

**CONTACT:**

Janis Rizzuto  
Director, Communications  
714-246-8837  
[jrizzuto@caloptima.org](mailto:jrizzuto@caloptima.org)

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**CALOPTIMA APPROVES \$64 MILLION IN ADDED PROVIDER SUPPORT**  
*New budget boosts funding for COVID-19 expenses, maintains Medicare reimbursement and moves forward with digital transformation efforts.*

**ORANGE, Calif. (June 7, 2022)** — This past week, CalOptima’s Board of Directors approved a Fiscal Year 2022–23 budget that amplifies financial support for Orange County’s provider community in a variety of ways. Effective July 1, hospitals, health networks and providers will receive extended supplemental funding for COVID-19 expenses, totaling \$58.2 million for the year. Further, the agency is continuing to protect providers from \$6 million in Medicare cuts, maintaining maximum reimbursement in programs serving seniors. Finally, CalOptima allocated \$45.2 million for digital transformation efforts designed to streamline and improve interactions with the provider community.

The COVID-19 supplemental payment increase of up to 7.5% will fund efforts by CalOptima-contracted providers to promote and administer COVID-19 vaccinations, cover increased costs for testing and treatment, and help address additional variants of the COVID-19 virus. The payments will be made for a full year, from July 1, 2022, to June 30, 2023. The Board first approved supplemental payments in 2020 after recognizing the additional strain put on providers by the pandemic and the potential for interruption in necessary Medi-Cal services. This financial support also supports the health care safety net generally, given that CalOptima membership grew 23% during the pandemic to nearly 900,000.

“COVID-19 cases are fluctuating, and providers are continuing to grapple with the pandemic. CalOptima wants to support our partners with the resources they need to ensure quality care for our vulnerable member population,” said Michael Hunn, CalOptima Chief Executive Officer. “The supplemental funding will provide stability for the health care system as we prepare to transition out of the Public Health Emergency.”

CalOptima’s Medicare programs include OneCare (HMO SNP), OneCare Connect Cal MediConnect Plan (Medicare-Medicaid Plan) and the Program of All-Inclusive Care for the Elderly (PACE). The programs are subject to 2% federal cuts that total \$6 million annually. The Board voted to protect providers from this reduction particularly during this time as CalOptima will transition approximately 14,500 members from OneCare Connect to OneCare on January 1, 2023. California is closing Cal MediConnect Plans as part of a larger initiative known as California Advancing and Innovating Medi-Cal (CalAIM).

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Announced in March, CalOptima's digital transformation is part of a new three-year strategic vision to deliver efficiencies for providers, including same-day treatment authorizations and real-time claims payment. CalOptima's new budget allocates \$45.2 million to this effort and signifies that the agency is moving forward with strengthening its systems on behalf of Orange County's provider community. A few initiatives identified for the first year are provider portal enhancements, a provider data management system that integrates contracting and credentialing, and robotic process automation to better connect members to providers offering the services they need.

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**About CalOptima**

A county organized health system, CalOptima provides publicly funded health care coverage for low-income children, adults, seniors and people with disabilities in Orange County, California. CalOptima's mission is to serve member health with excellence and dignity, respecting the value and needs of each person. In total, CalOptima serves more than 891,000 members with a network of more than 10,500 primary care doctors and specialists as well as 41 acute and rehab hospitals.