

Fast Facts

July 2025

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

Membership Data* (as of May 31, 2025)

Total CalOptima Health Membership

904,822

Program	Members
Medi-Cal	886,830
OneCare (HMO D-SNP)	17,476
Program of All-Inclusive Care for the Elderly (PACE)	516

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

Key Financial Indicators (for 11 months ended May 31, 2025)

	Dashboard	YTD Actual	Actual vs. Budget (\$)	Actual vs. Budget (%)
Operating Income/(Loss)		\$117.2M	\$361.5M	148.0%
Non-Operating Income/(Loss)	•	\$166.8M	\$107.7M	182.0%
Bottom Line (Change in Net Assets)	•	\$284.0M	\$469.2M	253.4%
Medical Loss Ratio (MLR) (Percent of every dollar spent on member care)		92.5%		(6.8%)
Administrative Loss Ratio (ALR) (Percent of every dollar spent on overhead costs)		5.0%		1.9%

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 88.3%.

Reserve Summary (as of May 31, 2025)

	Amount (in millions)
Board Designated Reserves*	\$1,573.8
Statutory Designated Reserves	\$131.3
Capital Assets (Net of depreciation)	\$98.5
Unspent Balance of Allocated Resources	\$432.5
Unspent Balance of Board Approved Provider Rate Increase**	\$333.3
Unallocated Resources*	\$159.6
Total Net Assets	\$2,729.1

^{*} Total of Board-designated reserves and unallocated resources can support approximately 160 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 and does <u>not</u> receive any of its funding from the County of Orange.

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

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Personnel Summary (as of June 14, 2025, pay period)

_	Filled	Open	Vacancy % Medical	Vacancy % Administrative	Vacancy % Combined
Staff	1,337.25	39.65	44.08%	55.92%	2.88%
Supervisor	85	2	0%	100%	2.3%
Manager	116	9	22.22%	77.78%	7.2%
Director	70	6.5	23.08%	76.92%	6.5%
Executive	22	0	%	%	%
Total FTE Count	1,629.25	58.2	47.89%	52.11%	3.45%

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

Provider Network Data (as of June 23, 2025)

	Number of Providers
Primary Care Providers	1,304
Specialists	7,439
Pharmacies	605
Acute and Rehab Hospitals	43
Community Health Centers	68
Long-Term Care Facilities	206

Treatment Authorizations (as of April 30, 2025)

	Mandated	Average Time to Decision
Inpatient Concurrent Urgent	72 hours	34.33 hours
Prior Authorization – Urgent	72 hours	19.33 hours
Prior Authorization – Routine	5 days	2.75 days

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

Member Demographics (as of May 31, 2025)

Member A	ge	Language Pre	ference	Medi-Cal Aid Category	•
0 to 5	8%	English	54%	Expansion	38%
6 to 18	22%	Spanish	31%	Temporary Assistance for Needy Families	37%
19 to 44	35%	Vietnamese	9%	Seniors	12%
45 to 64	21%	Other	2%	Optional Targeted Low-Income Children	7%
65 +	14%	Korean	2%	People With Disabilities	5%
		Farsi	1%	Long-Term Care	<1%
		Chinese	<1%	_ Other	<1%
		Arabic	<1%		