

Health Plan Services Update

Prepared for: CCH Board of Directors

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Metrics



Current Membership

Monthly membership as of Feb 7th, 2023

Category	Total Members	ACHN Members	% ACHN
FHP	279,473	18,201	6.5%
ACA	124,396	18,319	14.7%
ICP	30,153	4,891	16.2%
MLTSS	8,561	-	0%
SNC	7,681	389	5.1%
Total	450,264	41,800	9.3%

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 December 2022 Data

Managed Care Organization	Cook County	Cook Market Share
*CountyCare	448,307	32.6%
Blue Cross Blue Shield	357,951	26.1%
Meridian (a WellCare Co.)	323,994	23.6%
IlliniCare (Aetna/CVS)	131,580	9.6%
Molina	102,260	7.4%
YouthCare	9,753	0.7%
Total	1,373,845	100.0%

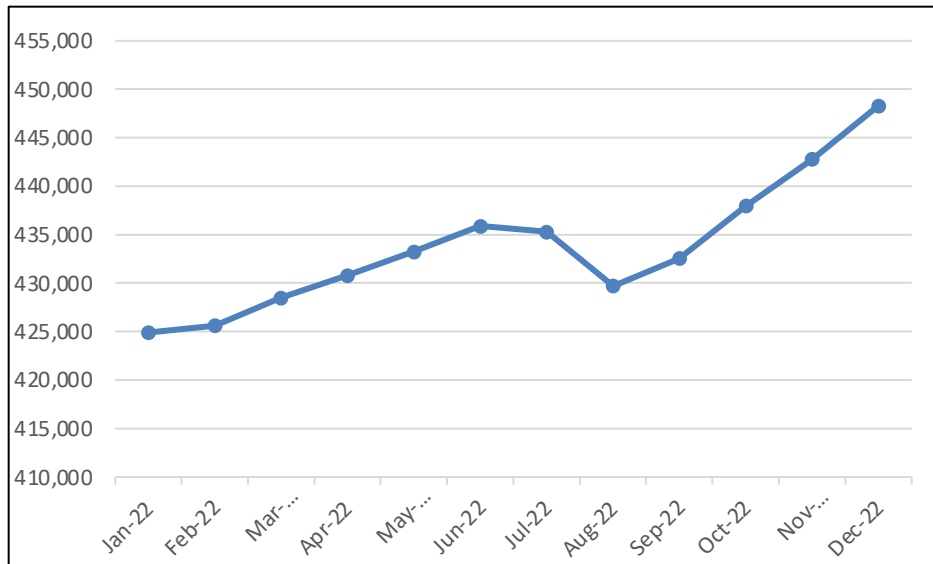
* Only Operating in Cook County



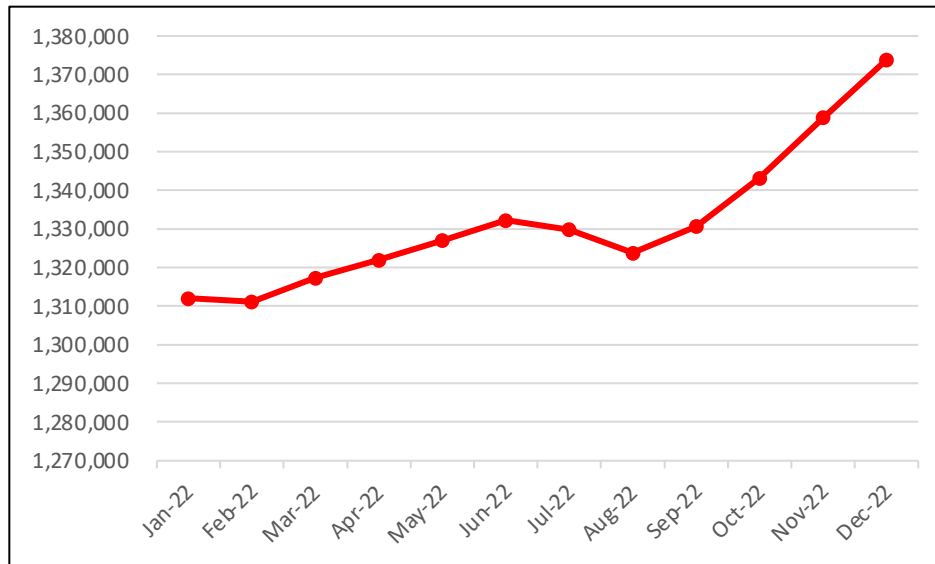
IL Medicaid Managed Care Trend in Cook County

(charts not to scale)

CountyCare



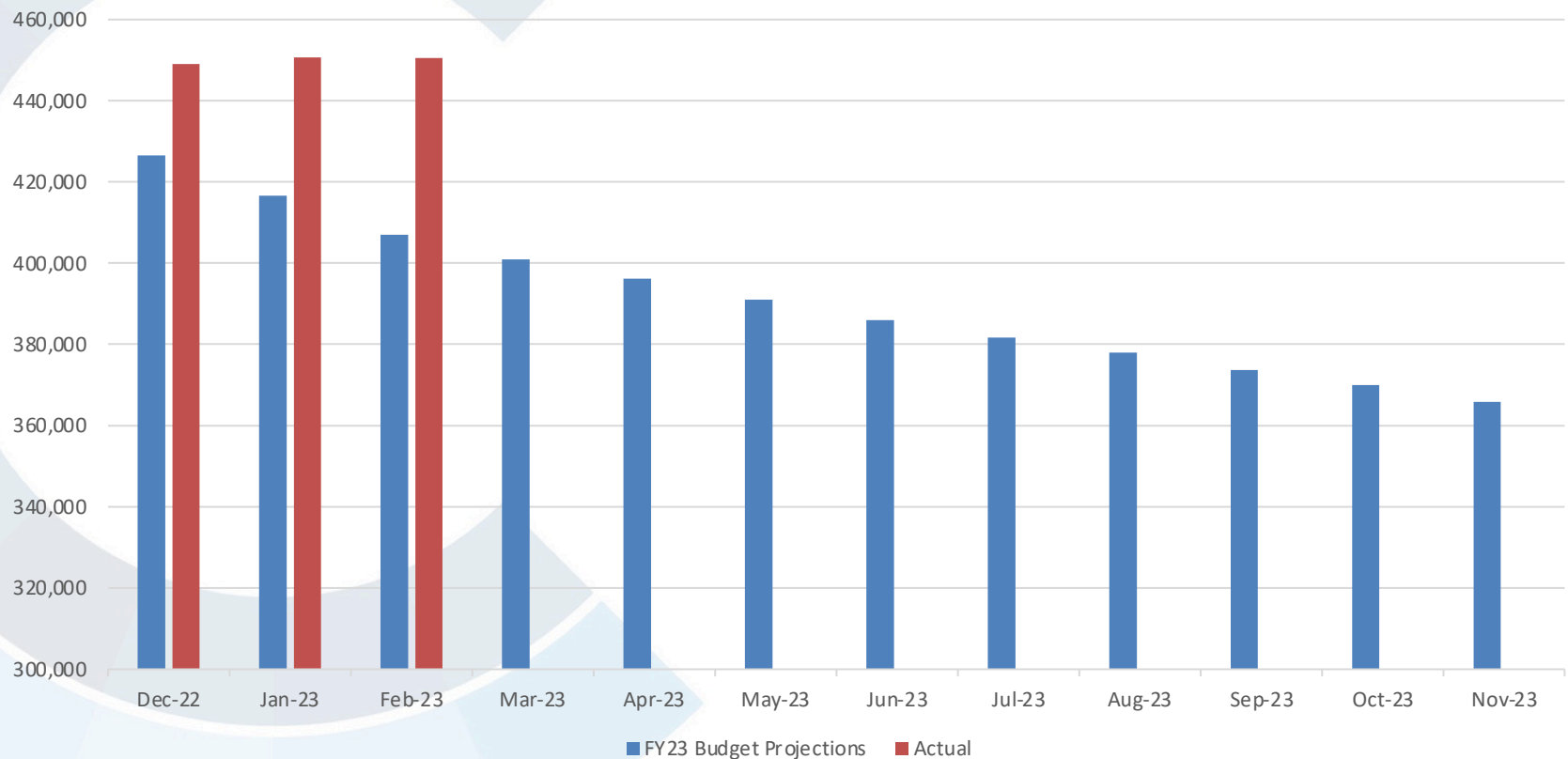
Cook County Medicaid Managed Care



- CountyCare's enrollment has increased 6% over the past 12 months, ahead of the Cook County increase of 5%
- CountyCare's enrollment increased 1.3% in December 2022 compared to the prior month, ahead of the Cook County increase of 1.1%

FY 23 Budget | Membership

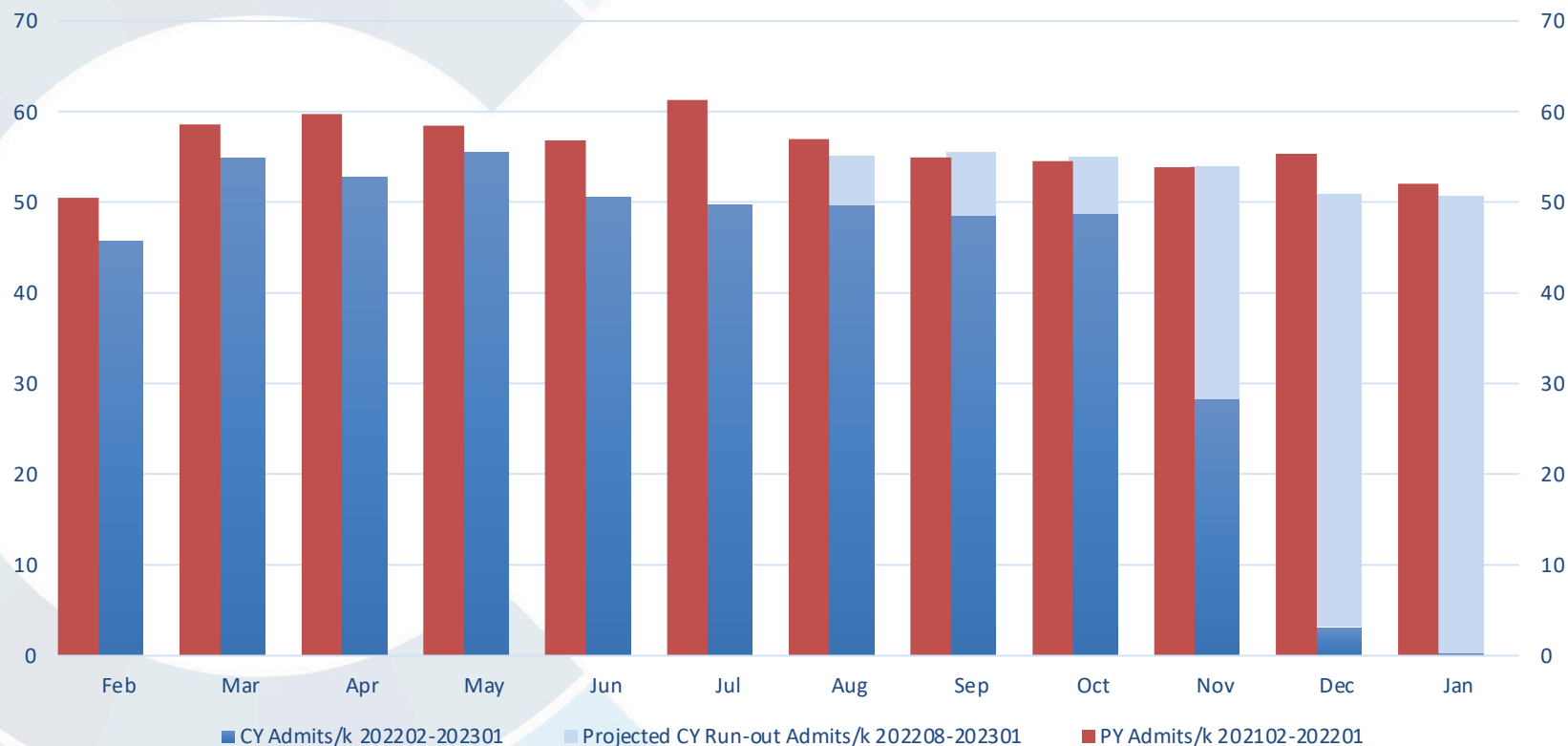
CountyCare Membership



Operations Metrics: Call Center & Encounter Rate

		Performance		
Key Metrics	State Goal	Nov 2022	Dec 2022	Jan 2023
Member & Provider Services Call Center Metrics				
Inbound Call Volume	N/A	38,923	51,203	55,884
Abandonment Rate	< 5%	1.54%	7.78%	7.51%
Hold Time (minutes)	1:00	0:12	1:21	3:05
% Calls Answered < 30 seconds	> 80%	93.03%	72.04%	71.42%
Quarterly				
Claims/Encounters Acceptance Rate	98%	97%		

Current v. Prior Year: IP Acute Admits/1000



Updated monthly, paid through January 2023

All acute and surgical cases + approved acute authorizations

Domestic admissions are not included since they do not require Prior Authorization

CountyCare COVID Vaccination Rates

Age Category	Total	At Least 1 Dose		Series Complete		Updated (Bivalent) Booster		All Booster/3rd Dose
	Eligible Members	% of Total Eligible Members	CDC Benchmark	% of Total Eligible Members	CDC Benchmark	% of Total Eligible Members	CDC Benchmark	% of Total Eligible Members
<2 yrs	18,321	6.48%	7.60%	3.97%	3.70%	0.01%	0.20%	0.90%
2-4 yrs	29,229	9.72%	10.30%	5.87%	5.50%	0.03%	0.30%	1.28%
5-11 yrs	71,027	38.55%	39.70%	33.12%	32.60%	3.60%	4.00%	7.85%
12-17 yrs	64,354	58.23%	71.90%	53.22%	61.60%	6.69%	7.00%	18.49%
18-24 yrs	54,959	59.28%	81.90%	52.64%	66.50%	5.02%	6.70%	20.27%
25-49 yrs	137,299	54.90%	85.20%	49.29%	72.00%	7.30%	11.20%	21.48%
50-64 yrs	58,445	72.97%	95.00%	68.91%	83.70%	20.20%	20.30%	46.24%
>=65 yrs	16,396	76.38%	95.00%	72.61%	94.20%	26.48%	40.80%	56.80%
Total	450,030	51.55%		46.44%		8.90%		21.11%

Data as of 2/8/2023

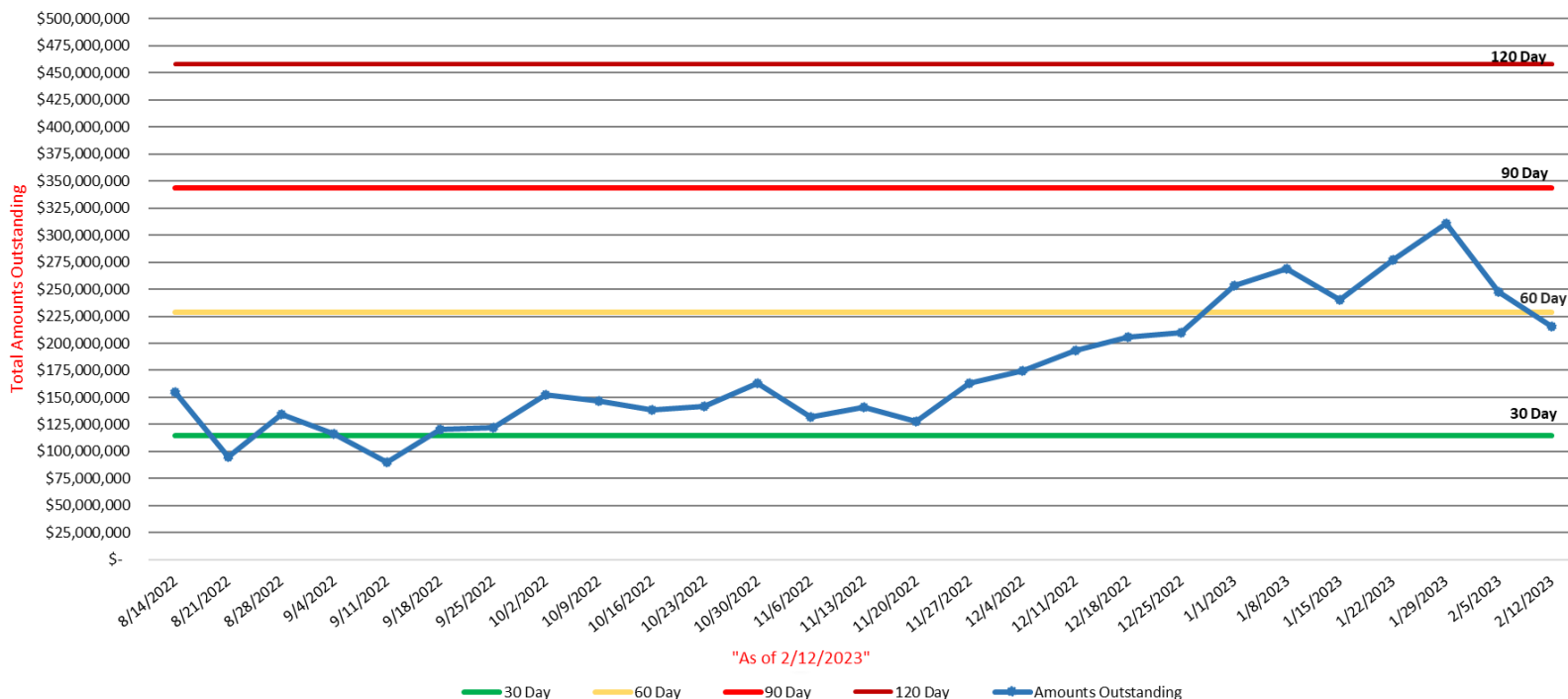
Notes: Benchmark data in the table above is obtained from CDC. For booster, the benchmark data only captures the updated bivalent booster.

Benchmark for each age category: <https://covid.cdc.gov/covid-data-tracker/#vaccination-demographics-trends>

Bechmark for overall vaccination rate: https://covid.cdc.gov/covid-data-tracker/#vaccinations_vacc-people-onedose-pop-total

Claims Payments

Received but Not Yet Paid Medical Claims



*Assumes average of 15 days to process claims

*Assumes \$57.5M in pending claims not yet adjudicated

*Medical claims only- does not include pharmacy, dental, vision or transportation claims. These claims typically average a 30-60 day payment timing.

Claims Payments

Received but Not Yet Paid Claims

Aging Days	0-30 days	31-60 days	61-90 days	91+ days	Grand Total
Q1 2020	\$ 109,814,352	\$ 53,445,721	\$ 46,955,452	\$ 9,290,569	\$ 219,506,093
Q2 2020	\$ 116,483,514	\$ 41,306,116	\$ 27,968,899	\$ 18,701,664	\$ 204,460,193
Q3 2020	\$ 118,379,552	\$ 59,681,973	\$ 26,222,464	\$ 71,735	\$ 204,355,723
Q4 2020	\$ 111,807,287	\$ 73,687,608	\$ 61,649,515	\$ 1,374,660	\$ 248,519,070
Q1 2021	\$ 111,325,661	\$ 49,497,185	\$ 4,766,955	\$ 37,362	\$ 165,627,162
Q2 2021	\$ 131,867,220	\$ 49,224,709	\$ 566,619	\$ 213,967	\$ 181,872,515
Q3 2021	\$ 89,511,334	\$ 25,733,866	\$ 38,516	\$ 779,119	\$ 116,062,835
Q4 2021	\$ 125,581,303	\$ 90,378,328	\$ 112,699	\$ 1,114,644	\$ 217,186,974
Q1 2022	\$ 144,241,915	\$ 12,166,101	\$ 2,958,928	\$ 2,183,828	\$ 161,550,772
Q2 2022	\$ 120,267,520	\$ 735,088	\$ 2,476,393	\$ 4,676,897	\$ 128,155,898
Q3 2022	\$ 105,262,634	\$ 16,617,110	\$ 59,407	\$ 15,171	\$ 121,954,322
Q4 2022	\$ 142,815,499	\$ 62,495,024	\$ 2,403,391	\$ 2,056,097	\$ 209,770,011
Week of 2/12/2023	\$ 147,673,702	\$ 60,858,587	\$ 6,670,604	\$ 546,862	\$ 215,749,755

*0-30 days is increased for an estimated \$57.5M of received but not adjudicated claims

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

*The amounts in the table are clean claims



Thank you

Q&A

