



**NOTICE OF A  
REGULAR MEETING OF THE  
WHOLE-CHILD MODEL  
FAMILY ADVISORY COMMITTEE**

**TUESDAY, SEPTEMBER 24, 2024  
9:30 A.M.**

**CalOptima Health  
505 City Parkway West, Room 109-N  
Orange, California 92868**

**AGENDA**

This agenda contains a brief, general description of each item to be considered. The Committee may take any action on all items listed. Except as otherwise provided by law, no action shall be taken on any item not appearing in the following agenda. To speak on an item during the public comment portion of the agenda, please register using the Webinar link below. Once the meeting begins the Question-and-Answer section of the Webinar will be open for those who wish to make a public comment and registered individuals will be unmuted when their name is called. You must be registered to make a public comment.

In compliance with the Americans with Disabilities Act, those requiring accommodations for this meeting should notify the Clerk of the Board's Office at (714) 246-8806, at least 72 hours prior to the meeting.

The Regular Whole-Child Model Family Advisory Committee's meeting agenda and supporting materials are available for review at CalOptima Health, 505 City Parkway West, Orange, CA 92868, 8 a.m. – 5:00 p.m., Monday-Friday, and online at [www.caloptima.org](http://www.caloptima.org).

Register to Participate via Zoom at:

[https://us06web.zoom.us/webinar/register/WN\\_R1UjioSwQKmDfnNp6CCnQg](https://us06web.zoom.us/webinar/register/WN_R1UjioSwQKmDfnNp6CCnQg) and Join the Meeting.

Webinar ID: 813 3095 6089

**Passcode: 108466 -- Webinar instructions are provided below.**

1. **CALL TO ORDER**  
*Pledge of Allegiance*
2. **ESTABLISH QUORUM**
3. **APPROVE MINUTES**  
[Approve Minutes of the June 18, 2024 Regular Meeting of the Whole-Child Model Family Advisory Committee](#)
4. **PUBLIC COMMENT**  
*At this time, members of the public may address the Whole-Child Model Family Advisory committee on matters not appearing on the agenda, but within the subject matter jurisdiction of the Committee. Speakers will be limited to three (3) minutes.*
5. **REPORTS**
  - A. Approve Recommendation for Chair and Vice-Chair
6. **INFORMATIONAL ITEMS**
  - A. California Children’s Services (CCS) Update
  - B. [Covered California](#)
  - C. Committee Member Updates
7. **MANAGEMENT REPORTS**
  - A. Chief Operating Officer
  - B. [Chief Medical Officer](#)
  - C. [Chief Executive Officer](#)
8. **COMMITTEE MEMBER COMMENTS**
9. **ADJOURNMENT**

## TO JOIN THE MEETING

**Please register for the Regular Meeting of the Whole-Child Model Family Advisory Committee on September 24, 2024 at 9:30 a.m. (PDT)**

To **Register** in advance for this webinar:

[https://us06web.zoom.us/webinar/register/WN\\_R1UjioSwQKmDfnNp6CCnQg](https://us06web.zoom.us/webinar/register/WN_R1UjioSwQKmDfnNp6CCnQg) and join from a PC, Mac, iPad, iPhone or Android device

On day of meeting, please click this URL to join: Please click this URL to join.

<https://us06web.zoom.us/j/81330956089?pwd=EfFMA4EGzGdSbS3vLbkOPrsQqeaVS0.1>

Passcode: **108466**

Or One tap mobile:

+16694449171,,81330956089#,,,,\*108466# US

+12532158782,,81330956089#,,,,\*108466# US (Tacoma)

Or join by phone:

Dial(for higher quality, dial a number based on your current location):

US: +1 669 444 9171 or +1 253 215 8782 or +1 346 248 7799 or +1 719 359 4580  
or +1 720 707 2699 or +1 253 205 0468 or +1 309 205 3325 or +1 312 626 6799 or  
+1 360 209 5623 or +1 386 347 5053 or +1 507 473 4847 or +1 564 217 2000 or +1  
646 558 8656 or +1 646 931 3860 or +1 689 278 1000 or +1 301 715 8592 or +1  
305 224 1968

**Webinar ID: 813 3095 6089**

**Passcode: 108466**

# MINUTES

## REGULAR MEETING OF THE CALOPTIMA HEALTH WHOLE CHILD MODEL FAMILY ADVISORY COMMITTEE

June 18, 2024

A Regular Meeting of the Whole-Child Model Family Advisory Committee (WCM FAC) was held on June 18, 2024 at CalOptima Health, 505 City Parkway West, Orange, California via in-person and teleconference (Zoom).

### **CALL TO ORDER**

Chair Kristen Rogers called the meeting to order at 9:33 a.m. and led the Pledge of Allegiance.

### **ROLL CALL**

Members Present: Kristen Rogers, Chair; Erika Jewell, Vice-Chair; Jennifer Heavener; Sofia Martinez (Remote) (9:49 a.m.); Janis Price; Jessica Putterman; Lori Sato

Members Absent: Cally Johnson; Monica Maier

Others Present: Michael Hunn, Chief Executive Officer; Yunkyung Kim, Chief Operating Officer; Richard Pitts, D.O., Ph.D.; Linda Lee, Executive Director, Quality Improvement; Hannah Kim, Director, Case Management; Javier Sanchez, Executive Director, Medicare; Cheryl Meronk, Director, Medicare; Michell Nielson, Director, CalAIM; Sharon Dwiers, Clerk of the Board; Cheryl Simmons, Staff to the Advisory Committees; Maura Byron, CalOptima Health Board of Directors (Remote)

### **MINUTES**

#### **Approve the Minutes of the March 19, 2024 Regular Meeting of the CalOptima Board of Directors' Whole-Child Model Family Advisory Committee**

*Action: On motion of Member Sato, seconded and carried, the WCM FAC Committee approved the minutes of the March 19, 2024, meeting. (Motion carried 6-0-0; Members Cally Johnson and Monica Maier absent)*

### **PUBLIC COMMENTS**

There were no public comments.

## **REPORTS**

### **Approve Whole-Child Model Quarterly Schedule for FY 2024-2025**

*Action: On motion of Member Putterman, seconded and carried, the WCM FAC Committee approved the FY 2024-2025 meeting schedule. (Motion carried 6-0-0; Members Cally Johnson and Monica Maier absent)*

## **INFORMATION ITEMS**

### **Quality Improvement Update**

Linda Lee, Executive Director, Quality Improvement provided an update on quality improvement projects that affect CalOptima Health members in both OneCare and Medi-Cal. She noted that the Department of Health Care Services (DHCS) requires CalOptima Health to engage in several quality improvement projects on an annual basis and that some of those projects are selected by DHCS based on their priority statewide and reviewed several of the projects with the committee and answered many questions.

### **OneCare Program**

Cheryl Meronk, Director, Medicare Program Operations and Hannah Kim, Director, Case Management presented on the OneCare Program. Ms. Meronk presented an overview on the OneCare Program, CalOptima Health's Medicare and Medi-Cal program (Medi-Medi). Ms. Meronk noted that in many cases that children with special needs would qualify for Medicare under their parent's Medicare record and would be eligible to become a OneCare member with their existing Medi-Cal. Hannah Kim reviewed the case management criteria of being a Medi-Medi patient on OneCare noting that typically Medicare did not have case management support but in OneCare the Medi-Cal side would provide the case management support to its members.

### **Committee Member Updates**

Chair Kristen Rogers announced the Whole Child Model member updates. At the June 12, 2024, Board of Directors Quality Assurance Committee, the Whole-Child Model Family Advisory Committee's slate of candidate recommendation was approved and will be submitted to the board of directors for appointment at their August 1, 2024, meeting. Furthermore, at the next quarterly meeting on September 2, 2024, there will be a nomination for a Chair and Vice Chair for the committee.

## **CEO AND MANAGEMENT REPORTS**

### **Chief Operating Officer Report**

Yunkyung Kim, Chief Operating Officer updated the committee on the draft strategic plan for CalOptima Health and asked Michell Nielsen to present on her behalf. Ms. Nielsen reviewed the five components of the revised strategic plan. She noted that they had expanded the plan into a more comprehensive strategic plan framework which included mission, vision and values. She also reviewed the three-year organizational goals with measurable objectives by setting targets which

will be used for performance measurements. Ms. Nielsen asked for feedback on several items she discussed.

**Chief Medical Officer Report**

Richard Pitts, D.O., Ph.D., Chief Medical Officer presented on how Measles and Pertussis are making a comeback and stressed the importance of vaccines. He noted that in 2023 there were 58 cases of the measles in the United States and that number in the first four months of 2024 measles cases had risen to 138. For Pertussis also known as Whooping Cough he noted that approximately 20 babies per year died in the United States between 2010 – 2020.

**Chief Executive Officer Update**

Michael Hunn, Chief Executive Officer thanked the members of the committee for their time in service to CalOptima members. He asked the members to please reach out to Cheryl Simmons with any feedback they might have on the strategic plan draft.

**ADJOURNMENT**

Hearing no further business, Chair Kristen Rogers adjourned the meeting at 11:00 a.m.

/s/ Cheryl Simmons

Cheryl Simmons  
Staff to the Advisory Committees

*Approved: September 24, 2024*



# CalOptima Health

## Covered California Participation Opportunity

Whole Child Model Family Advisory Committee  
September 2024

### Our Mission

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

### Our Vision

By 2027, remove barriers to health care access for our members, implement same-day treatment authorizations and real-time claims payments for our providers, and annually assess members' social determinants of health.

# Agenda

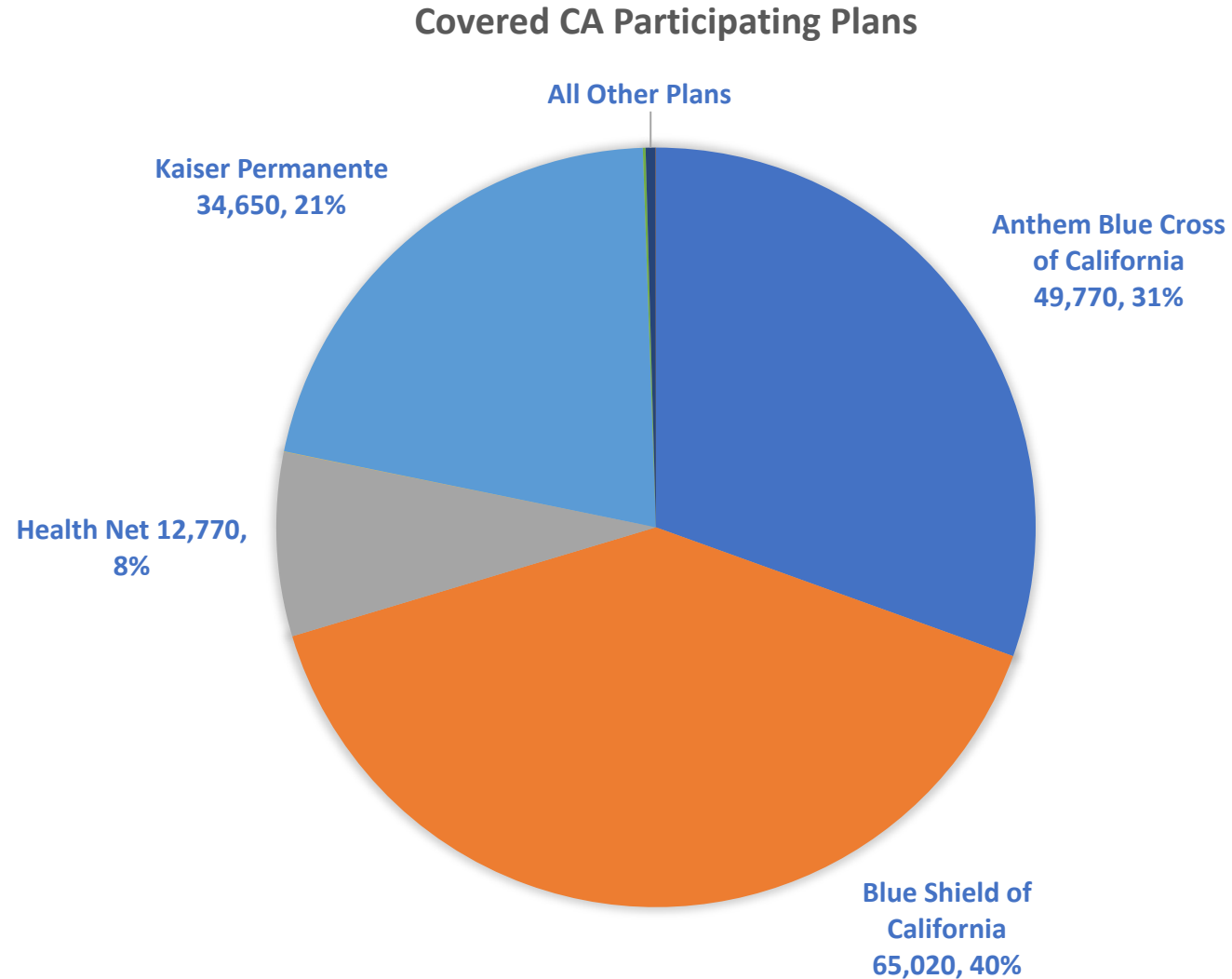
- Background
- Overview of the Orange County Covered California Landscape
- Value Proposition for CalOptima Health Participation
- Member Story
- Guiding Principles
- Stakeholder Engagement
- High Level Timeline
- Question & Answer



# Background

- Covered California (Covered CA) is the California state-based Marketplace program through which eligible Californians can purchase individual insurance coverage for themselves and their families.
- California residents who are not eligible for Medi-Cal or employer-sponsored insurance can purchase a plan through Covered CA.
- Premium subsidies are available to qualifying individuals/families.
- The type of plans offered in Covered CA are called Qualified Health Plans (QHPs).
- CalOptima Health would be seeking to join the Covered CA market for the 2027 plan year.
- Covered CA advises that new plans will need a two-year runway to prepare for participation.

# Orange County's Covered CA Plans



[Back to Agenda](#)

# Value Proposition for Participation

- **Opportunity:** The recent reinstatement of Medi-Cal renewals and existing churn in eligibility for low-income populations compromises continuity of care for members and results in mixed-coverage households with varying provider networks.
- **Solution:** Entry into the Covered CA market will bridge the coverage gap when our members lose Medi-Cal coverage and keep family members in aligned networks at affordable premiums.
- **Value:** CalOptima Health is the largest health plan in Orange County with broad partnerships and a commitment to reinvesting in our local community.
- **Call to Action:** CalOptima Health has a responsibility to protect access to and continuity of high-quality care for our members throughout their life span.

# Member Story

- A CalOptima Health member undergoing breast cancer treatment recently received a Medi-Cal disenrollment notice due to her current income level that was assessed during the redetermination process.
- The member was very concerned about the following:
  - Maintaining access to the same providers that are administering her current treatment plan.
  - Inability to afford her out-of-pocket treatment costs under any of the currently available Covered CA plans.
- Due to her lack of Medi-Cal eligibility, CalOptima Health was prohibited from exercising “continuity of care” (COC) provisions.
  - COC provisions to maintain access to her current providers can only be exercised at the discretion of her *new* plan — and may be time-limited.

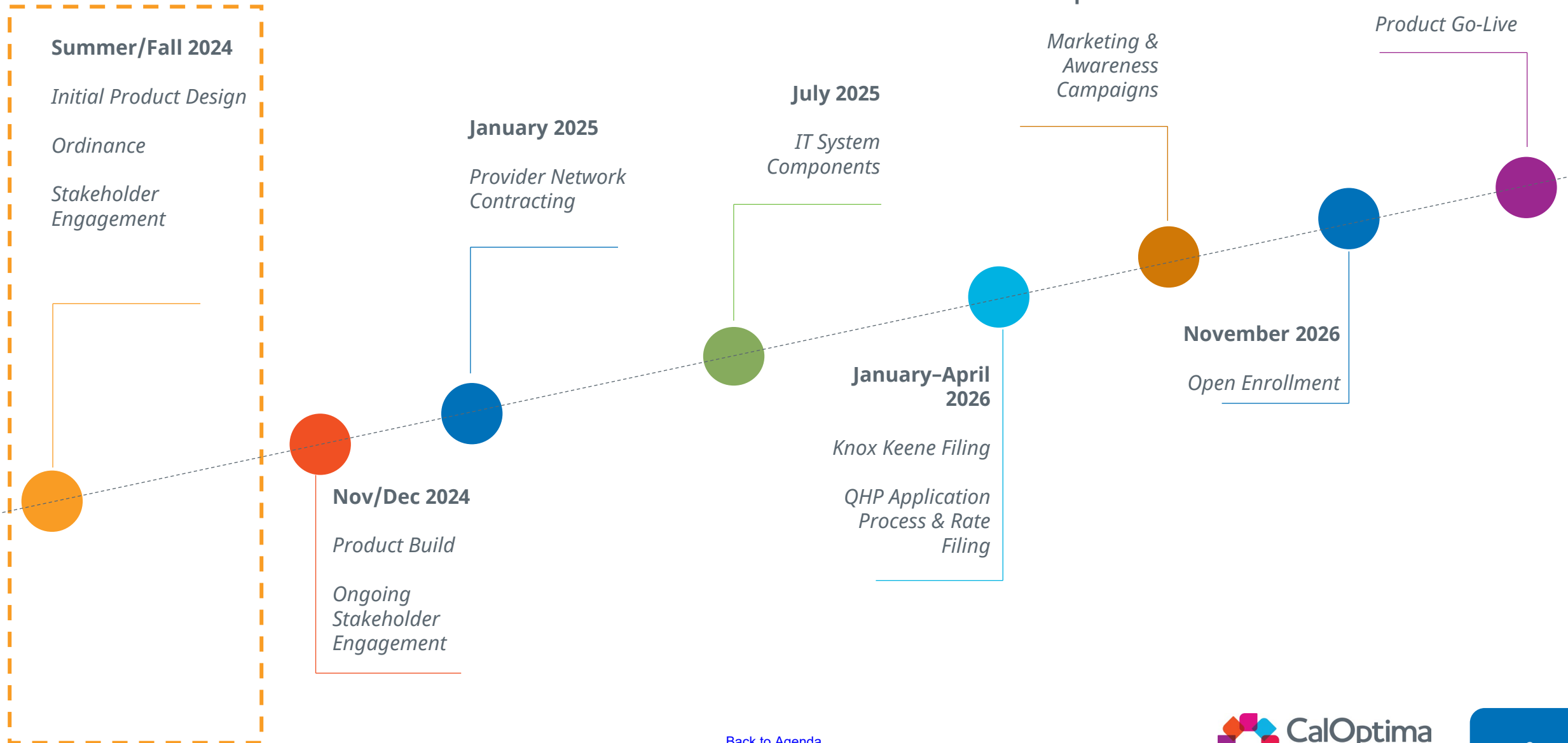
# CalOptima Health Covered CA Guiding Principles

1. Through Covered CA participation, provide continuous, high-quality care to our members across changes in life circumstances.
2. Ensure sufficient provider reimbursement in alignment with the current Covered CA market in Orange County.
3. Consistently engage external stakeholders on an ongoing basis to inform the design, development and implementation of the program in a transparent way.
4. Be strong stewards of public funds by identifying opportunities for efficiency and careful investment in needed capabilities.
5. Ensure ongoing reinvestment in the Orange County community as a key tenet of Covered CA participation.
6. Start small and target individuals and families churning on and off Medi-Cal coverage.
7. Ensure network adequacy to support access and availability to care for our members.

# Stakeholder Engagement

- CalOptima Health has been actively engaging key stakeholders in discussions about participation in Covered CA.
- A small steering group made up of external stakeholders began meeting in August to inform the development of the program.
- The Member and Provider Advisory Committee meeting in August included a discussion topic on Covered California.
- Community Listening Sessions took place in August to obtain broad community input into the program development process.

# High-Level Timeline



# Question & Answer

[Back to Agenda](#)





# CalOptima Health

## Chief Medical Officer Update

Whole-Child Model Family Advisory Committee –  
September 24, 2024

Richard Pitts, D.O., Ph.D., Chief Medical Officer

### Our Mission

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

### Our Vision

By 2027, remove barriers to health care access for our members, implement same-day treatment authorizations and real-time claims payments for our providers, and annually assess members' social determinants of health.

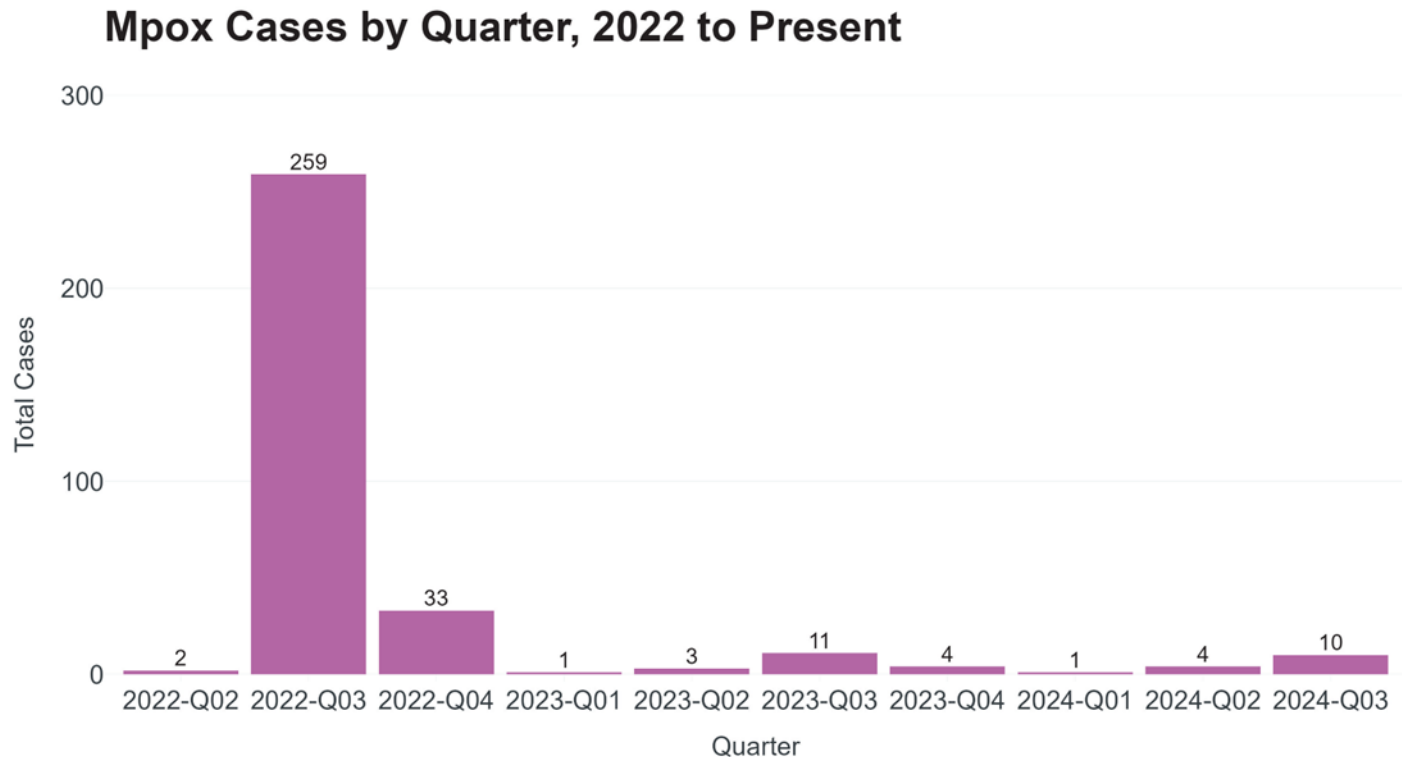
# Mpox

- Transmission continues nationally and in Orange County at much lower levels than was seen in 2022.
- Orange County did see an increase in cases up to 5 in August. This likely represents increased exposure and transmission associated with high-risk behavior
- We continue to monitor the Clade Ib outbreak in Africa, but to date, no transmission of that clade to the U.S. has occurred.
- Clade Ib is a new strain of the mpox virus that is spreading rapidly in the Democratic Republic of Congo (DRC) and other countries

# PUBLIC HEALTH MATTERS

[Back to Agenda](#)

# Mpox Cases Orange County by Quarter



## Mpox Situation Summary - Orange County

Total Cases	Hospitalizations	Partially Vaccinated	Fully Vaccinated
328	18 (5%)	2,637	6,316

Last updated: 9/20/2024

Gender - n (%)	
Female	9 (2.7%)
Male	315 (96%)
Transgender woman or man	**

Race/Ethnicity - n (%)	
American Indian/Alaska Native	**
Asian	31 (9.5%)
Black/African American	8 (2.4%)
Hispanic/Latinx	184 (56.1%)
Multiple Races	**
Native Hawaiian/Other Pacific Islan..	**
Other	8 (2.4%)
Unknown	7 (2.1%)
White	83 (25.3%)

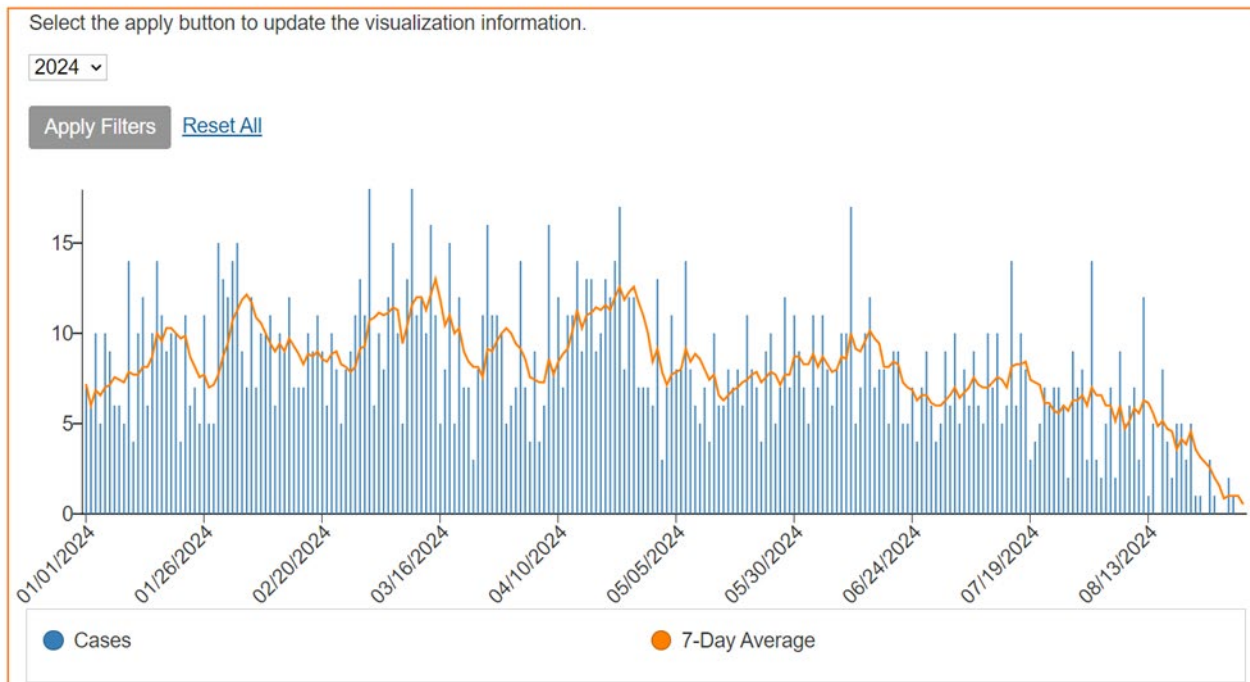
Sexual Orientation - n (%)	
Bisexual	41 (12.5%)
Gay, lesbian, or same gender-loving	228 (69.5%)
Heterosexual or straight	20 (6.1%)
Unknown	39 (11.9%)

Age Distribution (Years)	
Minimum	15-17*
Median	34
Maximum	65+*

Case counts less than five are suppressed with a double asterisk (\*\*).

# National (U.S.) Mpox cases per day

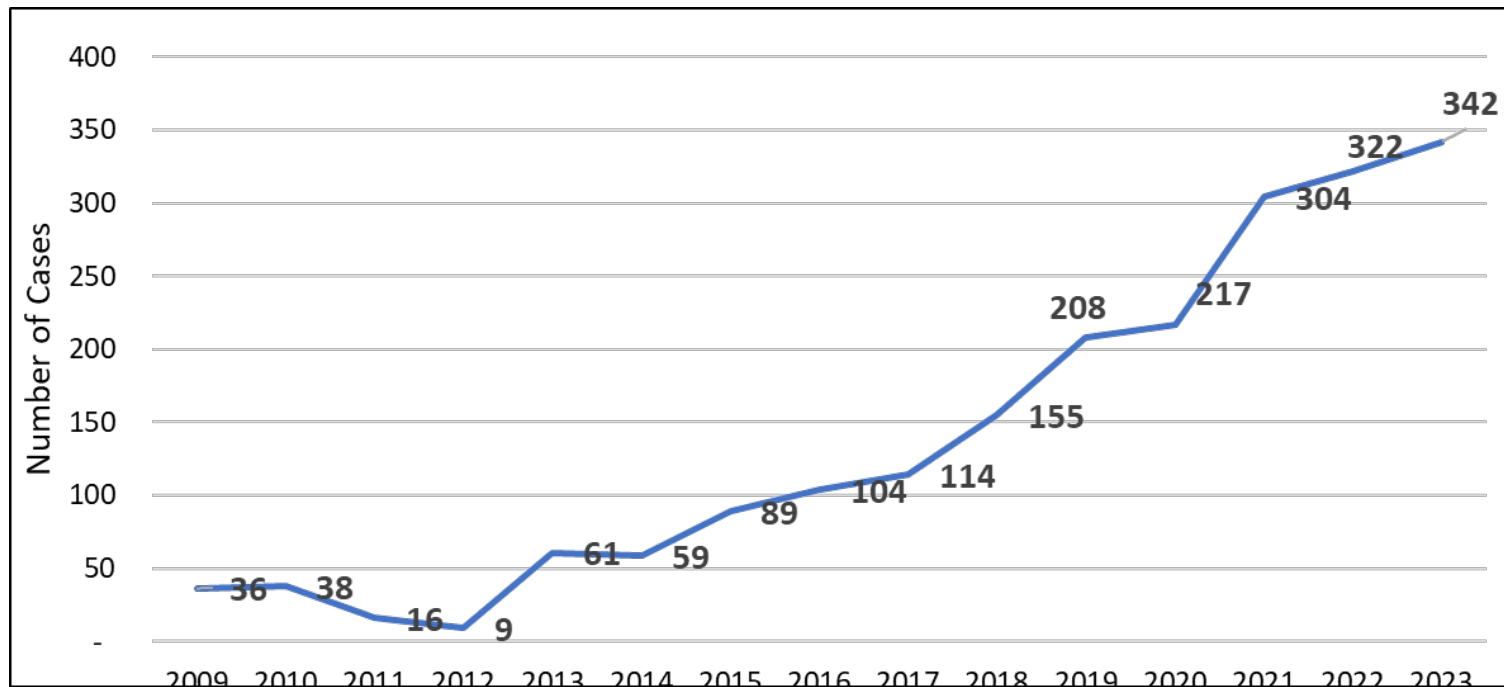
Trends of mpox cases reported to CDC during the 2022 outbreak by date\*



# Syphilis

- The number of women of childbearing age diagnosed with syphilis in Orange County has increased every year since 2012.
- Congenital syphilis cases in Orange County had been increasing every year since 2020, but in 2023 there was a 29% decrease.
- ACOG, the American College of Obstetricians and Gynecologists now recommends screening of all pregnant women three times during pregnancy: at the first prenatal visit, at 28-32 weeks and at delivery.

# All Stage Syphilis in Women of Child-Bearing Age 2009-2023 in Orange County

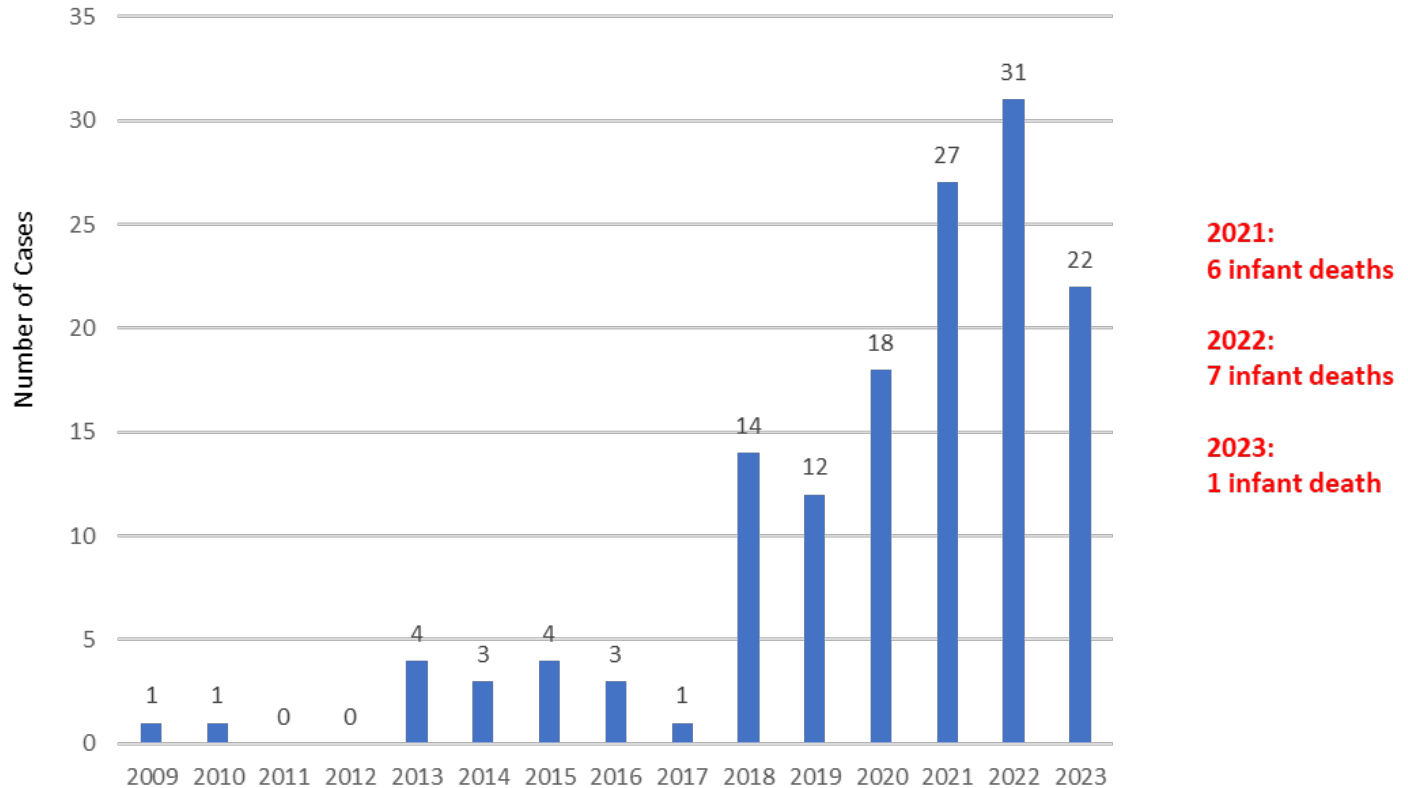


California Reportable Disease Information Exchange

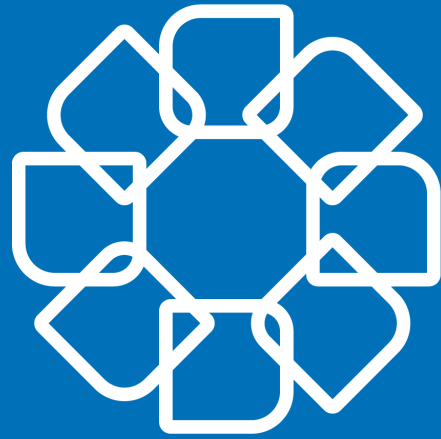




# Congenital Syphilis Cases 2009-2023 in Orange County



California Reportable Disease Information Exchange (CalREDIE)



# CalOptima Health

Stay Connected With Us  
[www.caloptima.org](http://www.caloptima.org)

   @CalOptima



# CalOptima Health

---

## MEMORANDUM

---

DATE: August 29, 2024

TO: CalOptima Health Board of Directors

FROM: Michael Hunn, Chief Executive Officer

SUBJECT: CEO Report — September 5, 2024, Board of Directors Meeting

COPY: Sharon Dwiers, Clerk of the Board; Member Advisory Committee; Provider Advisory Committee; and Whole-Child Model Family Advisory Committee

---

### **A. CalOptima Health Celebrates Expansion of Street Medicine Program**

On August 21, CalOptima Health hosted a well-attended press conference to announce the start of our Street Medicine Program in the city of Costa Mesa. My welcome remarks focused on the importance of partnership to the success of the program, and I thanked all the collaborators, including city leaders, fire and police personnel, and services provider Celebrating Life Community Health Center. The event included the following speakers:

- Supervisor Katrina Foley, Orange County Board of Supervisors, Fifth District
- Yunkyung Kim, CalOptima Health Chief Operating Officer
- Kelly Bruno-Nelson, DSW, CalOptima Health Executive Director, Medi-Cal/CalAIM
- Lori Ann Farrell Harrison, Costa Mesa City Manager
- Sergey Sergeev, CEO, Celebrating Life Community Health Center
- Alec Bradbury, Family Nurse Practitioner, Celebrating Life Community Health Center

The program launch garnered outstanding TV and radio coverage, including from [KNBC](#), [KABC](#), [KCAL](#), [KTLA](#), [KFI Radio](#) and [KNX Radio](#). The [Orange County Register](#) and the [Los Angeles Times/Daily Pilot](#) ran print and online articles.

Separately, CalOptima Health gathered data regarding progress of our original Street Medicine Program in Garden Grove. Since the launch in April 2023, our services provider, Healthcare in Action, has contacted more than 475 unhoused individuals in Garden Grove and enrolled 315 in the program. At the close of July, 151 members were currently enrolled, 95% of whom have an active relationship with their primary care provider and 95% of whom are enrolled in Enhanced Care Management and/or Housing Navigation. Also, since the program's inception, 12 members have been permanently housed. The expansion continues with the launch of our Street Medicine Program in Anaheim on September 3.

### **B. CalOptima Health Begins Stakeholder Engagement for Covered California Exploration**

Following the Board's direction to staff at its August 1, 2024, meeting, CalOptima Health invited providers, members and community partners to attend two listening sessions in August to learn more about the value proposition for CalOptima Health's participation in Covered California, the state's health insurance marketplace. The sessions drew nearly 100 registrants. We discussed that participation in Covered California would help ensure access and continuity of care for members, bolster safety net

providers, and streamline community resources for Orange County residents who no longer qualify for Medi-Cal due to income limits. Further, on August 29, staff convened the first meeting of the Covered California Stakeholder Steering Committee to bring together leaders representing key stakeholders from Board-approved categories, including hospitals and small and large health networks. The agenda included a discussion of CalOptima Health's guiding principles in offering a Covered California plan, a presentation about Covered California fundamentals by consultant Health Management Associates, and an open forum for questions and answers. Staff are planning additional Steering Committee meetings in September. The goal of both the listening sessions and the Steering Committee is to pursue the exploration of Covered California participation in a transparent and collaborative manner. With the input obtained from our stakeholders, CalOptima Health plans to bring an action to the Board in October for approval to seek a change in our governing ordinance to allow participation in Covered California.

### **C. Government Affairs Staff Visit Legislators in Washington, D.C.**

In July, Jordan Abushawish, Senior Director, Federal and Local Government Affairs, traveled to Washington, D.C., to introduce CalOptima Health's newly contracted federal advocacy firm Chamber Hill Strategies to the Capitol staff of Orange County's U.S. House delegation, California's two U.S. senators, and U.S. Rep. Ken Calvert, whose Inland Empire-based district is adjacent to Orange County and who serves as the highest-ranking California member of the House Appropriations Committee. Next, in early September, principals from Chamber Hill Strategies will travel to Orange County to meet with several CalOptima Health leaders to learn more about our strategic priorities and initiatives to better inform advocacy efforts on behalf of our members, providers and stakeholders.

### **D. Customer Service Moves to New Building**

CalOptima Health has moved the Customer Service lobby and 12 Customer Service staff to the first floor of 500 City Parkway West, directly across the street from CalOptima Health's 505 building. Inside the lobby, members will be welcomed by Customer Service Representatives ready to assist them with answering questions about their health care coverage, selecting a physician and more. Hours of operation are Monday through Friday, 8 a.m. to 5 p.m. Enjoy this brief [tour](#). The buildout of the Care Traffic Control Command Center on the third floor of the 500 building is ongoing.

### **E. CalOptima Health Engages ModivCare for Process Improvement in Transportation Services**

In response to the transportation issues raised at the August Board of Directors meeting, CalOptima Health Customer Service leaders have met with ModivCare to establish process improvements in the overall delivery of transportation services. ModivCare is working on several changes, including ensuring trips are assigned to transportation providers in advance, contacting transportation providers prior to scheduled rides to confirm their assignments and holding accountability meetings with transportation providers who have less than 95% on-time performance. We are also requiring that ModivCare proactively alert our transportation services program manager to any issues that need resolution. Further, staff has been working directly with the individual members who spoke at the Board meeting to ensure that their experience with obtaining reliable, appropriate transportation has improved.

### **F. CalOptima Health Executives Gain Leadership Roles, Win Award**

- **National Coalition of 100 Black Women Inc.** — CalOptima Health Executive Director of Equity and Community Health Marie Jeannis, RN, MSN, CCM, has been selected through a highly competitive process to participate in the National Coalition of 100 Black Women Inc. (NCBW). Jeannis will serve in the NCBW's health education program, which is designed to raise awareness of health disparities and solutions, and provide access to health care and wellness information that promotes behavior change and healthier lifestyles. The group's health advocacy focuses in the areas of family and childhood obesity, cancer/health disparities, and metabolic disease.

- **Local Health Plans of California Workgroups** — As CalOptima Health looks to help shape future Medi-Cal policy, two CalOptima Health executives recently joined Local Health Plans of California (LHPC) workgroups. Donna Laverdiere, Executive Director, Strategic Development, joined the LHPC Waiver Committee, which is responsible for studying and crafting proposals for the next iteration of California’s Medicaid waivers, following the January 1, 2027, expiration of the current CalAIM pilot waivers. In addition, Kelly Bruno-Nelson, DSW, Executive Director, Medi-Cal/CalAIM, joined the LHPC Housing Group, which is responsible for advocacy efforts to guide the Department of Health Care Services (DHCS) January 1, 2026, rollout of the newest Community Support — six-months of Transitional Rent — as well as future changes to current housing-related Community Supports.
- **Community Health Center Ambassador Award** — On August 4, CalOptima Health Chief Operating Officer Yunkyung Kim received a special Community Health Center Ambassador Award. The award recognizes her partnership and support of community health centers’ work to deliver value-based care to strengthen the Orange County health care safety net. Thanks to Board Chair and Coalition of Orange County Community Health Centers CEO Isabel Becerra for this honor.

#### **G. CalOptima Health Completes 2024 DHCS Medical Audit, Corrective Action Plan Due September 23**

On August 16, CalOptima Health received the final report of the DHCS routine medical audit focused on CalOptima Health’s Medi-Cal program. There were no surprises as part of the audit. The minor findings were in the audit areas of Utilization Management, Case Management, Care Coordination, Availability of Care, and Member’s Rights. The Corrective Action Plan (CAP) request was received from DHCS on August 22. The CAP is due to DHCS on September 23. The Medi-Cal Regulatory Affairs & Compliance department is coordinating with the relevant CalOptima Health departments to document and track the CAPs, which are currently under development and implementation. We will review the audit as part of the Quality Assurance Committee of the Board.

#### **H. Quality Improvement Initiatives Grants to Be Announced in September**

Through a Notice of Funding Opportunity, CalOptima Health’s Quality Analytics team launched the Quality Improvement Medi-Cal Grant Program for 2024. The purpose is to provide support to health networks, community clinics and CalOptima Health Community Network primary care providers for the planning and implementation of quality improvement activities for Medi-Cal members. This grant program was developed in response to the ongoing need for enhanced health care quality and patient outcomes, particularly in underserved communities. Through this initiative, we aim to address systemic challenges and disparities within health care delivery systems, fostering innovation, collaboration and sustainability in quality improvement efforts. Approved grants will be announced on September 23.

#### **I. CalOptima Health Hosts Successful Back-to-School Health and Wellness Fair**

More than 5,200 community members attended CalOptima Health’s second annual Back-to-School Health and Wellness Fair in Tustin. The event, co-hosted with the Orange County Department of Education, helped our school-age members and their families prepare for the new school year by providing helpful community resources, giveaways and services. The event included 21 community partners and representation from four elected officials’ offices, including Supervisor Vicente Sarmiento, who is Vice Chair of the CalOptima Health Board of Directors. Thank you to Board Chair Isabel Becerra for giving welcome remarks and to the community organizations who generously provided the following free services and giveaways:

- 24,225 individual diapers and 1,000 boxes of food provided by Community Action Partnership of Orange County

- 4,500 pairs of shoes provided by The H4H Foundation
- 500 bike helmets provided by Health Bridge
- 1,500 backpacks and school supplies provided by Karina’s Backpack Project
- Vision exams and eyeglasses provided by Lestonnac Free Clinic
- Dental services provided by AltaMed Healthy Smiles
- Sports physicals provided by Hurtt Family Health Clinic
- Haircuts provided by Cru Institute, a Barber School

#### **J. Press Release Announces Cancer Screening Grants**

On August 5, CalOptima Health issued a press release to announce the first round of cancer screening community grants, totaling \$16.4 million for 13 organizations. The Comprehensive Community Cancer Screening and Support Program is designed to help Orange County achieve the lowest incidence rate nationwide for late-stage breast, cervical, colon and certain lung cancers. This is the single largest investment in a disease prevention program in CalOptima Health’s history. Please see the release [here](#).

#### **K. CalOptima Health Gains Media Coverage**

Reflecting the media’s recognition of our ongoing innovation and program development, CalOptima Health continues to receive robust coverage:

- On July 24, Program of All-Inclusive Care for the Elderly (PACE) Medical Director Donna Frisch, M.D., was interviewed by [KNX Radio](#) on ways to talk to aging parents about personal safety and physical decline.
- On August 9, [U.S. News](#) published an article titled “How to Use Medicare’s Telehealth Coverage,” quoting Steven Arabo, M.D., CalOptima Health’s Medical Director of Medicare Programs.
- On August 14, the [Fullerton Observer](#) ran an article on CalOptima Health awarding more than \$16 million for cancer screening and support efforts.
- On August 14, the [Los Angeles Times/Daily Pilot](#) ran an article about an Anaheim motel being converted to housing for at-risk young adults. The article mentioned CalOptima Health providing \$2 million for the project.
- On August 19, the [Orange County Business Journal](#) ran an article on Project Hope Alliance receiving a \$2.1 million grant from CalOptima Health. The funds will enable Project Hope to scale its model of support for unhoused youth by partnering with Orange County school districts and the Orange County Department of Education.





**Fast Facts**  
 September 2024

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

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

Total CalOptima Health Membership <b>910,928</b>	Program	Members
	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%		