

# 2020

Report  
to the  
Community

## CONNECTING



A Public Agency

# CalOptima

Better. Together.

CELEBRATING  
25 YEARS

# Heartfelt Connections

This CalOptima Report to the Community is about you as much as it is about us. You are the providers, health network leaders, community-based organization representatives and elected officials we connect with to make serving CalOptima members possible.

Quality health care services for members is our shared mission. For a clear sense of how we actively strive to fulfill that, you can read the personal stories of the people we serve. In our community-based health plan, these connections are quite simply life-changing. Just ask Jen, Jack, Lap or the Sosa family.

There are layers to our connections, too. Find them in how we help members feel part of CalOptima with compassionate service, how we keep providers informed about the latest changes or how community representatives stay engaged in our activities. Still other connections help us build a stronger health care system by integrating programs or pursuing quality outcomes.

I truly hope you see yourself in this report because CalOptima cannot care for Orange County's vulnerable residents without you. Your work, advocacy and dedication are ingrained in our agency, which is recognized statewide for leadership in quality, innovation and collaboration.

It's my honor as well to note that the remarkable work we do together has been ongoing for 25 years, yet it hasn't gotten old. Each year brings new challenges that we embrace on behalf of members. Inside this report, you will find a glimpse of what may be ahead for the next three years in our 2020–2022 Strategic Plan.

But for a moment today, celebrate the significant impact you have in keeping our community healthy. Thank you to all our partners, and happy 25th anniversary!



A stylized, handwritten signature in black ink that reads "MSQ SQA SQA".

Michael Schrader  
Chief Executive Officer



02 MEMBERS

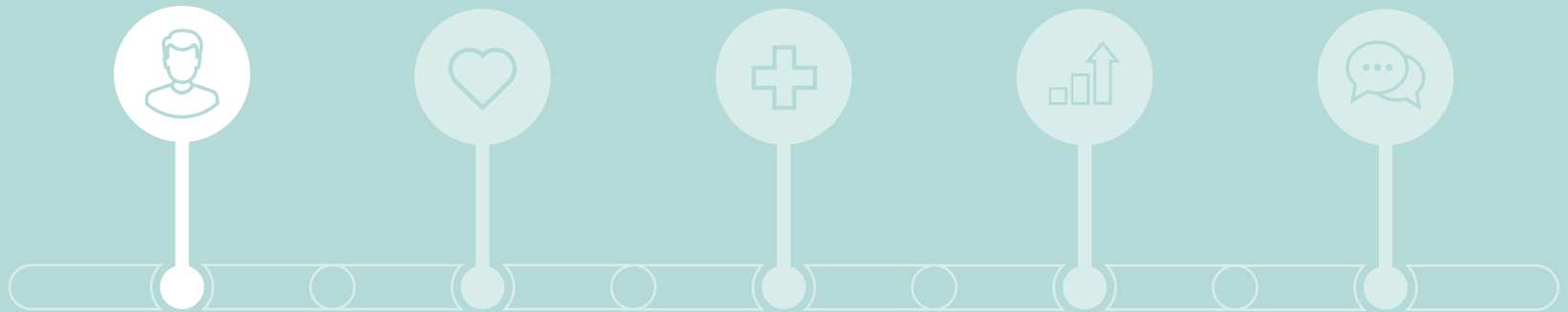
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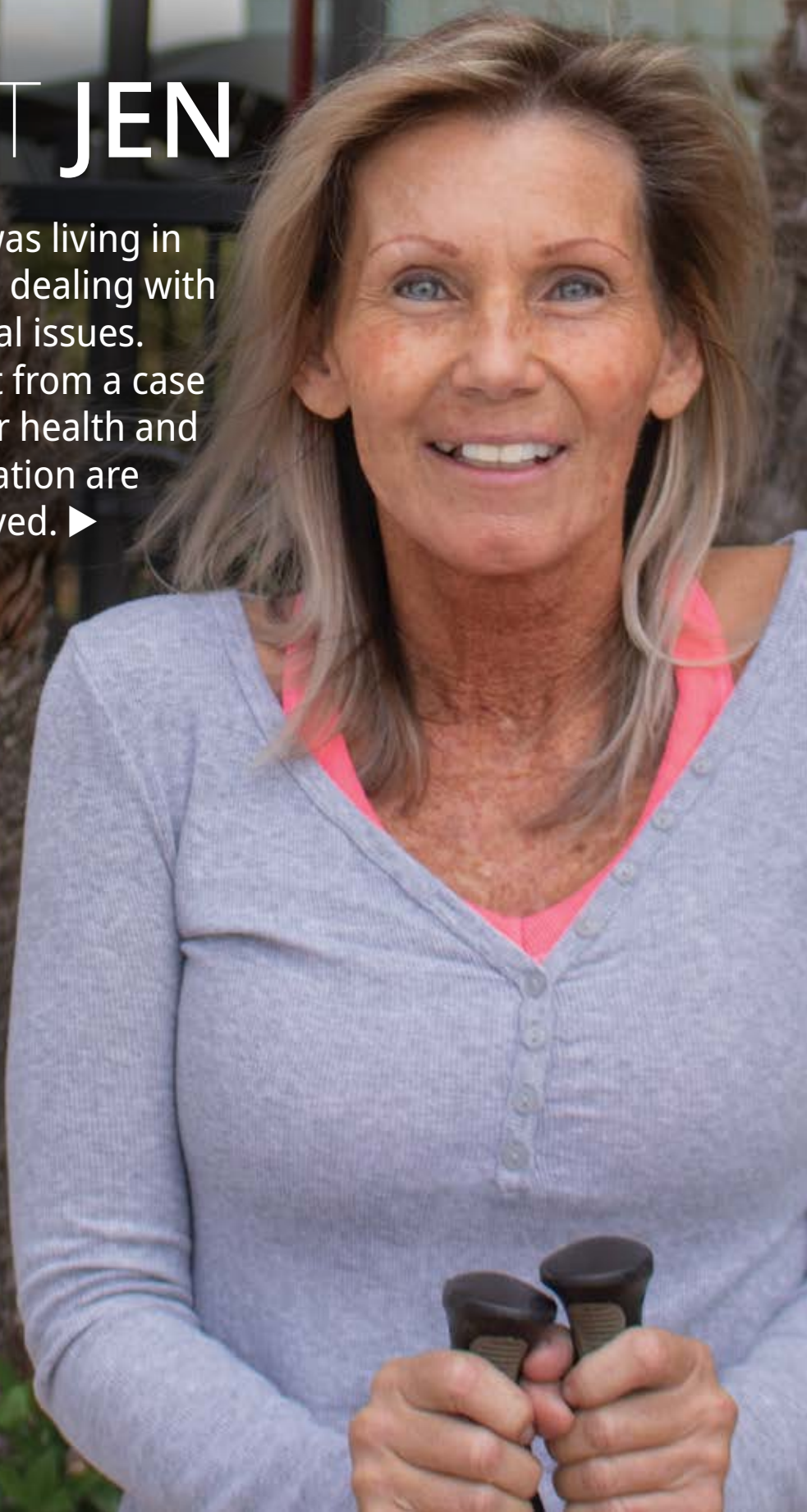
# CONNECTING: MEMBERS

Members. Not patients. Not customers. Not clients. And not insureds. Members are the reason CalOptima was created 25 years ago. The term makes a difference in our daily work, and we use it exclusively to refer to those we serve. Saying “members” reminds us that health care is personal and that we are part of something bigger in the community. You are part of it, too. CalOptima is a public agency with a significant responsibility to deliver access to quality care in Orange County for the families, friends and neighbors who need it most. Read on to learn how CalOptima connects with members so they feel like they belong.



# MEET JEN

Jen Prowse was living in her car while dealing with major medical issues. With support from a case manager, her health and housing situation are vastly improved. ►



*CalOptima Case Manager Keri Graper (left) and CalOptima member Jen Prowse celebrate Jen's improving health.*



## **About a year ago, Jen Prowse, 57, came to Orange County from Utah under difficult circumstances.**

She arrived without a place to live and in declining health. By her own account, her outlook on life and her future was grim. That is until she became a CalOptima member and found a group of people who cared for her.

Back in 2018, Jen relied on an oxygen tank, used a wheelchair and faced an unknown health condition. Her prior interactions with health care providers made her feel like an experimental guinea pig — poked and prodded but without results. After CalOptima provided a network of specialists and a case manager, Jen finally got an answer — she had CREST syndrome, a form of sclerosis that affects her connective tissues.

In mapping a course to improve her health, Jen worked with CalOptima Case Manager Keri Graper. “My responsibility is to call my members once a month to see if they need anything,” Keri says. “Knowing that Jen has some memory issues and needed help tracking all of her appointments with more than 10 specialists, I made sure to call her more regularly so that she wouldn’t miss any checkups or treatments.”

Because case management often extends beyond medical needs, Keri also made sure to help Jen as a whole person, connecting her with community-based services that helped her recently transition from living in her car to temporary supportive housing.

Jen is sincerely grateful. “I wanted to give up because I felt like I had no self-worth,” she says. “But I had people who were going beyond their job requirements to keep me alive. If I gave up, I knew I would disappoint them. They worked hard to better my health. They have only known me a short period of time, but the way they treat me doesn’t show it. There is no way I would still be here without this group.”



## Orientation Sessions Welcome New Members To CalOptima

New Member Orientation sessions are all about answering the who, what, when and how of CalOptima health care coverage. The monthly sessions lay the groundwork for a successful experience so members understand their access to medical services, prescriptions and other resources. Orientations are available in English, Spanish and Vietnamese, and they are specific to our Medi-Cal and OneCare Connect programs.

## Case Managers Coordinate Member Care and Services

If there's an epicenter of advocacy at CalOptima, it is our case management team. More than 130 nurses, personal care coordinators and social workers strong, this team is one you want on your side. They help members who have difficult medical conditions, such as spinal injuries, cancer, immune diseases, transplants, kidney failure and other illnesses. Applying years of clinical and community expertise, case managers know the best paths to improved health outcomes, whether that means arranging medical appointments, organizing care team meetings or engaging community resources. Each year, thousands of CalOptima members receive crucial support from case managers who make a difference in their lives.

## New Website Makes Information More Accessible

Clean and contemporary — that's the look of CalOptima's new website, which debuted in June 2019. But its good looks don't outshine its better function. The website's usefulness got an upgrade as well. Users are enjoying fewer pages filled with only the essentials, easier navigation to the most popular sections, and member and provider



*Medi-Cal member Angel Juarez, 10, attends a CalOptima event that educates children about the dangers of vaping.*

portals at front and center. With this better access, members can do more online, such as request an ID card, member handbook or provider directory; change their health network; and see records of their most recent medical services. This improved electronic connection is another way CalOptima strengthens service for members. Check it out at [www.caloptima.org](http://www.caloptima.org).

## Language Access Delivered in Many Ways

Communication should not be a barrier to good health. CalOptima offers customer service and member materials in seven core languages — English, Spanish, Vietnamese, Farsi, Korean, Arabic and Chinese. We take great care to contract with diverse health care providers as well. Records show that you can find providers who speak 70 different languages. Plus, CalOptima offers no-cost language assistance in any language. Our over-the-phone interpreter service is available 24 hours a day, and members can access face-to-face interpreter service for doctor appointments when needed. In 2019, members requested telephonic help in 84 languages and in-person support in 21 languages. Orange County is international!

# 1:4

### Strong Membership

CalOptima has more than 755,000 members, which equates to about 1 in 4 Orange County residents.

# 4

### Diverse Programs

Members belong to four programs: Medi-Cal, OneCare Connect, OneCare and PACE.

# 7

### Threshold Languages

CalOptima materials are available in English, Spanish, Vietnamese, Farsi, Korean, Arabic and Chinese.

# 13

### Health Networks

Member choice is a priority, and members can choose from 13 different health networks.



### CalOptima Babies

Welcome to OC, baby! More than 21,600 bundles of joy were born to CalOptima moms during the two-year period from January 2018 to December 2019.



### Medi-Cal Expansion

One third of our members are eligible for CalOptima because of Medi-Cal expansion through the Affordable Care Act, which began in January 2014.



### Happy 100!

CEO Michael Schrader signs 100th birthday cards for new OneCare Connect and OneCare centenarians — about 90 or so each year.



### Phone Skills

Each day, CalOptima Customer Service representatives answer an average of 2,000 member calls, fielding questions about Medi-Cal, OneCare Connect and OneCare.



### Accessible Office

Nearly 70 percent of members reside within a 15-mile radius of CalOptima's office in Orange, which features an in-person Customer Service team on the first floor.



### Busy Behavioral Health Phone Line

An average of 12,500 calls come in from members on CalOptima's dedicated Behavioral Health Customer Service line each quarter.

### Top Three Cities

Santa Ana, Anaheim and Garden Grove are the top three cities with the most CalOptima members — a total of about 315,000 combined!



### Transportation Benefit

Members rely on the transportation benefit to get them where they need to go for good health, requesting more than 32,000 rides a month to doctor offices, pharmacies, labs and more.



### Translating Success

Producing material in members' preferred languages is a big job. Nearly 8,200 requests for translations were fulfilled during the one-year period from July 2018 to June 2019.





## 25th Anniversary Spotlight

### Liz Ramos-Lopez: Serving Members Since 1995

Liz Ramos-Lopez will celebrate her 25th work anniversary on March 27, 2020, and her 50th birthday on May 14. She has literally spent half her life at CalOptima. What keeps her here? Liz says the answer is simple: members.

"I love being part of creating the member experience," Liz says. "I really believe in giving members the best service possible."

Liz started at CalOptima as a receptionist and mail clerk. Once Medi-Cal launched in October 1995, she began answering member calls, priding herself on compassionate response. Her good work got noticed. Over the years, she was promoted to various roles in six different CalOptima departments, but the one constant was her desire to connect with members.

In her current role as a supervisor in Grievance and Appeals Resolution Services, she is the go-to person for handling the most difficult member issues. "I get the escalated cases," Liz says. "But I'm able to show empathy and work to comprehend the problem. The key is listening, because members feel better when they have been heard."

Looking back, Liz says her most memorable role was helping to launch OneCare in 2005. She loved sharing how OneCare's combined Medicare/Medi-Cal benefits simplified health care. She made presentations to the community and met with potential enrollees, signing up hundreds during her eight years with the OneCare team.

Through OneCare, Liz met Ronaldo. After enrolling him, she continued to help coordinate his health care services until she changed departments in 2013. "He is a beautiful soul," she says. "At the time, he needed someone to talk to, and he often came to the office to meet with me, bringing a card to say thank you." They connected over the phone again in 2019, and it was like no time had passed. Liz builds special relationships, and members are better for it.



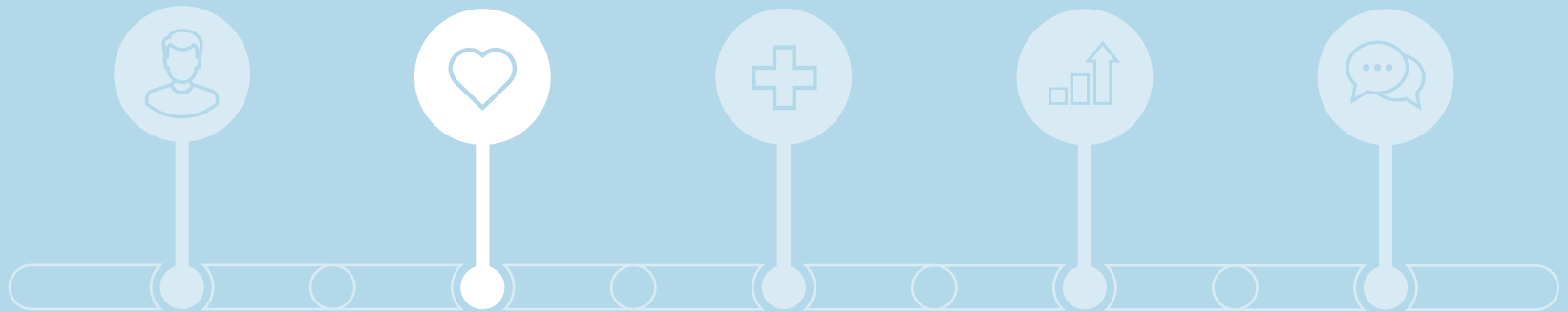
*Liz Ramos-Lopez treasures notes she has received from members.*

## Health Incentives Engage Members For Better Health

To help members take an active role in their health and obtain important services, CalOptima is launching more robust incentive programs for 2020. What's at the top of the priority list? For adults, there are seven things — screenings for cervical cancer, colorectal cancer and breast cancer; eye exams and A1c tests for diabetic members; tobacco cessation sessions for smokers; and postpartum checks for new moms. For children, well-child visits are essential. Babies need to have six well-child visits before 15 months, so there's an incentive for that. And another program rewards annual well-care visits for teens. There's also an incentive encouraging kids at risk for obesity to complete healthy living classes. Members who participate may receive either \$25 or \$50 gift cards or movie tickets, depending on the incentive program. But better than that, they receive care that makes a difference in their overall health.

## Compassionate Member Liaisons Guide Those With Special Needs

CalOptima's Member Liaison program has a longstanding role serving seniors, members with disabilities or chronic conditions, and members experiencing homelessness. In 2019, the program expanded its reach to approximately 12,000 members eligible for California Children's Services through the Whole-Child Model. Revealing their compassion, member liaisons offer help with navigating the health care system in the most complex cases. They are the highly trained staff who members rely on for personalized service.



# CONNECTING: PROGRAMS

Nowhere is CalOptima's drive to connect more evident than in our programs. Several recent initiatives focus on bringing together various pieces of the health care system to make them work better. The truth is that integration has long been a CalOptima priority. Maybe you remember 1996 when we folded long-term care into our Medi-Cal plan or 2005 when we combined Medicare and Medi-Cal benefits to launch OneCare, a Dual Eligible Special Needs Plan. While CalOptima may have started with integration decades ago, it is undeniably part of our future. Read on to learn about the latest efforts to create more seamless, comprehensive experiences in our programs for members.



# MEET JACK

Jack Rogers has complex medical needs stemming from childhood seizures. CalOptima's Whole-Child Model is making a difference. ►





*Kristen Rogers (left) relies on the Whole-Child Model to coordinate care for her son, Jack.*

## **At 4 years old, Jack Rogers was a healthy, rambunctious boy until several seizures led to a long-term hospitalization.**

Jack, now 16, had to relearn everything, from speaking to walking, and he endured 12 surgeries to improve his condition. With occupational and physical therapy, and a personal aide, Jack has become a social and verbal young man.

Navigating Jack through this experience showed his mom, Kristen Rogers, that there was room for improvement in the health care system. Years later, she is seeing positive change with the integration of the California Children's Services program into Medi-Cal under the Whole-Child Model (WCM). Launched in July 2019, WCM is delivering better care coordination, reliable access to care and improved health results for Jack and thousands of other children, Kristen says.

"It was hard at the beginning of Jack's new life," Kristen says. "We had to learn how to access services, and we were going through our savings so quickly to cover medical and therapy bills. We started to cancel appointments because we couldn't afford them. I don't want other families to go through what we went through."

Her compassion for other families drove Kristen to become an advocate for children with special needs. She is currently a member of CalOptima's Whole-Child Model Family Advisory Committee, and she sits on several advisory committees at CHOC Children's.

Relying on WCM and CalOptima's Customer Service team, Kristen feels a sense of relief because her son's health is in good hands. "Now I can focus on spreading awareness and helping other parents who are in similar situations. Together, we're all going to live the best life we can with each other's support."

## Whole-Child Model Folds California Children's Services Into Medi-Cal Managed Care

Helping families receive more coordinated care for their child's serious medical condition — that's the goal of the Whole-Child Model (WCM), a major effort that integrates California Children's Services (CCS) into Medi-Cal managed care for approximately 12,000 children in Orange County. In July 2019, with support from countless providers, CalOptima launched WCM to coordinate and combine each child's Medi-Cal and CCS benefits in one plan seamlessly. Because children who are CCS-eligible have complex medical needs, communication about

the change with families, advocates and providers was a top priority. CalOptima held dozens of public meetings, and each family received a personal phone call as a WCM welcome. Every program transition is another opportunity to put members first.

## Health Homes Program Supports High-Risk Members

A new program for the new decade, CalOptima's Health Homes Program (HHP) launched January 1, 2020. HHP offers additional services to Medi-Cal members with certain physical health or mental health conditions and a high level of acuity, such as a recent hospital stay or chronic homelessness. The state developed HHP to

### Homeless Health Initiatives Aim to Better Connect Members to Care

CalOptima members experiencing homelessness have unique challenges accessing the traditional health care delivery system. In 2019, CalOptima committed enhanced funding to make systemic changes that break down barriers. There are several initiatives, including three highlighted below:

#### *Clinical Field Teams*

In a first for Orange County, CalOptima launched a Clinical Field Team program in April 2019, sending medical professionals and social workers out into the community to treat homeless individuals where they are. Five community health centers have created dedicated teams, which are on call seven days a week and prepared to travel to any area in Orange County. In 2019, CalOptima dispatched teams to serve individuals nearly 500 times. (See Page 15.)

#### *CalOptima Homeless Response Team*

This 10-member team is the hub of CalOptima activity on homeless health. Some staff serve as liaisons, making regular field visits to shelters, hot spots and recuperative care facilities to assist members. Others act as dispatchers for the Clinical Field Teams. Having a centralized team makes it easier to coordinate care with community partners, such as the Orange County Health Care Agency's Outreach & Engagement staff and shelter operators.

#### *Recuperative Care*

In partnership with the Orange County Health Care Agency's Whole-Person Care pilot, CalOptima committed more than \$8 million to expand access to recuperative care, offering homeless members a clean, safe place to go when discharged from the hospital and to stay for up to 90 days when medically necessary.

# 12k

### Whole-Child Model

California Children's Services transitioned to the Whole-Child Model, affecting about 12,000 members.

# 14k

### OneCare Connect

More than 14,000 members participate in this combined Medicare and Medi-Cal plan.

# ~500

### Clinical Field Team Dispatches

CalOptima sent medical professionals out into the community to serve individuals who are homeless nearly 500 times in 2019.



### Health Homes Program

Launched January 1, the Health Homes Program provides enhanced care management for at-risk members.



## 25th Anniversary Spotlight

# Programs Past And Present



### OneCare (HMO SNP)

*October 2005–present*

A Dual Eligible Special Needs Plan for low-income seniors and people with disabilities who qualify for both Medicare and Medi-Cal.

### Healthy Families Program

*July 1998–October 2013*

A low-cost insurance plan for children under 19, providing health, dental and vision coverage to children who do not have insurance and do not qualify for Medi-Cal.

### Medi-Cal

*October 1995–present*

A public health insurance program for low-income children, adults, seniors, people with disabilities and people with specific diseases.

1995

## CalOptima

A Public Healthcare Agency



A Plan for Healthy Families

### Multipurpose Senior Services Program

*March 2001–present*

A program providing social and health care management services to delay older adults from having to go to nursing homes.

### Healthy Kids Program

*January 2007–February 2011*

A program providing low-cost medical, dental and vision coverage to children under 19 who are not eligible for Medi-Cal or the Healthy Families Program, and have family incomes at or below 300 percent of the federal poverty level.

### Program of All-Inclusive Care for the Elderly (PACE)

*October 2013–present*

A community-based program that provides coordinated and integrated health care services to frail seniors to help them continue living independently.



**PACE**  
**CalOptima**  
Better. Together.

### OneCare Connect Cal MediConnect Plan (Medicare-Medicaid Plan)

*July 2015–present*

A program for people who qualify for both Medicare and Medi-Cal that combines those benefits and adds benefits for vision, transportation and fitness as well as comprehensive care coordination.

2020





*Leaders dedicated to improving mental health and wellness break ground for Be Well OC in October 2019. The public-private partnership includes the County of Orange, CalOptima, Kaiser Permanente, Hoag and Providence St. Joseph Health.*

provide enhanced care coordination and social services support for the eligible population of high-needs members in hopes of positively impacting their outcomes. HHP is a voluntary program, and CalOptima and our health networks are reaching out to explain the benefits, which range from comprehensive care management and care transitions support to housing navigation services and accompaniment to doctor visits. To ensure members connect to all these services, each will have a personal care coordinator to guide them on the path to better health outcomes.

## Expanded Behavioral Health Integration Reaches More Members

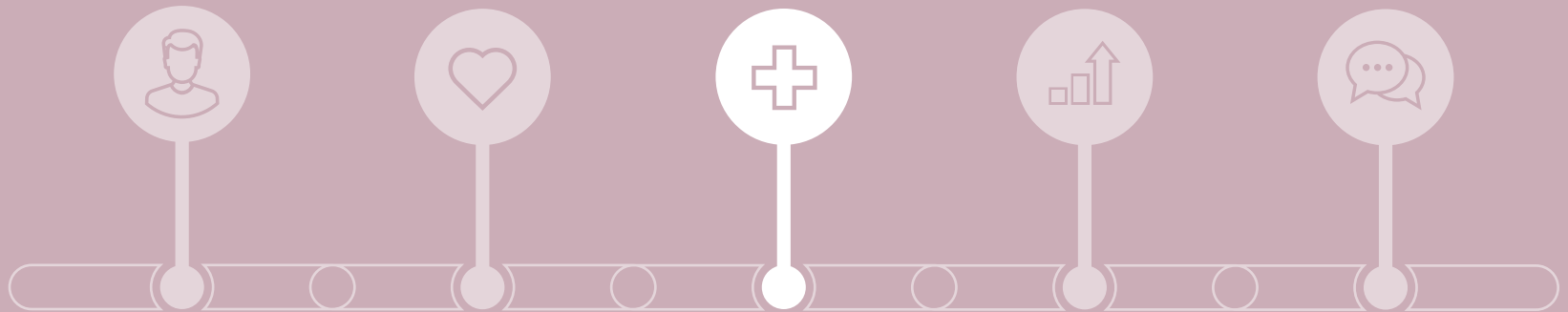
A coordinated approach to physical and mental health can significantly improve access to care. In January 2018, CalOptima began directly administering the Medi-Cal benefits for outpatient mental health services for mild to moderate conditions and behavioral health treatment. With direct phone lines to our Customer Service and Behavioral Health teams, members now receive seamless support from CalOptima staff who are knowledgeable in both medical and behavioral health coverage. Members no longer have to be transferred from an external vendor back to CalOptima to address non-behavioral health care needs. In January 2020, CalOptima expanded our integration efforts again by administering mental health benefits for OneCare and OneCare Connect members as well.

## CalOptima Supports New Concept in Mental Health and Wellness

Orange County will soon open the Be Well OC Regional Mental Health and Wellness Campus, an innovative facility that connects services from prevention to treatment along the mental health and substance use disorder continuum. CalOptima is proud to be a founding organization helping to bring Be Well to life through an \$11.4 million prepayment for enhanced Medi-Cal services at the campus. Like so many others, we look forward to supporting the success of this groundbreaking initiative that increases access to mental health care for all Orange County residents.

## Over-the-Counter Medication Rounds Out Benefits

OneCare Connect and OneCare members have even more complete coverage thanks to new benefits introduced in 2020. For the first time, members can obtain \$50 of nonprescription medicines and supplies each quarter at no cost as part of the programs' over-the-counter allowance. Items such as cold medicine, acetaminophen and first aid supplies are ordered from a catalog and shipped directly to members' homes.



# CONNECTING: PROVIDERS

Public-private partnership — CalOptima is the “public” and providers are the “private,” and together we are celebrating 25 years of partnership. We can’t do our work without you and thousands of other remarkable professionals. Nor would we want to. This public-private approach to health care delivery was designed by and for Orange County, and it works for our community. Taking care of vulnerable, low-income members calls for mission-driven commitment. In many ways, providers adopt CalOptima’s mission as their own, reliably delivering quality health care services in a cost-effective and compassionate manner. Read on to learn how CalOptima connects with providers to support their life-changing work.



# MEET FRANCISCO, MARTHA AND SOMAYA

This trio from Central City Community Health Center delivers health care in the field for vulnerable individuals experiencing homelessness. They go where needed, and needed they are. ►





**Based out of Garden Grove, Central City Community Health Center is one of five community health centers participating in CalOptima's Clinical Field Team program to provide urgent care services in the community for individuals experiencing homelessness.**

Through Clinical Field Teams, Orange County has — for the first time — a new type of provider capable of responding to the local homeless crisis with mobile health care services. Medical Assistants Francisco Vazquez and Martha Gil and Nurse Practitioner Somaya Bhimaya are a compassionate team that knows medical care is often not the only thing they deliver when Central City is dispatched.

"We try our best to make our patients feel comfortable by showing them respect and being sensitive to their current situation," Francisco says. "We don't just focus on wound care or curing a short-term illness — we care about the person's overall health. We want to make sure they are good all around."

Working three days a week, 8–10 hours a day, this trio is busy as they drive from city to city to respond to calls for medical care. As they pull up to different areas, from train stations and parks to highway bridges, their rolling cart of medical equipment and supplies can be quickly depleted as they encounter a line of people who depend on their care.

"We get a lot of people coming to see us now because of the trust and connection that we've made in these different communities," Somaya says. "When one person gets their wound or abscess cared for, others around them see what we've done and ask for help, too. What we do doesn't feel like a job because we're making a difference and helping those who are often neglected."

## **Clinical Field Teams Thrive as New Providers for Homeless**

Shout out to the five community health centers delivering quality care in the community for individuals experiencing homelessness. Clinical Field Teams are on call seven days a week, and they crisscross Orange County to treat people with urgent medical needs at shelters, train stations, parking lots, parks and many other places. With these teams, CalOptima can reach those who need care the most.

### ***Central City Community Health Center***

**Clinical Field Team Staff:** Somaya Bhimaya, NP; Martha Gil, MA; Francisco Vazquez, MA

### ***Families Together of Orange County Community Health Center***

**Clinical Field Team Staff:** Pete Carrillo, M.D.; Uriel Gutierrez, MA; Parsia Jahanbani, RDA; Antonella Zegarra, Care Coordinator

### ***Hurtt Family Health Clinic***

**Clinical Field Team Staff:** Jonathan Chhean, NP; Laurie Mazzie, PA; Olga Rivera, MA; Jose Torres, MA

### ***Korean Community Services Health Center***

**Clinical Field Team Staff:** Jaewon Lee, NP; Kijae Ko, MA

### ***Serve the People Community Health Center***

**Clinical Field Team Staff:** Himelda Rivera, PA; Brenda Aguirre, MA; Anthony Cueva, MA; Juan Martinez, MA; Abigail Alvarez, Scribe

## State Proposal of Sweeping Medi-Cal Changes to Impact Providers

Over the next few years, Medi-Cal Healthier California for All is bound to impact you and all providers. Introduced in October 2019, the multiyear initiative from the Department of Health Care Services calls for broad delivery system, program and payment reforms. Given the proposal's significance, CalOptima is working to raise awareness among providers about the overarching changes, bringing the topic to key meetings and stakeholder groups. The state has three goals: use whole-person care approaches and address social determinants of health; reduce complexity and increase flexibility in Medi-Cal; and improve outcomes and quality through value-based initiatives. More than 20 separate proposals are designed to support the goals, and CalOptima is highlighting those with the most local impact. Examples include proposals that focus on population health management, enhanced care management, in lieu of services and National Committee for Quality Assurance accreditation. Since the first changes stemming from Medi-Cal Healthier California for All may be as soon as January 2021, we know the time for provider engagement and education is now.

## CalOptima Offers Continuing Education On Timely Issues

To deliver quality care for members, providers need to stay on top of the latest issues in health care, and CalOptima is committed to helping with that effort. Each quarter, we host educational seminars for physicians and licensed health care professionals, complete with the opportunity to earn continuing medical education credits. The most recent sessions covered pediatric care, including pediatric neuromuscular diseases, substance use in adolescents and pediatric preventable infections; pain management, including current regulations regarding opiate



*Provider Advisory Committee Chair John Nishimoto, O.D., (center) talks with Maura Byron (left), chair of the Whole-Child Model Family Advisory Committee, and Christine Tolbert (right), chair of the Member Advisory Committee, at a meeting about CalOptima's Strategic Plan.*

prescribing; and the clinical principles of street medicine for the homeless population. In 2019, nearly 150 providers attended the valuable sessions.

## Health Network Forums, CEO Meetings Keep Partners Engaged

A dozen private health networks serve the vast majority of CalOptima members. So, staying connected to these contracted organizations ensures the success of our health care system. Each month, a Health Network Forum brings health network and CalOptima leaders together for two hours to address the most pressing issues in health plan operations. Topics range from Medi-Cal or Medicare program changes and quality performance to financial updates and compliance matters. In a similar approach, health network CEOs are also invited to quarterly meetings focused on executive-level discussions. The events help surface emerging issues and solidify working relationships.

# 1.6k

## Primary Care Providers

Nearly 1,600 primary care providers are available across Orange County.

# 7k

## Specialists

Specialists number in the thousands and range from allergy to urology.

# 40

## Acute and Rehab Hospitals

CalOptima counts 40 acute and rehab hospitals among our contracted providers.

# 916

## Provider Calls

In 2019, CalOptima received a daily average of 916 provider calls with questions about programs and claims.

# CALOPTIMA PROVIDER NETWORK NUMBERS

As of January 15, 2020

## 40

Acute and  
Rehab Hospitals

## 1,571

Primary Care Providers

## 572

Pharmacies

## 35

Community  
Health Centers

## 4

PACE Alternative  
Care Settings

## 6,999

Specialists

## 100

Long-Term Care  
Facilities

## Highlighting Health Networks

For a true picture of CalOptima providers' huge responsibility, take a look at the numbers of members served in three programs.

Health Network	Medi-Cal Members	OneCare Connect Members	OneCare Members
AltaMed Health Services	42,469	492	64
AMVI Care Health Network	21,480	442	249
Arta Western Health Network	60,188	612	123
CalOptima Community Network	80,159	1,870	
CHOC Health Alliance	144,523		
Family Choice Health Network	44,157	1,831	87
Heritage-Regal Medical Group	6,674	193	
Kaiser Permanente	44,653		
Monarch Family HealthCare	78,640	4,606	709
Noble Mid-Orange County	20,341	419	32
Prospect Medical Group	33,822	2,326	
Talbert Medical Group	23,875	1,084	147
United Care Medical Network	33,359	557	60

Data as of December 1, 2019; blank cells indicate no participation in that program





## 25th Anniversary Spotlight

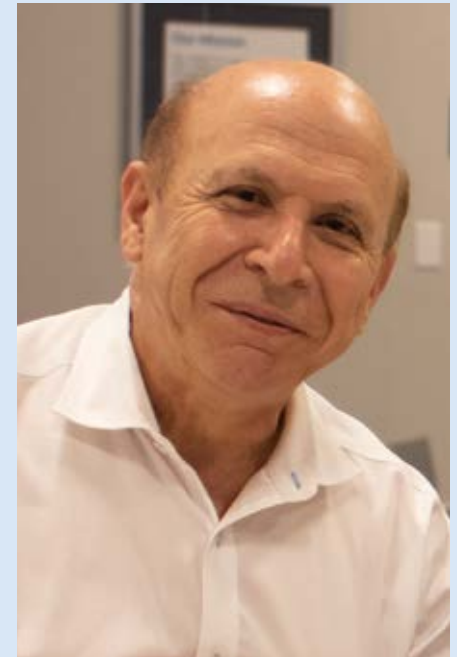
### Jacob Sweidan, M.D.: Caring for Orange County and Leaving a Legacy

Jacob Sweidan, M.D., was caring for Medi-Cal members long before CalOptima launched, so it was only natural for him to be involved at the beginning in 1995. He was a trusted advisor to CalOptima's founding Chief Executive Officer Mary Dewane, helping to establish relationships with providers across Orange County and build a robust Medi-Cal provider network. In the early days, Dr. Sweidan gave lectures on managed care and capitation to providers who were not familiar with the concepts.

Then and now, Dr. Sweidan says he loves what he does as a pediatrician, neonatologist and medical student advisor. "My purpose is to help my patients get the care they need and to teach new doctors how to provide care in a compassionate manner. When my patients get better, I'm happy. When my fellow physicians treat patients with kindness and attentiveness, I know that my job is done. I want my legacy to be that I've done something right for the community."

Dr. Sweidan sees his community on a grand scale. "My patients are family," he says. "It fills me with joy to deliver the next generation of babies whose moms I delivered 30 years ago. My connections go beyond the walls of hospitals and clinics. I've attended special 15th birthday celebrations, graduations and football games." Dr. Sweidan's own son, Alexander, is an internist who also serves CalOptima members.

As a current member of the CalOptima Provider Advisory Committee, Dr. Sweidan is not ready to slow down. "By continuing to work with CalOptima and being part of its initiatives, I see that there are new resources and programs that benefit my patients and their mental, physical and overall health. I'm proud to be part of CalOptima's growth for the past 25 years."



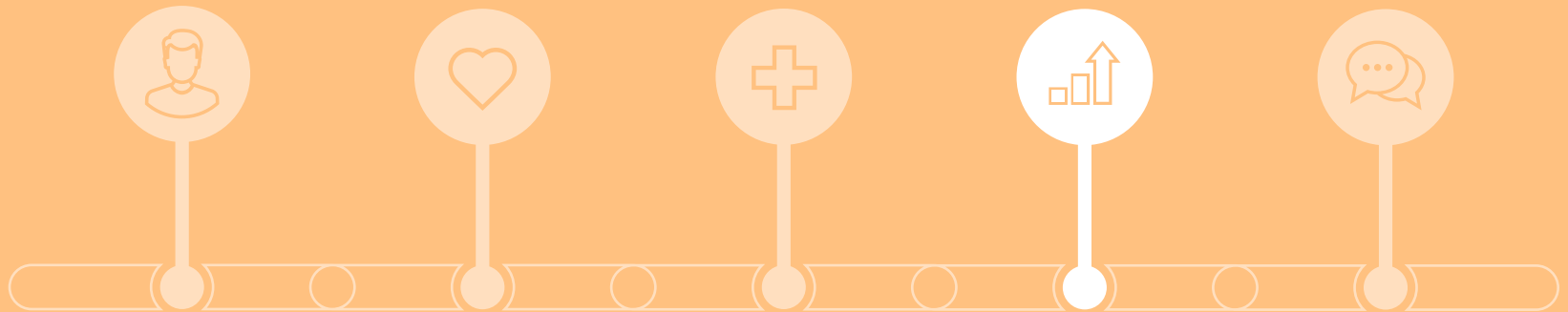
*Jacob Sweidan, M.D., represents his fellow physicians on CalOptima's Provider Advisory Committee.*

## Provider Relations Reps Reach Out To Community Network

The face of CalOptima isn't just one person — it's 14 different people in the Provider Relations department. Providers contracted with CalOptima Community Network enjoy personalized support from these individuals in a variety of ways. During visits to provider offices (more than 1,100 in 2019!) and over the phone, the reps answer questions about regulatory requirements and coverage, offer information about new programs or incentives, and generally serve as go-to resources for all things CalOptima. Provider Relations reps also specialize, with some focusing on certain provider types, such as hospitals, long-term care facilities or behavioral health providers. Strengthening our business relationships with providers encourages them to build better bonds with members, too.

## Delivery System Study Assesses Current, Future Provider Network

In 2019, CalOptima engaged Pacific Health Consulting Group to conduct a thorough review of our delivery system, including the health networks at its core. Using input from a comprehensive, months-long process of meetings and interviews with stakeholders, the consultants will produce a final report in early 2020 that makes observations about our current operations and recommendations for the future. Key issues being considered are provider access, cost and quality performance. CalOptima's Board may use the study results to guide further enhancements to our outstanding delivery system.

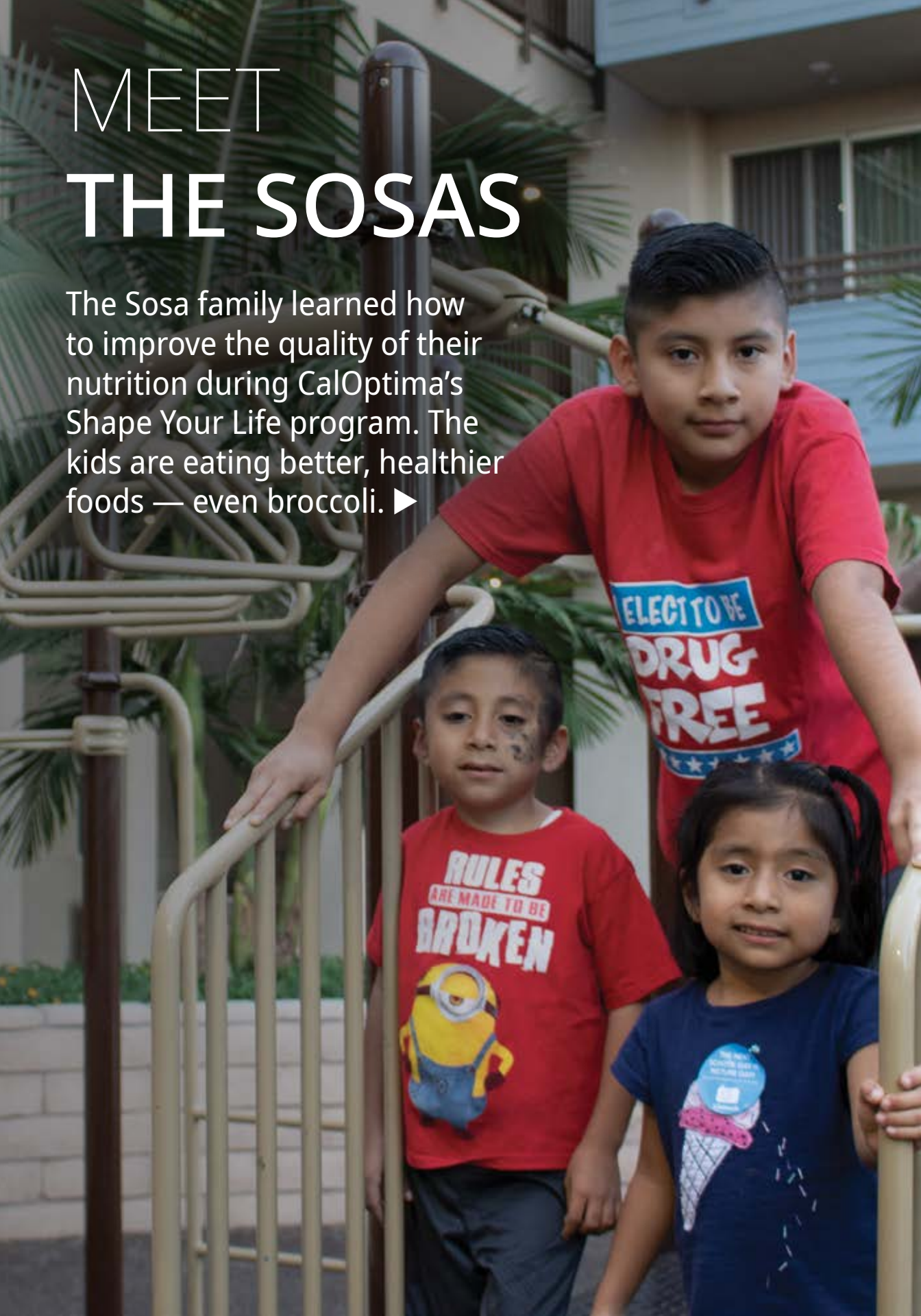


# CONNECTING: QUALITY

CalOptima's past, present and future are linked to quality. In 1995, we were created to solve a problem with lack of access to quality care for Orange County's Medi-Cal population. By partnering with providers and engaging stakeholders for support, CalOptima has done more than just fix the gap. We have earned recognition as one of the best Medi-Cal plans in the state, receiving a top rating from the National Committee for Quality Assurance for the past six years in a row. You share the honor of this achievement, and together we will continue moving upward. Read on to learn about quality initiatives now and for the future.

# MEET THE SOSAS

The Sosa family learned how to improve the quality of their nutrition during CalOptima's Shape Your Life program. The kids are eating better, healthier foods — even broccoli. ►







*CalOptima Health Educator Leslie Martinez (left) teaches Diana, Daniel and David Sosa about nutritious eating habits.*

## Cooking for a family of five is never an easy task.

Different food preferences made it challenging for Alejandra Ruiz, a mom of three, to prepare a meal everyone would eat. “My youngest and oldest child tried to eat different foods, but my middle child only ate meat, spaghetti, tacos and M&M’s.”

Siblings Daniel, 10, David, 6, and Diana, 4, also face challenges when it comes to fighting the temptation of tasty, sugary treats. So, when the family was asked to participate in Shape Your Life, a six-week interactive nutrition program that teaches parents and children how to improve their eating habits, they jumped right in without hesitation.

“The health educator taught my kids about the consequences of eating too much sugar and junk food,” Alejandra says. “I tried telling them the same message, but I wasn’t as impactful as the health educator. I’m really glad I went through the program because it showed me what I needed to do to ensure my children have well-balanced meals.”

CalOptima’s Population Health Management department developed Shape Your Life as a quality initiative that supports healthy lifestyles for CalOptima members, according to Leslie Martinez, the health educator who led the sessions the Sosa family attended. Each program includes a 45-minute group presentation then 45 minutes of physical activity for the kids while a separate parent session is held. More sessions are planned for 2020. They will be led by CalOptima or contracted community partners, which increases access for members.

Nearly a year after their Shape Your Life session, the Sosa children are proud to say they love broccoli and organic foods. Alejandra says, “The kids now enjoy going to the grocery store with me to carefully pick out their snacks by reading the nutrition labels and making sure what we’re eating is organic.”

## NCQA Continues to Honor CalOptima's Quality

CalOptima is on roll when it comes to recognition by the National Committee for Quality Assurance (NCQA). Across five years, from September 2014 to September 2019, CalOptima was the top rated Medi-Cal plan in California, according to the NCQA's Medicaid Health Insurance Plan Ratings. For 2019–20, CalOptima continues to be among the highest rated Medi-Cal plans in the state and nation. No other Medi-Cal plan in California earned higher than CalOptima's 4 out of 5 rating, and only 15 health plans nationwide scored higher. We share this honor with you and our entire provider community. It takes remarkable effort to deliver reliable, quality care year after year. We all can be especially proud because NCQA ratings measure what matters most — health care outcomes and member satisfaction.

## OneCare Earns Four Stars From Medicare

Even our smaller health plans deliver big on quality. OneCare, which serves about 1,500 members, is rated a 4-star plan overall for 2020. It is the second year in a row our plan serving members who are dually eligible for Medicare and Medi-Cal received that rating via the Medicare Star Rating System, which assesses how well plans perform in several categories, with 5 being the highest and 1 being the lowest. The stars add a little more sparkle to OneCare, which celebrates its 15th anniversary in 2020.

## Quality Measures Moving Up in All Programs

The Healthcare Effectiveness Data and Information Set (HEDIS) is the bedrock of most quality efforts in managed care. HEDIS measures look back to reveal health



*At a community event, CalOptima Health Educator Jaime Najera (right) shares health tips with Medi-Cal members and mom-daughter pair Ashley Diaz (left) and Aaliyah Carrasco (center).*

plan performance in preventive care and treatments, and CalOptima always strives for continuous improvement. And improve we did. For the most recent measurement year, 42 out of 62 measures (68%) are better in Medi-Cal, 26 out of 43 measures (60%) are better in OneCare Connect and 12 out of 27 measures (44%) are better in OneCare.

## State Sets Higher Quality Standards

In 2019, CalOptima Medi-Cal hit the Department of Health Care Services (DHCS) quality performance target, but the bull's-eye is moving up. Starting in 2020, because of quality concerns uncovered in a statewide audit, DHCS will measure plans using its new Managed Care Accountability Set, based on quality measures for adults and children from the federal Centers for Medicare & Medicaid Services standards. The state is also raising the Minimum Performance Level, requiring California plans to perform at the 50th percentile of Medicaid plans nationwide or face corrective action and sanctions. With your support and partnership, CalOptima is gearing up to jump the new higher hurdle.



### Commendable Accreditation

CalOptima earned NCQA Accreditation at the Commendable level for 2019–20.

# 4/5

### Top NCQA Rating

Our current NCQA rating of 4 out of 5 puts CalOptima among the top California Medi-Cal plans.




### State Standards

CalOptima Medi-Cal met or exceeded all of DHCS' Minimum Performance Levels for 2019.



### Quality Gains

Sixty percent of OneCare Connect quality measures improved in 2019.



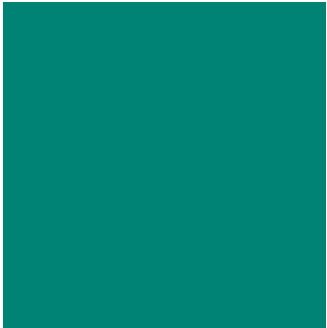
### Cancer Screenings

About 217,500 members were screened for breast cancer, cervical cancer or colorectal cancer, during the period January 2018–September 2019.




### Flu Prevention

About 186,800 members ages 18–64 received a flu shot in 2018.



### Adolescent Immunizations


About 14,600 adolescent members got all their recommended vaccines by their 13th birthday, during the period January 2018–September 2019.





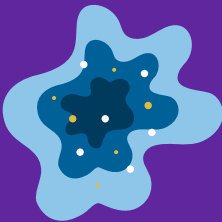
### Fully Vaccinated Toddlers

About 12,700 children in Medi-Cal got all recommended vaccines by their second birthday, during the period January 2018–September 2019.



### Prevention at PACE

Nearly all PACE participants (94%) have received a pneumococcal vaccination, as of June 2019.





### PACE’s Low Infection Rates

In 2018, PACE’s respiratory infection and skin infection rates were about five times lower than the national benchmarks.

### Well-Care Visits

More than 63,500 children in Medi-Cal ages 3–6 received well-care visits, during the period January 2018–September 2019.





### On Time to PACE

Vans make more than 5,000 trips to the PACE center each month, with a 96% on-time record.



### Decreased Hospitalization

PACE participants are staying in the hospital less, with nearly a 10% decrease in the annual rate of hospital days since 2018.







*CalOptima employees celebrate recognition from the Department of Health Care Services for outstanding performance by a large-scale Medi-Cal plan in 2019. It is our fifth straight year receiving this honor from the state.*

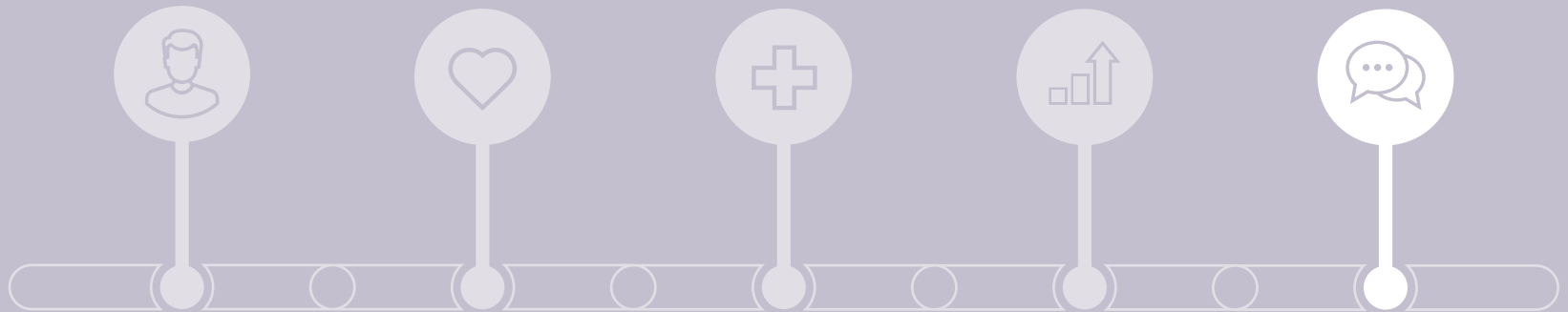
## Infection Control Program Is National Example

Twenty-seven Orange County nursing homes are harnessing PIPQI power to fight superbugs, and CalOptima is helping to generate the force by offering \$2.3 million in incentives. PIPQI (Post-Acute Infection Prevention Quality Initiative) protects nursing home residents from dangerous infections using a new, clinically proven bathing regime. Bathing residents with chlorhexidine (CHG) antiseptic soap instead of standard soap and using iodine nasal swabs every other week reduces colonization of multidrug-resistant organisms. Colonization means the organism is present on the skin and could cause illness. UC Irvine Professor of Infectious Diseases Susan Huang, M.D., developed the program in collaboration with CalOptima, and it is strongly supported by the Centers for Disease Control and Prevention. The protocol was tested in 16 CalOptima-contracted nursing homes since 2017, resulting in a significant decrease in the presence of antibiotic-resistant organisms and a reduction of inpatient hospital stays due to infection, according to CalOptima Deputy Chief Medical Officer Emily Fonda, M.D.

Dr. Fonda is leading the effort to expand PIPQI, with plans to train personnel and implement the program in all of CalOptima's contracted facilities. "This is a unique opportunity to implement a cutting-edge best practice that is on the national radar," Dr. Fonda says. Furthermore, PIPQI's quality results will be published in an academic journal and presented at a health care-associated infections conference this year.

## Population Health Management Replaces Disease Management

People are not their disease, and there is widespread recognition that the common term "disease management" is out of step with industry thinking. So, in 2019, CalOptima adopted the forward-looking moniker of Population Health Management for our department that combines great minds in health care quality. Our health coaches, health educators, registered dietitians and others serve the populations that need them most, such as members with diabetes, congestive heart failure, asthma and obesity, and work with them toward the best health outcomes possible.



# CONNECTING: COMMUNITY

CalOptima is, in technical terms, a County Organized Health System, so our connection to Orange County is built in and runs deep. It began 25 years ago when a community-based group of advocates, providers and elected officials first entrusted CalOptima with providing access to quality health care for 180,000 vulnerable, low-income residents. Over time, membership grew and so did the importance of community partnerships. Collaboration with community-based organizations, county agencies, advocacy groups and many others is a defining element of CalOptima. Thank you for working with us and holding us accountable to do our best. Read on to learn about CalOptima's engagement with people and places across Orange County.

A portrait of an older man with grey hair and glasses, smiling. He is wearing a light-colored button-down shirt. The background is a blurred green foliage.

# MEET LAP

In June 2018, Lap Nguyen became a participant at the Garden Grove CalOptima Program of All-Inclusive Care for the Elderly (PACE), but now — by choice — much of his care is delivered elsewhere. ►





*PACE Acacia Social Worker Anne Le (left) engages Lap Nguyen in conversation about his improving health.*

## **Unique partnerships with Community-Based Adult Services (CBAS) centers offer PACE participants more access to care throughout Orange County.**

In 2018, PACE engaged the centers through the Alternative Care Settings (ACS) strategy, and more than 60 participants now get many of their health care needs met closer to home. Lap, 68, is a great example of ACS in action. He attends PACE Acacia.

"Before coming here, I did not have support getting medical care," he says. "That has all changed. Now I have good doctors and great staff to help me get the services I need and want. I enjoy the activities offered, like the Vietnamese music and English as a Second Language classes. I feel my health and overall well-being has improved."

The PACE team of social workers, rehabilitation therapists and providers have seen a change in Lap since his enrollment. "Lap has definitely grown as a participant since he joined PACE and transitioned to PACE Acacia," says Thanh Duong, PACE social worker. "Before PACE, he was very isolated at home due to his disability. Now he has gained confidence and self-esteem, and he is motivated to engage in social interactions." Anne Le, Lap's social worker at PACE Acacia, adds: "His regular attendance enhances his coping skills and reduces depressive feelings. He says he's feeling better physically and emotionally."

With plans to add more ACS sites in the coming year, CalOptima PACE will continue to improve the lives of participants like Lap. "We know PACE is making a difference for our seniors," says Elizabeth Lee, PACE director. "They have a higher quality of life, get to live longer at home, and experience fewer hospitalizations, emergency room visits and nursing home days. Many participants benefit from our partnership with CBAS. It is truly invaluable for their health."

## Advisory Committees Represent Diverse Community Perspectives

It's community representation at its finest. CalOptima's five advisory committees ensure our agency and Board of Directors stay connected to the priorities and perspectives of members and providers across Orange County. This is no small endeavor, as there are currently 46 committee members engaged across these groups: Member Advisory Committee, OneCare Connect Member Advisory Committee, Whole-Child Model Family Advisory Committee, Provider Advisory Committee and Investment Advisory Committee. And the committees themselves meet a total of 34 times throughout the year. The depth and breadth of our advisory committee efforts reflect CalOptima's commitment to understand and respond to the community we serve.

## Community Alliances Forums Gather Orange County Leaders

There aren't many events that welcome a large cross-section of community organization leaders, but the Community Alliances Forum is one of them. For more than a decade, CalOptima has strengthened partnerships and collaboration among the community through our Community Alliances Forums. Organized and hosted by CalOptima, with support from a long list of partners, the goal of these quarterly meetings is to bring together community-based organizations, Orange County agencies, health care providers and nonprofit groups. Guest speakers provide education and information about health-related issues and health initiatives that affect Orange County, and there's time to network, too. Literally thousands have attended, likely including you!



### OC Events

CalOptima participated in 156 community meetings and health fairs in 2019.



### Community Grants

Twelve organizations have been awarded \$20.1 million in grants for health care programs.



### Legislative Ties

In 2019, CalOptima staff attended nearly 40 events hosted by an elected official or featuring a legislator as keynote speaker.



### Community Volunteers

CalOptima employees have volunteered nearly 350 hours at community events.

## Grants Fund Innovative Health Care Programs

A dozen organizations can now expand their impact on the health of Orange County residents, thanks to \$20.1 million in community grants approved in late 2019 by the CalOptima Board. The funding supports seven priority areas, and great programs are planned. We can't wait to see these groups in action.

- 1. Expand access to outpatient children's mental health services**
  - Children's Bureau of Southern California, \$3.4 million
  - Orange County Asian and Pacific Islander Community Alliance, \$685,000
  - Boys & Girls Clubs of Garden Grove, \$325,000
  - Jamboree Housing Corp., \$450,000
- 2. Integrate children's mental health services into primary care**
  - CHOC Children's, \$4.3 million
  - Friends of Family Health Center, \$600,000
- 3. Increase access to medication-assisted treatment**
  - Coalition of Orange County Community Health Centers, \$6 million
- 4. Expand access to food distribution services focused on children and families**
  - Serve the People, \$1 million
- 5. Increase access to children's dental services**
  - Coalition of Orange County Community Health Centers, \$500,000
  - Healthy Smiles for Kids of Orange County, \$500,000
- 6. Increase access to adult dental services**
  - Korean Community Services Health Center, \$1 million
- 7. Support primary care services and programs addressing social determinants of health**
  - Santa Ana Unified School District, \$1.4 million

# Proud of Our Partners

These groups are our allies in presenting the popular Community Alliances Forums. They help us select the topics, organize materials and promote attendance. Thank you to all!

- Access California Services
- Alzheimer's Orange County
- CalOptima PACE
- Child Behavior Pathways UC Irvine Health
- CHOC Children's
- Coalition of Orange County Community Health Centers
- Community Health Initiative of Orange County
- Community Legal Aid Society SoCal
- CSUF for Healthy Neighborhoods
- Family Support Network
- Help Me Grow
- Meals on Wheels Orange County
- Mission Hospital
- Orange County Office on Aging
- PHFE WIC Program
- Planned Parenthood of Orange & San Bernardino Counties
- Regional Center of Orange County
- Santa Ana Unified School District
- State Council on Developmental Disabilities Orange County Office
- Susan G. Komen Orange County
- United Cerebral Palsy of Orange County
- Vitas Healthcare

# In the Neighborhood

Residents in these top 10 cities are more likely to have their health care coverage in common, and it's from CalOptima.

<b>Santa Ana</b> .....	129,000 members
<b>Anaheim</b> .....	117,000 members
<b>Garden Grove</b> .....	69,000 members
<b>Westminster</b> .....	38,000 members
<b>Irvine</b> .....	35,000 members
<b>Fullerton</b> .....	30,000 members
<b>Orange</b> .....	30,000 members
<b>Huntington Beach</b> .....	29,000 members
<b>Buena Park</b> .....	22,000 members
<b>Costa Mesa</b> .....	22,000 members

*Average monthly membership figures as of October 2019*

## Purple People Movers

CalOptima's purple PACE vans are on the move across Orange County, making round trips to pick up participants from their homes, deliver them safely to the Garden Grove PACE center and then back again. Each month, the fleet of 17 vans travels approximately 25,000 miles. Seeing purple on the freeway is a lot more fun than seeing red.







## 25th Anniversary Spotlight

### The Evolution of CalOptima's Name and Brand

Did you know that CalOptima wasn't always CalOptima? If you were part of the health care community in 1993–95, you might. The name used in founding documents was O.P.T.I.M.A. — complete with the periods because it was an acronym. It stood for Orange Prevention & Treatment Integrated Medical Assistance. O.P.T.I.M.A. was a “doing business as” name for our public agency, which was and still is officially known as Orange County Health Authority. At the time, the O.P.T.I.M.A. name was already being used by another organization. So, shortly before the launch of our Medi-Cal plan in October 1995, a “Cal” was added to the “Optima,” and the periods were dropped. CalOptima (one word) was born.

The look of CalOptima's brand changed over the years as well. It moved from a literal connection to Orange County by including the leafy orange in the logo to a more figurative image of integrated care with the full-circle “O” at the center. The current brand, adopted in 2009, uses the same “O” and adds our motto of “Better. Together.” It was an important change to reflect both our heritage as a community-based health plan and our pledge to collaborate with others to achieve quality care for members.

1995  
2009

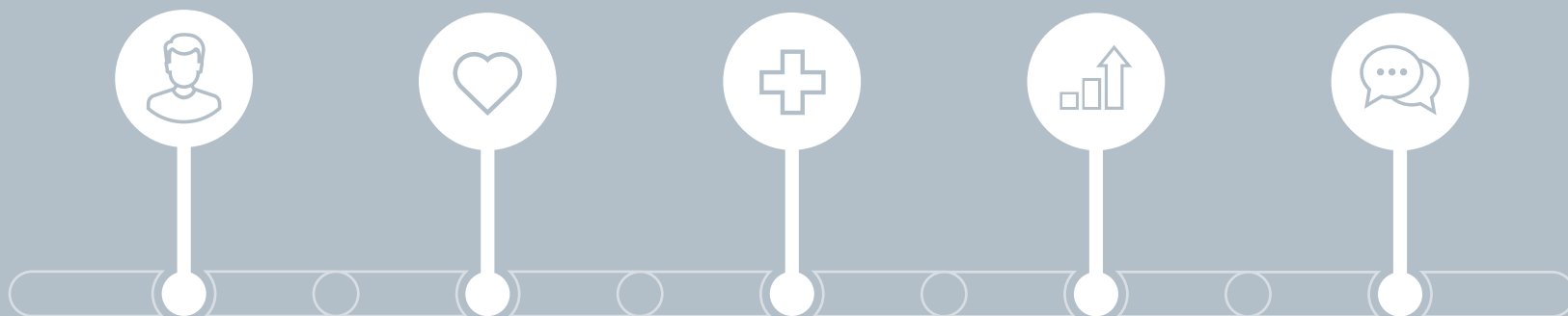


## PBS SoCal Carries CalOptima Messages for the Community

Since July 2019, children and parents watching Sesame Street, Daniel Tiger, Curious George and other PBS Kids favorites may have learned a little something from CalOptima, too. For the first time, CalOptima is partnering with PBS to carry preventive health care messages to millions of people in the public television viewing community. Thus far, three different 15-second educational spots have aired hundreds of times on PBS Kids and PBS SoCal, raising awareness about regular well-baby checks, healthy nutrition and exercise for adolescents, and flu prevention. CalOptima's sponsorship of PBS Kids is also being mentioned regularly in “thank you” spots that reflect our support for the programming. So tune in today to catch a glimpse of CalOptima community engagement on the air.

## CalOptima Offers Satellite Office in Westminster

At the corner of Magnolia Street and McFadden Avenue in Westminster — that's where you can find a treasure trove of resources, the County Community Service Center. CalOptima operates a satellite office at the center through a partnership with the Orange County Social Services Agency. Our staff is available Monday–Friday, from 8 a.m. to 5 p.m., to help members understand their benefits so they can better access CalOptima programs and services. Members can also get assistance with resolving customer service issues, navigating mental health benefits, or enrolling in the OneCare Connect and PACE programs. Also represented at the center are Orange County Health Care Agency, Office on Aging and Clerk-Recorder.



# CONNECTING: THE FUTURE

As the prior pages show, CalOptima has a lot going on in the present. But we are also actively working on our future. CalOptima's next three-year Strategic Plan starts now — 2020 — and it extends through 2022. We just completed a comprehensive development process to arrive at five strategic priorities and objectives. You may have even helped to shape them. CalOptima engaged our Board, executive team, advisory committee leaders, health networks and the community in public meetings to discuss what to focus on in the years to come. This Better. Together. approach creates stronger results and clearer direction. Read on to learn about CalOptima's path forward.

# Strategic Priorities and Objectives

Our members are the essential focus of the strategic priorities and objectives for the 2020–2022 Strategic Plan and are supported by the programs and services provided by CalOptima.



## Innovate and Be Proactive

- Anticipate Likely CMS and DHCS Priorities
- Identify and Collaborate on Local Priorities and Needs
- Leverage New Federal and State Programs and Services to Improve Access and Quality of Care for Members
- Seek Opportunities to Further Integrate Care for Members



## Expand CalOptima's Member-Centric Focus

- Focus on Population Health
- Strengthen Provider Network and Access to Care
- Enhance Member Experience and Customer Service



## Strengthen Community Partnerships

- Increase Collaboration with Providers and Community Stakeholders to Improve Care
- Utilize Strong Advisory Committee Participation to Inform Additional Community Engagement Strategies



## Increase Value and Improve Care Delivery

- Evaluate and Implement Value-Based Purchasing Strategies that Drive Quality
- Deploy Innovative Delivery Models to Address Social Determinants of Health and Homelessness
- Maintain Focus on Providing High-Quality Care to Members



## Enhance Operational Excellence and Efficiency

- Maintain Strong Culture of Compliance
- Preserve CalOptima's Financial Stability
- Invest in Infrastructure and Efficient Processes
- Engage Workforce and Identify Development Opportunities



# CalOptima Financials Reflect Transparency and Efficiency

As a public agency, CalOptima is accountable for managing public resources wisely so we can fulfill our commitment to members while maintaining long-term sustainability. You can see our dedication to this principle in our 25-year legacy of careful financial stewardship.

Across time, our spending patterns have been consistent, with about 95 cents of every dollar going toward medical expenses and about 4 cents of every dollar for administrative costs. More is available to spend on members' health care because of CalOptima's prudent management of resources. In fact, we typically have among the lowest administrative costs compared with all health plans in California.

To ensure accuracy and transparency, CalOptima financials are fully audited each year, and we routinely receive clean audit results. On this page and the next, you will find a current look at CalOptima membership (which drives our budget), operating ratios, and FY 2019 medical and administrative expenses. Further details are always available in our monthly performance reports, provided for every Board of Directors meeting. The goal is to keep the community informed and affirm our commitment to financial stewardship.

## CalOptima Membership

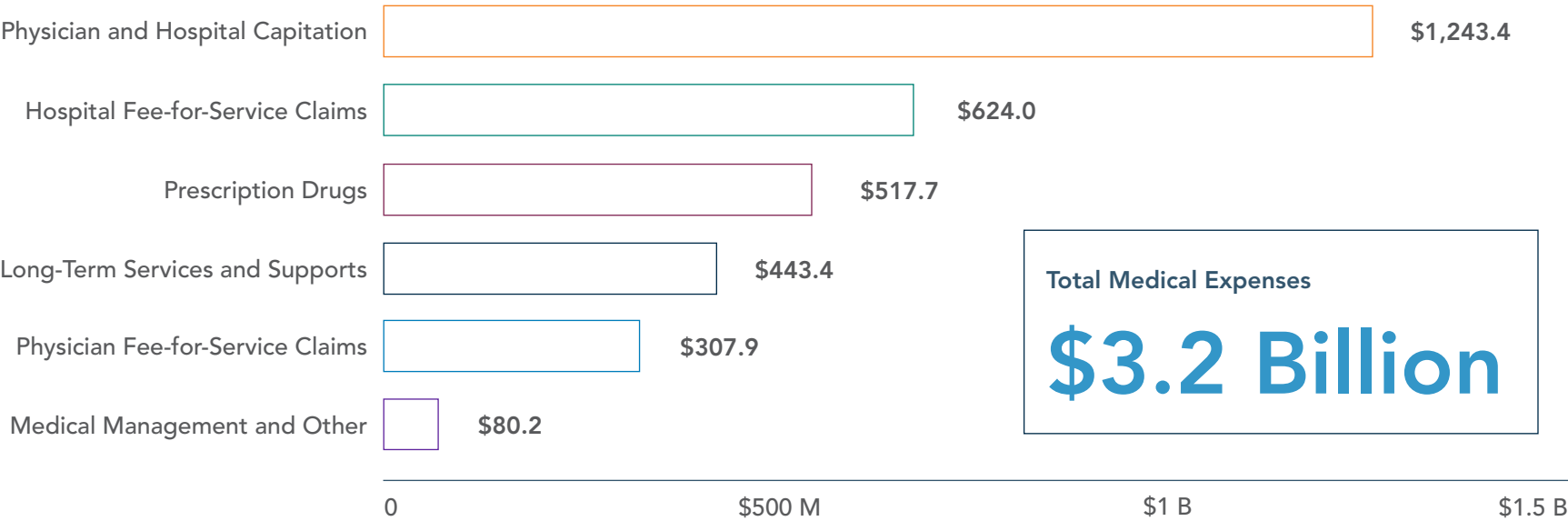
	FY 2017	FY 2018	FY 2019	FY 2020 Budgeted
<b>Medi-Cal</b>	772,228	763,824	743,936	718,592
<b>OneCare Connect</b>	15,505	14,768	14,123	13,780
<b>OneCare</b>	1,121	1,418	1,537	1,520
<b>PACE</b>	212	267	327	430
<b>Total Membership</b>	<b>789,066</b>	<b>780,277</b>	<b>759,923</b>	<b>734,322</b>

## Operating Ratios

	FY 2017	FY 2018	FY 2019	FY 2020 Budgeted
<b>Medical Loss Ratio</b>	95.8%	95.5%	92.6%	95.3%
<b>Administrative Loss Ratio</b>	3.2%	3.8%	3.8%	4.4%
<b>Operating Margin</b>	1.0%	0.6%	3.7%	0.3%
<b>Current Ratio</b>	<b>1.08</b>	<b>1.20</b>	<b>1.32</b>	<b>1.32*</b>

*\*Estimated based on FY 2019 ratio*

# Medical Expenses Distribution for FY 2019 by Category (in Millions)



# Administrative Expenses Distribution for FY 2019 by Category (in Millions)



# Governing With Mission in Mind

CalOptima’s 10-member Board of Directors provides effective oversight that connects us to our mission. If you have attended a Board meeting, then you have seen our directors in action. They are driven to consider the present needs of members and providers at the same time they guide CalOptima’s success in the future health care landscape. Our directors’ varied backgrounds ensure we see issues from all sides. Volunteering their time and knowledge, CalOptima directors fill seats designated to represent physicians, health networks, hospitals, community clinics, the public, the county and most of all, the members.

## Board of Directors

<b>Paul Yost, M.D. (Chair)</b> Anesthesiologist, CHOC Children’s and St. Joseph Hospital <i>Designated seat: Licensed physician, representing a health network</i>	<b>Ron DiLuigi</b> Retired Health Care Executive <i>Designated seat: Legal resident of Orange County</i>	<b>Richard Sanchez, REHS, MPH</b> Director, Orange County Health Care Agency <i>Designated seat (non-voting): Orange County Health Care Agency Director</i>
<b>Dr. Nikan Khatibi (Vice Chair)</b> Anesthesiologist, Pain Specialist and Addiction Medicine Physician <i>Designated seat: Licensed medical professional, not representing a health network</i>	<b>Andrew Do</b> Orange County Board of Supervisors Supervisor, First District <i>Designated seat: Orange County Board of Supervisors</i>	<b>J. Scott Schoeffel</b> Attorney <i>Designated seat: Legal, finance or accounting professional</i>
<b>Ria Berger</b> CEO, Healthy Smiles for Kids of Orange County <i>Designated seat: Community clinic representative</i>	<b>Alexander Nguyen, M.D., MPH</b> Psychiatrist, Long Beach Veterans Affairs Medical Center <i>Designated seat: CalOptima member or family member of a CalOptima member</i>	<b>Michelle Steel</b> Orange County Board of Supervisors Supervisor, Second District <i>Designated seat: Orange County Board of Supervisors</i>
<b>Doug Chaffee</b> Orange County Board of Supervisors Supervisor, Fourth District <i>Designated seat: Orange County Board of Supervisors (alternate)</i>	<b>Lee Penrose</b> Health Care Executive <i>Designated seat: Current or former hospital administrator</i>	

# Leading With Member-Centric Focus

As an executive team, we bring diverse skills and expertise that combine in working toward our common purpose — members’ health. Together with more than 1,400 employees and countless community stakeholders we are focused on realizing CalOptima’s vision: To be a model public agency and community health plan that provides an integrated and well-coordinated system of care to ensure optimal health outcomes for all our members.

## Executive Leadership

<b>Michael Schrader</b> Chief Executive Officer	<b>Len Rosignoli</b> Chief Information Officer	<b>Candice Gomez</b> Executive Director, Program Implementation
<b>Gary Crockett</b> Chief Counsel	<b>Emily Fonda, M.D.</b> Deputy Chief Medical Officer	<b>Betsy Ha</b> Executive Director, Quality and Population Health Management
<b>Nancy Huang</b> Chief Financial Officer	<b>Diana Hoffman</b> Deputy Chief Counsel	<b>Tracy Hitzeman, RN</b> Executive Director, Clinical Operations
<b>Ladan Khamseh</b> Chief Operating Officer	<b>Belinda Abeyta</b> Executive Director, Operations	<b>Silver Ho</b> Executive Director, Compliance
<b>David Ramirez, M.D.</b> Chief Medical Officer	<b>Brigette Gibb</b> Executive Director, Human Resources	<b>Michelle Laughlin</b> Executive Director, Network Operations



# Connecting CalOptima to Stakeholder Input

CalOptima relies on valuable ideas and input from leaders who directly serve the community. You might even recognize many of the well-regarded individuals who have seats on our five advisory committees. They are the essential connections in helping us understand member, provider and financial interests. Through regularly scheduled meetings, our committee members can easily bring the needs and concerns of those they represent to our attention. These insights reveal our community's priorities and influence CalOptima programs.

## Member Advisory Committee

**Christine Tolbert (Chair)**

Community Program Specialist II, State Council on Developmental Disabilities  
*Persons with Special Needs Representative*

**Pamela Pimentel, RN (Vice Chair)**

Chief Executive Officer, MOMS Orange County  
*Children Representative*

**Diana Cruz-Toro**

Policy and Quality Assurance Senior Administrative Manager, Social Services Agency  
*Recipients of CalWORKs Representative*

**Sandra Finestone**

Executive Director, Association of Cancer Patient Educators  
*Adult Beneficiaries Representative*

**Connie Gonzalez**

Administrative Manager I, Social Services Agency  
*Social Services Agency Representative*

**Sally Molnar**

Public Policy Chair, Susan G. Komen for the Cure  
*Medically Indigent Persons Representative*

**Patty Mouton**

Vice President, Outreach and Advocacy, Alzheimer's Orange County  
*Medi-Cal Beneficiaries Representative*

**Jaime Muñoz**

Administrative Manager II, Social Services Agency  
*Foster Children Representative*

**Ilia Rolon**

Health Policy and Programs Director, Children and Families Commission of Orange County  
*Family Support Representative*

**Sr. Mary Therese Sweeney**

Director, St. Joseph Health  
*Persons With Mental Illness Representative*

**Mallory Vega**

Vice President of Direct Care Services, Alzheimer's Orange County  
*Seniors Representative*

**Vacant Seats**

*Consumer Representative*  
*Orange County Health Care Agency Representative*  
*Long-Term Services and Supports Representative*  
*Persons with Disabilities Representative*

## OneCare Connect Member Advisory Committee

**Patty Mouton (Chair)**

Vice President, Outreach and Advocacy, Alzheimer's Orange County  
*Seniors Representative*

**Gio Corzo (Vice Chair)**

Vice President, Home & Care Services, Meals on Wheels Orange County  
*Community-Based Adult Services Provider Representative*

**Jyothi Atluri**

Deputy Director, Social Services Agency  
*Orange County Social Services Agency Representative*

**Josefina Diaz**

*OneCare Connect Member/Family Member Representative*

**Sandra Finestone**

Executive Director, Association of Cancer Patient Educators  
*Members With Disabilities Representative*

**Keiko Gamez**

*OneCare Connect Member/Family Member Representative*

**Sara Lee**

Supervising Attorney, Health Consumer Action Center of Community Legal Aid Society SoCal  
*Members From an Ethnic or Cultural Community Representative*

**Mario Parada**

*In-Home Supportive Services or Union Provider Representative*

**Donald Stukes**

*Member Advocate Representative*

**Erin Ulibarri, MPH**

Manager, Information and Assistance, Orange County Office on Aging  
*Orange County Office on Aging Representative*

**Vacant Seats**

*Long-Term Care Facility Representative*  
*OneCare Connect Member/Family Member Representative*  
*Orange County Health Care Agency Representative*  
*Orange County In-Home Supportive Services Public Authority Representative*

## Provider Advisory Committee

**John H. Nishimoto, O.D., MBA,**

**FAAO (Chair)**

Ketchum University  
*Non-Physician Medical Practitioner Representative*

**Teri Miranti (Vice Chair)**

Executive Director of Government Programs, Monarch HealthCare  
*Health Network Representative*

**Anjan Batra, M.D., MBA, FHRS**

Professor, Division Chief and Vice Chair of Pediatrics, UC Irvine  
*Physician Representative*

**Tina Bloomer, WHNP, FNP, MSN**

AltaMed  
*Nurse Representative*

**Donald Bruhns**

Director of A/R, Rehabilitation Center of Orange County  
*Long-Term Services and Supports Representative*

**Jena Jensen**

Chief Government Relations Officer, CHOC Children's  
*Traditional/Safety Net Representative*

**John P. Kelly, M.D.**

President, Platinum Orthopedics  
*Physician Representative*

**Junie Lazo-Pearson, Ph.D., BCBA-D**

Advanced Behavioral Health  
*Behavioral/Mental Health Representative*

**Craig G. Myers**

Consultant, Orange County Community Health Centers  
*Community Health Centers Representative*

**Pat Patton, MSN, RN**

Chief Nursing Officer, UC Irvine Health  
*Hospital Representative*

**Jacob Sweidan, M.D., FAAP**

Pediatrician and Neonatologist, Medical Group of Orange County Inc.  
*Physician Representative*

**Loc Tran, Pharm.D.**

All Care Pharmacy  
*Pharmacy Representative*

**Vacant Seats**

*Allied Health Services Representative*  
*Long-Term Services and Supports Representative*  
*Orange County Health Care Agency Representative*

## Whole-Child Model Family Advisory Committee

**Maura Byron (Chair)**

*Authorized Family Representative*

**Cathleen Collins**

*Authorized Family Representative*

**Sandra Cortez-Schultz**

Customer Service Manager, CHOC Children's  
*Community-Based Organization Representative*

**Brenda Deeley**

*Authorized Family Representative*

**Kathleen Lear**

*Consumer Advocate Representative*

**Kristen Rogers**

*Authorized Family Representative*

**Malissa Watson**

*Authorized Family Representative*

**Vacant Seats**

*Authorized Family Representatives (4)*

## Investment Advisory Committee

**Patrick Moore (Chair)**

Attorney at Law  
Patrick Moore Law Corp.

**Peggy Eckroth**

Executive Vice President, Retired  
Autumn Capital Investment Services

**Caroline Harkins**

Senior Vice President, Southern California Regional Manager  
Bridge Bank

**Nancy Huang**

Chief Financial Officer and Treasurer  
CalOptima

**Rodney Johnson**

Senior Director, Finance-Treasury  
Los Angeles County Metropolitan Transportation

**Susan Munson**

Founder and CEO  
Fixed Income Academy

**David Young, CFA**

Founder and CEO  
Anfield Capital Management



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