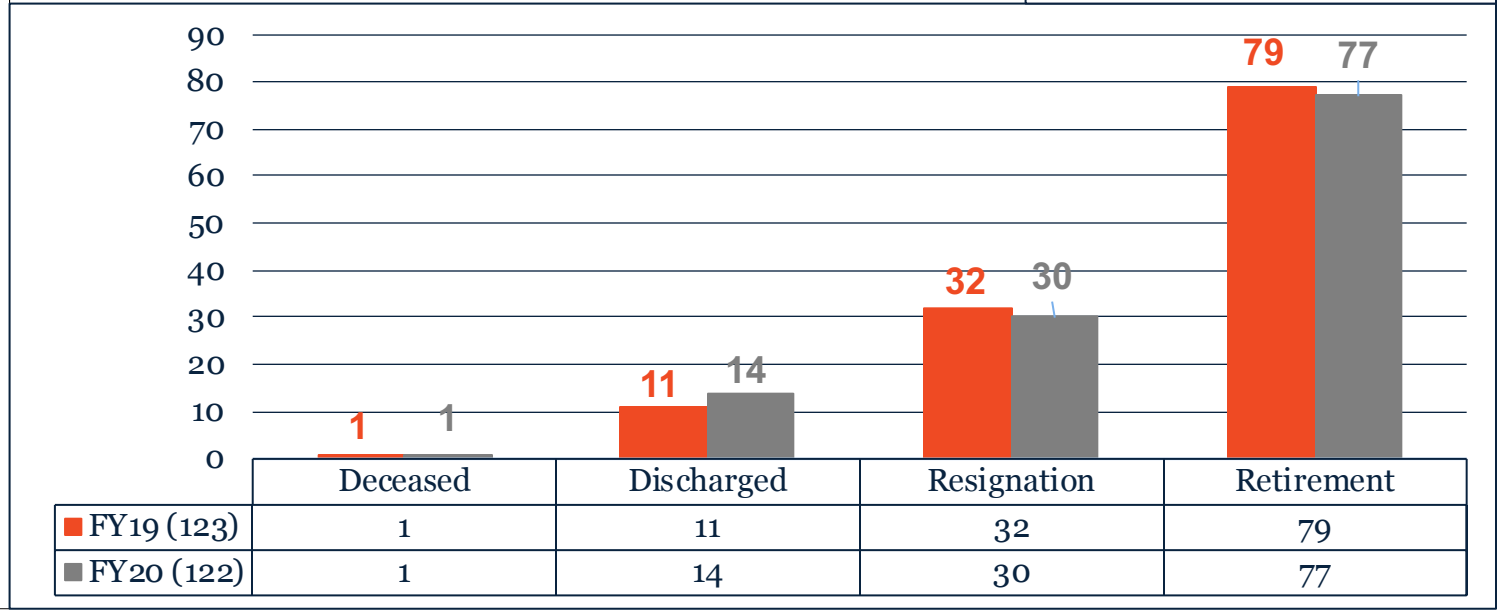
FY 2020 CCH HR Activity Report

Thru 01/31/2020









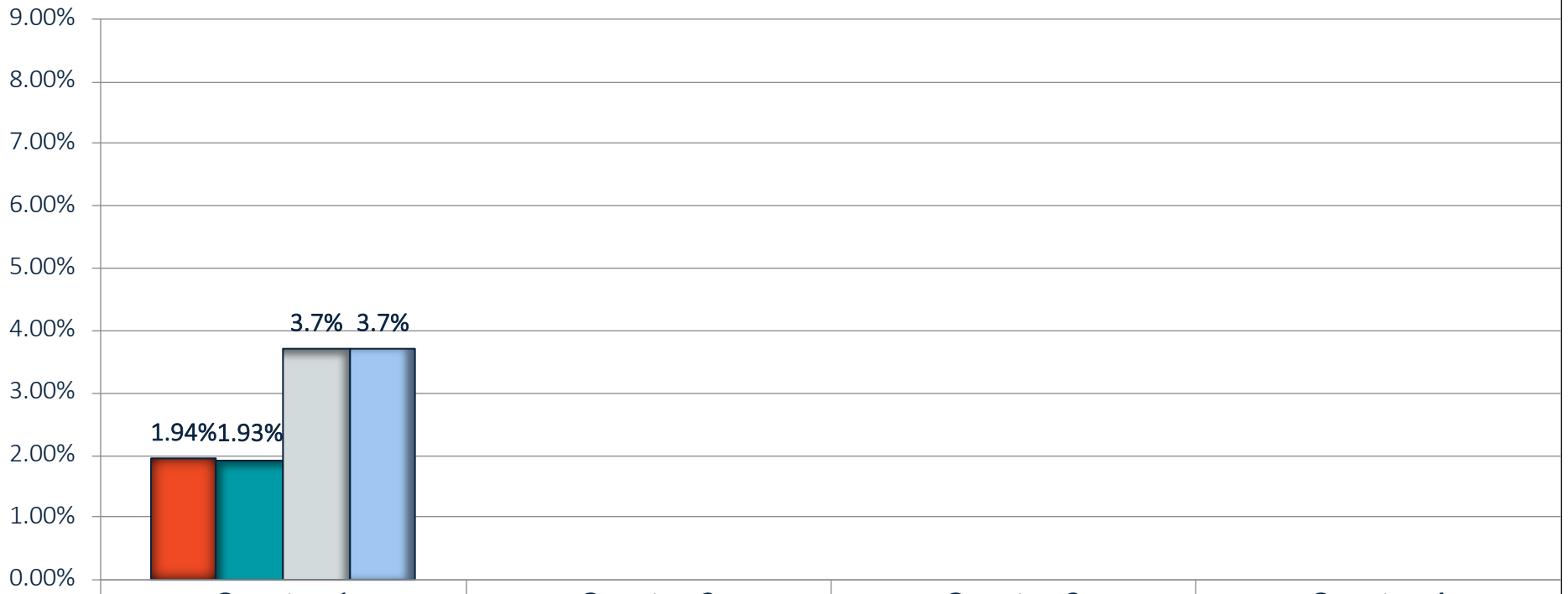
	Deceased	Discharged	Resignation	Retirement
FY19 (123)	1	11	32	79
FY20 (122)	1	14	30	77

COOK COUNTY HEALTH

Does not include Consultants, Registry and House Staff

CCH HR Activity Report – Turnover

CCH TURNOVER
Turnover Year-to-Date
Head Count: 6,297



YTD Cumulative Totals:	Quarter 1	Quarter 2	Quarter 3	Quarter 4
FY20 CCH Turnover	1.94%			
FY19 CCH Turnover	1.93%			
FY17 U.S. IL Health & Hospital Assoc. Turnover Data	3.7%			
FY19 U.S. Dept. of Labor Turnover Data	3.7%			

COOK COUNTY HEALTH

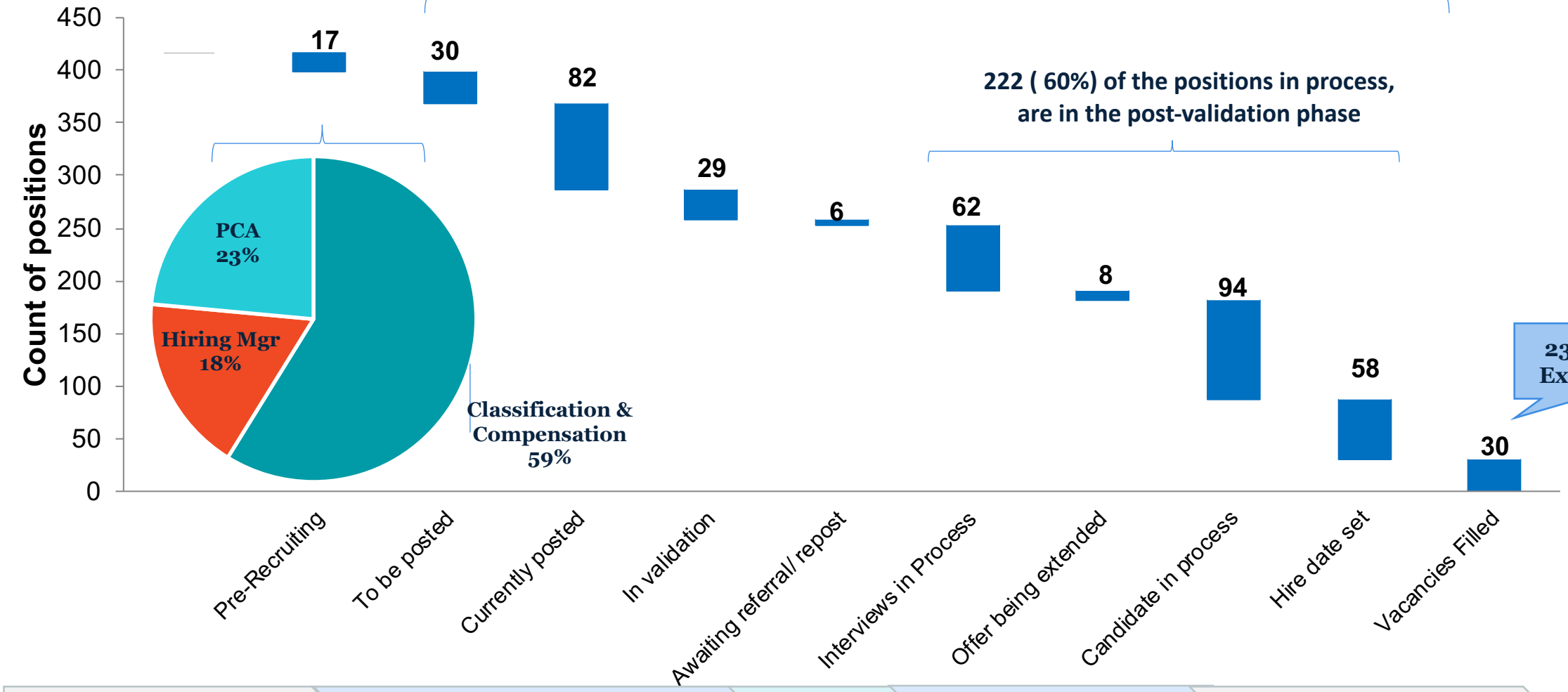
Include Consultants, Registry and House Staff
FY20 data is through 01/31/2020

Cook County Health HR Activity Report – Hiring Snapshot

Thru 01/31/2020

Clinical Positions	224 | 61%
Non-Clinical Positions	145| 39%

369 Positions in Recruitment



Shared Responsibility | Human Resources | Management | Finance / Human Resources | Shared Responsibility

COOK COUNTY HEALTH

Thank you.

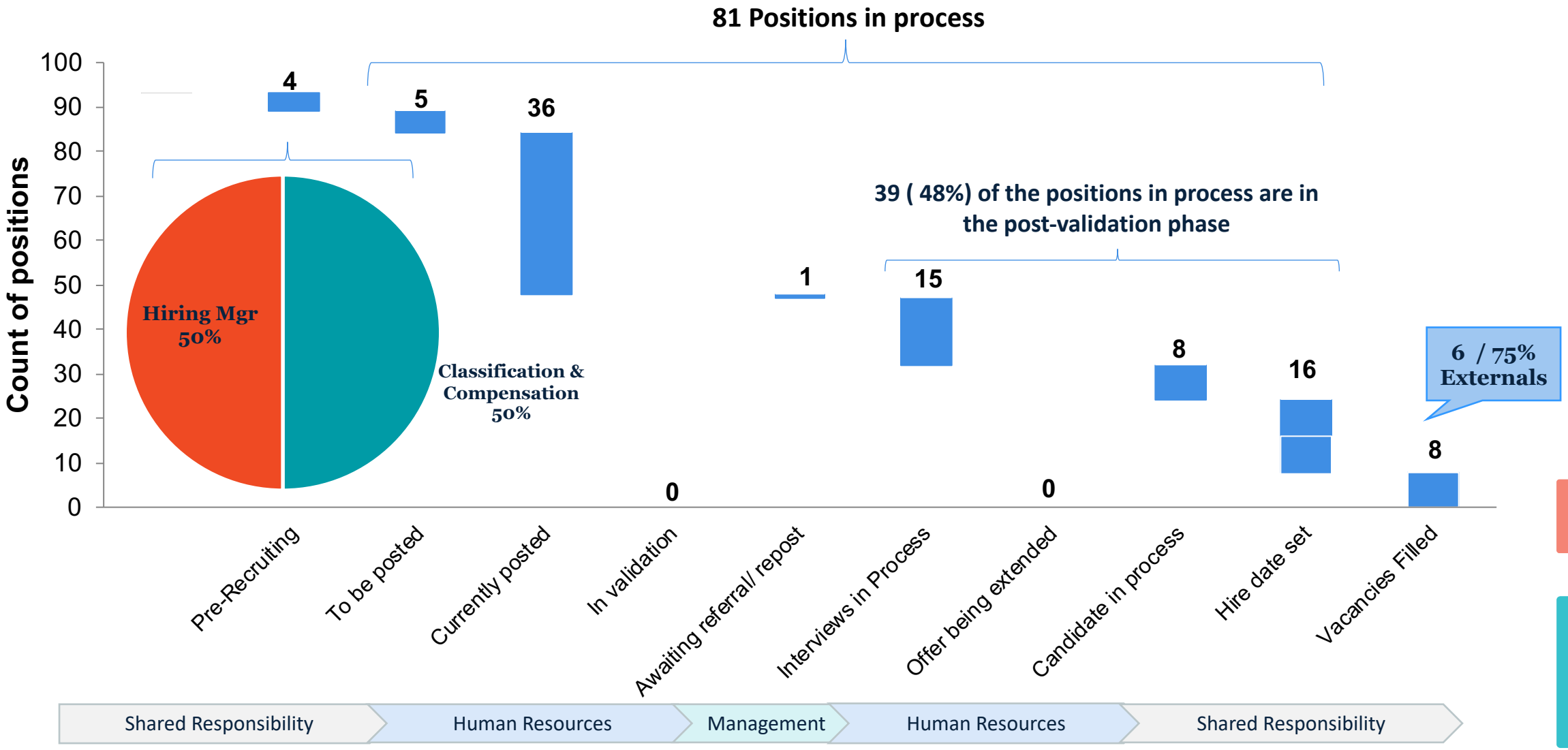
COOK COUNTY
HEALTH

Appendix

COOK COUNTY HEALTH

Cook County Health HR Activity Report Nursing Hiring: CNI, CNII

Thru 01/31/2020

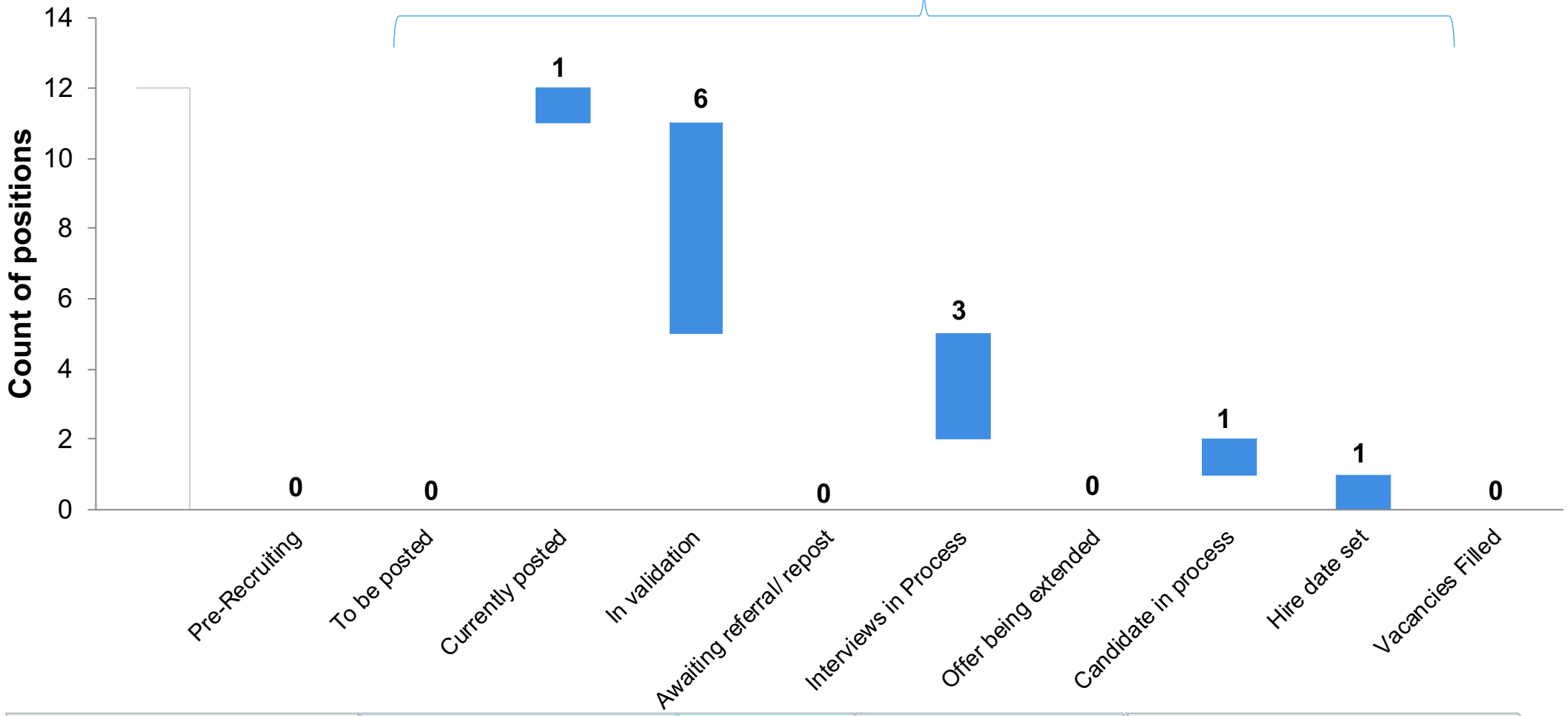


COOK COUNTY HEALTH

Cook County Health HR Activity Report – Revenue Cycle

Thru 01/31/2020

12 Positions in process



Shared Responsibility → Human Resources → Management → Human Resources → Shared Responsibility

COOK COUNTY HEALTH

CountyCare Update

Prepared for: CCH Board of Directors

James Kiamos

CEO, Health Plan Services

February 28, 2020

Current Membership

Monthly membership as of February 4, 2020

Category	Total Members	ACHN Members	% ACHN
FHP	211,511	16,508	7.8%
ACA	73,577	12,390	16.8%
ICP	28,372	5,492	19.4%
MLTSS	5,906	0	N/A
Total	**319,366**	**34,390**	**10.8%**

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

CountyCare HEALTH PLAN

Managed Medicaid Market

Illinois Department of Healthcare and Family Services December 2019 Data

Managed Care Organization	Cook County Enrollment	Cook County Market Share
*CountyCare	319,174	31.6%
Blue Cross Blue Shield	242,598	24.0%
Meridian (to WellCare to Centene)	222,581	22.0%
IlliniCare (legacy to CVS/Aetna)	104,911	10.4%
Molina	64,664	6.4%
*Next Level (sold to Molina)	57,666	5.7%
Total	**1,011,594**	**100.0%**

* Only Operating in Cook County

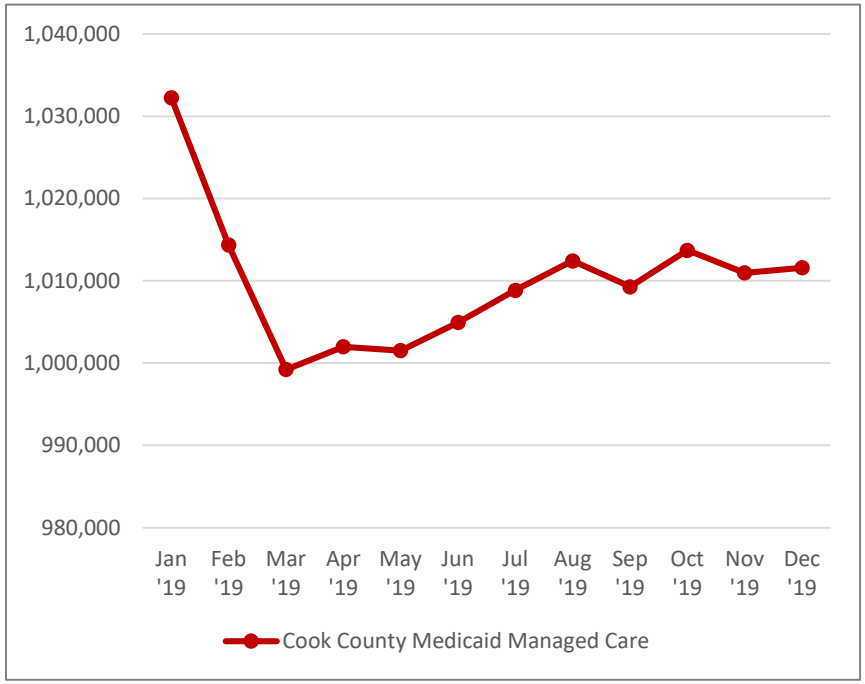
Meridian and WellCare (dba Harmony) merged as of 1/1/2019. Pending Merger with Centene (dba IlliniCare)
CVS/Aeta purchasing IlliniCare legacy Medicaid

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

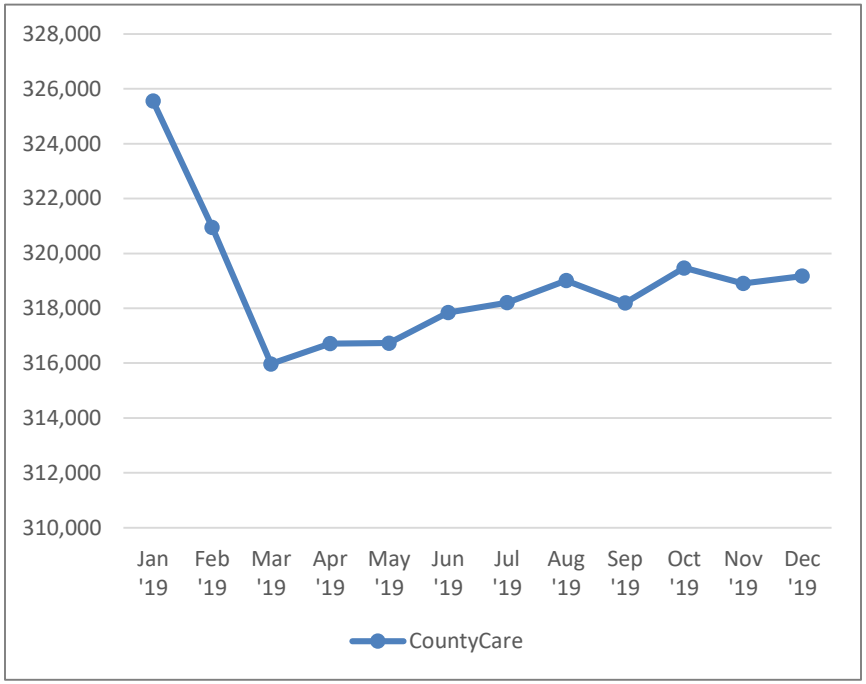
CountyCare HEALTH PLAN

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

Cook County Medicaid Managed Care



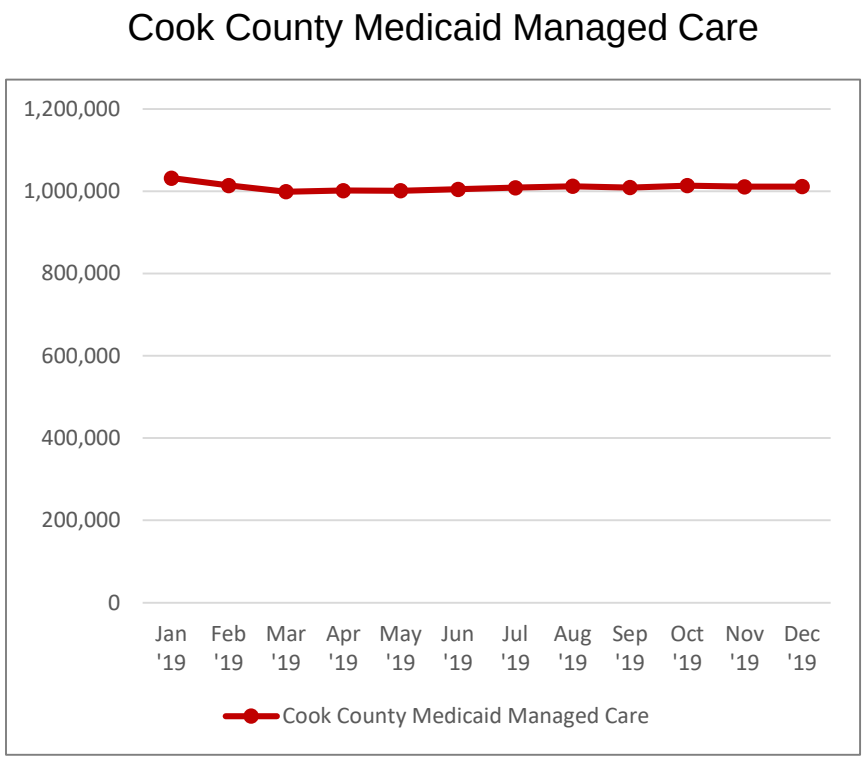
CountyCare

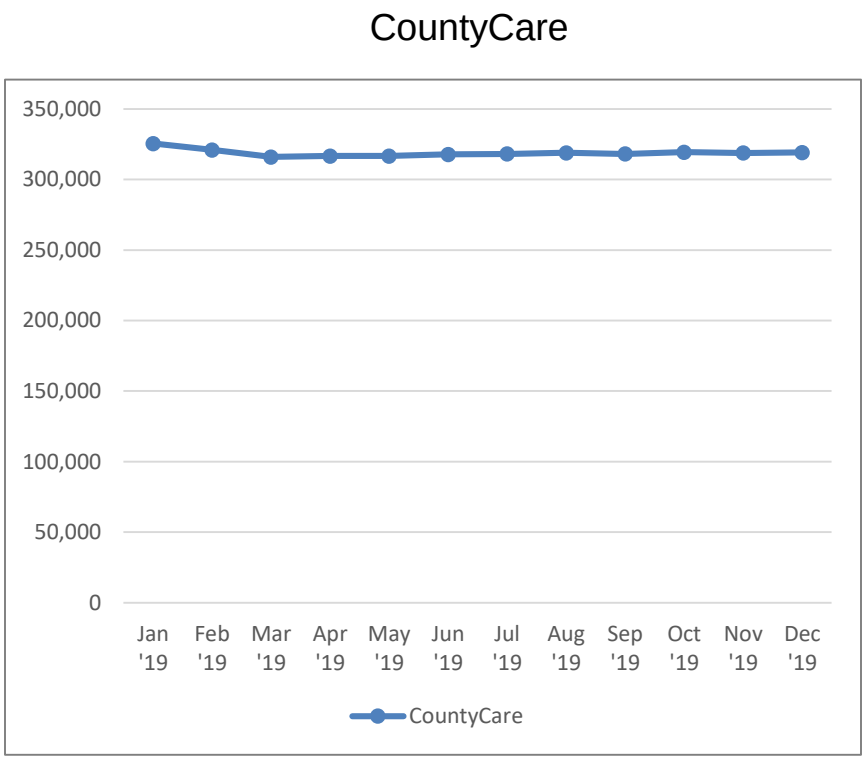


- CountyCare's monthly enrollment trend closely follows the overall Managed Care enrollment trend in Cook County

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

IL Medicaid Managed Care Trend in Cook County





- 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

Operations Metrics:
Overall Care Management Performance

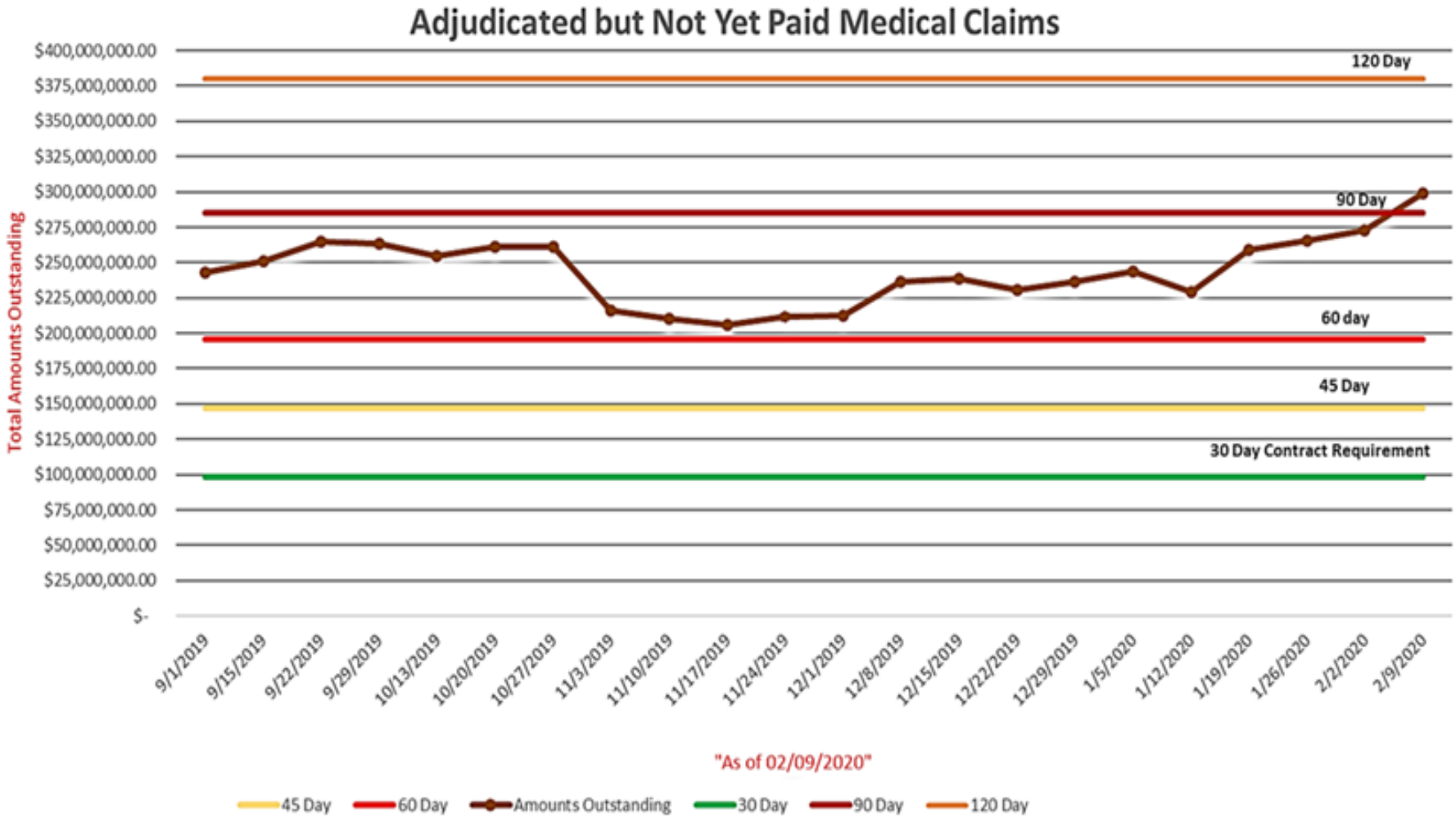
		Performance		
Key Metrics	**Market %**	**Oct**	**Nov**	**Dec**
Completed HRS/HRA (all populations)				
Overall Performance	**40%**	**67.4%**	**67.5%**	**67.6%**
Completed Care Plans on High Risk Members				
Overall Performance	**65%**	**63.2%**	**64.0%**	**63.3%**

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

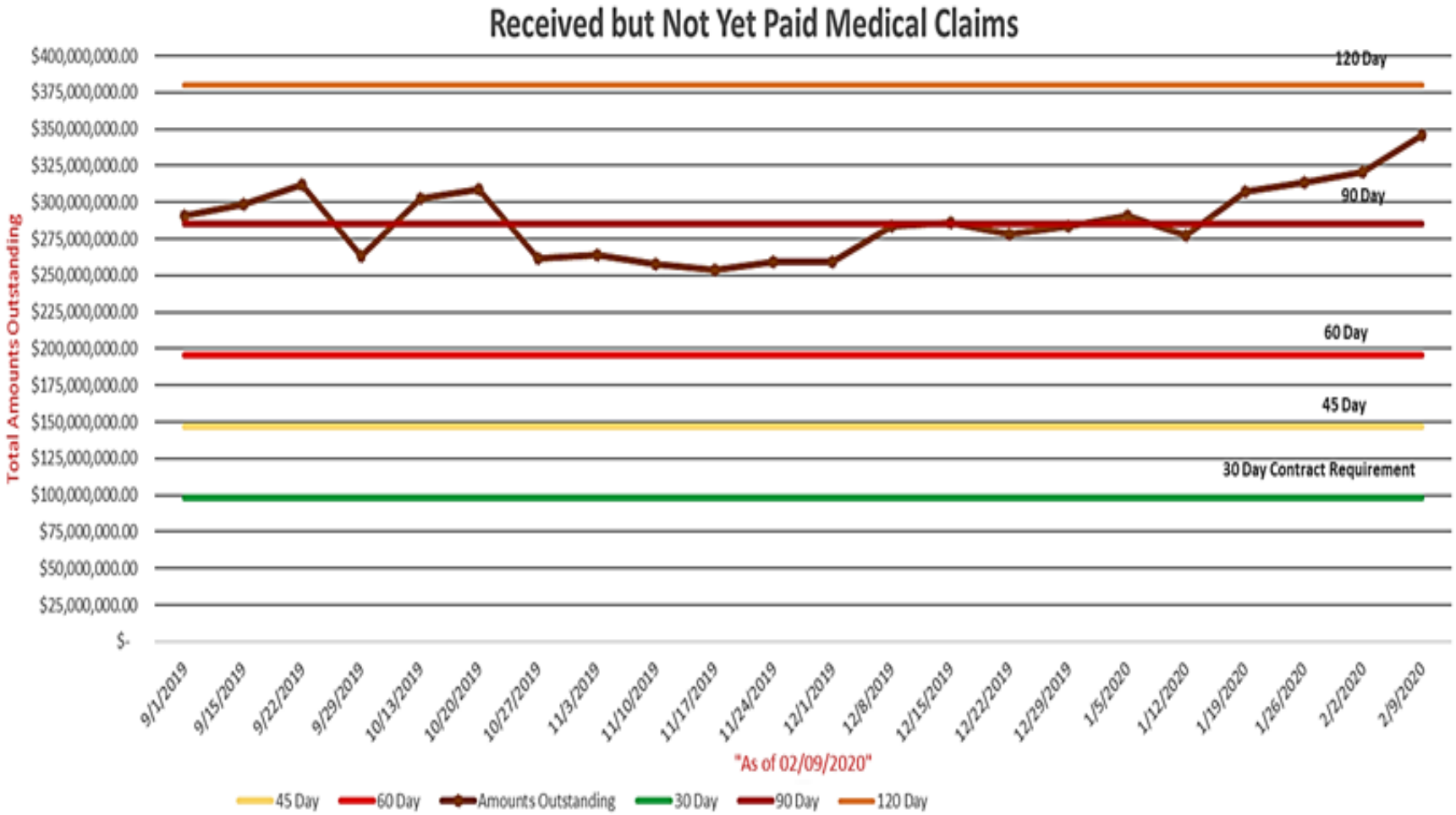
CountyCare HEALTH PLAN

Claims Payment



Source: CCH Health Plan Services Analytics

Claims Payment



*Assumes average of 15 days to process claims

*Assumes $47.5M in pending claims

Source: CCH Health Plan Services Analytics

QPS Quality Dashboard

February 20, 2020

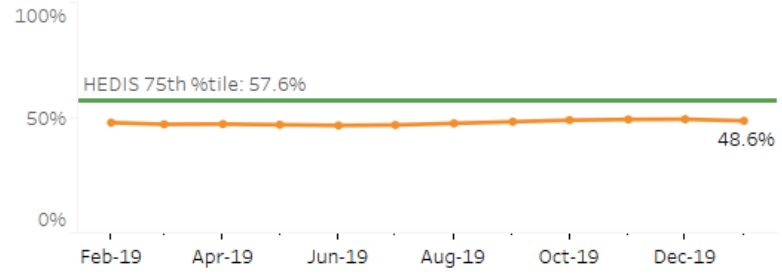
COOK COUNTY HEALTH

COOK COUNTY HEALTH Quality Dashboard

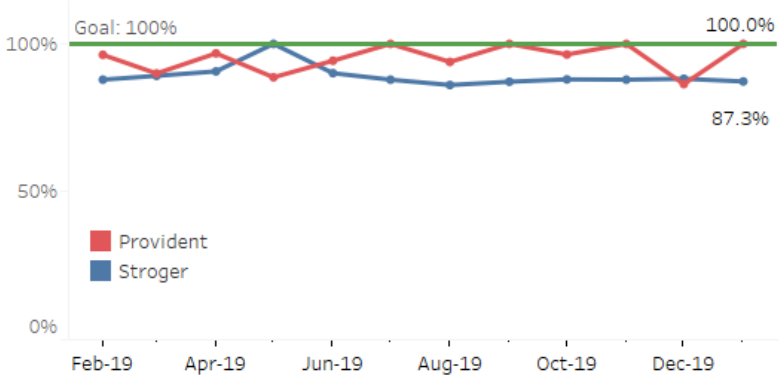
February 20, 2020

Health Outcomes

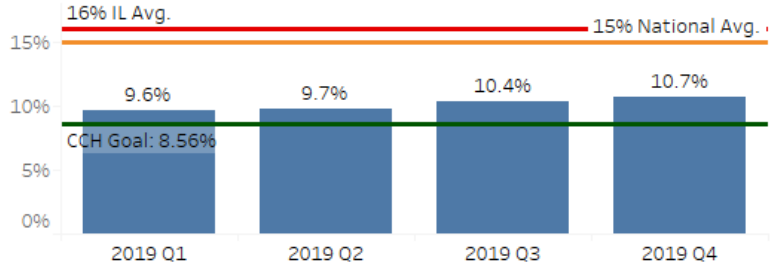
HEDIS - Diabetes Management: HbA1c < 8%



Core Measure - Venous Thromboembolism (VTE) Prevention

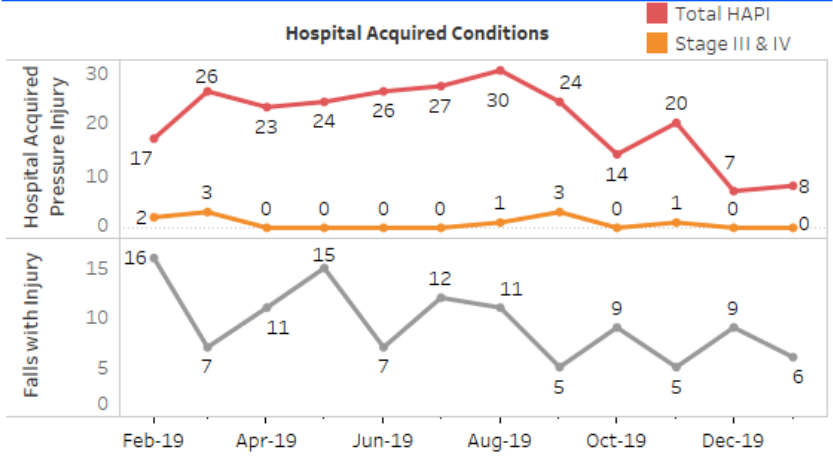


30 Day Readmission Rate

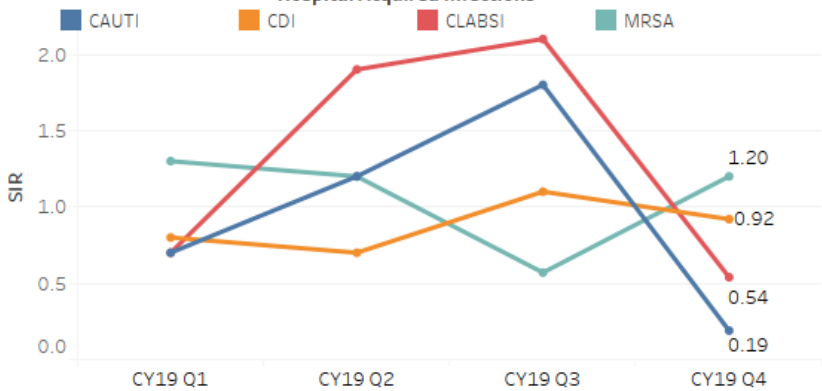


Patient Safety

Hospital Acquired Conditions



Hospital Acquired Infections

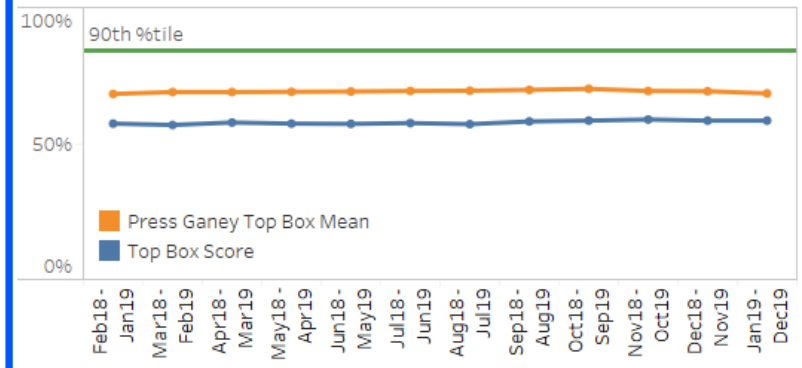


SIR (Standardized Infection Ratio) is a summary measure which compares the actual number of Healthcare Associated Infections (HAI) in a facility with the baseline data for standard population. SIR > 1.0 indicates more HAIs were observed than predicted, conversely SIR of < 1.0 indicates that fewer HAIs were observed than predicted.

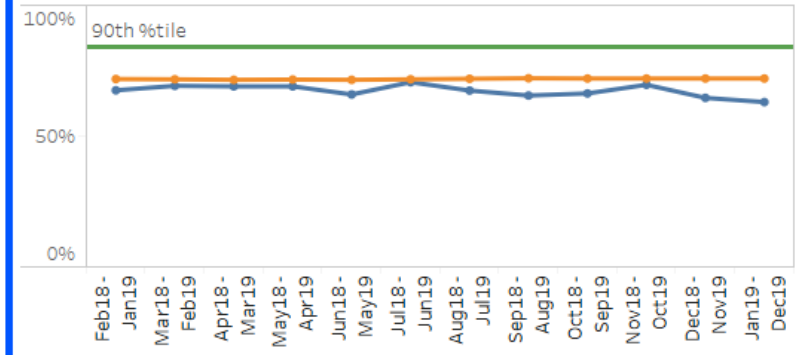
	Jan-19	Feb-19	Mar-19	Apr-19	May-19	Jun-19	Jul-19	Aug-19	Sep-19	Oct-19	Nov-19	Dec-19
CAUTI	1	1	2	1	2	5	6	2	3	0	1	0
CDI	6	2	6	5	4	4	9	5	7	7	5	3
CLABSI	1	0	2	2	2	3	2	4	1	1	1	0
MRSA	1	0	1	0	0	2	0	0	1	1	0	1

Utilization

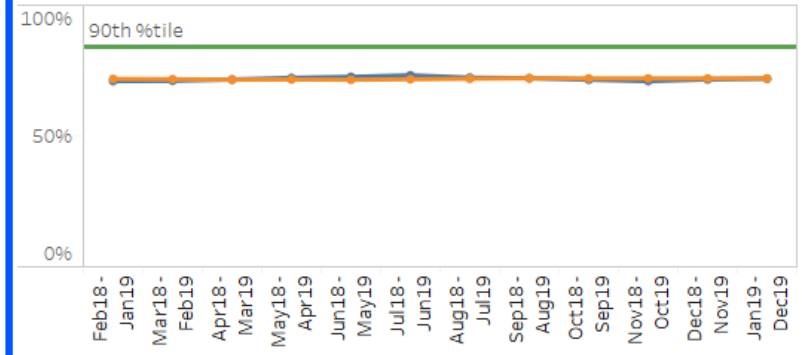
ACHN--Overall Clinic Assessment



Provident--Willingness to Recommend Hospital



Stroger--Willingness to Recommend Hospital



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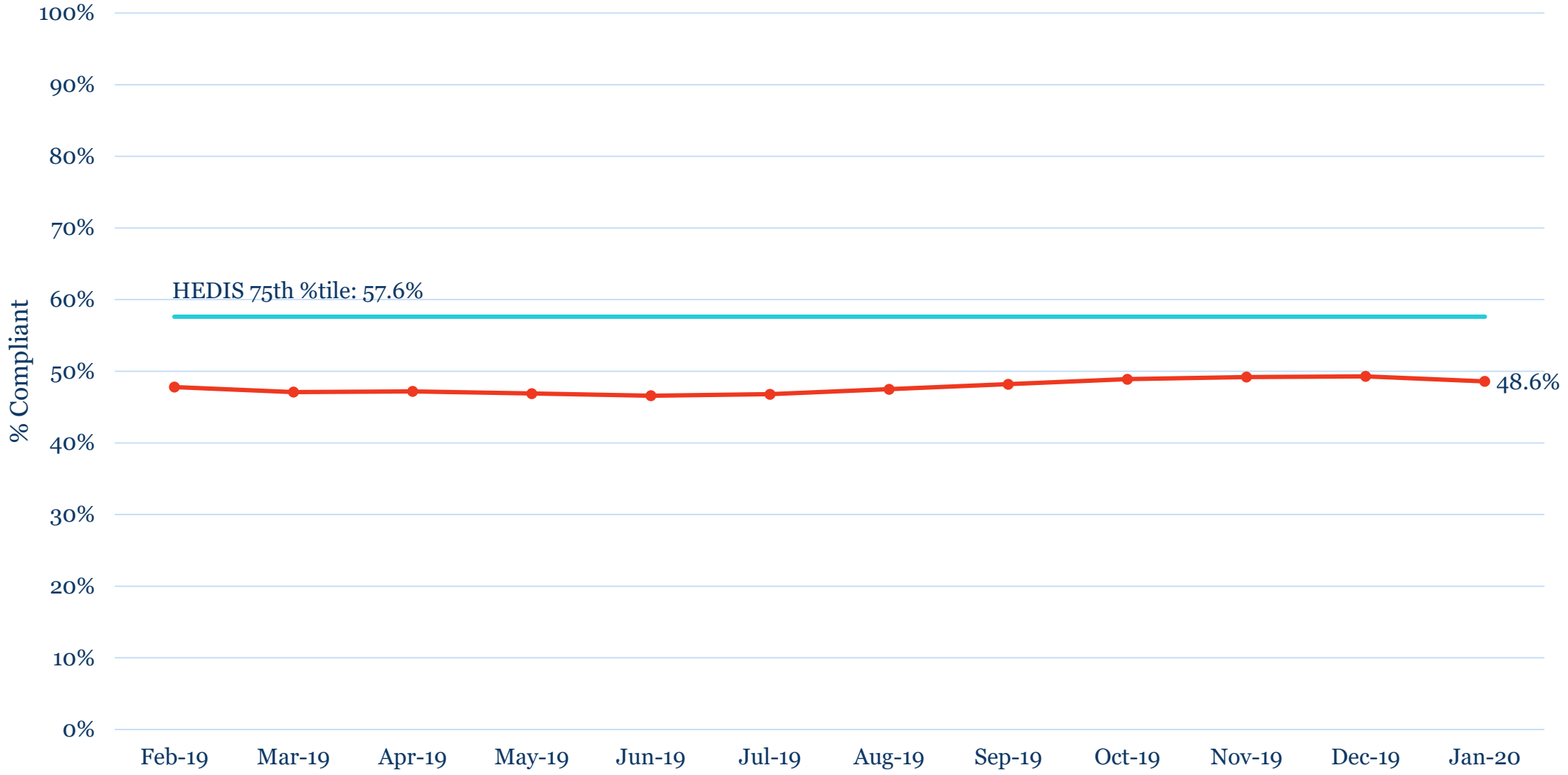
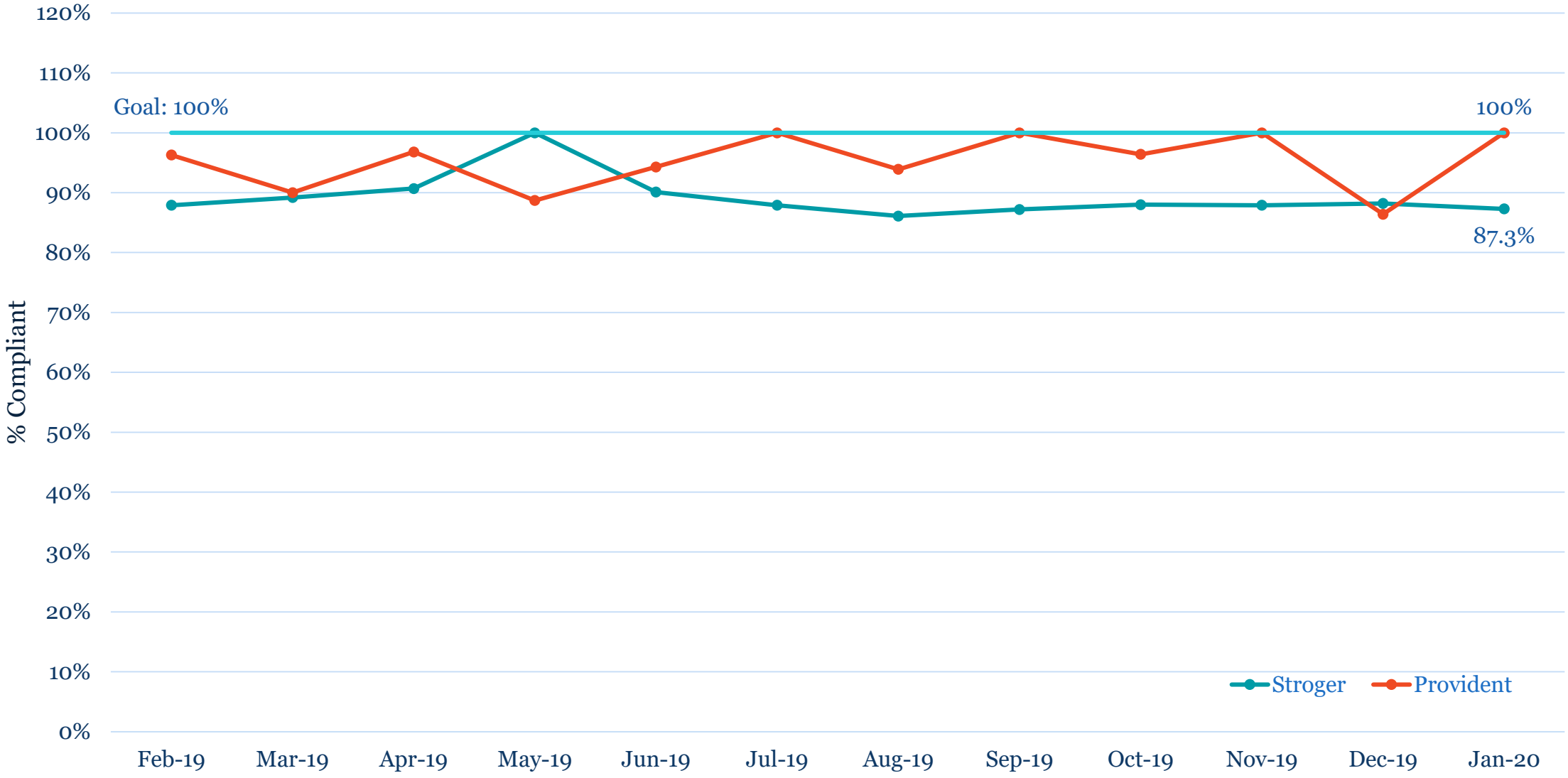


Source: Business Intelligence

COOK COUNTY HEALTH

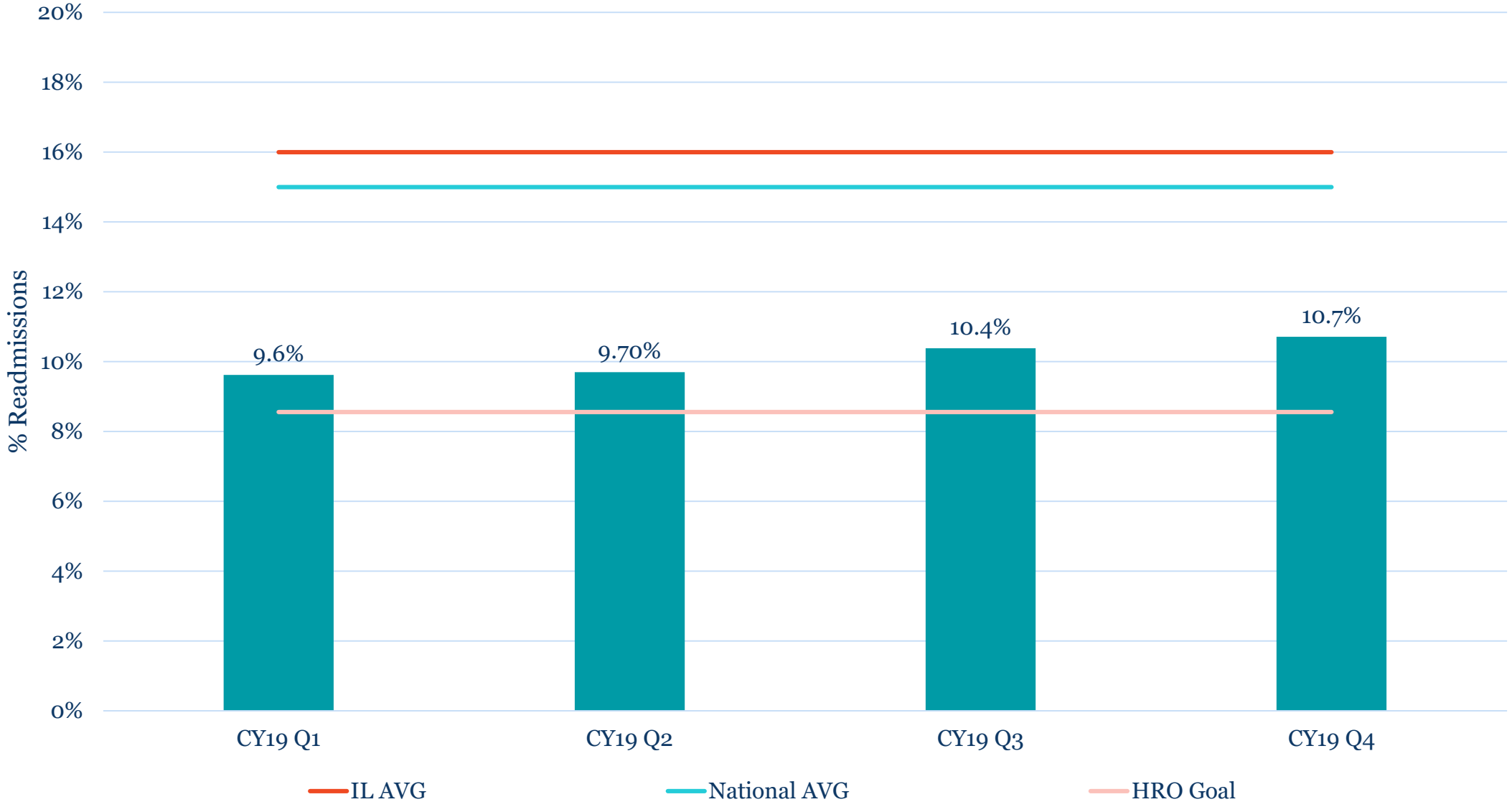
Core Measure – Venous Thromboembolism (VTE) Prevention



Source: Quality Dept.

COOK COUNTY HEALTH

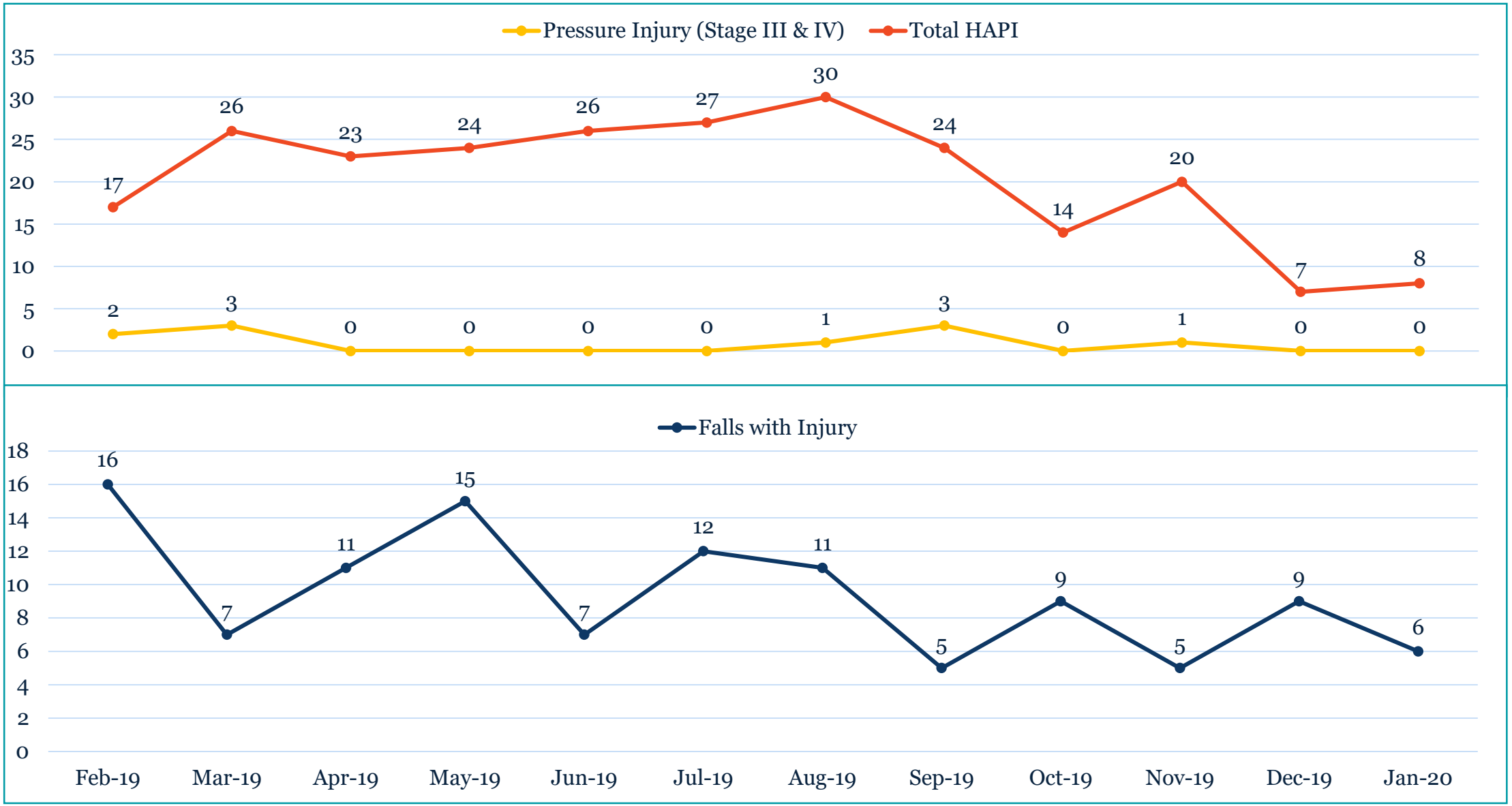
30 Day Readmission Rate



Source: Business Intelligence

COOK COUNTY HEALTH

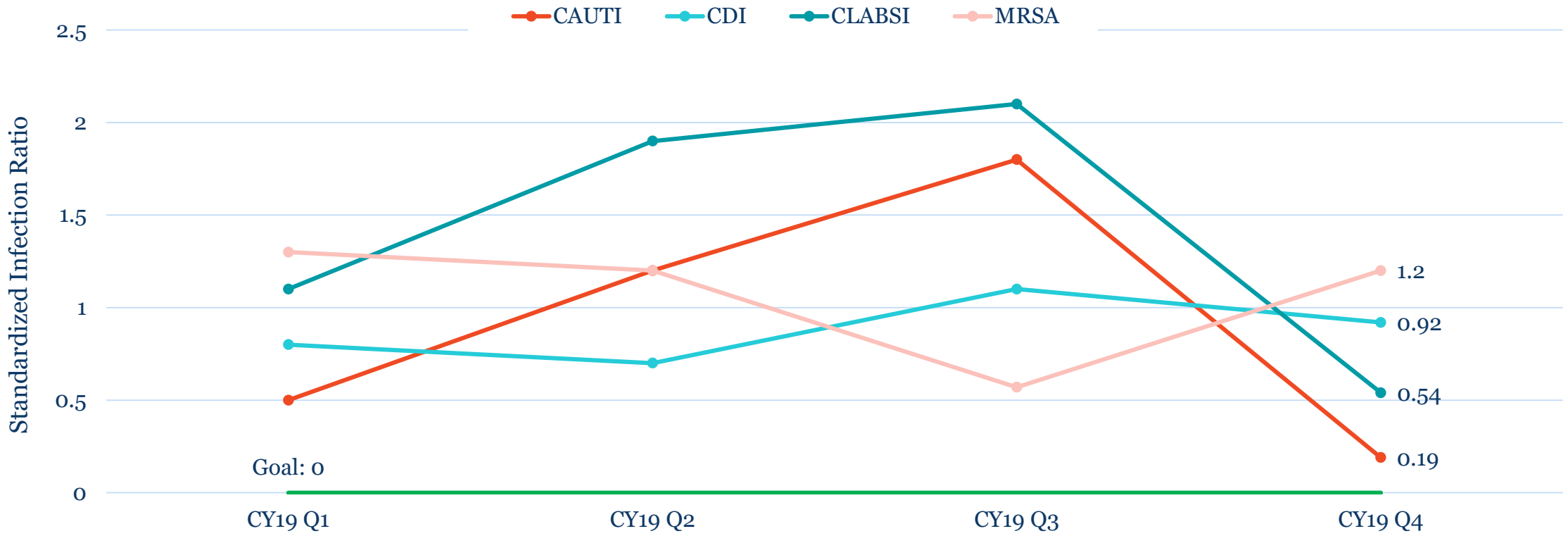
Hospital Acquired Conditions



COOK COUNTY HEALTH

Source: Business Intelligence

Hospital Acquired Infections



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CAUTI	1	1	2*	1	2*	5	6	2	3	0	1	0
CDI	6	2	6	5	4	4	9	5	7	7	5	3
CLABSI	1	0	2*	2	2	3	2	4	1	1	1	0
MRSA	1	0	1	0	0	2	0	0	1	1	0	1

*Amended

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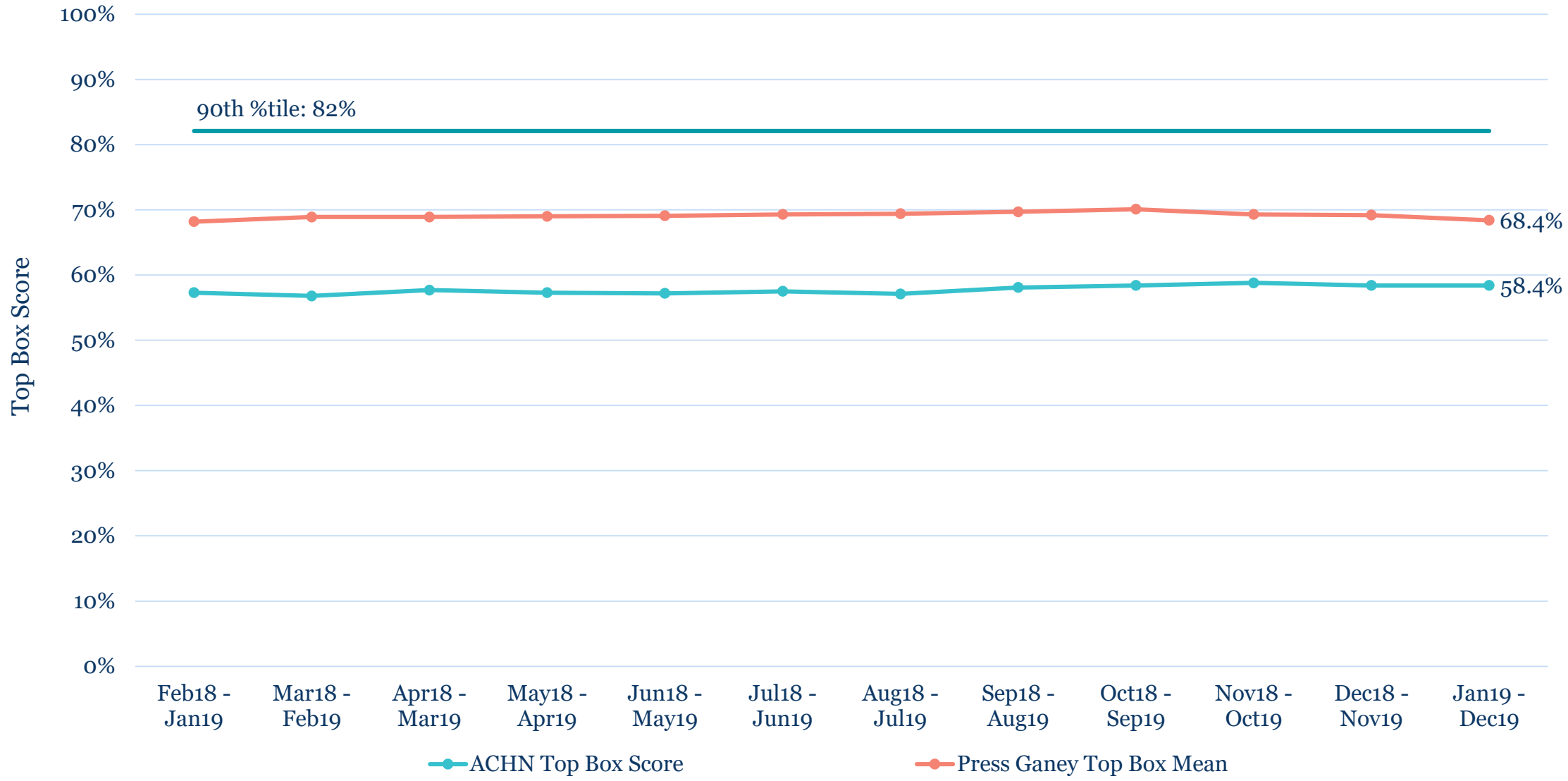
Source: Infection Control Dept.

COOK COUNTY HEALTH

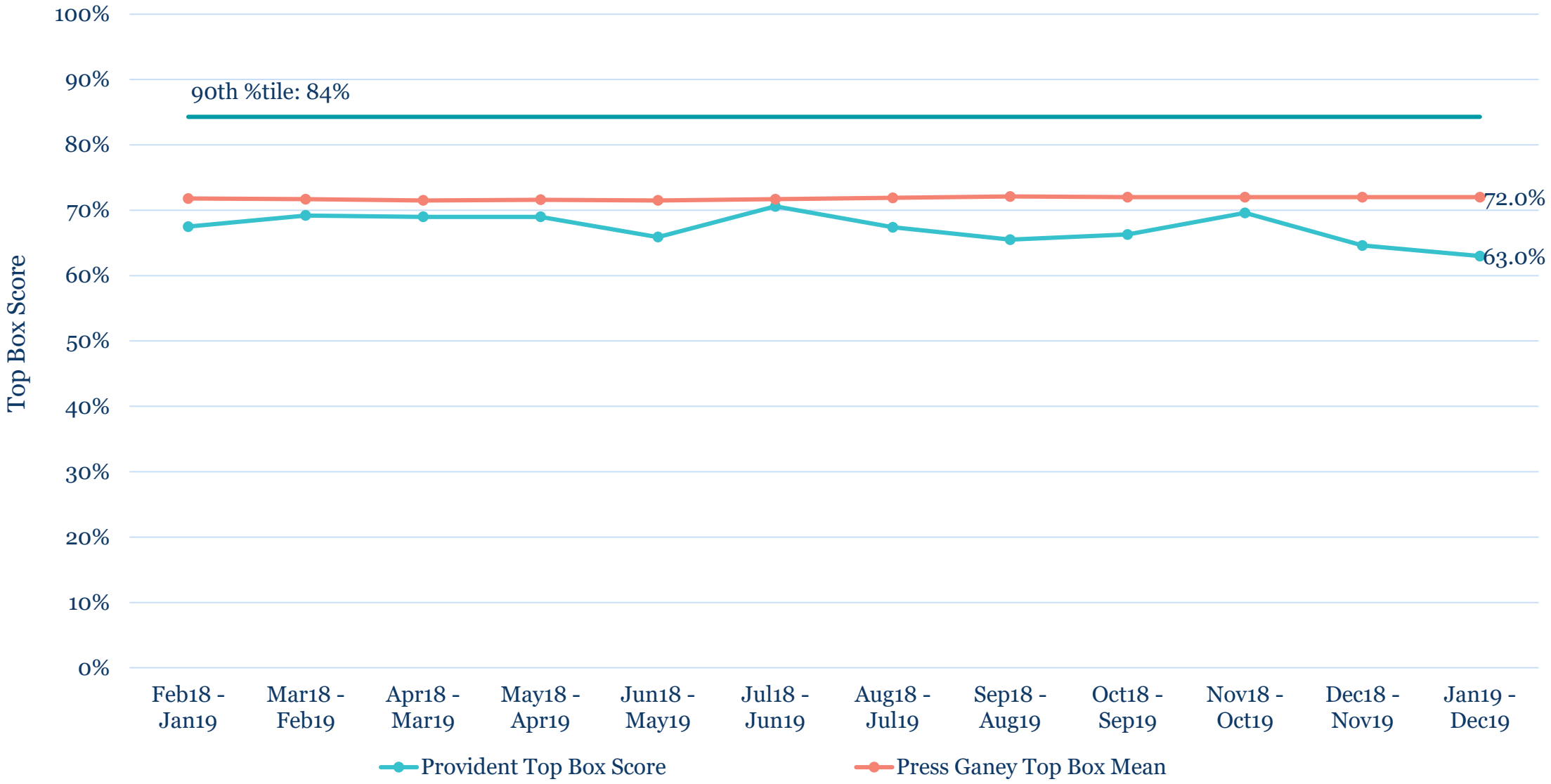
ACHN – Overall Clinic Assessment



Source: Press Ganey

COOK COUNTY HEALTH

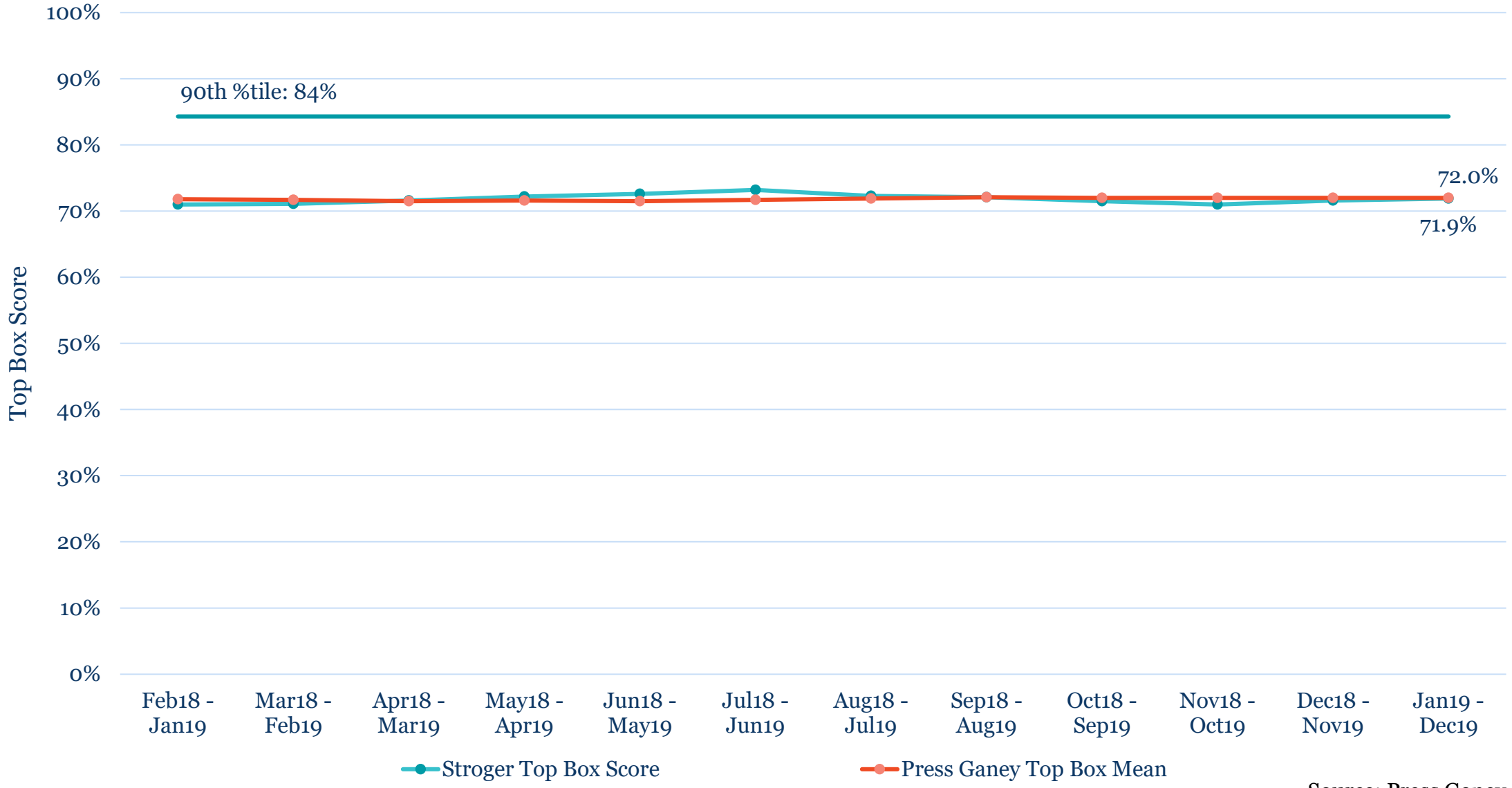
Provident – Willingness to Recommend the Hospital



Source: Press Ganey

COOK COUNTY HEALTH

Stroger – Willingness to Recommend the Hospital



Source: Press Ganey

COOK COUNTY HEALTH

Measure Name	Measure Definition	Source
Diabetes Management HbA1c <8%	Adults ages 18-75 with diabetes (type 1 or type 2) where HbA1c is in control (<8.0%). Qualifying patients: - Age 18-75 years as of December 31 of current year AND two diabetic Outpatient/ED visits in the current year or previous year OR -One diabetic Inpatient visit in the current year or previous year OR -Prescribed insulin or hypoglycemic or antihyperglycemics in the current year or previous year	NCQA, HEDIS
Core Measure-Venous Thromboembolism (VTE) Prevention	Numerator: Patients who received VTE prophylaxis or have documentation why no VTE prophylaxis was given: The day of or the day after hospital admission The day of or the day after surgery end date for surgeries that start the day of or the day after hospital admission Denominator: All patients	CMS
Readmission Rate	The readmission measures are estimates of unplanned readmission to an acute care hospital in the 30 days after discharge from a hospitalization. Patients may have had an unplanned readmission for any reason.	CMS
Hospital Acquired Pressure Injuries	A pressure injury is localized damage to the skin and underlying soft tissue usually over a bony prominence or related to a medical or other device. Full thickness pressure injuries involve the epidermis and dermis, but also extend into deeper tissues (fat, fascia, muscle, bone, tendon, etc.)	CMS, AHRQ
Falls with Injury	A patient fall is an unplanned descent to the floor (or extension of the floor, e.g., trash can or other equipment) with injury to the patient.	TJC, NDNQI
Hospital Acquired Infections - CAUTI	Catheter-associated urinary tract infections	NHSN
Hospital Acquired Infections - CDI	Clostridium difficile intestinal infections	NHSN
Hospital Acquired Infections - CLABSI	Central line-associated bloodstream infections	NHSN
Hospital Acquired Infections - MRSA	Methicillin-resistant Staphylococcus Aureus blood infections	NHSN
Press Ganey Patient Satisfaction Top Box Score	The percentage of responses in the highest possible category for a question, section, or survey (e.g. percentage of 'Very Good,' or 'Always' responses).	Press Ganey
Press Ganey Patient Satisfaction Percentile Rank	A percentile rank tells you where your score falls in relationship to other scores. Percentile rank for any given metric in any peer group is determined by ordering all facilities' scores from highest to lowest, then each score receives a percentile rank by determining the proportion of the database that falls below that score. For example, if your percentile rank is 30, you are scoring the same as or better than 30% of the organizations you are compared to.	Press Ganey
ACHN Patient Satisfaction-Overall Assessment	Includes two questions: 1. How well the staff worked together to care for you. 2. Likelihood of your recommending our practice to others.	Press Ganey
Hospital Patient Satisfaction-Willingness to Recommend Hospital	The likelihood that a patient will recommend a hospital to family members and friends.	Press Ganey

CCH Finance Committee Meeting February 2020

Ekerete Akpan, Chief Financial Officer

February 20, 2020

COOK COUNTY HEALTH

Agenda

1. Jan-2020 Leading indicators
   a. Revenue Cycle metrics and observations as of Jan-2020
   b. FY 2020 Gross Charges as of Jan-2020
   c. Charity care and Self pay costs vs. DSH/BIPA as of Jan-2020
   d. Preliminary Cash Flow projections as of January 2020
2. System wide Dec-2019 Accrual Basis Income Statement and Observations
   a. CCH Provider Service Financials , Operational Statistics and Observations
   b. County Care Financials & Stats
   c. Correctional Health services Financials & Stats
   d. Cook County Department of Public Health Financials & Stats
   e. Administration Financials
3. Appendix - FY 2020 System-wide volumes/stats

January 2020 Leading Indicators

Revenue Cycle Metrics, Gross Charges and Uncompensated Care vs. DSH/BIPA Preliminary Cash Flow Projections

COOK COUNTY HEALTH

FYTD 2020 - Revenue Cycle Metrics as of end Jan-2020

Metric	Average FYTD 2019	Average FYTD 2020	Dec-19	Jan-20	CCH Benchmark /Targets	Some Industry Targets
Average Days in Accounts Receivable *(lower is better)*	97	88	88	88	60-65	40*
Discharged Not Finally Billed Days *(lower is better)*	11	8	8.3	8	5	7*
Claims Initial Denials Percentage *(lower is better)*	20%	20%	20%	19%	10%	3%*

Definitions:
Average Days in Accounts Receivable: Total accounts receivable over average daily revenue
Discharged Not Finally Billed Days: Total charges of discharge not finally billed over average daily revenue
Claims Initial Denials Percentage: Percentage of claims denied initially compared to total claims submitted.
*Source HFMA Key Hospital Statistics and Ratio Margins from Cerner

Observations on Revenue Cycle Metrics

- Sustained year over year improvements
  - Cash collections for FYTD 2020 up 23% to $72.8M from $59.4M for same period in FY2019
  - Case mix index continues to improve by 6% year over year, indicating greater focus on clinical documentation and coding
  - Average days in Accounts Receivables at 88 days, improving with focus on getting to target days in AR
  - Discharged Not Finally Billed (DNFB) at 8 days improving with focus on "coding-ready" encounters especially for high dollar inpatient discharges and concurrent coding for long stay patients prior to discharges
  - Initial Claims Denials – improving to 19% with focus on upstream processes and activities including pre-authorization, pre-certification and accurate registration. Specific activities aligned with patient accounting implementation there is room for continued improvement.

Source: Finance Department, Business Intelligence & CountyCare

FYTD 2020 – Gross Charges as of end Jan-2020 (in $ millions)

	2019	2020	2019 vs. 2020	2019 vs. 2020 %tage	2020 Budget Target
Charges with Reimbursement Potential	160.11	164.96	4.84	3.0%	
Charges with NO Reimbursement Potential	106.06	131.06	25.00	23.6%	8.5%
Total	**266.17**	**296.01**	**29.84**	**11.2%**	

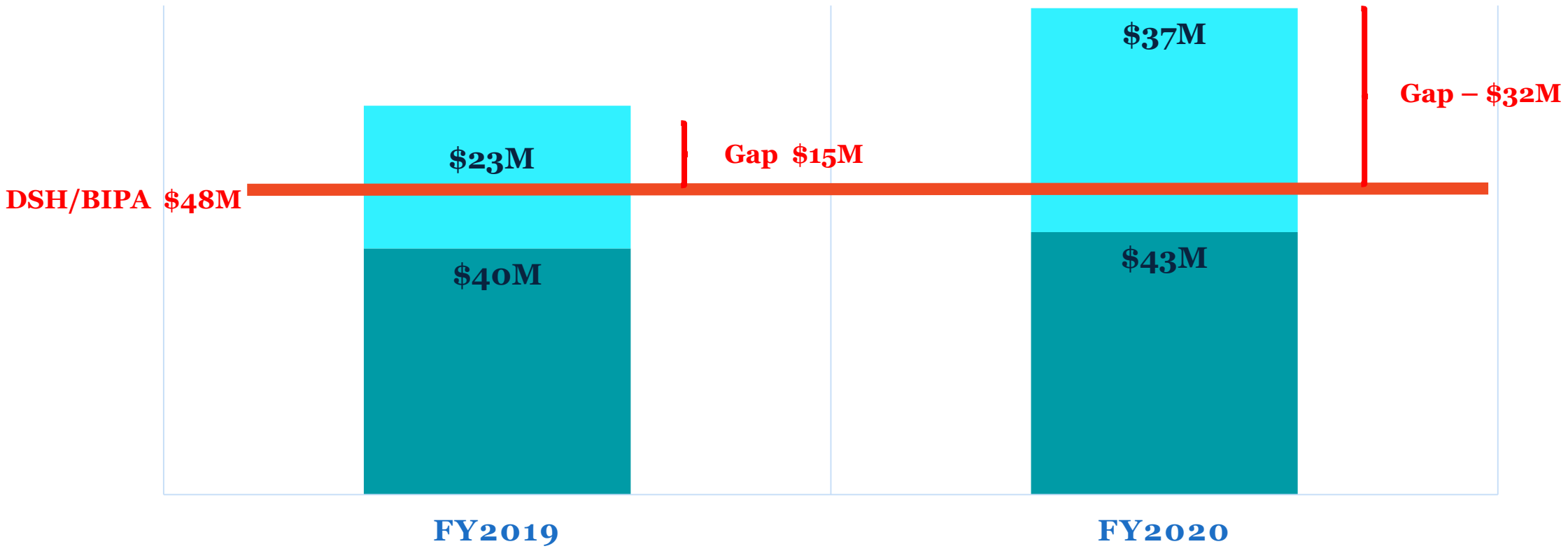
	2019	2020	2019vs. 2020	2019v2020 %tage
COMMERCIAL	$ 16.46	$ 15.00	$ (1.46)	-8.9%
COUNTYCARE	$ 38.82	$ 42.42	$ 3.60	9.3%
MEDICAID	$ 31.89	$ 23.07	$ (8.82)	-27.7%
MEDICAID MGD CARE	$ 30.72	$ 38.29	$ 7.57	24.7%
MEDICARE	$ 30.63	$ 31.53	$ 0.90	2.9%
MEDICARE MGD CARE	$ 11.59	$ 14.65	$ 3.06	26.4%
CHARITY CARE	$ 64.52	$ 68.82	$ 4.29	6.7%
SELF PAY	$ 37.41	$ 58.69	$ 21.28	56.9%
Others	$ 4.12	$ 3.54	$ (0.58)	-14.0%
Grand Total	**$266.17**	**$296.01**	**$ 29.84**	**11.2%**

COOK COUNTY HEALTH

Source: Unaudited Financials Charge Reports , FY2020 Cook County /CCH Budget Book

FYTD 2020 - Charity Care & Self Pay Cost vs. DSH/BIPA funding as of end Jan-2020

FY2020 YTD:	$80M
FY2019 YTD:	$63M
FY2020 Target:	$48M



Source: Unaudited Financials Charge Reports , FY2020 Cook County /CCH Budget Book
DSH: Disproportionate Share Hospital Payments-**$156.7M/Year**
BIPA: Benefits Improvement and Protection Act Payments-**$132.3M/Year**

COOK COUNTY HEALTH

FY2020 – CCH Hospitals & Clinics - Preliminary Cash Flow Projections as of end Jan-2020 (in millions)

Month	Projected Cash Receipts	Projected Expenses	Projected Earnings from Health Plans	Net Cash Flow
Dec-19	$ 57.10	$ (124.46)	$ -	$ (67.36)
Jan-20	57.10	(124.46)	-	(67.36)
Feb-20	57.10	(94.46)	38.00	0.64
Mar-20	54.25	(84.46)	15.00	(15.21)
Apr-20	54.25	(84.46)	15.00	(15.21)
May-20	54.25	(84.46)	15.00	(15.21)
Jun-20	54.25	(84.46)	15.00	(15.21)
Jul-20	54.25	(84.46)	15.00	(15.21)
Aug-20	150.80	(84.46)	15.00	81.34
Sep-20	54.25	(84.46)	15.00	(15.21)
Oct-20	54.25	(84.46)	15.00	(15.21)
Nov-20	90.92	(84.46)	15.00	21.46
Total	**$ 792.73**	**$ (1,103.50)**	**$ 173.00**	**$(137.77)**

Source: Finance Department

Observations

- CCH Hospitals & Clinics as a provider of care, cash flows are positive in August and November due to payments of BIPA.
- Due to increasing and unsustainable growth in charity care, and predominantly government payors, CCH projected expenses exceed its cash flows and will impact CCH ability to meet budget.
- CCH must earn Health plan business of $173M for FY2020 by serving Countycare/MoreCare members

FY2020 – Correctional Health / CCDPH Preliminary Cash Flow projections as of end Jan-2020 (in millions)

Month	Projected Property Tax Receipts	Projected Expenses	Net Cash Flow
Dec-19	$ 0.17	$ (8.46)	$ (8.29)
Jan-20	4.83	(8.46)	(3.63)
Feb-20	7.19	(8.46)	(1.27)
Mar-20	36.22	(8.46)	27.77
Apr-20	1.29	(8.46)	(7.17)
May-20	0.59	(8.46)	(7.87)
Jun-20	4.45	(8.46)	(4.00)
Jul-20	4.34	(8.46)	(4.12)
Aug-20	22.04	(8.46)	13.58
Sep-20	0.70	(8.46)	(7.75)
Oct-20	0.82	(8.46)	(7.64)
Nov-20	0.35	(8.46)	(8.11)
Total	**$ 83.00**	**$ (101.50)**	**$ (18.50)**

Source: Finance Department

Observations

- Correctional Health /CCDPH cashflow dependent on property tax receipts, cashflow based on FY2019 experience .
- Correctional Health/CCDPH projected expenses exceed its cash flows for Cook County mandated services

FY2020 – Health Plans Preliminary Cash Flow projections as of end Jan-2020 (in millions)

Month	Projected PMPM Receipts	Projected Claims Expenses	Net Cash Flow to CCH Hospital & Clinics
Dec-19	$ 48.00	$ (48.00)	$ -
Jan-20	66.00	(66.00)	-
Feb-20	450.00	(412.00)	38.00
Mar-20	150.00	(135.00)	15.00
Apr-20	150.00	(135.00)	15.00
May-20	150.00	(135.00)	15.00
Jun-20	150.00	(135.00)	15.00
Jul-20	150.00	(135.00)	15.00
Aug-20	150.00	(135.00)	15.00
Sep-20	150.00	(135.00)	15.00
Oct-20	150.00	(135.00)	15.00
Nov-20	150.00	(135.00)	15.00
Total	**$ 1,914.00**	**$ (1,741.00)**	**$ 173.00**

Source: Finance Department

Observations

- Health plans cashflows particularly exposed to State payments cycles
- HealthPlan does not make direct to CCH, however, residual PMPM not paid to external providers is retained by CCH hospitals & Clinics.
- CCH Hospitals and Clinics must earn Health plan business by serving Countycare/MoreCare members

COOK COUNTY HEALTH

FY2020 - Systems-wide Accrual Basis Financials, Observations as of end December 2019

COOK COUNTY HEALTH

Accrual Basis Income Statement for the One Month ending December 2019 (in thousands)

CCH Systemwide	Year-To-Date Actual	Year-To-Date Budget	Variance $	Variance %
Operating Revenue				
Net Patient Service Revenue	63,235	71,440	(8,205)	-11%
County Care Access Payments	35,315	-	35,315	n/a
CountyCare Capitation Revenue	146,827	148,022	(1,195)	-1%
Cook County Access Payments	7,938	7,938	-	0%
Other Revenue	365	1,042	(677)	-65%
Total Operating Rev	253,679	228,441	25,238	11%
Operating Expenses				
Salaries & Benefits	57,703	54,544	(3,160)	-6%
Overtime	4,005	2,541	(1,464)	-58%
Pension*	9,275	9,161	(115)	-1%
Supplies & Materials	13,027	4,747	(8,280)	-174%
Pharmaceutical Supplies	6,278	6,192	(86)	-1%
Purch. Svs., Rental, Oth.	34,832	22,134	(12,698)	-57%
External Claims Expense	129,096	140,577	11,481	8%
County Care Access Expense	35,315	-	(35,315)	n/a
Insurance Expense	2,655	3,489	834	24%
Depreciation	2,847	2,119	(728)	-34%
Utilities	976	1,109	133	12%
Total Operating Exp	296,009	246,613	(49,397)	-20%
Operating Margin	(42,330)	(18,172)	(24,158)	-133%
Operating Margin %	**-17%**	**-8%**	**-9%**	**-110%**
Non Operating Revenue	**16,190**	**9,161**	**7,029**	**77%**
Net Income/(Loss)	**(26,140)**	**(9,011)**	**(17,129)**	**-190%**

*Year to Date (1 month) Pension Liability per GASB
Pension includes Other Post Employment Benefits (OPEB) Expense
Internal Claims based on paid claims and estimated IBNR provided by third-party actuaries priced at 100% of Medicaid rates

Observations on Accrual Basis Financials

Revenues

- CCH Hospitals & Clinics as a provider of care, Net Patient Service Revenues - $63M, 11% unfavorable to target due to increasing and unsustainable growth in charity care, this is above the 8.5% budgeted and will impact CCH ability to meet budget.
  - System-wide uninsured numbers
    - Captured by Visits, increased to 46%
    - Captured by Charges, increases to 45%

- CountyCare Capitation Revenues - $146.8M, 1% unfavorable to target due to lower than budgeted enrollment (currently approximately 319,000 members vs. 326,000) as a result of lower State/County MCO enrollment. CountyCare retains market share of approximately 31.5%.
- State owed CountyCare $170M of past due capitation payments as of end December -2019 with $246M in adjudicated but not paid claims pending action.

Source: Finance Department, Business Intelligence & CountyCare

Observations on Accrual Basis Financials

Expenses

- Personnel Costs - Salary & Benefits expenses - exceeding budget by $3.2M or 6% and Overtime expenses - exceeding budget by $1.5M of 58%
  - CCH is embarking on an immediate review of vacancies and programs with operational and clinical leaders to prioritize hiring, ensure we come within budgeted vacancy factor of 900 FTEs vs current vacancies of approximately 600 FTEs including as significant number of clinical positions needed to continue services at current levels.
- Other than Personnel Costs - Supplies & Materials and Pharmaceutical Supplies exceeding budget, Purchase Services Rental others including Agency Expenses exceeding budget
  - CCH is embarking on an immediate review of all other than personnel costs with operational and clinical leaders to ensure we come within budget, including a review of programs with contracted agency costs

Source: Finance Department

Provider of Care Services Financial and Operational Statistics

COOK COUNTY HEALTH

CCH Provider - Accrual Basis Income Statement for one month ending December 2019 (in thousands)

CCH Providers	Year-To-Date		Variance	
	Actual	*Budget*	*$*	*%*
Operating Revenue				
Net Patient Service Revenue	63,235	71,440	(8,205)	-11%
Cook County Access Payment	7,938	7,938	-	0%
Other Revenue	229	917	(688)	-75%
Total Operating Rev	71,401	80,294	(8,893)	-11%
Operating Expenses				
Salaries & Benefits	49,409	42,817	(6,592)	-15%
Overtime	3,608	2,059	(1,548)	-75%
Pension*	7,864	7,766	(97)	-1%
Supplies & Materials	12,950	4,429	(8,521)	-192%
Pharmaceutical Supplies	6,265	5,617	(648)	-12%
Purch. Svs., Rental, Oth.	28,266	13,960	(14,305)	-102%
Insurance Expense	2,655	-	(2,655)	n/a
Depreciation	1,860	1,901	41	2%
Utilities	971	907	(65)	-7%
Total Operating Exp	113,848	79,457	(34,391)	-43%
Operating Margin	(42,447)	837	(43,285)	5169%
Operating Margin %	-59%	1%	-60%	5800%
Non Operating Revenue	**10,391**	**7,766**	**2,624**	**34%**
Net Income/(Loss)	**(32,056)**	**8,604**	**(40,659)**	**473%**

*Year to Date (1 month) Pension Liability per GASB
Pension includes Other Post Employment Benefits (OPEB) Expense
Internal Claims based on paid claims and estimated IBNR provided by third-party actuaries priced at 100% of Medicaid rates

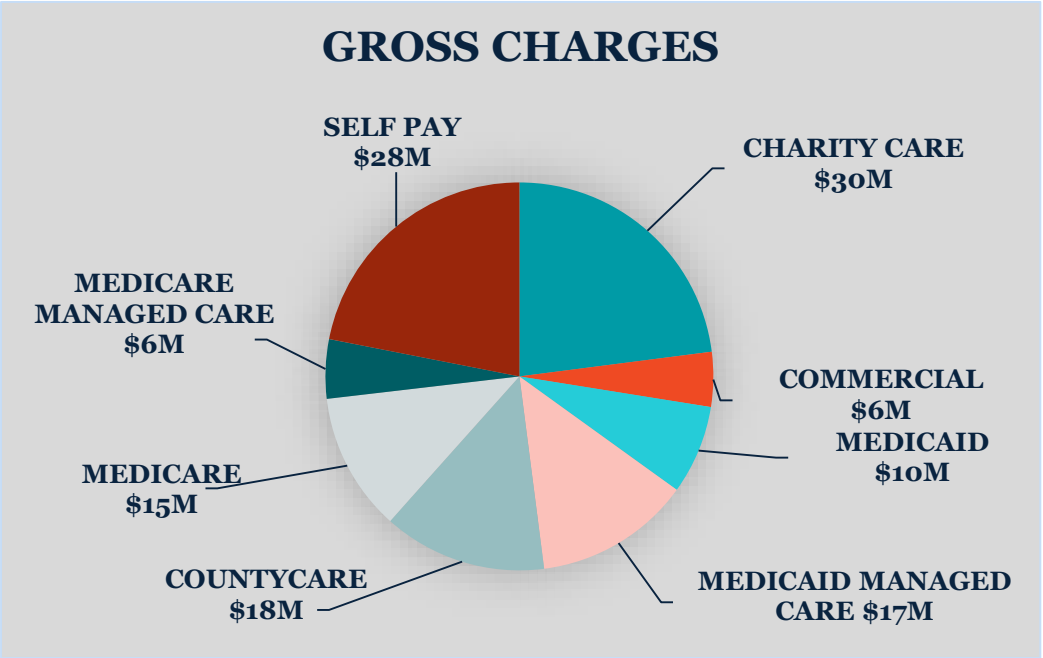
Unaudited Financial Statement

Clinical Activity Observations

- Primary Care visits are up by 10% versus FY18, and up 6% versus FY19 target
- Specialty Care visits are up by 15% versus FY18 up 11% versus FY19 target
- Surgical Cases are up by 7% versus FY19, and down 2% versus FY20 target
- Inpatient Discharges are up by 10% versus FY19
- Length of Stay is down by 2% versus FY19, and down 2% versus FY20target
- Emergency Department visits are up by 3% versus FY19
- Deliveries are up by 1% versus FY19 and up by 7% versus FY20 target

Source: CCH Tableau Dashboards

Stroger Operations Overview for one month ending December 2019



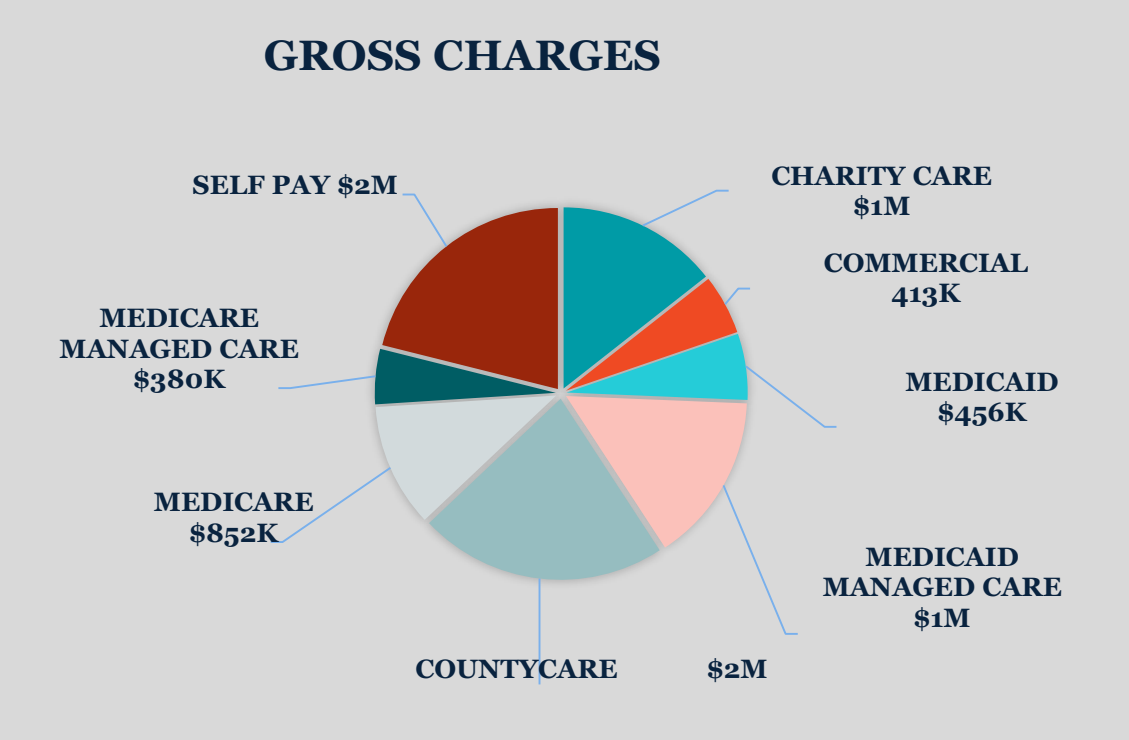
Inpatient/Observation-FYTD			
Measure	**FY2020**	**FYTD Target**	**FY2019**
Inpatient Discharges	1,486	1,342	1,342
– Long Stay Admissions	324	262	262
– One Day Admissions	103	93	93
Inpatient Days	7,611	7,118	7,118
Observation Discharges	842	883	883
Observation Days (Observation Discharge)	1,667	1,600	1,600
Avg LOS (Inpatient Discharge)	6	6	5.6
Average Daily Census (Inpatient & Observation	299	281	281.2
Surgical Cases (all patient types)	1,045	919	919
Endoscopy Cases (all patient types)	655	620	620
Radiology Tests	3,593	3,370	3,370
Deliveries	81	76	76
Emergency- FYTD			
Measure	**FY2020**	**FYTD Target**	**FY2019**
Emergency Visits (includes LWBS & Trauma)	9,775	9,492	9,492
Adult Emergency Visits	7,925	8,028	8,028
Peds Emergency Visits	695	592	592
Trauma Visits	596	462	462
LWBS	559	410	410
Radiology Tests	8,406	7,723	7,723
Outpatient Clinic- FYTD			
Measure	**FY2020**	**FYTD Target**	**FY2019**
Total Provider Visits*	24,612	21,771	21,771
Specialty/Diagnostic/Procedure Provider Visits			
Hospital – Based	1,512	1,463	1,463
Specialty Care / Fantus / Professional Bldg	9,971	9,185	9,185
Oral Health	533	n/a	n/a
Professional Building	7,922	6,761	6,761
Peds	937	990	990
Total	**20,342**	**18,399**	**18,399**
Primary Care Provider Visits			
GMC	4,270	3,372	3,372
Total	**4,270**	**3,372**	**3,372**
Procedures & Ancillary Services- FYTD			
Measure	**FY2020**	**FYTD Target**	**FY2019**
Dialysis Treatments (all patient types)	509	608	608
Infusion Center Visits	1,330	1,099	1,099
Minor Procedure (Clinic F) Visits	277	255	255
PT/OT Volume (all patient types)	5,408	4,208	4,208

Comments:

- Growth primary and specialty care provider visits continue in FY2020 targets
- Payor mix challenges continue vs FY 2020 budget assumptions

Source: Charge Report & Business Intelligence

Provident Operations Overview for one month ending December 2019



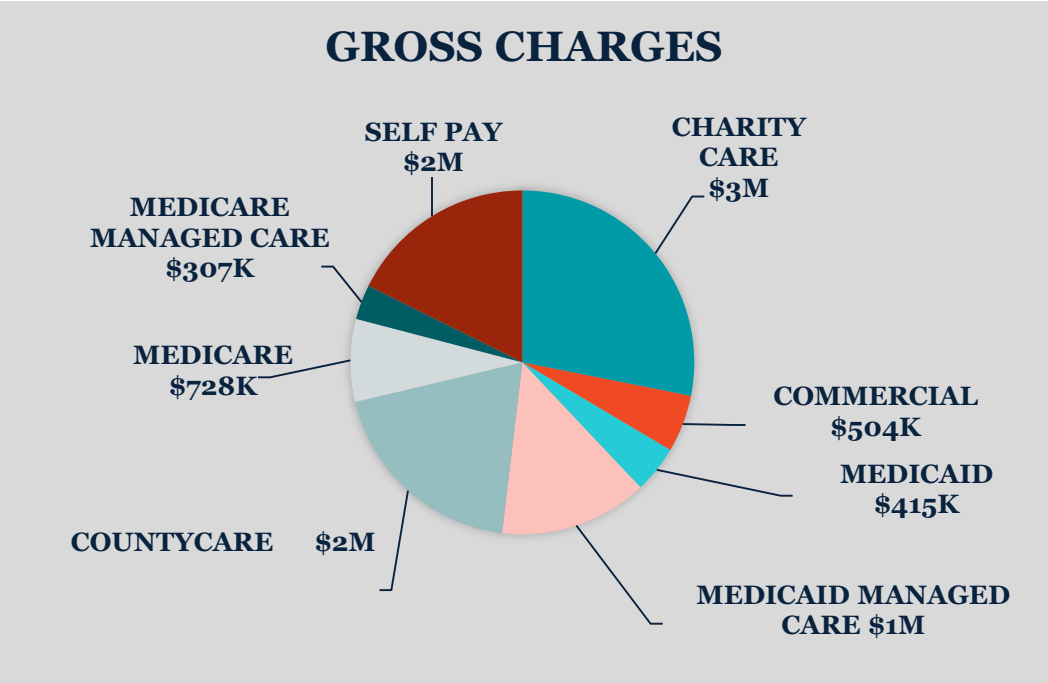
Comments:

- Growth in primary care and specialty care provider visits continues in FY2020 Leadership reviewing left without being seen in Emergency Dept.
- Challenging payor mix though better than rest of system on average

Inpatient/Observation-FYTD			
Measure	**FY2020**	**Monthly Target**	**FY2019**
Inpatient Discharges	43	47	47
- Long Stay Admissions	3	10	10
- One Day Admissions	3	5	5
Inpatient Days	291	241	241
Observation Discharges	63	60	60
Observation Days (Observation Discharge)	167	104	104
Avg LOS (Inpatient Discharge)	3.8	5	5.1
Average Daily Census (Inpatient & Observatio	14.8	11	11.1
Surgical Cases	169	217	217
Radiology Tests	31	29	29
Emergency- FYTD			
Measure	**FY2020**	**Monthly Target**	**FY2019**
Emergency Visits (including LWBS)	2,462	2,416	2,416
Adult Emergency Visits	2,082	2,137	2,137
Peds Emergency Visits	174	115	115
LWBS	206	164	164
Radiology Tests	1,301	1,330	1,330
Outpatient Clinic- FYTD			
Measure	**FY2020**	**Monthly Target**	**FY2019**
Total Registrations	7,291	6,836	6,836
Amb of Prov - Specialty/Diagnostic/Procedure Provider Visits	127	126	126
Sengstacke - Specialty/Diagnostic/Procedure Provider Visits	2,920	2,645	2,645
Sengstacke Primary	1,443	1,369	1,369
Sengstacke Primary Peds	12	92	92
Radiology Tests	867	817	817
Procedures & Ancillary Services- FYTD			
Measure	**FY2020**	**FYTD Target**	**FY2019**
PT/OT Volume (all patient types)	923	675	675

Source: Charge Report & Business Intelligence

ACHN Operations Overview for one month ending December 2019



Comments :

- Growth trends in Primary care and Specialty care provider visits continues in FY2020
- Challenging payor mix trends with non-reimbursable payors generally higher than rest of system

*includes All OBGYN clinics , Ped Primary on Stroger campus
*excludes Stroger Specialty Care, CORE, Stroger-Hospital Based Clinics, Sengstacke GMC & Psych, Austin Behavioral Health, and assuming all registrations are provider visits

Summary- FYTD			
Measure	**FY2020**	**FYTD Target**	**FY2019**
Total Provider Visits	19,538	n/a	17,262
Primary Provider Visits- FYTD			
Measure	**FY2020**	**FYTD Target**	**FY2019**
Arlington Heights (AR)/Vista (VH)	1,188	n/a	860
Austin (AH)	1,270	n/a	935
Child Advocacy	29	n/a	42
Cicero (CH)	1,098	n/a	792
Core	1,155	n/a	1,088
Core Peds	36	n/a	41
Cottage Grove (CG)	811	n/a	773
Englewood (EH)	1,119	n/a	1,110
Logan Square (LS)	1,128	n/a	1,108
Morton East (ME)	55	n/a	52
Near South (NS)	1,171	n/a	1,059
OFHC (OF)	864	n/a	1,167
Prieto (PH)	1,218	n/a	1,287
Robbins (RH)	1,067	n/a	882
Specialty Care (SC) Peds	373	n/a	322
Woodlawn (WH)	1,007	n/a	790
Total Primary Care Provider Visits	**13,589**	**n/a**	**12,308**
Specialty/Diagnostic/Procedure Provider Visits- FYTD			
Measure	**FY2020**	**FYTD Target**	**FY2019**
Austin (AH) Behavioral Health	436	n/a	328
Austin (AH) OBGYN	36	n/a	20
Cicero (CH) Family Planning	21	n/a	21
Cicero (CH) OBGYN	44	n/a	39
Core Specialty	747	n/a	764
Logan Square (LS) OBGYN	44	n/a	73
Morton East (ME) Psych & OBGYN	0	n/a	8
Morton East (ME) Psych	7	n/a	1
OFHC (OF)	2,415	n/a	2,059
Oral Health (OH)	794	n/a	351
Specialty Care (SC) OBGYN / RHS	1,405	n/a	1,290
Total Specialty Care Provider Visits	**5,949**	**n/a**	**4,954**
Procedures & Ancillary Services- FYTD			
Measure	**FY2020**	**FYTD Target**	**FY2019**
OFHC PT/OT Volume	209	n/a	194
Partnerships- FYTD			
Measure	**FY2020**	**FYTD Target**	**FY2019**
CDPH	1,185	n/a	--
Siegle Health Center (CCHHS	30	n/a	34

Source: Charge Report & Business Intelligence

CountyCare Health Plan
Financial and Operational Statistics

COOK COUNTY
HEALTH

Health Plans – Accrual Basis Income Statement for one month ending December 2019 (in thousands)

	Year to Date		Variance	
	Actual	Budget	$	%
Member Months	320	326	(6)	-2%
Revenue				
PMPM	149,881	149,385	496	0%
Hospital Supplemental Access Payments	35,315	35,315	(0)	0%
Total Revenue	**185,196**	**184,700**	**496**	**0%**
Expense				
Total Admin Expenses	**6,839**	**6,118**	**(721)**	**-12%**
CCH Clinical Expenses				
Claims	10,197	11,032	835	8%
Pharmacy Claims	1,152	2,117	965	46%
Care Management	944	1,250	306	n/a
Total CCH Clinical Expenses	**12,293**	**14,399**	**2,106**	**15%**
External Clinical Expenses				
Claims	92,221	90,866	(1,356)	-1%
Hospital Supplemental Access Pmt	35,315	35,315	-	0%
Pharmacy Claims	26,385	25,070	(1,315)	-5%
Care Management	3,116	3,202	85	3%
Care Management Analytics	585	567	(19)	-3%
Dental Claims	4,214	3,395	(819)	-24%
Transportation Claims	1,276	1,438	162	11%
Optical Claims	757	400	(358)	-89%
Member Incentives	541	287	(254)	-88%
Total External Clinical Expenses	**164,411**	**160,539**	**(3,872)**	**-2%**
Total Clinical Expenses	**176,704**	**174,937**	**(1,767)**	**-1%**
Total Expenses	**183,543**	**181,055**	**(2,488)**	**-1%**
Net Income Before Rate Adjustment	**1,653**	**3,645**	**(1,992)**	**-55%**
Medical Loss Ratio (MLR)	**95%**	**95%**	**-1%**	**-1%**
Net Income Before Prior Period Adj/IGT	**1,653**	**3,645**	**(1,992)**	**-55%**
IGT	**3,054**	**3,394**	**(340)**	**-10%**
Amortization	**773**	**773**	**-**	**0%**
Net Income After IGT And Amortization	**(2,174)**	**(522)**	**(1,652)**	**316%**
Total CCH Impact	**13,946**	**18,044**	**(4,098)**	**-23%**

*Internal Claims based on paid claims and estimated IBNR provided by third-party actuaries priced at 100% of Medicaid rates

**Cook County Health reflects a refundable deposit asset of $50 million. The actual balance of this deposit may vary due to claims payment timing, however, replenishment of the deposit is reflected in Claims Payable on the balance sheet.

Correctional Health Services
Financial & Operational Statistics

COOK COUNTY
HEALTH

Accrual Basis Income Statement for one month ending December 2019 (in thousands)

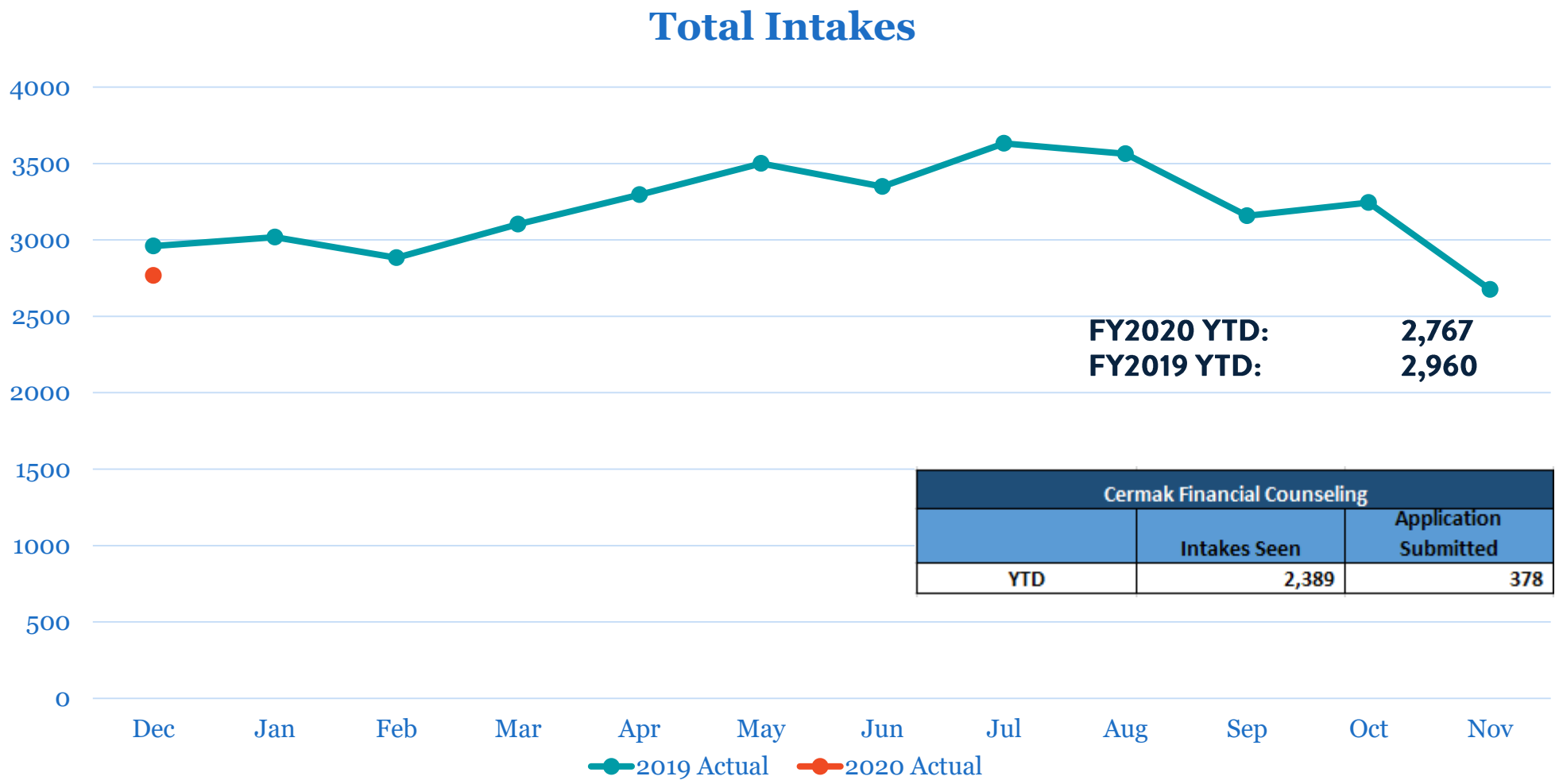
Correctional Health Services	Year-To-Date		Variance	
	Actual	*Budget*	*$*	*%*
Total Operating Rev	0	-	0	n/a
Operating Expenses				
Salaries & Benefits	3,889	5,334	1,445	27%
Overtime	343	439	96	22%
Pension*	569	562	(7)	-1%
Supplies & Materials	72	60	(11)	-18%
Pharmaceutical Supplies	13	575	562	98%
Purch. Svs., Rental, Oth.	69	923	854	93%
Insurance Expense	-	-	-	n/a
Depreciation	7	7	0	2%
Total Operating Exp	4,962	7,900	2,938	37%
Operating Margin	(4,961)	(7,900)	2,938	37%
Operating Margin %	**na**	**na**	**na**	**na**
Non Operating Revenue	**4,957**	**562**	**4,395**	**782%**
Net Income/(Loss)	**(5)**	**(7,338)**	**7,333**	**100%**

COOK COUNTY HEALTH

*Year to Date (1 months) Pension Liability per GASB
Pension includes Other Post Employment Benefits (OPEB) Expense

Unaudited Financial Statement

Correctional Health Operation Overview for one month ending December 2019



Cermak Financial Counseling		
	Intakes Seen	Application Submitted
YTD	2,389	378

Comments:

- 91% of intakes are screened by financial counselling to ensure continuity of coverage

COOK COUNTY HEALTH

Source: Cermak Health Services – Financial Counseling

Cook County Dept. of Public Health
Financial & Operational Statistics

COOK COUNTY
HEALTH

Accrual Basis Income Statement for one month ending December 2019 (in thousands)

COOK COUNTY PUBLIC HEALTH	Year-To-Date		Variance	
	Actual	*Budget*	*$*	*%*
Total Operating Rev	137	125	12	9%
Operating Expenses				
Salaries & Benefits	535	1,008	473	47%
Overtime	5	1	(4)	-522%
Pension*	72	71	(1)	-1%
Supplies & Materials	-	16	16	100%
Purch. Svs., Rental, Oth.	18	(176)	(194)	110%
Insurance Expense	-	-	-	n/a
Depreciation	0	0	0	2%
Utilities	5	-	(5)	n/a
Total Operating Exp	635	920	285	31%
Operating Margin	(499)	(795)	296	37%
Operating Margin %	**na**	**na**	**na**	**na**
Non Operating Revenue	**72**	**71**	**1**	**1%**
Net Income/(Loss)	**(427)**	**(724)**	**297**	**41%**

COOK COUNTY HEALTH

*Year to Date (1 months) Pension Liability per GASB
Pension includes Other Post Employment Benefits (OPEB) Expense

Unaudited Financial Statement

CCDPH Operation Overview for the One Month ending December 2019

	Program Title	Metric	YTD Thru Dec. 19	FY20 Target
Public Health	Integrated Health	Percent of high-risk infant APORS (Adverse Pregnancy Outcome Reporting System) referrals received that are contacted for follow-up by the Public Health Nurse within 14 calendar days of referral	%	85%
	Administration	Cost per county residents served	$4.31	$4.31
	Environmental Health	Cost per Inspection Efficiency	$	$208.56
		Percent of food establishments with isolated illness complaints within a contracted community or unincorporated Suburban Cook County that are inspected within 2 business days of receipt of complaint	%	100%
	Communicable Diseases	Time from receipt of Chlamydia or gonorrhea report to field (days)		5
Lead Poisoning Prevention	Program Title	Metric	YTD Thru Dec. 19	FY20 Target
	Lead Poisoning Prevention	Percentage of cases with elevated blood levels visited within the timeline provided in protocols	87%	90%
		Percentage of cases with elevated blood lead levels who receive joint nursing visit and environmental risk assessment visit	100%	95%
TB Program	Program Title	Metric	YTD Thru Dec. 19	FY20 Target
	TB Program	Number of completed Direct Observation Treatments (DOT)	%	91%

Source: Department of Public Health

CCH Administration Financial Statements

COOK COUNTY HEALTH

Accrual Basis Income Statement for one month ending December 2019 (in thousands)

Administration	Year-To-Date		Variance	
	Actual	*Budget*	*$*	*%*
Operating Expenses				
Salaries & Benefits	3,534	2,740	(795)	-29%
Overtime	18	17	(1)	-5%
Pension*	550	543	(7)	-1%
Supplies & Materials	5	32	28	86%
Purch. Svs., Rental, Oth.	8	752	743	99%
Insurance Expense	-	-	-	n/a
Depreciation	206	211	5	2%
Utilities	-	4		
Total Operating Exp	4,320	4,294	(27)	-1%
Operating Margin	(4,320)	(4,294)	(27)	-1%
Non Operating Revenue	**550**	**543**	**(7)**	**-1%**
Net Income/(Loss)	**(3,771)**	**(3,751)**	**(20)**	**-1%**

Unaudited Financial Statement

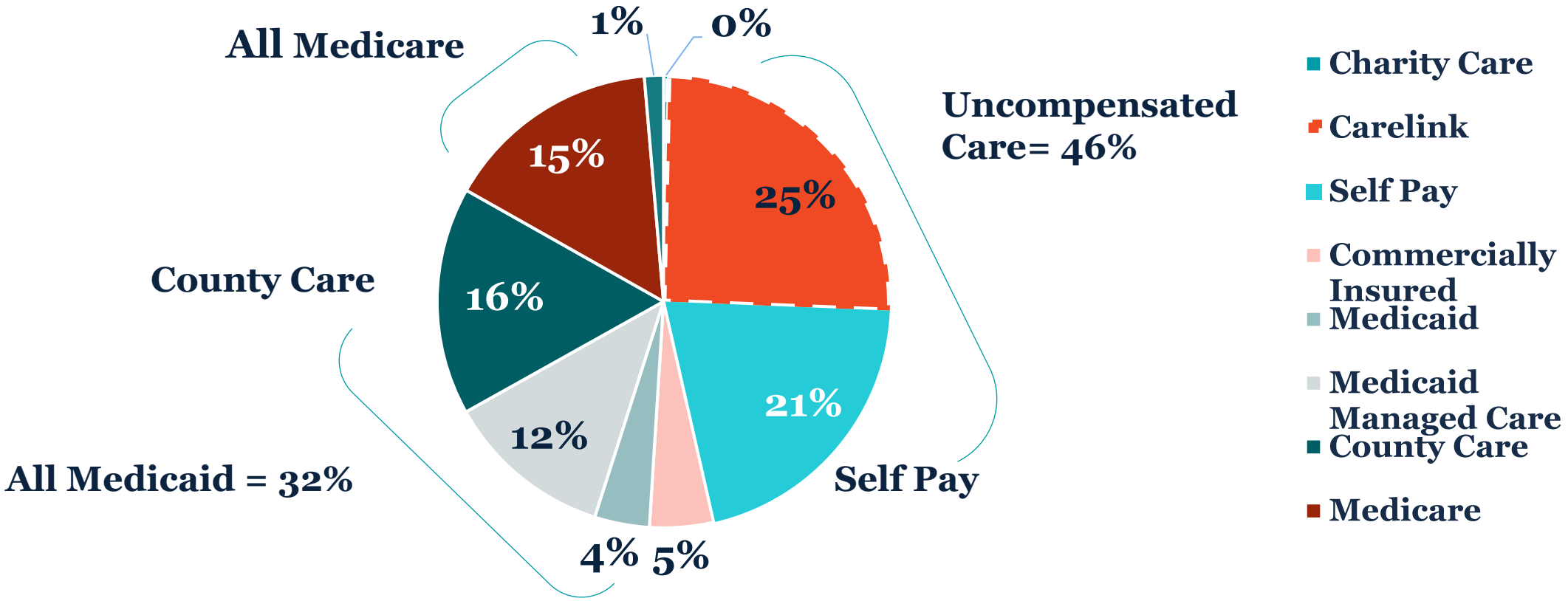
COOK COUNTY HEALTH

*Year to Date (1 month) Pension Liability per GASB
Pension includes Other Post Employment Benefits (OPEB) Expense

Appendix
FY 2020 - System-wide Volumes / Stats

COOK COUNTY
HEALTH

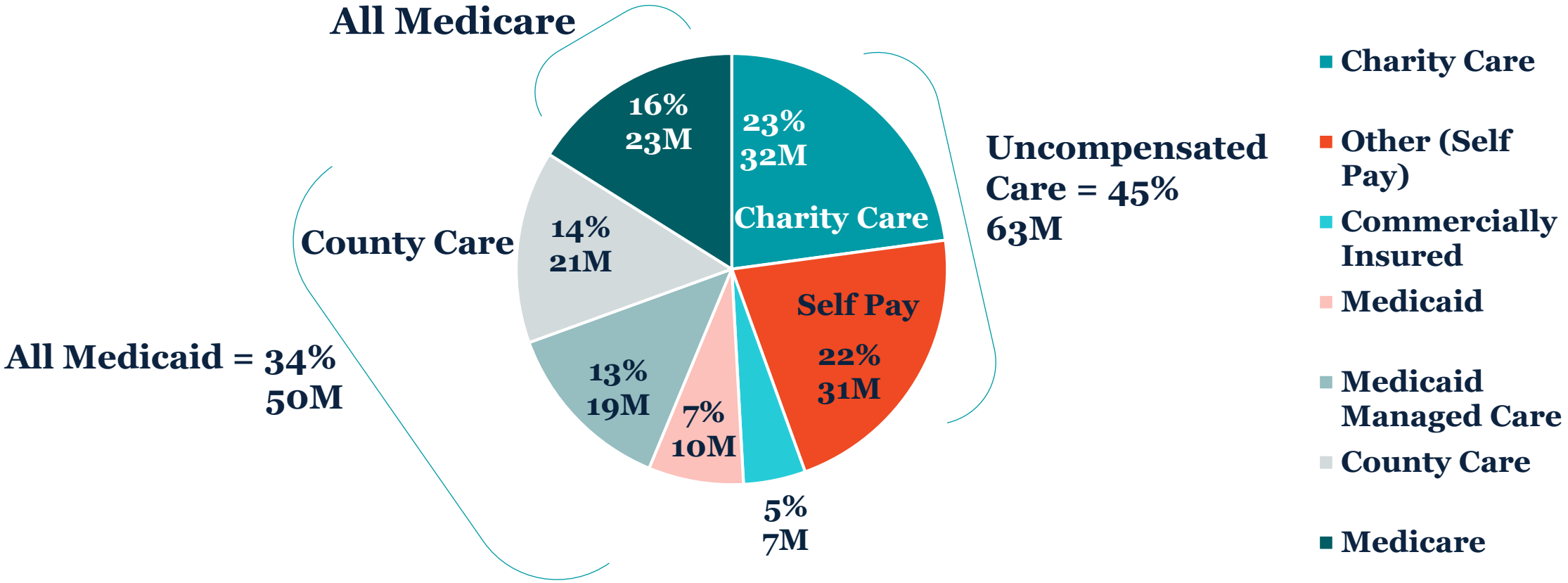
System Payor Mix By Visit as of December 2019



COOK COUNTY HEALTH

Source: Tableau Dashboards & Business Intelligence

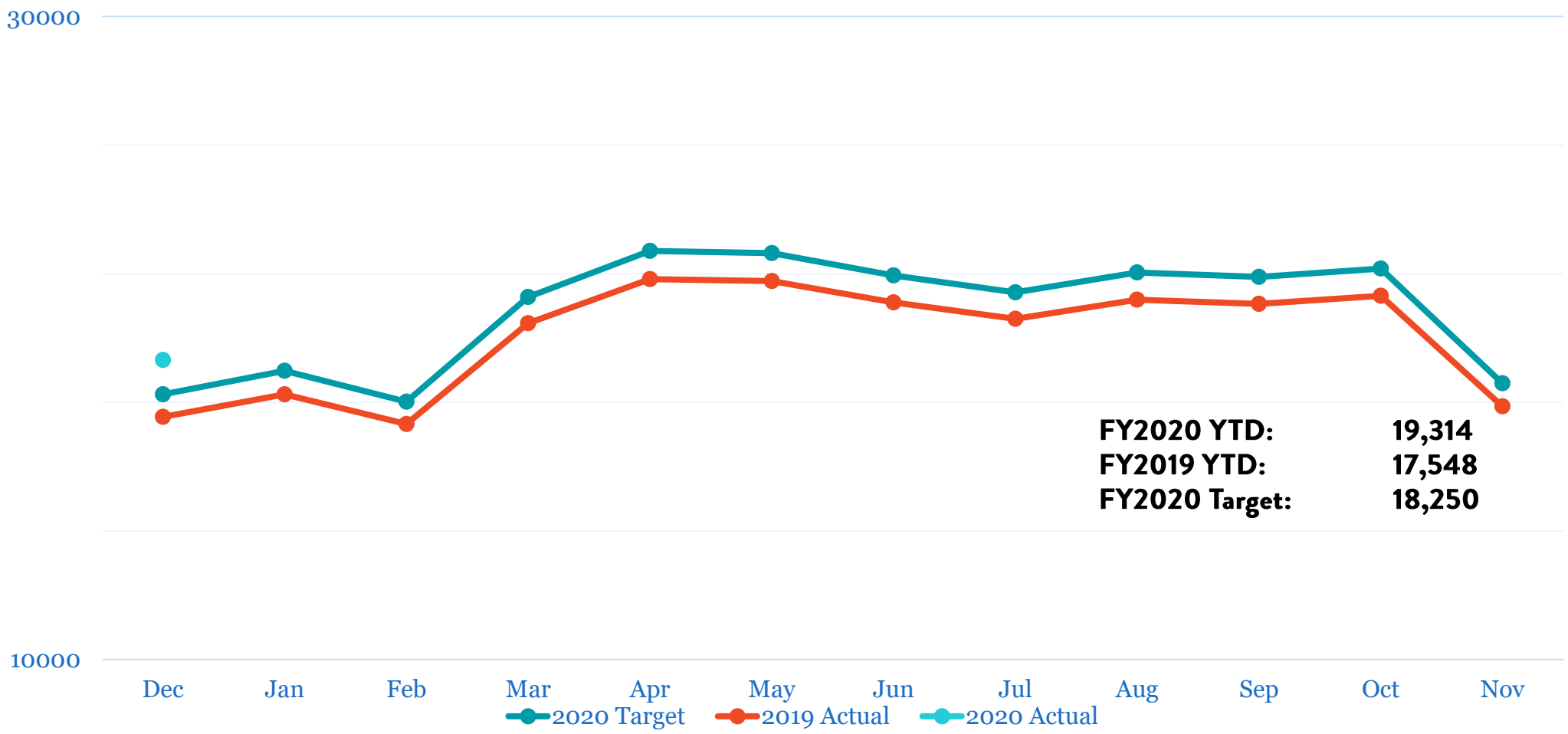
System Payor Mix By Charges as of December 2019



COOK COUNTY HEALTH

Source: Finance Department

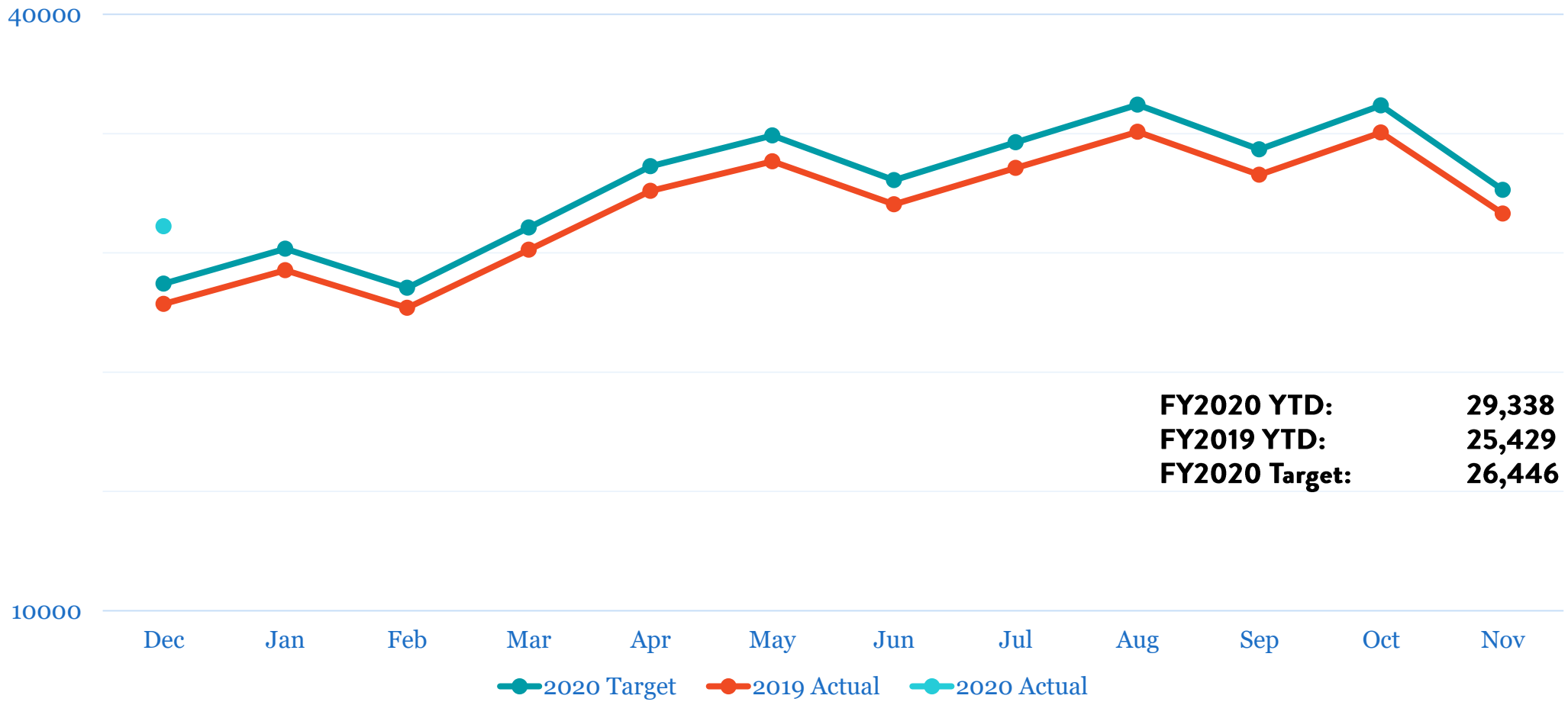
Primary Care Provider Visits



COOK COUNTY HEALTH

Source: Tableau Dashboards & Business Intelligence

Specialty Care Provider Visits

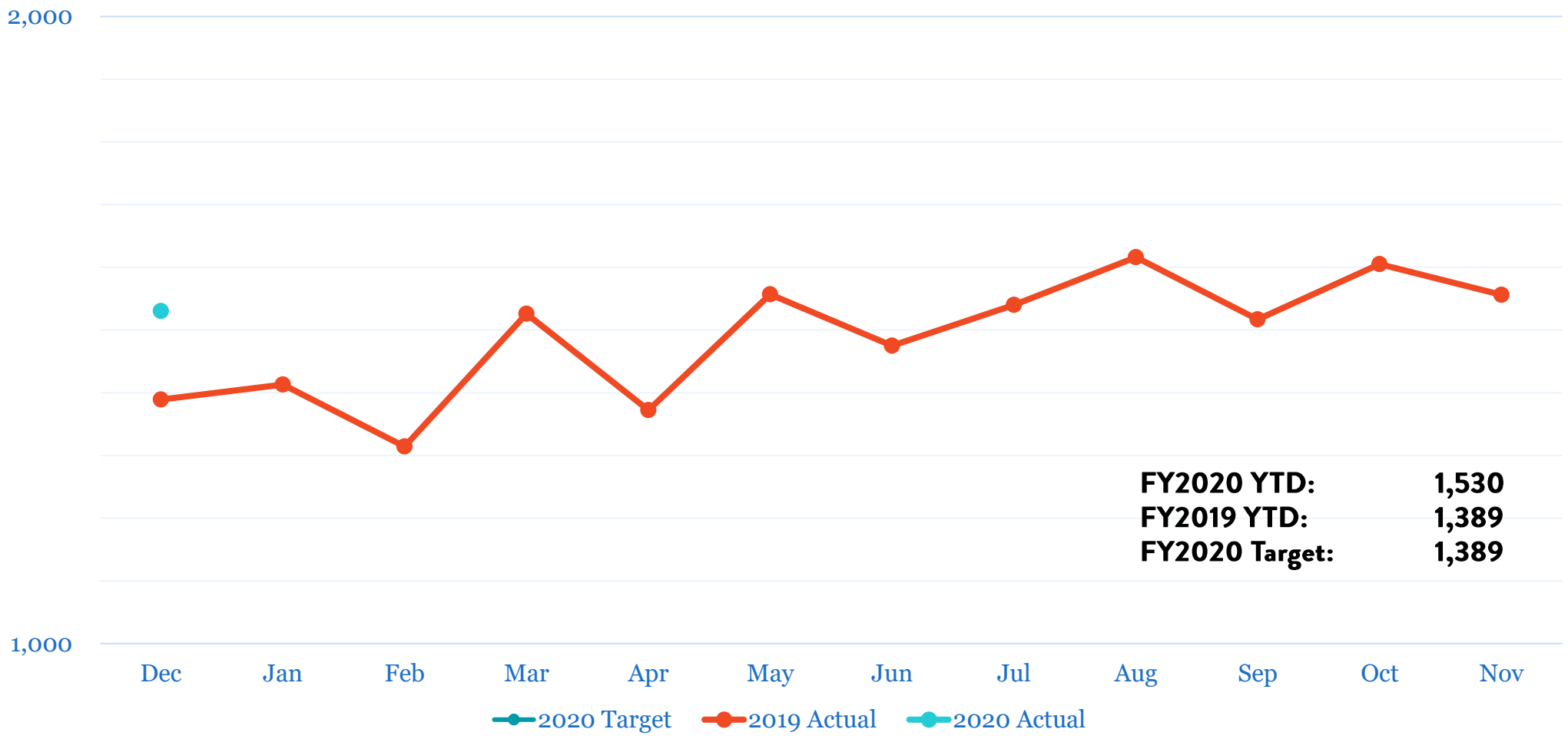


FY2020 YTD:	**29,338**
FY2019 YTD:	**25,429**
FY2020 Target:	**26,446**

COOK COUNTY HEALTH

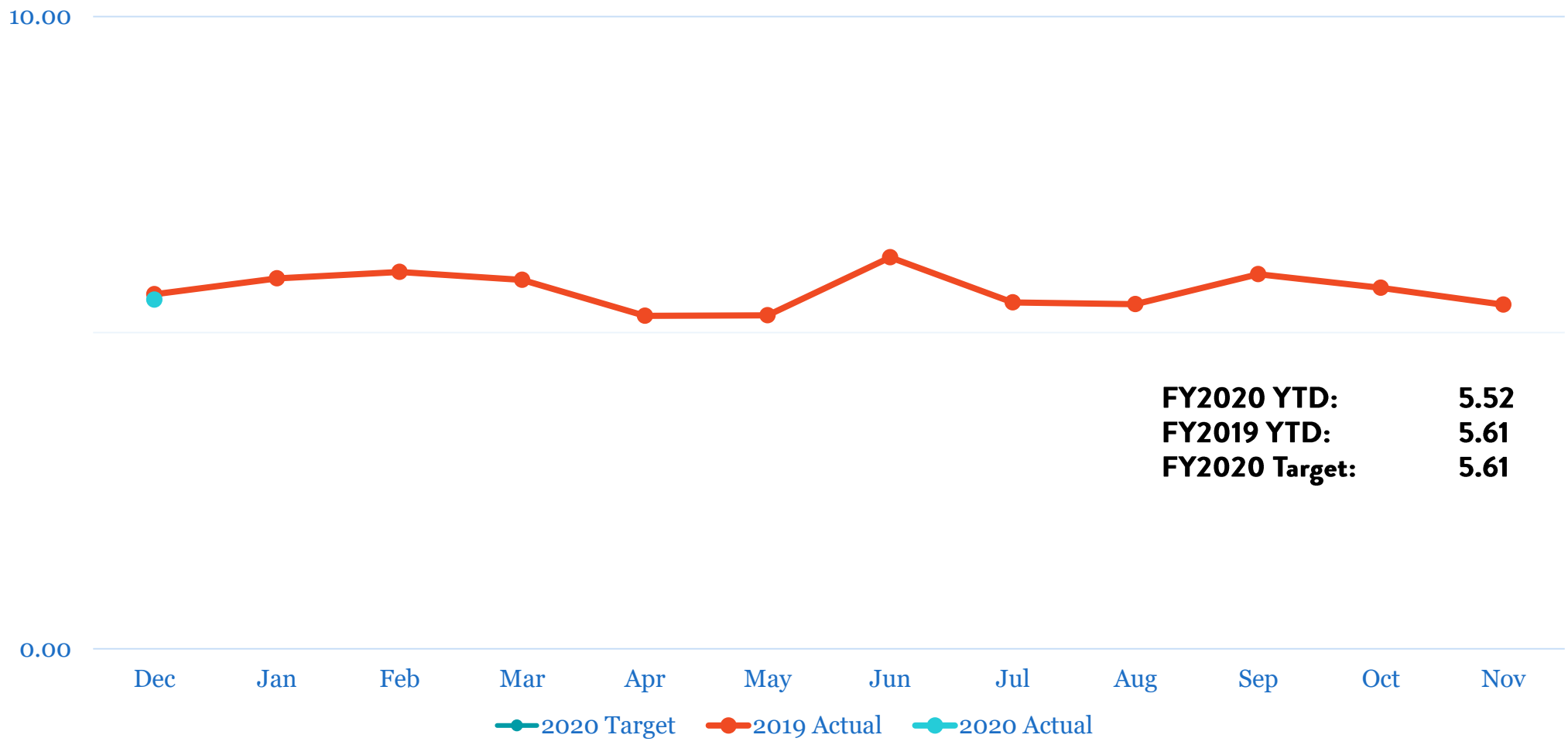
Source: Tableau Dashboards & Business Intelligence

Total Inpatient Discharges



Source: Tableau Dashboards & Business Intelligence

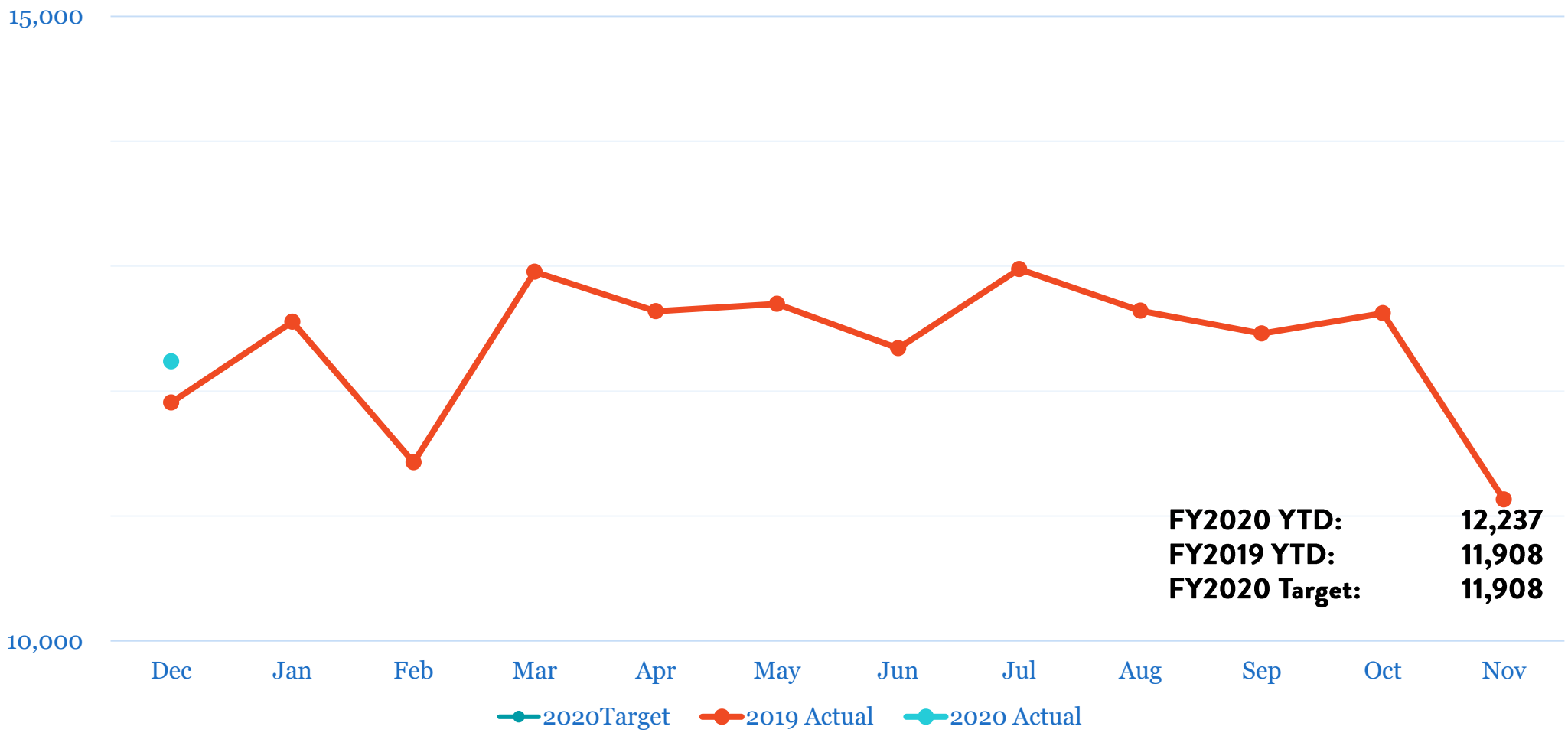
Average Length of Stay



FY2020 YTD:	**5.52**
FY2019 YTD:	**5.61**
FY2020 Target:	**5.61**

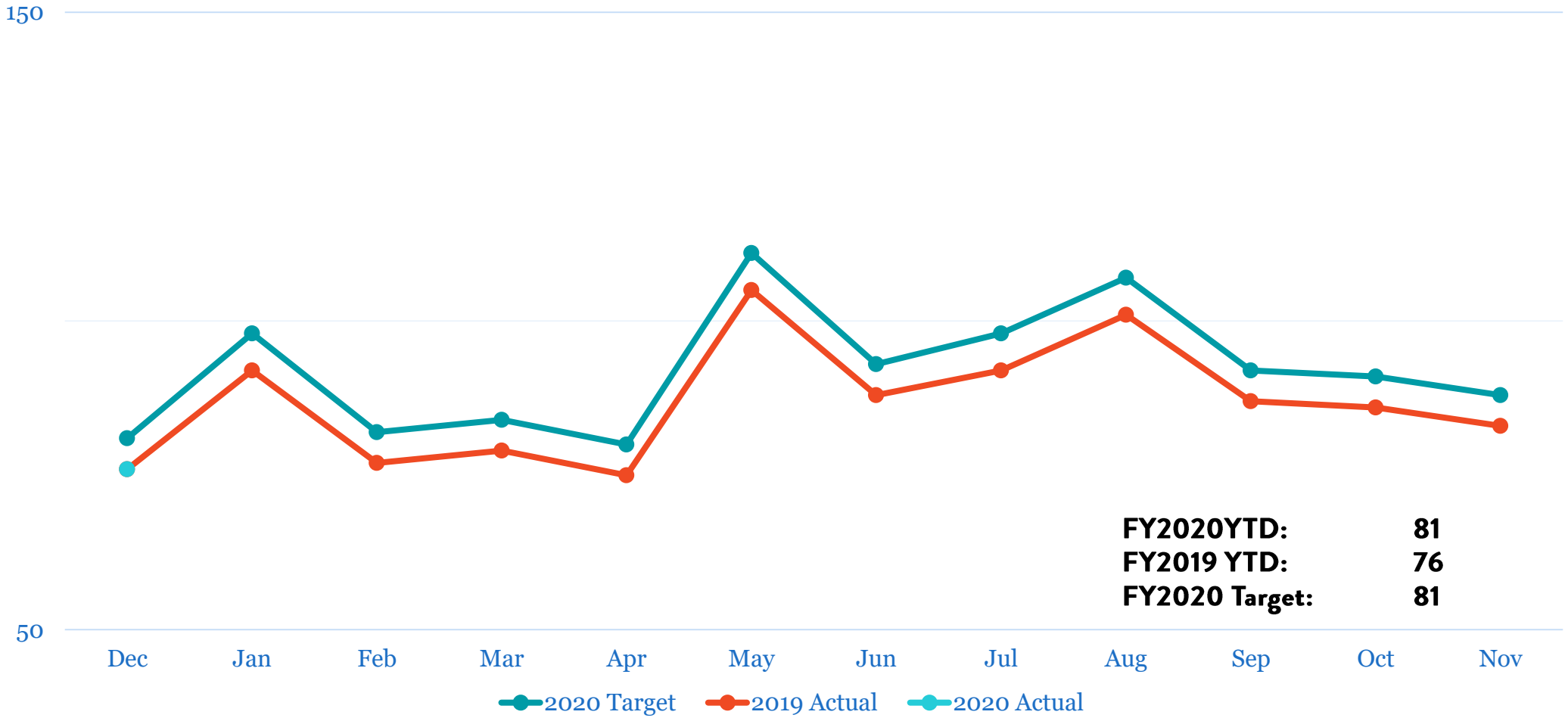
Source: Business Intelligence

Total Emergency Room Visits



Source: Tableau Dashboard

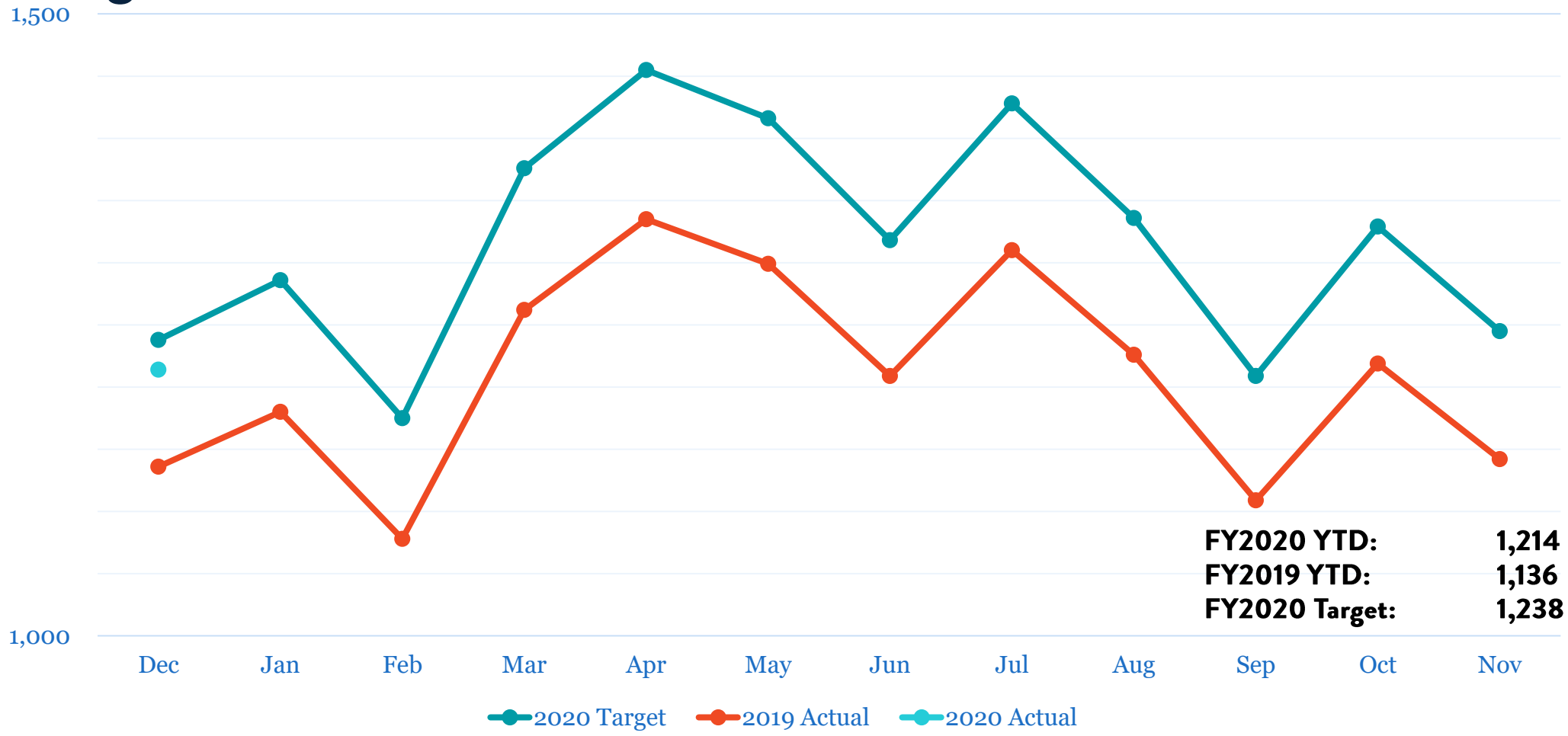
Total Deliveries



FY2020YTD:	**81**
FY2019 YTD:	**76**
FY2020 Target:	**81**

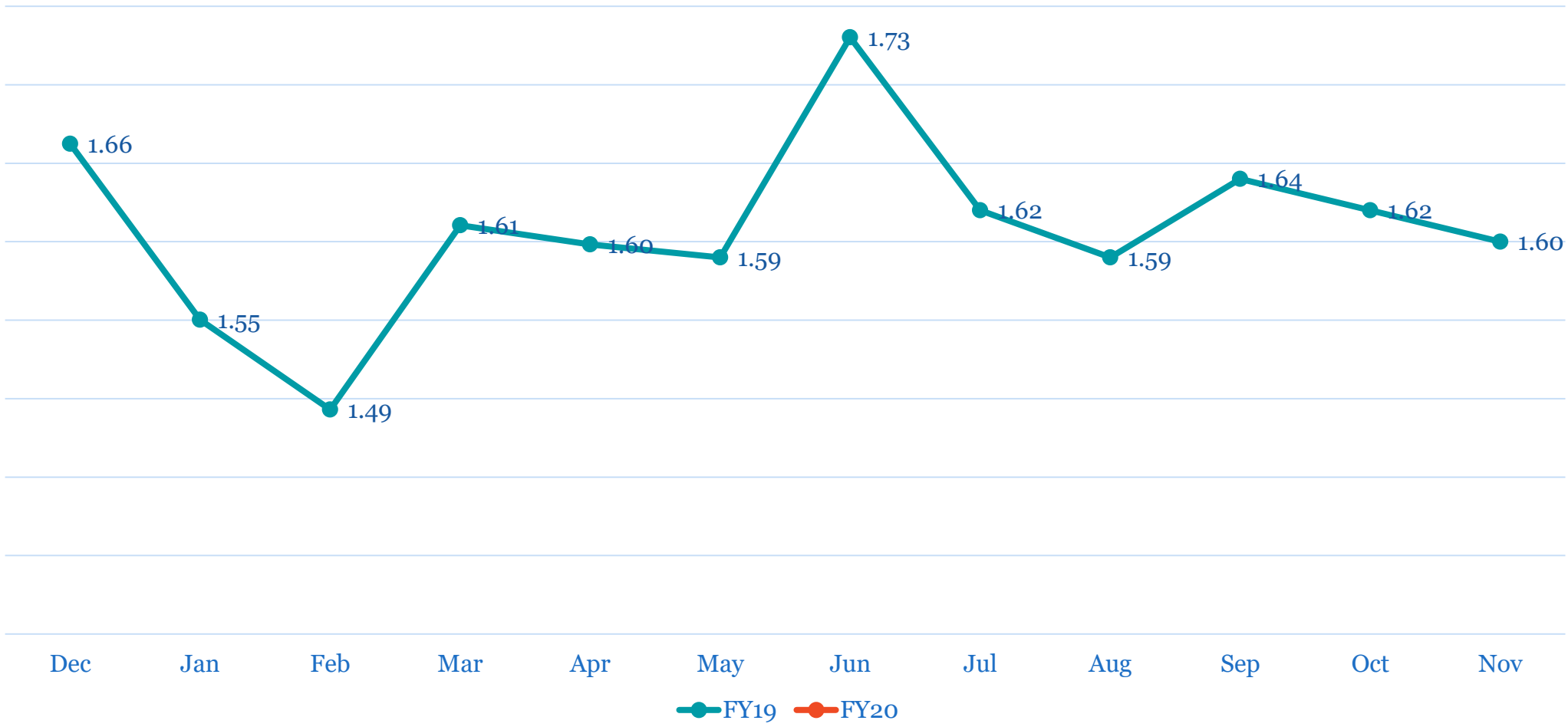
Source: Business Intelligence

Total Surgical Cases



Source: Business Intelligence

Case Mix Index



Source: Tableau Dashboard

Questions?

COOK COUNTY HEALTH