

Fast Facts September 2025

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

Membership Data* (as of July 31, 2025)

Total CalOptima Health Membership

904,278

Program	Members
Medi-Cal	885,779
OneCare (HMO D-SNP)	17,971
Program of All-Inclusive Care for the Elderly (PACE)	528

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

Key Financial Indicators (for the month ended July 31, 2025)

	Dashboard	YTD Actual	Actual vs. Budget (\$)	Actual vs. Budget (%)
Operating Income/(Loss)		\$9.3M	\$5.7M	160.3%
Non-Operating Income/(Loss)		\$5.2M	(\$3.0M)	(36.2%)
Covered California Start-up Expenses		(\$0.1M)	(\$0.6M)	84.7%
Bottom Line (Change in Net Assets)		\$14.4M	\$3.3M	30.2%
Medical Loss Ratio (MLR) (Percent of every dollar spent on member care)		92.5%		(0.4%)
Administrative Loss Ratio (ALR) (Percent of every dollar spent on overhead costs)		5.2%		1.2%

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 88.1%.

Reserve Summary (as of July 31, 2025)

	Amount (in millions)
Board Designated Reserves*	\$1,584.6
Statutory Designated Reserves	\$132.3
Capital Assets (Net of depreciation)	\$102.7
Unspent Balance of Allocated Resources	\$402.0
Unspent Balance of Board Approved Provider Rate Increase**	\$298.2
Unallocated Resources*	\$295.2
Total Net Assets	\$2,815.0

^{*} Total of Board-designated reserves and unallocated resources can support approximately 169 days of CalOptima Health's current operations.

Total Annual Budgeted Revenue

\$4.7 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.

CalOptima Health Fast Facts

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Personnel Summary (as of August 9, 2025, pay period)

_	Filled	Open	Vacancy % Medical	Vacancy % Administrative	Vacancy % Combined
Staff	1,352	83.25	39.7%	60.3%	5.8%
Supervisor	84	3	0%	100%	3.45%
Manager	112	14	14.29%	85.71%	11.11%
Director	72	14.5	24.14%	75.86%	16.76%
Executive	21	0	%	%	%
Total FTE Count	1,641	115.8	47.89%	52.11%	6.59%

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

Provider Network Data (as of August 25, 2025)

	Number of Providers
Primary Care Providers	1,300
Specialists	7,668
Pharmacies	498
Acute and Rehab Hospitals	43
Community Health Centers	68
Long-Term Care Facilities	224

Treatment Authorizations (as of June 30, 2025)

	Mandated	Average Time to Decision
Inpatient Concurrent Urgent	72 hours	34 hours
Prior Authorization – Urgent	72 hours	16.57 hours
Prior Authorization – Routine	5 days	1.96 days

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

Member Demographics (as of July 31, 2025)

Member Age		
0 to 5	7%	
6 to 18	22%	
19 to 44	35%	
45 to 64	20%	
65 +	16%	

Language Preference		
English	54%	
Spanish	31%	
Vietnamese	9%	
Other	2%	
Korean	2%	
Farsi	1%	
Chinese	<1%	
Arabic	<1%	

Medi-Cal Aid Category	
Expansion	38%
Temporary Assistance for Needy Families	37%
Seniors	12%
Optional Targeted Low-Income Children	7%
People With Disabilities	5%
Long-Term Care	<1%
Other	<1%
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