CHICAGOLAND HEALTHCARE WORKFORCE COLLABORATIVE

SEPTEMBER 2026 QUARTERLY MEETING

Navigating Federal Changes: Impacts on the Health Workforce, Part 2

SEPT 1st, 9-11AM | Malcolm X College

CHICAGOLAND
HEALTHCARE
WORKFORCE
COLLABORATIVE

MISSION

The Chicagoland Healthcare Workforce Collaborative unites employers and industry partners to support an inclusive healthcare workforce, provide accessibility for unemployed and underemployed populations, and develop innovative responses to the evolving needs of the healthcare industry.

STRATEGIC PILLARS

1

Local & Targeted Hiring

Focusing recruitment efforts in areas with higher concentrations of unemployment

2

Education & Training

Bridging the gap by uniting a variety of partners across the healthcare industry

3

Retention & Career Pathways

Offering education & training opportunities to new career pathways for employees

EMPLOYER-LED SECTOR PARTNERSHIP

- 12+ employer partners
- 20+ strategic partners

AGENDA

CHICAGOLAND HEALTHCARE WORKFORCE COLLABORATIVE

PART 1: Workforce Education Funding Shifts

- **Federal funding shifts impacting community colleges**
- **Introducing Workforce Pell Grants**
  - **Chris Warden**, Vice President of Policy, Women Employed
  - **Carrie Thomas**, Deputy Director, Business Services, IDES
  - **Sarah Lichtenstein Walter**, Vice Chancellor of Academic Programs, City Colleges of Chicago

PART 2: Tracking & Documenting Impacts of Federal Policy Changes

- **Kate Albrecht, PhD,** Assistant Professor, Public Policy, Management, and Analytics, University of Illinois Chicago
- **Wesley Epplin**, Policy Director, Health & Medicine Policy Research Group
- **Mayra Diaz,** Senior Policy Analyst, Health & Medicine Policy Research Group

Navigating Federal Changes: Impacts on the Health Workforce, Part 1 Recap

- **Medicaid cuts** under HR 1 could result in up to **500,000** Illinoisans losing Medicaid coverage, and between **$26-$51 billion** in lost funding for Illinois over 10 years.
- Approximately **770,000** Illinois adults are enrolled through the ACA Medicaid expansion and may be affected by new **work requirement** rules going into effect on January 1st.
- **Job Ready Illinois** was created to help SNAP and Medicaid recipients meet work requirements through a free, online learning platform.
- Budget proposals under "Make America Skilled Again" could cut federal **workforce funding** by $1.2 billion, eliminate dozens of programs, and consolidate different funding streams into block grants to states.

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Access slides and resources from our June meeting: https://chihealthworks.com/events/june-2026-quarterly/

Medicaid Work Requirement Updates

- The interim final rule may make exemptions harder to access.
- The broader rule is complicated and implementation will be challenging.
- The federal rules around income and what counts as “work”, are complex and include some favorable provisions (caregiving).
- The immediate focus is on outreach and helping people understand what they need to do.
- There are resources available to help organizations and individuals navigate the changes.

*Summary of talking points provided by Carrie Chapman, Illinois Department of Healthcare and Family Services, August 2026

Resources to Learn More

- **HFS Federal Resource Center**: Medicaid resources, guidance, and updates on upcoming changes
- **Illinois Medicaid Customer Guide**: Plain-language information to help Medicaid members understand changes and take action
- **Cook County Health Medicaid Impact Working Group**: Cross-sector coalition coordinating resources and strategies to protect access to coverage and care for Cook County residents
- **Get Medicaid Facts**: website and communications toolkit to help Medicaid enrollees understand changes and take steps to maintain coverage

Scan to view Resources list with links:

UPCOMING EVENT: Behavioral Health - Primary Care Learning Collaborative's Medicaid Work Requirements: A Proactive Response
September 22, 10am-1pm on Zoom

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Job Ready IL

Program Basics

- Free, online workforce program available statewide at JobReadyIL.com
- Approved Qualified Work Program for SNAP work requirements
  - Working with HFS to be approved for Medicaid Work Requirements
- Users can earn 20, 40, 60, or 80 hours a month to meet work requirements

Updates

- Open RFQ for content creators
- Resilient Chicago Fund recipient
  - Funding will support user testing for both design and language accessibility

Job Ready IL: The Numbers

	Total	April	May	June	July
Total New Enrollments	**2632**	**944**	**700**	**493**	**495**
Achieved Some Certificate	1219	329	404	246	240
% Achieving Some Certificate	**46%**	**35%**	**58%**	**50%**	**48%**
Achieved 20 hours and stopped	452	106	148	113	85
Achieved 40 hours and stopped	162	32	37	23	70
Achieved 60 hours and stopped	74	11	44	11	8
Achieved 80 Hours	531	180	175	99	77
% Achieving Full 80 Hours	**20%**	**55%**	**43%**	**20%**	**15%**

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PART 1: Workforce Education Funding Shifts

Federal Funding Shifts Impacting Community Colleges

Introduction of Workforce Pell Grants

Federal Shifts Impacting Community Colleges

- Funding unpredictability, delays, terminations
- DEI-focused activities & funds targeted, increased risk
- Workforce integration a priority
  - Federal education grants tied to, or strengthened by, alignment with employers, industry-led sector partnerships (CHWC), apprenticeships
  - Increased accountability measures based on employment outcomes

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*Summary of talking points provided by Illinois Community College Board

Minority-Serving Institution Funding Elimination

- **$350 million** from Department of Education for Hispanic-Serving Institutions, Predominantly Black Institutions, Asian American and Native American Pacific Islander-Serving Institutions
- **Funded student success initiatives**, academic advising, tutoring and retention programs, faculty development, STEM and healthcare program improvements, technology and infrastructure investments
- FY 2026 funds redirected toward one-time race-neutral Strengthening Institutions Program (SIP) focused on **workforce readiness**. SIP is eliminated in FY 2027 budget proposal
- Local community colleges with MSI designations include: City Colleges, Triton, College of DuPage, Harper, Oakton, Elgin, Lake County, Prairie State, and South Suburban

Sources: U.S. Department of Education Ends Funding to Racially Discriminatory Discretionary Grant Programs at Minority-Serving Institutions press release; U.S. Department of Education and U.S. Department of Labor Make Historic Grant Investments in Programs that Bolster Postsecondary Outcomes press release

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Additional Proposed Cuts

The President has sought to eliminate or cut these and other programs in proposed budgets in FY 26 and FY 27, but Congress has acted to continue funding.

- **TRIO ($1.19 billion elimination)** and **GEAR UP ($398 million elimination)** to help low-income, first-generation, and underrepresented students access and complete postsecondary education. Typically supports academic advising, mentoring, financial aid guidance, and college preparation.
- **Adult Basic Education**: $716 million elimination
- **Federal Work Study**: $1.1 billion decrease; federal share of wages decreasing from 75% to 10%

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Sources: 'A coordinated retreat from college access: What TRIO and GEAR UP cuts reveal', Brookings Institute; US Department of Education FY 2027 Budget Summary

Workforce Integration

- **ED-DOL Interagency Agreement (IAA)** is an effort to create a more integrated education-to-employment system
- Career and Technical Education funding request remains level ($1.44 billion), but moves to Department of Labor
- One-time SIP emphasized workforce readiness, short-term training programs, Workforce Pell implementation, AI and workforce preparation
- New **Student Tuition and Transparency System (STATS) and Earnings Accountability rule** require undergrad programs to demonstrate that their graduates earn more than the typical high school diploma holder
- Planned accreditation system reforms include greater emphasis on student outcomes

Sources: US Department of Labor Budget in Brief; U.S. Department of Education and U.S. Department of Labor Implement Workforce Development Partnership press release; U.S. Department of Education Issues Final Rule to Hold All Colleges and Universities Accountable for Low-Earning Programs press release; U.S. Department of Education Reaches Consensus to Reform and Strengthen America's Higher Education Accreditation System press release

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April's Conclusions

- Our colleges will continue to face uncertainty, and may need more help to maintain programs or to implement changes.
- These policy shifts ignore well-documented racial disparities in access, they create new risks for institutions that seek to respond to them, and they are in direct odds with our goals.
- Cuts target student success and readiness initiatives– strategies we uplift as best practices to reduce disparities.
- Future shifts will likely place a greater emphasis on workforce outcomes, requiring strengthed partnerships between colleges & employers.

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Introduction to Workforce Pell

Presented by
Christina Warden
Vice President of Policy and Programs
Women Employed

Presented to
Chicago Healthcare Workforce Collaborative
Quarterly Meeting, September 1, 2026

About Women Employed

Since 1973, Women Employed (WE) has led the charge to relentlessly pursue equity for women in the workforce by effecting policy change, expanding access to educational opportunities, and advocating for fair and inclusive workplaces so that all women, families, and communities can thrive.

Our mission:
Improve the economic status of women and remove barriers to economic equity.

Women Employed
WE pursue equity for all.

Workforce Pell

Workforce Pell opens to door for learners pursuing short-term certificates or credentials that overlap the boundaries of workforce training and higher education, making federal financial aid dollars available to students and workers enrolled in these short-term programs for the first time.

Workforce Pell may be referred to as Short-Term Pell.

Women Employed
WE pursue equity for all.

The Workforce Pell Opportunity

- Students with low incomes will gain **access to federal financial aid for programs that quickly prepare them for in-demand jobs** and lead to additional education, if desired.

- Employers will benefit from an **expanded pipeline of skilled workers** trained for jobs they are looking to fill and be able to hire with confidence.

Source: National Skills Coalition

Workforce Pell Parameters

AhaSlides

3 Layers of Eligibility:

- Institutional Eligibility
- Student Eligibility
- Program Eligibility

Institutional Eligibility

In order to offer Workforce Pell programs, an institution must be accredited and eligible under Title-IV of the Higher Education Act to offer federal financial aid programs.

Women Employed
WE pursue equity for all.

Key Elements of Program Eligibility

AhaSlides

150-599 clock hours and **8-15 weeks**	Program leads to **high-skill, high-wage, or in-demand** sectors/occupations	Meets the hiring **requirements of employers**
Leads to a **stackable & portable** credential	Has **70% completion** and **job placement** rates + meets **earnings metric**	Offered by **accredited, Title IV-eligible** providers

Source: National Skills Coalition

Student Eligibility

Students must meet the same income eligibility requirements for regular Pell federal financial aid.

For immigrants, this means being a US citizen, a permanent resident, or other eligible noncitizen.

Unlike traditional Pell, students with Bachelors Degrees ARE eligible for Workforce Pell.

State Flexibility

Define
- √ High Demand
- √ High-Wage or High-Skill Occupations
- √ Stackability
- √ Portability

Set Up
- √ Program Approval Processes
- √ Review Processes

Prepare Data Systems, for example:
- √ Data sharing agreements
- √ Data on eligible noncredit programs
- √ Collect data on occupations

Engage Employers in Validating
- √ Skills
- √ Competencies
- √ Credentials

Needed to fill jobs

Timeline

Workforce Pell funding became available July 1,2026* for the 2026-27 academic year

**For programs that have been up and running for at least 1 year and have the required outcome data.*

Source: National Skills Coalition

My Contact Information

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Vice President of Policy and Programs
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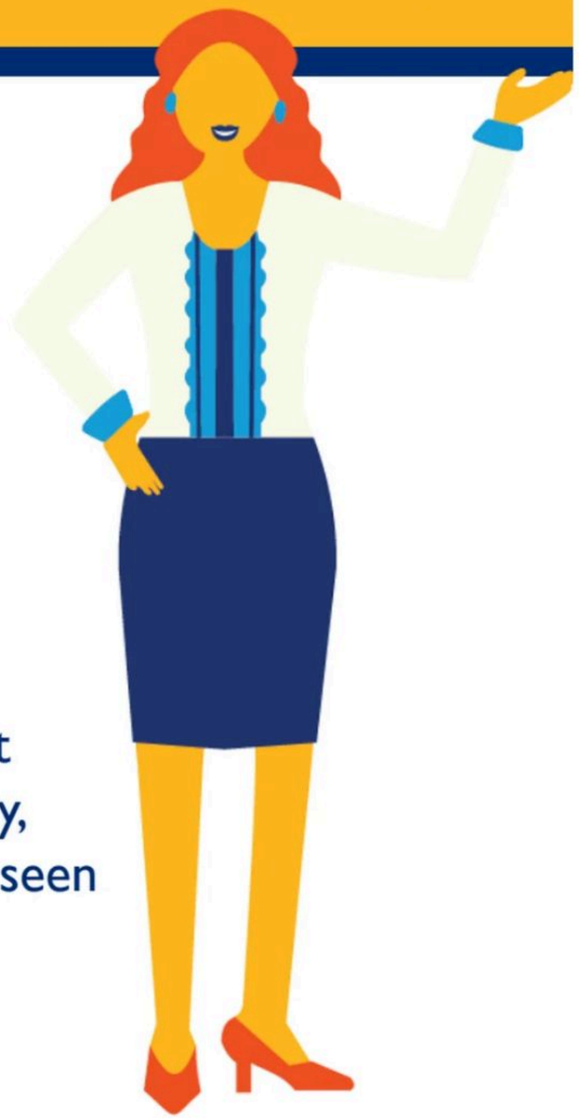


Special thank you to Caroline Treschitta, Senior Government Affairs Manager, at National Skills Coalition (NSC). Nationally, NSC led non-profit advocate for Workforce Pell, and you've seen some of her slides incorporated into this presentation.

Women Employed
WE pursue equity for all.

Illinois Workforce Pell Implementation

Chicagoland Healthcare Workforce Collaborative Update

9/1/2026

Cross-Agency Planning and Implementation Structure

Illinois has established a two-tier governance model to coordinate policy alignment and operational execution across all relevant state agencies.

Cross-Agency Leadership Team

Sets strategic direction and formalizes policy decisions at the executive level, with representation from Agency Directors and the Governor's Office.

Interagency Steering Committee

Drives day-to-day coordination and operational planning, facilitated by the Education Strategy Group, with subject matter experts from each agency.

Executive Branch Roles and Responsibilities

Each agency, under the Governor, plays a distinct and critical role in Illinois' Workforce Pell implementation. Policy support is provided by Education Strategy Group.

Governor's Office - Approval

Provides strategic leadership to the interagency teams. Accountable for implementation and approval in alignment with the statute. Consults with the IWIB on program approval.

ISAC — Financial Aid Alignment

Contributes to alignment between Workforce Pell and existing state aid programs. Provides technical assistance and support for students, families, counselors, and financial aid advisors.

IDES & DCEO — Labor Market & Workforce Alignment

Responsible for employer engagement, labor market data validation, and priority occupation methodology. Contributes to alignment between funded programs and existing workforce training funds.

ICCB & IBHE — Policy and Process Development

ICCB serves as the primary coordinating body. Higher education agencies are responsible for eligibility criteria development, institutional guidance, and overall infrastructure.

Illinois' Goal for Workforce Pell

To maximize student access to high quality short-term workforce programs and expanded financial aid, while maintaining consumer protections.

Key Deliverables

1 Create an Approval Process

Set up an approval process that is coordinated across the Governor's Office and relevant agencies. Process includes necessary validation.

2 Eligible Occupations List

Leveraging existing State Plans, defined high-skill, high-wage, and in-demand. Identified priority occupations and related training programs.

3 Policy Framework

Policy Manual drafted for institutions, encompassing all written policy, application directions, and supporting guidance. Pending public comment.

4 Stakeholder Engagement

Illinois colleges, employers, and workforce partners have been engaged throughout the process to ensure the policy reflects on-the-ground realities and statewide labor market needs.

5 Campus-Level Training

Resources are being developed for institutions and key staff to aid program approval and overall student support.

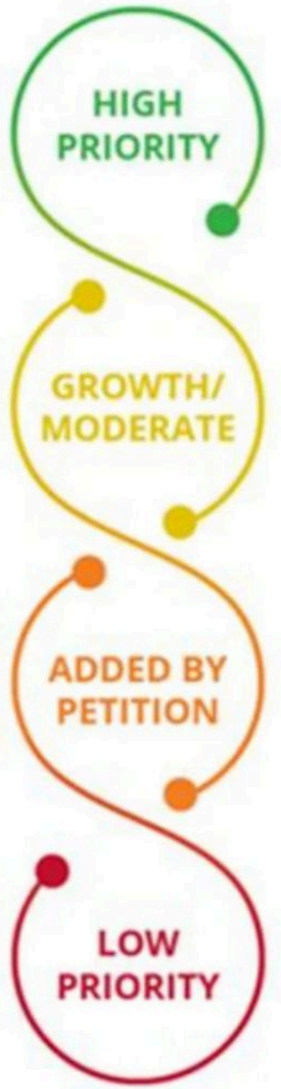
Program Determination Policy

Priority Occupations List

Federal law requires that the State publish its methodology to determine and periodically review which ***occupations and industry sectors*** *are* ***high-skill, high-wage, or in-demand****, including the competencies needed in such industries and occupations, and where the* ***list of such occupations and sectors will be made publicly available****. Such review shall be done not less than every two years concurrent with development and modification of the WIOA State Plan.*

Priority Occupations List- Policy Recommendation

- Use the Demand Occupation Training List, managed by DCEO, as the foundation for the Eligible Program List.
- The DOTL is currently utilized for the WIOA Eligible Training provider program list.
- The DOTL is a framework guided by wage, skill, and occupational demand data.
- The DOTL allows for state and local petition for occupations to be added.



ADVANCED EDUCATION	999	Meet all criteria + minimum Bachelors
MIDDLE SKILLS	999	Meet all criteria, less than Bachelors
GROWTH	999	Meet education and openings criteria, less than minimum median wage
MODERATE DEMAND	999	Meet education and minimum median wage criteria, openings between 400 and statewide minimum (646)
STATEWIDE PRIORITY	999	Address a State, or Federal, priority related to emergency response, funding opportunities, innovative programs or identified initiatives and that may have a defined period of activity
LOCAL PRIORITY	999	Address an Approved Local Petition based on employer needs related to new or increased job openings or wages, or that meet priorities as outlined within Regional or Local Plans
LOW PRIORITY	999	Do not meet education and/or below 400 annual openings; occupations with SOC Code ending in ##-###9 ("All Other")[3] (***Not on DOTL***)

Policy Requirements Summary

Policy Category	Illinois Policy Proposal	Acceptable Documentation
Program meets the hiring requirements of employers (**Employer Validation**) ***Registered Apprenticeships Satisfy This Requirement***	• The program is in high-demand. • Program competencies are aligned to the competencies of the occupation(s). • Authentic employer engagement.	Combination of: • Job postings data • Employer Commitment Letters • Advisory Committee Minutes • Curriculum Competency Maps
Program is **Stackable**	• Credential vertically stacks in a pathway • Documented links exist to additional credentials	curriculum maps, program catalogs, articulation agreements, job descriptions
Program is **Portable**	• Credential is recognized by more than one employer beyond the awarding institution or region, OR, • Credential is aligned with industry or external quality indicators	employer verification, competency map, job postings, program accreditation
Program **articulates to a certificate or degree program** and **students are awarded academic credit** upon successful completion and subsequent enrollment.	• Mirrors Illinois Articulation Initiative processes • Institutions shall maintain written agreements ensuring transferability (within or between institutions) • Credit must articulate and be applied to the required competencies (not electives)	Articulation agreements, competency maps, related policies

Other Requirements

- Program must have met the length/clock hour requirements for the last 12 months.
- Already approved to operate in the State of Illinois
- Institutional Financial Health
- Institutions cannot contract out more than 25% of instruction through a written agreement with a non-eligible entity.
- Institutions must not have been subject to any suspension, emergency action, or termination of programs during the five years preceding seeking Workforce Pell program approval.

The Approval Process

Step 1: Provider verifies that the program seeking eligibility prepares students for employment in an occupation on the Eligible Demand Occupation List.
Step 2: Institutions submit program approval through the Illinois Workforce Pell Application (JotForm).
Step 3: ICCB, IBHE, and DCEO review and validate applications, prepare recommendations to the Governor's Office and IWIB.
Step 4: Governor's Office and IWIB Approval. Governor certifies.
Step 5: Certifications are routed back to institutions by the cognizant agency for their submittal to the U.S. Department of Education.

Our Path Forward

Implementation Timeline

Spring 2026
Policy development; stakeholder engagement; public comment to federal rules

April – May 2026
Stakeholder engagement

June 2, 2026
Policy Manual and Application posted for public comment; public webinar

July 15 – August 31, 2026
Application Portal Open

September 2026
Interagency Review

October/ November 2026
Consultation with IWIB; Governor Approval and Certification

Late 2026/Early 2027
Approved programs submitted to U.S. Department of Education for approval

Opportunities and Challenges

Opportunities

- Creates additional low or no-cost training opportunities for Illinoisans
- Incentivizes stackable credentials and transferability, creating clear and seamless pathways for students
- Requires greater coordination among education and workforce data systems

Challenges

- Balancing consumer protections for students with minimizing administrative burden for institutions
- Requires significant state administrative effort with no financial support
- Required data for post-completion employment not readily available
- Collecting of enhanced wage records

Learn More

- Https://www.iccb.org/programs-and-initiatives/workforce-pell/

- Contact Info: Carrie.Thomas@illinois.gov

Resources:

bitly

CHICAGOLAND HEALTHCARE WORKFORCE COLLABORATIVE

AhaSlides

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TABLE DISCUSSIONS

How have, or how might, these education funding shifts impact your work?

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PART 2: Tracking & Documenting Impacts of Federal Policy Changes

What impacts of federal funding or policy changes are you currently experiencing in your work, or anticipating in the coming year?

Medicaid funding cuts

Students losing scholarship opportunities, preventing them to attend their top choices

MSI Funding Cits affecting our partners

Medicaid and SNAP funding cuts especially around redetermination and work requirements

Programs defined as eligible for financial aid. Program accrediting bodies aligning with fed mandates...putting programs at risk of below credit hours

There is a culture or fear - fear of filling out fafsa, ITIN, and showing up for immigrant students and those with undocumented family members.

Student loan caps and more stringent requirements on student loans (for example; student performance in current term impacts their loan caps for the following term)

Potential billing/reimbursement opportunities from medicaid for CHWs. As well as career pathways to help get CHWs in the state certified “easier”

How is the state going to support institutions with workforce programs to build their "evidence base" for a year to be pell eligible are there opportunities to align efforts

Balancing Mission Risk and Legal Risk, particularly related to DEI

Impacts of career pathway programs... funding.

Impact of cuts/rule changes on immigrant students

Changes in Medicaid funding impacting hiring at health care safety net institutions

Changes to cap on student loans

Reduced funding, possible losing students to community colleges as we are not sure if we can offer programs for Workforce Pell

Funding response to Medicaid/SNAP cuts/new requirements. Navigating changes to HUD funding.

Medicaid work requirements

Rachel
SUHI

In anticipation : adding additional Patient Benefit Specialist to help guide/assist our patients.

We are currently navigating/planning for the Medicaid work requirements and redetermination. How we can retain our patients and manage barriers to care and resources at large for our communities

Dara Basley

Loss of benefits for IL residents at the same time taking lots of state resources to deal with the new complexities rules that work against their goal of being human centered

Kylin
CWFA

DEI opportunities being removed creating barriers to higher wage paying programs

Benefits Cliff policies and processes

Receiving increased requests for larger funding.

Low risk-tolerance on the part of foundation boards, which is affecting the funding landscape.

Trio and High School applicants impact on higher ed enrollment.
FWS impact on programmatic support

Anticipating severe budget deficits to every safety net institution due primarily to Medicaid cuts / increased uncompensated care—and likely related service cuts

Uncertainty in future funding and programming

Tameka
Wellness West

Potential federal cuts affecting community-based health and social services; More pressure on nonprofits to fill gaps as public benefits and services change

Xiaofan Liu
OAI

Not ready candidate pool to fill certified roles

Increased disparities in high paying roles that require education longer than 15 weeks

Cuts in basic life needs Medicaid / snap affects people’s ability to move forward in life

Tracking & Documenting Impacts of Federal Policy Changes

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CHICAGOLAND HEALTHCARE WORKFORCE COLLABORATIVE

UNIVERSITY OF ILLINOIS CHICAGO

Tracking & Documenting the Impacts of Federal Policy Changes

Emerging qualitative findings from Chicago-area health networks

September 2026

Kate Albrecht, PhD — University of Illinois Chicago

THE PROJECT

The study behind these findings

Funded through the Volcker Alliance ARRC program. Research team is part of the UIC Networks & Governance Lab.

Pre / post design

- Baseline: 54 Chicago-area health networks and ~1,000 member organizations, mapped in 2024, remapping now
- Federal exposure identified against USASpending records
- Structural mapping shows landscape and interconnections of Chicago and Cook County health networks (like yours!)

Data shown here are emerging patterns, not prevalence. The sample is survivorship-biased so far. Networks that dissolved did not respond to interview requests.

THEME 1

Exposure to impacts travels through some networks

Direct grant loss is the smallest part of the story. Harm reaches organizations through the people they serve, through pass-through funding, and through partners.

- Networks report flat budgets while the services they refer into also contract around them
- State pass-through funding stalls when the federal match becomes uncertain
- Medicaid effects widely expected next year; organizations are bracing, but not yet cutting
- One coalition lost its annual convening — the coordination function itself was defunded
- Enforcement activity suppressed in-person attendance, with quality and revenue effects to follow

> *"It's not necessarily the organization that's impacted, but it's the people that they serve."*
>
> Convener, multi-member health alliance

> *"Our current funding has remained the same, but the services we refer to have decreased."*
>
> Network manager survey respondent

THEME 2

Disruption without a budget line

Substantial operational change is occurring in organizations whose awards were never cut. Conditions, DEI language restrictions, and procedural delay are still being felt.

- Awards continued on condition of removing prohibited language and dropping population focus
- Legal review drove website and program renaming; some initiatives were abandoned rather than renamed
- Grant cycles slipping: notice expected early August, now anticipated mid-September for an October start
- Scoring criteria changed; forecasted opportunities announced, then never released
- Anticipatory retrenchment just in case of more drastic changes in funding and policies

> *"I remember I asked a question. Is the word underserved a four-letter word? He said, yep."*
>
> Convener, on legal guidance given to member organizations

> *"There are forecasted grants that are continuously delayed."*
>
> Network manager survey respondent

THEME 3

A continuity problem, not only a headcount problem

Workforce effects show up as lost institutional memory, thinning care teams, and pipeline damage that will not register for years.

- Reductions in force removed ten staff from one collaborative overnight
- Departures clustered at senior levels; some leavers rehired on contract to recover knowledge
- Workforce development is a non-revenue function, so it is early in line to be cut when institutions tighten
- Graduate loan limits reduce the master's-prepared nurses who staff community college faculty
- Visa and international student changes will not be felt immediately

> *"That period just really bore a lot of people out — and if people were close to retirement, they did it."*
>
> Convener, on senior departures across partner organizations

> *"If you want to stand up some new workforce initiative — go find your own grant funds."*
>
> Convener, relaying guidance given inside a health system

THE GAP

What we currently cannot see

Gaps our interviews surfaced

- Federal datasets relied on for program planning withdrawn or no longer released
- Disaggregated subgroup data was already inadequate before 2025
- Community-level accounts heard informally but not systematically collected
- No single existing metric links workforce change to federal policy change

Indicators the interviews suggest

- Grant-cycle latency — notice-to-award and award-to-start intervals
- Revenue mix shift — philanthropic and industry share against three years ago
- Referral inventory — services a network can still refer into are shrinking
- Care team ratios and hiring capacity
- Educator capacity and clinical training seats

HEALTH & MEDICINE POLICY RESEARCH GROUP

Measuring Health Workforce Effects of Federal Policy Change

Wesley Epplin, MPH — Policy Director

Mayra Diaz, MPH, MSW — Senior Policy Analyst

WHO WE ARE

About Health & Medicine Policy Research Group

Our Mission

Build power and momentum for social justice and health equity in Illinois.

Our Vision

A society free of social and health inequities, so all people can attain their full potential.

Medicaid Cuts: Illinois

- Due to federal Medicaid cuts, Illinois faces:
  - 330,000–400,000 Illinoisans losing Medicaid coverage
  - a loss of **$26–$51 billion in revenue** to the state over the next decade

- According to a report by the Center for Healthcare Quality & Payment Reform, **16 of our rural hospitals are at risk of closure, 8 at immediate risk**—reduced Medicaid reimbursements would harm these hospitals' finances and ability to stay open

- Hospitals are large employers, so cutting positions and services—and closures—**will harm local economies beyond reduced health care access**

- **Beyond Medicaid: CDC cuts will reduce federal grants to our state and local health departments**—their main funding source

Medicaid Cuts: Cook County

- Cook County Health's FY2027 preliminary budget seeks to include **$40 million in additional County support to help prevent service reductions and layoffs** associated with federal Medicaid cuts
  → Without the subsidy 154 jobs could be lost, some community health centers may close, and some services could be cut

- CCH projects: **charity-care costs to reach $485 million** (up from $385M in 2026) and **uncompensated care will rise from 13% of its payer mix in 2023 to 30% in FY2027**
  → Medicaid accounts for 53.8% of Stroger's inpatient patients and 54.7% of outpatient patients (Illinois Hospital Report Card)
  → Medicaid changes have a direct implication for the local safety net

- **Beyond Medicaid**: Cook County Board has identified **$64.2 million of impacted grants** (or highly likely impacted) by shifting federal policies
  → The preliminary budget proposes a local $65M fund as an offset

ANTICIPATED IMPACT

What We Can Expect From Medicaid Cuts

- Increased uninsurance rate
- Reduced access & quality; and increased costs of care
- Reduced reimbursements and budgets
- Health workforce job losses
- Service reductions & closures

HOW WE GOT HERE

Our Process

1

Initial Research

Internal and external interviews and discussion with researchers, practitioners, and advocates

2

Ongoing Advocacy

Continued advocacy (e.g., Fund Public Health, supporting robust funding for Cook County Health)

3

Proposal Development

Health workforce kept surfacing as a top concern. We have health workforce challenges already, and likely to worsen under recent federal changes

4

Planning & Refining Data Project

Interviewing Chicago health network leaders, gathering perspectives to shape our proposal, planning forums to discuss impacts of federal policy

Current Plan

Review 990s
Sample nonprofit safety-net hospitals, past 5–10 years and moving forward

Review Budgets
The state's largest local health departments, recent years and moving forward

Analyze Change
Track budgets and FTEs, both retrospectively and prospectively

Publicize Results
Use findings to inform the public and officials and to guide state and local policy

Open question: What public agencies or private entities are best positioned to conduct analysis and issue reports?

WHY IT MATTERS

Potential Uses of These Analyses

Reduce Harm

Identify gaps sooner; build the case for state and local funding; increase pressure for progressive revenue options

Inform the Public to Support Accountability

Local quantitative data lands differently from macro statistics, affirming people's qualitative experience of the health safety net as precursor to accountability

Complement Other Data

Complements current data collection such as health professional shortage area data, which might be a lagging indicator

Move Toward Policy Change

Support systematic health workforce data collection such as at license renewal; improve health workforce planning and investment

THANK YOU

We appreciate your insights and welcome follow-up discussions.

Contact

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AhaSlides

CHICAGOLAND HEALTHCARE WORKFORCE COLLABORATIVE

TABLE DISCUSSIONS

What evidence can help us tell the story of how these changes are affecting our health workforce?

- What data or indicators are you already monitoring?
- What could a more coordinated approach to data collection look like?

What evidence can help us tell the story of how these changes are affecting our health workforce?

Partnership with journalists to share stories of the impact of these changes on healthcare workforce

Decline in enrollment of Healthcare focused programs. Becoming harder to fill certain roles at medical facilities.

There is a lot of fear of the unknown. Awareness will be extremely important. What to do. Resources to support. Etc

Impact on rural hospitals

Talking a lot about narrative change. I think telling real stories or these strains to the system and individuals is important. Also need to look at disease increases in the more affected communities. Those that depend on Safety Net hospitals.

The push to shorten healthcare programs increases the risk to patients

Tracking early retirements and people leaving the field due to burnout and morale issues

Staffing levels and workload

Mixed methods (data and stories) approaches

Worker and patient testimonies

Student persistence with less resources for support and barriers reduction for students

Kylin
CWFA

Talk specifically about the gap between reimbursement rates and what a living wage rate would be.

Show the multiple levels that impacts will have on businesses, institutions, etc. that don't just impact an individual. Ripple effects!

Rural HC service availability

Documenting the intersectionality of these cuts at multiple levels of impact

Number of employees from CBO referrals over time, employee wage and educational attainment growth over time,

For clinical roles: overtime pay, travel clinician pay, increased patient ratios, if there are patient outcomes related to low staffing like increased falls or sepsis response.

Accreditation and approval of programs depend on reliable budgetary support. We might see decline in new accredited programs

Type or level of jobs being lost because of cuts

Resourced institutions sucking up credentialed staff (nurses, social work chw) employed at community based organizations with higher wages

Tell the story of why there are long wait times for care, there are structural factors people need to understand

Upcoming Events

Making the Case for Healthcare Workforce Investment: Sept. 30th & Oct 14th

- A two-part learning series designed to help healthcare leaders measure and communicate the impact of workforce investments, led by Dr. Angela Jackson
- Learn more & register at chihealthworks.com.

Youth Pathways Committee: Mentorship Implementation: Sept. 24th, 1-2:30, virtual

- This Train-the-Trainer session unveils a youth mentorship framework and implementation plan based on recent reseach.
- Email Matt McClintock at mmcclintock@hmprg.org to register.

Public Health Workforce Collaborative meeting: Oct 15th, 1-4pm, 33 S. State

- Email Anna Yankelev at ayankelev@hmprg.org to learn more & register.

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Visit chihealthworks.com or email April@chihealthworks.com to get more involved.