**Cook County Health System - LWVCC ANNUAL MEETING 5/13/19**

Background: The Cook County Health System has been providing patient care to the residents of Cook County for over 180 years.

Since 2008, it has been governed by an independent board of eleven members. The current CEO, is Dr. Jay Shannon who has been overseeing massive changes and challenges to the System.

**Cook County Health System is busy - In 2018:**

* Passed a $2.9 budget, 3% of which is covered by Cook County taxpayers.
* Expanded Strategic focus on:
* Community centered care – 17 centers – Dental Care, Pediatrics including WIC, Behavioral Health with a focus on mental health, additions including opioids and tobacco. Soon centers will have prenatal care, mammography, and pharmacy services.
* Mother/Child Care – New Program housed in Stroger Hospital
* County Care – HHS’ managed health care insurance plan developed to compete for Medicaid patients covered by the State of Illinois. The Plan has 317,000 members against a goal of 345,000 for 2019.
* Increased post jail release services.
* Mental health care at the Juvenile Temporary Detention Center.
* Modernization: CCH completed a state of the art 9-story Central Campus Health Center, replacing the old Fantus Clinic with a new outpatient clinic and admin space. Expanded hours at the ACHNs, including Saturdays.
* Inaugurated community advisory boards at three community health clinics with feedback on how CCH can better serve patients and the community.
* Offers Fresh Food Markets at Oak Forest, Robbins, and Cottage Grove Health Centers; and partners with the Greater Chicago Food Depository to visit twelve of the health centers and deliver fresh fruits and vegetables to over 19,000 individuals that screened positive for food insecurity at a CCH health care center.
* Began discussions and presentations leading to an update to its 2020 Strategic Plan.
* Board turnover resulted in 3 new members including Dennis Deer, Cook County Commissioner.
* Mary Lowry-Richardson was elected as board Vice-President. The year of the woman!!!!
* The US District court ended Shakman oversight of the Cermak Correctional Health Services.

**Challenges:**

* Patient care satisfaction; Need for staff cultural change “patient first mantra”
* Budget revenue shortfalls and expense increases - Creeping rise in uninsured patients to 45%
* Ability to guaranteed patient care regardless of ability to pay
* Increased uncertainty of Federal and State willingness and ability to continue ACA funding
* Certainty that the System must grow to survive –

 @ Keep more of its Managed Care patients from going to other providers

 @ Convert its current Medicaid patients to Medicare when eligible

 @ Change the culture and patients’ willingness to recommend

**The League’s Role - Observe, Educate, and Advocate:**

* Met with Board Chair Hammock and CEO Shannon on our request to video coverage board and committee meetings. Not successful but will now receive audio coverage.
* Met with Arvind Goyal, Medical Director of the Illinois Medicaid Department of Healthcare and Family Services Medical program. He pointed out that Medicaid coverage is the largest expense in the State budget and the incredible complexity of the system.
* Met with Board Directors to discuss their goals and to obtain their opinions on the financial sustainability of the System.
* Visited the new Arlington Heights ambulatory clinic designed to attract insured patients.
* Observed all monthly board meetings and several committee meetings. We need more observers to cover board meetings which are held during the day – but can now be observed either in person or via audio coverage and downloaded board reports.
* Will tour the County Jail’s Cermak Health Center on May 23.
* Developed a simple but important mission statement for the CCH Interest Group which is: *“Evaluate the governance and use of public funds by the Cook County Health System.”*

***Diane Edmundson, Chair***

***Cook County Health Interest Group***

***Notes:***

***Over 80% of the system’s patients are either Medicaid [36%] or uninsured including immigrants [45%]***

***30% of visits of primary care office visits do not occur within the Managed Care patients’ assigned home centers. In other words, they don’t use the services of CC Health but go to other hospitals and providers.***

***The CC mortality rate for African American mothers is 3 times that of Caucasian mothers, and the suburbanization of poverty is on the County’s public health system’s radar.***