



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

Membership Data* (as of December 31, 2024)

Total CalOptima Health Membership 917,669	Program	Members
	Medi-Cal	900,126
	OneCare (HMO D-SNP)	17,037
	Program of All-Inclusive Care for the Elderly (PACE)	506

*Based on unaudited financial report and includes prior period adjustments.

Key Financial Indicators (for six months ended December 31, 2024)

	Dashboard	YTD Actual	Actual vs. Budget (\$)	Actual vs. Budget (%)
Operating Income/(Loss)	●	\$27.1M	\$185.5M	117.1%
Non-Operating Income/(Loss)	●	\$87.7M	\$55.4M	171.5%
Bottom Line (Change in Net Assets)	●	\$114.8M	\$240.9M	191.1%
Medical Loss Ratio (MLR) <i>(Percent of every dollar spent on member care)</i>	●	93.9%	100.6%	-6.8%
Administrative Loss Ratio (ALR) <i>(Percent of every dollar spent on overhead costs)</i>	●	5.0%	6.8%	1.8%

Notes:

- For additional financial details, refer to the financial packages included in the Board of Directors meeting materials.
- Adjusted MLR (without the estimated provider rate increases funded by reserves) is 89.5%.

Reserve Summary (as of December 31, 2024)

	Amount (in millions)
Board Designated Reserves*	\$1,036.7
Statutory Designated Reserves	\$135.6
Capital Assets (Net of depreciation)	\$102.1
Resources Committed by the Board	\$462.0
Board Approved Provider Rate Increase**	\$421.0
Resources Unallocated/Unassigned*	\$402.5
Total Net Assets	\$2,559.9

* Total of Board-designated reserves and unallocated resources can support approximately 136 days of CalOptima Health's current operations.

** 5/5/24 meeting: Board of Directors committed \$526.2 million for provider rate increases from 7/1/24 to 12/31/26.

Total Annual Budgeted Revenue

\$4 Billion

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

CalOptima Health Fast Facts

February 2025

Personnel Summary (as of January 10, 2025, pay period)

	Filled	Open	Vacancy % Medical	Vacancy % Administrative	Vacancy % Combined
Staff	1,328.75	57.15	59.6%	40.4%	5.26%
Supervisor	81	2	100%	--%	2.41%
Manager	119	4	25%	75%	3.25%
Director	69	4.5	55.56%	44.44%	6.12%
Executive	21	--	--%	--%	--%
Total FTE Count	1,618.8	68.7	47.89%	52.11%	5.02%

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

Provider Network Data (as of January 27, 2025)

	Number of Providers
Primary Care Providers	1,318
Specialists	7,032
Pharmacies	603
Acute and Rehab Hospitals	43
Community Health Centers	65
Long-Term Care Facilities	206

Treatment Authorizations (as of November 30, 2024)

	Mandated	Average Time to Decision
Inpatient Concurrent Urgent	72 hours	38.94 hours
Prior Authorization – Urgent	72 hours	14.18 hours
Prior Authorization – Routine	5 days	2.12 days

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

Member Demographics (as of December 31, 2024)

Member Age		Language Preference		Medi-Cal Aid Category	
0 to 5	8%	English	54%	Expansion	38%
6 to 18	23%	Spanish	31%	Temporary Assistance for Needy Families	37%
19 to 44	35%	Vietnamese	10%	Seniors	11%
45 to 64	20%	Other	2%	Optional Targeted Low-Income Children	8%
65 +	14%	Korean	1%	People With Disabilities	5%
		Farsi	1%	Long-Term Care	<1%
		Chinese	<1%	Other	<1%
		Arabic	<1%		