



**Mission:** To serve member health with excellence and dignity, respecting the value and needs of each person.

### Membership Data\* (as of July 31, 2024)

<b>Total CalOptima Health Membership</b>  <b>910,928</b>	<b>Program</b>	<b>Members</b>
	Medi-Cal	893,111
	OneCare (HMO D-SNP)	17,311
	Program of All-Inclusive Care for the Elderly (PACE)	506

\*Based on unaudited financial report and includes prior period adjustment

### Operating Budget (for one month ended July 31, 2024)

	YTD Actual	YTD Budget	Difference
Revenues	\$364,495,576	\$357,511,618	\$6,983,958
Medical Expenses	\$368,942,408	\$356,629,323	(\$12,313,085)
Administrative Expenses	\$18,922,484	\$24,574,716	\$5,652,232
Operating Margin	(\$23,369,316)	(\$23,692,421)	\$321,105
Medical Loss Ratio (MLR)	101.2%	99.8 %	1.5%
Administrative Loss Ratio (ALR)	5.2%	6.9%	1.7%

Note: Totals may not add due to rounding

### Reserve Summary (as of July 31, 2024)

	Amount (in millions)
Board Designated Reserves	\$1,018.3*
Statutory Designated Reserves	\$133.9
Capital Assets (Net of depreciation)	\$95.9
Resources Committed by the Board	\$499.0
Board Approved Provider Rate Increases	\$508.7
Resources Unallocated/Unassigned	\$191.7*
<b>Total Net Assets</b>	<b>\$2,447.5</b>

\*Total of Board-designated reserves and unallocated resources can support approximately 108 days of CalOptima Health's current operations.

## Total Annual Budgeted Revenue

# \$4 Billion

NOTE: CalOptima Health receives its funding from state and federal revenues only. CalOptima Health does not receive any of its funding from the County of Orange.

# CalOptima Health Fast Facts

September 2024

## Personnel Summary (as of August 10, 2024, pay period)

	Filled	Open	Vacancy % Medical	Vacancy % Administrative	Vacancy % Combined
Staff	1,311.3	79.3	45.81%	54.19%	5.7%
Supervisor	80	5	40%	60%	5.88%
Manager	113	6	50%	50%	5.04%
Director	68.75	2	50%	50%	2.83%
Executive	19	3	--%	100%	13.64%
<b>Total FTE Count</b>	<b>1,592.1</b>	<b>95.3</b>	<b>47.89%</b>	<b>52.11%</b>	<b>5.65%</b>

FTE count based on position control reconciliation and includes both medical and administrative positions.

## Provider Network Data (as of July 31, 2024)

	Number of Providers
Primary Care Providers	1,216
Specialists	10,528
Pharmacies	528
Acute and Rehab Hospitals	10
Community Health Centers	52
Long-Term Care Facilities	104

## Treatment Authorizations (as of June 30, 2024)

	Mandated	Average Time to Decision
Inpatient Concurrent Urgent	72 hours	33.15 hours
Prior Authorization – Urgent	72 hours	24.24 hours
Prior Authorization – Routine	5 days	2.41 days

Average turnaround time for routine and urgent authorization requests for CalOptima Health Community Network.

## Member Demographics (as of July 31, 2024)

Member Age		Language Preference		Medi-Cal Aid Category	
0 to 5	8%	English	54%	Temporary Assistance for Needy Families	38%
6 to 18	23%	Spanish	31%	Expansion	38%
19 to 44	36%	Vietnamese	9%	Optional Targeted Low-Income Children	8%
45 to 64	20%	Other	2%	Seniors	10%
65 +	13%	Korean	2%	People With Disabilities	5%
		Farsi	1%	Long-Term Care	<1%
		Chinese	<1%	Other	<1%
		Arabic	<1%		