

CalViva Health Finance Committee Meeting Minutes

Meeting Location CalViva Health 7625 N. Palm Ave., #109 Fresno, CA 93711

March 20, 2025

	Finance Committee Members in	Attendance	CalViva Health Staff in Attendance
✓	Daniel Maychen, Chair	✓	Cheryl Hurley, Director, HR/Office
✓	Jeff Nkansah, CEO	✓	Jiaqi Liu, Director of Finance
✓	Paulo Soares		Hector Torres, Sr. Accountant & MIS Analyst
✓	Joe Neves		
√ *	Supervisor Rogers		
✓	John Frye		
✓	Rose Mary Rahn		
		✓	Present
	·	*	Arrived late/Left Early
		•	Teleconference

AGENDA ITEM / PRESENTER	MOTIONS / MAJOR DISCUSSIONS	Comments	ACTION TAKEN
#1 Call to Order	The meeting was called to order at 11:30 am, a quorum was present.		
D. Maychen, Chair			
#2 Finance Committee Minutes	The minutes from February 20, 2025, Finance meeting were approved as read.		Motion: Minutes were
dated February 20, 2025			approved
Attachment 2.A			6-0-0-1
Action, D. Maychen, Chair			(Neves / Rahn)
#3 Financials – as of January 31,	As of January 2025, total current assets were approximately \$436.2M; total		Motion: Financials as
2025	current liabilities were approximately \$272.6M. Current ratio is approximately 1.6.		January 31, 2025, were
	TNE as of January 2025 was approximately \$173.4M, which is approximately 620%		approved
Action	above the minimum DMHC required TNE amount.		7-0-0-0
D. Maychen, Chair			(Frye / Neves)

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	As of January 2025, interest income actual recorded was approximately \$6.8M, which is approximately \$4.3M more than budgeted due to interest rates being higher than projected. Premium capitation income actual recorded was approximately \$1.18B which is approximately \$108.2M more than budgeted primarily due to MCO taxes being higher than projected. In December 2024, CMS approved a revised MCO tax which substantially increased the MCO tax from the first revision. In addition, enrollment and rates were higher than projected. Total Cost of Medical Care expense actual recorded was approximately \$787.1M which is approximately \$89.3M more than budgeted due to enrollment and rates being higher than projected.		
	Admin Service Agreement fees expense actual recorded was approximately \$33.5M which is approximately \$1.8M more than budgeted due to enrollment being higher as more members have been retained through the redetermination process. MCO taxes actual recorded was approximately \$344.7M which is approximately \$15.8M more than budgeted due to the revised MCO taxes. Telephone expense actual recorded was approximately \$32K, which is approximately \$7K more than budgeted due to the Plan's previous phone service provider increasing the rates stating the Plan was on a legacy platform. In response to that increase, the Plan obtained bids from other phone service providers and has now transitioned to a different phone service provider at a much lower cost.		
	Total net income through January 2025 was approximately \$11.7M, which is approximately \$6.8M more than budgeted primarily due to interest income being approximately \$4.3M higher than projected, and rates and enrollment being higher than projected.		
#4 Fiscal Year 2026 – Proposed Budget Budget Assumptions Proposed Budget	Basic assumptions were revised from information presented at the February Finance meeting. The Plan is accounting for impacts to the budget due to changes at the Federal and State levels for Medicaid, particularly accounting for an additional decrease in enrollment.	John Fry asked if the Medicaid change takes place October 1, 2025?	
Action D. Maychen, Chair	Medical revenue is projected to be approximately \$2B which is approximately \$198M more than budgeted in FY 2025 primarily due to an increase in MCO taxes by approximately \$190M, an increase in capitation rates net of a decrease in membership. Interest income is projected to be approximately \$5M, which is \$1M more than	Daniel Maychen stated details are unknown at this time. Rose Mary Rahn asked if the Plan is aware of how much of the UIS	

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	budgeted in FY 2025 due to the fact that it appears the Federal Reserve is going to	population is related to	
	be slower in decreasing the rates relative to what the Plan budgeted in FY 2025	the additional funds the	
	and allocating additional funds to the money market funds account.	State is requesting for	
		Medi-Cal expenditures?	
	Medical Cost expense is projected to be approximately \$1.2B, which is		
	approximately \$9.3M more than budgeted due to an increase in rates net of	Daniel Maychen stated	
	decrease in membership.	approximately \$2.7B	
	A best of the second se	was related to the UIS	
	Admin Services fee expense is projected to be approximately \$52.1M which is	population. Daniel	
	approximately \$1.6M less than budgeted due to enrollment declining as a result	also cited higher	
	of the end of the COVID eligibility flexibilities ending June 30, 2025, and potential changes to Medicaid at the Federal and State levels.	pharmaceutical costs	
	trianges to Medicalu at the Federal and State levels.	and higher enrollment specifically related to	
	Salary and wage expense is projected to be approximately \$5.4M which is	seniors in comparison	
	approximately \$406K more than budgeted due to accounting for up to 5% raise in	to what the State	
	salaries, 8% increase in insurance premiums, and succession planning efforts for	initially budgeted and	
	key management positions nearing retirement age.	in comparison to prior	
		years as reasons for the	
	Consulting and accreditation expense is projected to be approximately \$545K	overage.	
	which is an increase by \$145K as the Plan is looking to hire a retention consultant		
	who will be focused on member satisfaction and dissatisfaction, and looking into		
	ways the Plan can increase and/or retain membership.		
	License expense is projected to be approximately \$1.8M which is approximately	***	
	\$356K more than budgeted in FY 2025 due to the projected increased assessment	Paulo Soares asked,	
	fee by DMHC.	from an enrollment	
		standpoint, what is the	
	MCO taxes projected to be \$753.5M which is an approximate increase of \$190M	Plan projecting as far	
	more than what was budgeted in FY 2025 due to the MCO tax that was revised in	as a decrease?	
	December 2024 by CMS, which substantially increases the MCO taxes through	Daniel Maychen's	
	December 2026.	response the Plan's	
	Other income generated through monted in come for the healthing to an income	projection is	
	Other income, generated through rental income for the building, is projected to be approximately \$355K which is approximately an \$80K decrease primarily due	approximately 50,000	
	to the uncertainty of a current tenant renewing their lease.	which closely reflects	
	to the uncertainty of a current tenant renewing their lease.	the undocumented	
	Capital Expenditure budget is projected to be \$600K, which is a \$100K increase	population.	
	due to accounting for potential tenant improvements to current vacant office		
		Paulo Soares asked	

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AGENDA ITEM / PRESENTER		Comments	ACTION TAKEN
ACENDATIENT FALSENTER	space. Net Income is projected to be approximately \$9M which is approximately a \$338K increase in comparison to FY 2025 primarily due to interest income being higher by approximately \$1M due to higher interest rates net of a decrease in membership.	about the MCE population as well? Daniel Maychen responded the MCE population is about 25% of the Plan's membership, which would have an impact to CalViva. To be conservative, the Plan did account for potential program and enrollment changes by reducing enrollment projections and capitation rates, but the Plan is unsure if the federal government will definitely make program changes to the MCE population at this time.	
#5 Announcements	The official DMHC financial examination audit report was received and there were no findings noted. The tentative April 2025 meeting will be moved to June as a result of any potential		
	material changes to Medicaid by the State in May 2025.		

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#6 Adjourn	Meeting was adjourned at 11:46 am		

Submitted by:

Cheryl Hurley, Clerk to the Commission

Dated: 0-10-25

Approved by Committee:

Daniel Maychen, Committee Chairperson

Dated: 5 | 15 | 25