

Opinion by Illinois Health and Hospital Association President & CEO A.J. Wilhelmi (Submitted to Crain's Chicago Business September 16, 2020)

Hospitals Committed to Serving Everyone

Illinois hospitals of all shapes and sizes are the cornerstones of their communities and provide some of the highest quality healthcare in the world. "Inside the Health Care Gap: Why Hospitals Don't Treat Everyone Equally" (September 14) paints a very incomplete and misleading picture of Chicago-area hospitals and their strong commitment to care for patients and communities, including the most vulnerable, regardless of their ability to pay or insurance coverage. The article relies heavily on a Lown Institute report, selectively focusing on one metric, "Civic Leadership", but ignoring other key healthcare metrics, "Patient Outcomes" and "Value of Care".

The Institute's rankings present a skewed and inaccurate view of what individual hospitals are doing to meet the needs of their communities, cherry picking certain community benefit measures but specifically excluding others, including the hundreds of millions of dollars in Medicaid payment shortfalls that Chicago hospitals absorb each year (on average, Medicaid reimburses only 80% of a hospital's actual costs). The financial burden of the Medicaid shortfall, an average 20% loss per service, continues to grow, as nearly 1 in 4 Illinoisans are now insured by Medicaid.

It is important to note that non-safety net hospitals in Cook County provide *more than 60%* of all Medicaid services in the county. Additionally, Chicago's 3 major academic medical centers alone provide more than 25% of all Medicaid hospital services in the city. And without the active participation and support of hospitals in the state's Medicaid program – including paying the state \$1.7 billion annually in a hospital provider tax which generates nearly \$2.6 billion in federal matching funds for Illinois – the program would not be viable nor sustainable.

The Institute also chose not to include the substantial funds that hospitals expend and invest in medical education and research, which are critical to training the next generation of medical professionals and developing new life-saving treatments and cures. In addition, the Institute acknowledges that it could not allocate community benefits to individual hospitals within a system, resulting in those hospitals' actual community benefits being greatly understated and undervalued.

Overall, Chicago hospitals provide more than \$2 billion annually in community benefits, including absorbing nearly \$1 billion in underpayments by Medicaid and Medicare, and

providing nearly \$200 million in charity care to patients who are uninsured and unable to pay for their care.

Also, as part of a long standing commitment to serve the most vulnerable patients and communities in Illinois, the hospital community worked closely with the Attorney General and General Assembly on passing landmark legislation, the Hospital Uninsured Patient Discount Act, under which Illinois hospitals provide significant free and discounted care to their patients – based on some of the most generous standards in the country.

Finally, we all recognize that health and healthcare disparities and inequities remain a major societal challenge and that there is much work to be done. To that end, the Illinois Health and Hospital Association's (IHA) Board of Trustees this summer established a permanent Committee on Health Disparities, which is co-chaired by the CEOs of two Chicago safety net hospitals and includes nearly two dozen hospital leaders from across Chicago and the state, to develop and implement systemic solutions that will reduce health disparities and inequities, especially for people and communities of color. IHA and the hospital community are absolutely committed to improving the health and lives of all Illinoisans and doing that equitably.