



October 10, 2016  
Ms. Chelsea Guest  
Manager, Actuarial Services  
Oregon Health Authority  
500 Summer Street N.E.  
Salem, OR 97301

**Subject: Oregon Health Plan CY2017 CCO Rate Development**

Dear Chelsea:

Thank you for the opportunity to assist the Oregon Health Authority (OHA) with the development of the January – December 2017 Coordinated Care Organizations (CCOs) capitation rates. It was a pleasure to work with the OHA team throughout this project. The following report summarizes the methodology used for the development of the capitation rates, effective January 1, 2017 – December 31, 2017. We have also provided our actuarial certification for these capitation rates, compliant with CMS guidelines and requirements. Please send me an e-mail at [zachary.aters@optumas.com](mailto:zachary.aters@optumas.com) or call me at 480.588.2495 if you have any questions.

Sincerely,

A handwritten signature in black ink that reads "Zach Aters". The signature is fluid and cursive, with the first name "Zach" being more prominent than the last name "Aters".

Zachary Aters, ASA, MAAA  
Senior Actuary, Optumas

CC: Steve Schramm, **Optumas**  
Jessica Grado, **Optumas**  
Barry Jordan, **Optumas**  
Martin McNamara, **Optumas**

**Oregon Health Authority**

**CCO Rate Development Actuarial Certification**

January 1, 2017 – December 31, 2017 Capitation Rates

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## 1. Background

Since September 2012, the State of Oregon has contracted with Coordinated Care Organizations (CCOs) to provide coordinated care to its Medicaid-eligible population; there are currently 16 CCOs that will cover the population in CY17. The goal of the CCO program is to achieve the triple aim of better health, better health care, and lower per capita cost. As of September 2014, 90% of the Oregon Health Plan (OHP) members were enrolled in CCOs for one or more of Physical Health, Mental Health, and Dental services, while 10% were enrolled in Fee-for-Service (FFS).

CCOs are categorized into several types, depending on the services provided by the CCO:

1. CCO-A: Physical Health, Mental Health, NEMT, and Dental services
2. CCO-B: Physical Health, Mental Health, and NEMT services
3. CCO-E: Mental Health and NEMT services
4. CCO-F: Dental and NEMT services
5. CCO-G: Mental Health, Dental, and NEMT services

Populations covered within the CCO program are categorized into the following major categories of aid:

1. Temporary Assistance to Needy Families (TANF)
2. Poverty Level Medical (PLM) Adults
3. PLM, TANF, and Children's Health Insurance Program (CHIP) Children
4. Blind, Disabled, and General Assistance Client (AB/AD) and Old Age Assistance (OAA)
5. Children in Adoptive, Substitute, or Foster Care (CAF)
6. Affordable Care Act (ACA) Adults
7. Breast Cancer and Cervical Cancer Program (BCCP)

The populations noted above are covered statewide, the statewide population has been split into the following rating regions:

1. Central/Eastern Region
2. Northwest Region
3. Southwest Region
4. Tri-County Region

Please see Appendix I.A for a map of the rating regions.

The remainder of this report provides further detail surrounding the populations and services covered, as well as the data, assumptions, and adjustments used to develop the CY17 capitation rates. The appendices contain substantiation and summaries related to the rate development that may provide insight into particular adjustments and/or the overall rate methodology.

## 2. Rate Development Process

### 2.01 Overview

As mentioned above, there are 16 CCOs across the state; the size and business model differ across the various CCOs. The chart below shows CY15 enrollment by CCO (Including the BCCP population):

CCO	CY 2015 MMs
Allcare CCO, Inc.	586,817
Cascade Health Alliance, LLC.	196,245
Columbia-Pacific CCO, LLC.	299,935
Eastern Oregon Coordinated Care Org., LLC.	567,788
FamilyCare, Inc.	1,456,042
Health Share of Oregon	2,792,111
InterCommunity Health Network, Inc.	658,578
Jackson County CCO, LLC.	350,162
PacificSource Community Solutions, Inc. (Central)	632,577
PacificSource Community Solutions, Inc. (Gorge)	154,046
Primary Health of Josephine County, LLC	134,771
Trillium Community Health Plan, Inc.	1,071,399
DCIPA, LLC. Abn Umpqua Health Alliance	313,807
Western Oregon Advanced Health, LLC	240,077
Willamette Valley Community Health, LLC	1,172,579
Yamhill County Care Organization, Inc.	267,808

The following key concepts were considered when developing the rate methodology for the Oregon Medicaid program:

- 1) **Rating Regions** – Oregon could be considered a predominantly rural state with a handful of metropolitan areas. Due to its rurality, there are differences in practice patterns (e.g., access to care) depending on where a CCO's member base is concentrated. These differences need to be considered when developing rating regions.
- 2) **Credibility** – Because of the overall size of some of the CCOs, credibility needs to be considered to mitigate random fluctuations in base data. Addressing credibility in the base data will assist in mitigating some of the unexplained variance/change in specific CCOs' reported experience.
- 3) **Member Risk Differential** – Having 16 unique CCOs serving the same populations results in a disparity in the underlying member risk of the covered populations amongst the CCOs. A risk score tool should be considered to assist in better quantifying each CCO's membership risk.
- 4) **Differences in Hospital Utilization** – There are two different types of reimbursement for hospitals in the Oregon Medicaid program: DRG reimbursement (DRG-based hospitals) and Cost to Charge reimbursement (Type A/B hospitals). The A/B hospitals are facilities that are rurally located, which are generally more costly than the urban DRG hospitals. Depending on a CCO's member base, the mix of these facilities that make up the overall hospital utilization can be significantly different. To account for the inherent risk differences between CCO hospital costs, CCO inpatient and outpatient mix between DRG and A/B facilities needs to be considered.

- 5) **Differences in CCO Specific Contracting** – Each CCO may have different contracting agreements with its physicians and hospitals. Therefore, consideration needs to be given to the underlying differences in reimbursement between the CCOs.
- 6) **Data Quality** – Having 16 very different CCOs results in varying degrees of data quality with respect to reported expenditures. The actuary needs to explore any significant differences by each CCO and make appropriate adjustments to the base data.
- 7) **Expansion Population** – Like most states that have expanded, Oregon has seen significant increases in their eligibility due to the number of members enrolling in the program under the ACA expansion cohort. This increase in membership has changed the risk landscape of the program. Given the fact that this is a new population, the underlying risk profile for these expansion members needs to be explored regularly by the actuary until a stable baseline can be established.

The rate methodology described in this certification is centered around the idea of creating rating regions from which a regional benchmark will be developed for each rating cohort. This regional approach is then supplemented with the development of CCO specific risk factors that reflect the unique risk of each CCO. These risk factors are applied to the regional benchmark resulting in CCO payment rates that are commensurate with the CCOs' unique risk.

The state is split into four rating regions shown below (see Appendix I.A for rating region map):

CCO	County	Region
Allcare CCO, Inc.	Curry	Southwest
Allcare CCO, Inc.	Douglas	Southwest
Allcare CCO, Inc.	Jackson	Southwest
Allcare CCO, Inc.	Josephine	Southwest
Cascade Health Alliance, LLC.	Klamath	Central/Eastern
Columbia-Pacific CCO, LLC.	Clatsop	Northwest
Columbia-Pacific CCO, LLC.	Columbia	Northwest
Columbia-Pacific CCO, LLC.	Tillamook	Northwest
DCIPA, LLC. Abn Umpqua Health Alliance	Douglas	Southwest
Eastern Oregon Coordinated Care Org., LLC.	Baker	Central/Eastern
Eastern Oregon Coordinated Care Org., LLC.	Gilliam	Central/Eastern
Eastern Oregon Coordinated Care Org., LLC.	Grant	Central/Eastern
Eastern Oregon Coordinated Care Org., LLC.	Harney	Central/Eastern
Eastern Oregon Coordinated Care Org., LLC.	Lake	Central/Eastern
Eastern Oregon Coordinated Care Org., LLC.	Malheur	Central/Eastern
Eastern Oregon Coordinated Care Org., LLC.	Morrow	Central/Eastern
Eastern Oregon Coordinated Care Org., LLC.	Sherman	Central/Eastern
Eastern Oregon Coordinated Care Org., LLC.	Umatilla	Central/Eastern
Eastern Oregon Coordinated Care Org., LLC.	Union	Central/Eastern
Eastern Oregon Coordinated Care Org., LLC.	Wallowa	Central/Eastern
Eastern Oregon Coordinated Care Org., LLC.	Wheeler	Central/Eastern
FamilyCare, Inc.	Clackamas	Tri-County



CCO	County	Region
FamilyCare, Inc.	Marion	Tri-County
FamilyCare, Inc.	Multnomah	Tri-County
FamilyCare, Inc.	Washington	Tri-County
Health Share of Oregon	Clackamas	Tri-County
Health Share of Oregon	Multnomah	Tri-County
Health Share of Oregon	Washington	Tri-County
InterCommunity Health Network, Inc.	Benton	Northwest
InterCommunity Health Network, Inc.	Lincoln	Northwest
InterCommunity Health Network, Inc.	Linn	Northwest
Jackson County CCO, LLC.	Jackson	Southwest
PacificSource Community Solutions, Inc. (Central)	Crook	Central/Eastern
PacificSource Community Solutions, Inc. (Central)	Deschutes	Central/Eastern
PacificSource Community Solutions, Inc. (Central)	Jefferson	Central/Eastern
PacificSource Community Solutions, Inc. (Central)	Klamath	Central/Eastern
PacificSource Community Solutions, Inc. (Gorge)	Hood River	Central/Eastern
PacificSource Community Solutions, Inc. (Gorge)	Wasco	Central/Eastern
Primary Health of Josephine County, LLC	Douglas	Southwest
Primary Health of Josephine County, LLC	Jackson	Southwest
Primary Health of Josephine County, LLC	Josephine	Southwest
Trillium Community Health Plan, Inc.	Benton	Southwest
Trillium Community Health Plan, Inc.	Coos	Southwest
Trillium Community Health Plan, Inc.	Douglas	Southwest
Trillium Community Health Plan, Inc.	Lane	Southwest
Trillium Community Health Plan, Inc.	Linn	Southwest
Western Oregon Advanced Health, LLC	Coos	Southwest
Western Oregon Advanced Health, LLC	Curry	Southwest
Western Oregon Advanced Health, LLC	Douglas	Southwest
Willamette Valley Community Health, LLC	Benton	Northwest
Willamette Valley Community Health, LLC	Clackamas	Northwest
Willamette Valley Community Health, LLC	Linn	Northwest
Willamette Valley Community Health, LLC	Marion	Northwest
Willamette Valley Community Health, LLC	Yamhill	Northwest
Willamette Valley Community Health, LLC	Polk	Northwest
Yamhill County Care Organization, Inc.	Clackamas	Northwest
Yamhill County Care Organization, Inc.	Marion	Northwest
Yamhill County Care Organization, Inc.	Polk	Northwest
Yamhill County Care Organization, Inc.	Washington	Northwest
Yamhill County Care Organization, Inc.	Yamhill	Northwest

Each CCO has a risk factor for each rating cohort and the risk factor is applied in a budget neutral manner across each rating region. The risk factor is comprised of the following components:

- 1) Risk Score – using CDPS+RX risk tool
- 2) A/B Hospital Adjustment – captures impact of hospital mix

The goal of the rate development process was to develop a payment rate for each rating cohort within each rating region for each CCO using a regional methodology that is consistent with all applicable guidelines and Actuarial Standards of Practice (ASOPs):

- ASOP 5 – Incurred Health and Disability Claim
- ASOP 23 – Data Quality
- ASOP 41 – Actuarial Communications
- ASOP 45 – The Use of Health Status Based Risk Adjustment Methodologies
- ASOP 49 – Medicaid Managed Care Capitation Rate Development and Certification

The payment rate is the certifying actuary's best estimate that is developed to reflect the inherent risk of the covered population for each CCO, matching payment to risk across all CCOs.

OHA and **Optumas** emphasize a transparent and collaborative approach to the rate development; as such, OHA and **Optumas** have had numerous touchpoints with each CCO over the course of the past few months to discuss various aspects of the rate methodology. In order to provide the CCOs an opportunity to address any remaining concerns/questions related to the rate methodology, OHA/**Optumas** requested that each CCO submit their questions/comments in writing by Wednesday October 5, 2016. OHA and **Optumas** then conducted calls with each region, a total of four calls, to address the submitted questions. **Optumas** has included the CCO questions and responses in Appendix XI.

## 2.02 Base Data

### Data Reporting

As part of the CY17 Rate Development process, **Optumas** relied on the following data sources to compile base data used in the process. Each subsequent data source was trended forward to CY17:

1. CY14 and CY15 detailed dental encounter data (Incurred 1/1/2014 – 12/31/2015) provided by the Oregon Health Authority (OHA). This data is paid through April 30, 2016, and was used in the development of the Dental rates.
2. CY15 detailed encounter data (Incurred 1/1/2015 – 12/31/2015) provided by the Oregon Health Authority (OHA). This data is paid through April 30, 2016.
3. CY15 eligibility file – this data contains monthly, member-level enrollment information such as enrollment status, CCO enrolled, county of residence, and category of aid.
4. CY15 and YTD CY16 (January -June) Pharmacy Supplemental Template submitted by most CCOs to assist in informing HEP-C adjustment and pharmacy trends.
5. CY15 financial templates (Incurred 1/1/2015 – 12/31/2015), paid through March 31, 2016, reported by CCOs. These financial templates were provided by each CCO and contain enrollment volume and medical costs, inclusive of encounterable costs, subcapitated

arrangements, and additional incentive payments made to providers outside of the encounter data, including costs related to flexible services.

As part of the data validation process, **Optumas** worked in conjunction with the Oregon Health Authority (OHA) and each CCO, to ensure that a reconciliation between reported costs (financial template) and base data (encounter data, subcapitated expenditures, supplemental payments) used in rate development was completed. To the extent that adjustments were necessary to the base data, adjustments were made to reflect all reasonable allowed expenditures from the financial template. Additional detail surrounding the base data adjustments can be found in section 2.03 of this report.

## Covered Services

The services covered under the CCO program vary by CCO type. The rating categories of service used in the development of the CY16 rates are listed below, by CCO type. A value of “X” indicates that these services are covered by the particular CCO type; grey shading indicates that a service is excluded from a particular CCO type’s benefit package:

COS	CCO-A	CCO-B	CCO-E	CCO-F	CCO-G
A & B Inpatient	X	X			
DRG Inpatient	X	X			
Other Inpatient	X	X			
A & B Outpatient	X	X			
DRG Outpatient	X	X			
Other Outpatient	X	X			
Physician Services	X	X			
Substance Abuse	X	X			
Prescription Drugs	X	X			
DME and Miscellaneous	X	X			
Mental Health Services Inpatient	X	X	X		X
Mental Health Services Non-Inpatient	X	X	X		X
NEMT	X	X	X	X	X
Dental	X			X	X

## Covered Populations

The populations covered under the CCO program have been grouped into various rating categories of aid (COA). The rating COAs included in the CY17 rate development are included in the table below:

COA	Description
TANF	Temporary Assistance to Needy Families (TANF) - Ages 19 to 64
PLMA	Poverty Level Medical (PLM) Female Adults
CHILD 00-01	PLM, TANF, and CHIP - Age Under 1
CHILD 01-05	PLM, TANF, and CHIP - Ages 1 to 5
CHILD 06-18	PLM, TANF, and CHIP - Ages 6 to 18
DUAL-MEDS	Blind, Disabled, and General Assistance Client (AB/AD) and Old Age Assistance (OAA) - Duals

COA	Description
ABAD & OAA	Blind, Disabled, and General Assistance Client (AB/AD) and Old Age Assistance (OAA) - Non-Duals
CAF	Children in Adoptive, Substitute, or Foster Care
ACA 19-44	Affordable Care Act (ACA) - Expansion Male and Female Adults Ages 19-44
ACA 45-54	Affordable Care Act (ACA) - Expansion Male and Female Adults Ages 45-54
ACA 55-64	Affordable Care Act (ACA) - Expansion Male and Female Adults Ages 55-64
BCCP	Breast and Cervical Cancer Program

In addition to the rating cohorts noted above, a separate maternity supplemental rate has been developed for members who fall within one of these COAs and incur a delivery event. Details surrounding the rate development for the COAs noted above, as well as the maternity supplemental case rate, can be found in subsequent sections throughout this report.

### Covered Regions

As part of the rate development process, **Optumas** has developed four rating regions within Oregon for the CCO program: Tri-County, Northwest, Southwest, and Central/Eastern. The development of the CY17 rates relies significantly upon regionally aggregated base data. The rating regions are intended to provide additional credibility, considering the small sample size of some CCOs within the program. Additionally, the regions are designed in a way that groups CCOs based on coverage in like-geographical areas.

The grouping of each CCO into the four rating regions is shown in the table below:

CCO	Region
Allcare CCO, Inc.	Southwest
Cascade Health Alliance, LLC.	Central/Eastern
Columbia-Pacific CCO, LLC.	Northwest
DCIPA, LLC. Abn Umpqua Health Alliance	Southwest
Eastern Oregon Coordinated Care Org., LLC.	Central/Eastern
FamilyCare, Inc.	Tri-County
Health Share of Oregon	Tri-County
InterCommunity Health Network, Inc.	Northwest
Jackson County CCO, LLC.	Southwest
PacificSource Community Solutions, Inc. (Central Oregon)	Central/Eastern
PacificSource Community Solutions, Inc. (Columbia Gorge)	Central/Eastern
Primary Health of Josephine County, LLC	Southwest
Trillium Community Health Plan, Inc.	Southwest
Western Oregon Advanced Health, LLC	Southwest
Willamette Valley Community Health, LLC	Northwest
Yamhill County Care Organization, Inc.	Northwest

### 2.03 Base Data Adjustments

After compiling the encounter data provided by OHA, as well as costs reported by each CCO in its financial template related to the subcapitated arrangements and incentive programs, multiple adjustments were required to ensure that the base data was an appropriate starting point to project

capitation rates for the CY17 contract period. The following section describes adjustments made to the base data in the development of the CY17 capitation rates.

## Underreporting/Reconciliation Adjustments

**Optumas** received CY15 encounter data for each CCO through OHA, which was used as the basis for the base data development. Once the encounter data was compiled, adjustment factors were developed to align the encounter data with costs reported in each CCO's financial template. The first adjustment has been referred to as the 'Reconciliation Adjustment'; the purpose of this adjustment is to adjust the raw encounter data for specific costs known to be missing from the original data submission, as well as to remove the impact of known subcapitated encounters that were included in the raw encounter data. An underreporting adjustment was then developed to account for any additional costs that were underreported in the detailed encounter data, but indicative of non subcapitated costs. The combination of these two adjustments is used to ensure consistency with all reasonable costs reported by each CCO.

Once the Underreporting/Reconciliation adjustments were complete, **Optumas** added CCO-reported costs related to subcapitated arrangements, plus costs related to provider incentive programs, and additional prevention/outreach.

The impact of the Underreporting and Reconciliation adjustments to the base data, shown by CCO and COA, can be found in Appendix I.B.

After developing the base data using the process noted above, **Optumas** met with OHA and each CCO to develop what has been referred to as the "triangulation" process. This process was used as a validation process between the CY15 base data, CY15 CCO-reported financials, and each CCO's reported CY15 Exhibit L, to ensure consistency between the various sources; the Exhibit L report is a report of revenue and expenditures prepared by each CCO. This report is reconciled to the CCOs' audited financial statement, to ensure accuracy of the reported figures.

Costs related to the following were itemized within the reported financial template to assist in informing CCO specific adjustments

1. Maternity
2. Quality Pool Related Costs
3. NEMT
4. A&D Residential
5. ACT/SE
6. MH Children's Wraparound
7. CANS

To the extent that discrepancies between the data sources existed, reconciliation efforts were completed between **Optumas**, OHA, and each CCO to ensure a consistent base data starting point for the CY17 rates.

## Reimbursement Adjustments

During the 2015 financial review process, **Optumas** found that some CCOs were reporting a significant increase in per member spending from 2014 to 2015, while others were reporting sustainable or low rates of growth. In aggregate, the per-member per-month costs from 2014 to 2015 grew at a rate of 8.6% as reported by CCOs. This growth rate far out-paced the expected sustainable rate of growth of 3.4%.

OHA asked **Optumas** to explore the drivers for CCOs that experienced significant increases, and found the following drivers:

- Increased reimbursement to providers between 2014 to 2015 for specific CCOs
- Surplus payouts to providers (incentive payments) for specific CCOs
- Increased pharmacy costs (both generic and brand) affecting all CCOs
- Increased A/B hospital costs for specific CCOs

Given the noted reimbursement increases and increased incentives, OHA asked **Optumas** to conduct a reimbursement analysis across the program to further understand the changes over time. Appendix VIII contains a summary and description of the reimbursement analysis and associated policies.

It should be noted that OHA does not dictate the reimbursement arrangements between CCOs and providers. Each CCO is encouraged to engage in contracting arrangements that are best suited for their business model. However, increased expenditures due to surpluses and increased reimbursement due to previously high revenue associated with the CY14 ACA rate, cannot be perpetuated within the rate development as this would result in program costs that are not sustainable for OHA. **Optumas** reviewed the magnitude of the adjustments and determined that the adjusted base data still reflected a reimbursement level that would provide appropriate access to the covered members.

## Regional Base Data

Once the base data was adjusted to reflect all reasonable costs for each CCO, **Optumas** developed a regional blended base data set. Since 16 CCOs of various size operate within the state, the idea of credibility comes into play, particularly when using one year of base data as the basis for the rate development process. In an effort to curb the credibility concern, the regional base was developed for the following regions, as discussed in section 2.02 of this report:

1. Central/Eastern Region
2. Northwest Region
3. Southwest Region
4. Tri-County Region

The regional base data was used as the starting point to develop the CY17 regional rates. The aggregate per member, per month (PMPMs) for each COA and region can be found in Appendix I.C.

## 2.05 Program Changes/Rate Add-ons

Prospective program change adjustments recognize the impact of eligibility or benefit changes occurring after the base period. The following subsections summarize all applicable prospective program changes.

### Applied Behavioral Analysis Adjustment

Effective July 1, 2016, OHA is requiring all managed care entities to offer Applied Behavior Analysis (ABA) treatment to all eligible enrollees. This new benefit will impact the following populations:

- All children cohorts (Child 00-01, 01-05, 06-18)
- ABAD/OAA
- CAF

This adjustment was included and described within the mid-year CY16 rate addendum approved by CMS. Since there is no emerging experience available and no new information has been released that would alter the previous estimate, **Optumas** has included the same adjustment for CY17. Below is the narrative that was submitted as part of the mid-year addendum.

Since ABA treatment is a new service to the CCO program, **Optumas** relied on national data, recent publications, and state experts to help inform the impact of implementing ABA services. The following considerations were made during the development of the ABA adjustment:

- 1) The prevalence of children diagnosed with an Autism Spectrum Disorder (ASD) – to calculate the potential number of children with Autism who may seek an ABA service, **Optumas** assumed *1 out of 88 children (or 1.1%)* will be diagnosed with ASD, which is consistent with some national prevalence estimates
- 2) Take-up rate adjustment – based on ABA provider feedback, an ultimate take-up rate was developed, to reflect the fact that not all members eligible for ABA services will seek treatment; this was developed as a range, as shown below:

*At the lower bound, it is assumed that 40% of children eligible for ABA treatments will receive services.*

*At the upper bound, it is assumed that 50% of children eligible for ABA treatments will receive services.*

- 3) A distribution of ABA program hours by age – after the take-up rate was developed, the number of annual hours for ABA treatment was varied by age based on ABA provider input. The assumption surrounding the decrease in hours as age increases, is due to both the child making improvements and to the fact that other programs will be made available to the child as the child ages. The following table illustrates the assumed service utilization by discrete age:

Age	Service Utilization
0	0.0%
1	0.0%
2	0.0%
3	100.0%

Age	Service Utilization
4	100.0%
5	100.0%
6	76.9%
7	46.2%
8	30.8%
9	23.1%
10	15.4%
11	15.4%
12	7.7%
13	7.7%
14	7.7%
15	7.7%
16	7.7%
17	7.7%
18	7.7%
19	7.7%
20	7.7%

- 4) Estimated monthly costs by age – **Optumas** leveraged national annual cost estimates to calculate monthly costs for ASD services. Monthly costs were then varied by age (using the percentages noted in #2 above) based on ABA provider input as well as the assumption that costs will decrease in accordance to the decline in service utilization.

*At the lower bound, monthly costs are estimated at \$4,167.*

*At the upper bound, monthly costs are estimated at \$5,000.*

- 5) Access to care adjustment – Based on CCO and OHA feedback, an adjustment was made to account for potential service limitations due to an inadequate ABA provider network.

*At the lower bound, it is assumed that 35% of children seeking ABA treatments will receive services.*

*At the upper bound, it is assumed that 55% of children seeking ABA treatments will receive services.*

The projected PMPM associated with these new services was applied to the regional base data prior to the application of regional specific non-medical load that is described in section 2.07.

Due to the variability inherent in estimating the impact of adding ABA services to the program, OHA has implemented a risk corridor for the ABA services, for the service period July 1, 2016 – December 31, 2017. More detail surrounding the risk corridor definitions and thresholds can be found in Appendix IX.

The estimated impact as well as the non-medical load for all program changes noted in the certification, by CCO and category of aid, can be found in Appendices II-VII.



**Back Pain Benefit Adjustment**

This adjustment was included and described within the mid-year CY16 rate addendum approved by CMS. Since there is no emerging experience available and no new information has been released that would alter the previous estimate, **Optumas** has incorporated the same methodology in developing the estimate. Below is the narrative that was submitted as part of the mid-year addendum:

The Health Evidence Review Commission (HERC) has approved changes to the coverage for the treatments of back conditions in the Oregon Health Plan (OHP). These benefit changes will take effect July 1, 2016. The intent of this benefit change is to help people with back problems resume normal activities. Until now, OHP has limited treatment options for members who report muscle weakness and/or other signs of nerve damage. As of July 1<sup>st</sup>, treatments will become available for all back conditions. Before treatment begins, providers will assess patients to determine their level of risk for chronic back pain, and whether they meet criteria for surgical consultation. Based on the results of the assessment, one or more of the following conservative care treatments can be offered to OHP enrollees:

- Acupuncture
- Chiropractic manipulation
- Cognitive Behavioral therapy
- Medications (including short-term opiate drugs)
- Osteopathic manipulation
- Physical and occupational therapy
- And if available,
  - Yoga
  - Massage
  - Supervised exercise therapy

Consistent with the CCO rate development, the base data used to quantify the impact of the back pain benefit was calendar year 2014 (CY14) encounter data provided by OHA. To identify the target populations (i.e. members with back pain conditions), **Optumas** leveraged a technical document supplied by HERC which contained all back pain diagnosis codes and was used to identify members who would be eligible for the aforementioned treatments. It was also determined that the CY14 encounters could potentially be understated in regards to back pain diagnoses since these conditions were not previously treated under OHP and therefore relevant diagnoses could have been omitted from the encounter data. To account for this data limitation, **Optumas** also included recipients who did not have a back pain diagnosis but utilized more than 90 days of opioids during the year. It was assumed that recipients with this level of opioid utilization could be prone to having chronic back pain.

Other considerations that were reviewed during the development of the back pain benefit adjustment are as follows:

- 1) Member duration – since CY14 encounter diagnoses were used to identify the target population, **Optumas** wanted to ensure that a member's duration would not impact the assumed prevalence of back pain claimants. To quantify the back pain population, **Optumas** only included members with 6+ months of duration during CY14.
- 2) Target subpopulations – After identifying the total back pain population, **Optumas** proceeded to parse out the back pain members into two subpopulations; *Surgical* (high risk) and *Non-Surgical*

(low risk). The purpose of identifying these subpopulations was to vary utilization of treatments in relation to a member's level of chronicity.

- 3) Varying treatment utilization – it is assumed that the number of utilizers between the *Surgical* and *Non-Surgical* populations will vary since the level of risk is dependent upon a member's back pain condition. To account for this variation, **Optumas** assumed the following prevalence percentages:

*For Surgical members, a 50% prevalence is assumed at the lower and upper bound, to account for the fact that a portion of this population will have already received care in the form of surgical treatment, rather than the conservative care noted above.*

*For Non-Surgical members, 37.5% and 75% prevalence is assumed at the lower and upper bound, respectively.*

- 4) Access to care adjustment – Based on CCO and OHA feedback, an adjustment was made to account for potential service limitations due to provider network constraints.

*At the lower bound, it is assumed that 50% of enrollees seeking back pain treatments will receive the conservative care services, across all populations.*

*At the upper bound, it is assumed that 75% of enrollees seeking back pain treatments will receive the conservative care services, across all populations.*

- 5) Average number of conservative care treatments – as part of the back pain benefit change, OHP enrollees are now eligible for 30 conservative care visits. **Optumas** assumed a 9.97 average number of visits based on provider feedback as well as a review of the number of physical therapy/chiropractic visits inherent in the CY14 encounters.
- 6) Conservative care unit cost – **Optumas** assumed a \$73.13-unit cost for conservative care treatments based on a distribution of Physical Therapy, Occupational Therapy, Chiropractic, and Cognitive Behavioral Therapy services.

The projected PMPM associated with these new services was applied to the regional base data prior to the application of regional specific non-medical load that is described in section 2.07.

## Dental Benefit Adjustment

This adjustment was included and described within the mid-year CY16 rate addendum approved by CMS. Since there is no emerging experience available and no new information has been released that would alter the previous estimate, **Optumas** has incorporated the same methodology in developing the estimate. Below is the narrative that was submitted as part of the mid-year addendum.

Effective July 1, 2016, OHA has implemented a programmatic change to the benefit package offered for dental services. The intent of this change is to reinstate certain benefits that had been removed or limited for certain populations, due to budgetary constraints in prior years; additionally, these benefit package changes are intended to mirror those benefits offered to children under 21, and pregnant women. As a result, please note the following:

- Impacts have been developed for TANF, ABAD/OAA, and ACA adult populations.

- Since the base data reflects CY13, prior to the ACA expansion, the base data used to develop the ACA adult population adjustments reflect CY13 TANF data, stratified by the ACA cohort age bands (i.e., 19-44, 45-54, and 55-64).
- No Impact developed for Pregnant Women (PLMA) and Children (CAF and Child 00-01, 01-05, 06-18).

The specific benefit differences per the July 1, 2016 program change are as follows:

- 1) Full dentures will be covered once every 10 years if dentally appropriate; the policy change removes the requirement that tooth extraction must have occurred within the last 6 months.
- 2) Partial dentures will be covered once every 5 years if dentally appropriate, increased from once every 10 years.
- 3) Stainless steel crowns will be covered for posterior permanent teeth, and all primary teeth; a change from no coverage previously.
- 4) Full mouth debridement will be covered once every 2 years, an increase from the current benefit of once every 3 years.
- 5) Periodontal scaling/root planing will be covered once every 2 years, an increase from the current benefit of once every 3 years.
- 6) Periodontal maintenance will be covered once every 6 months, increased from the current benefit of once every 12 months.

The projected impact of each of these has been developed with a range around both the utilization and unit cost component of the service; detail surrounding the development of range of impacts for each benefit change, including the data and assumptions used, is described in the document provided in Appendix XII.

Please note that once the range of impact was developed, the best estimate (midpoint) of this range of assumptions was selected as the PMPM impact of the benefit component of the change. This PMPM was then grossed up to reflect an 8% non-medical load, consistent with the percentage load developed for the remainder of the CY17 dental rates.

## Non-Emergent Medical Transportation Rate

Non-Emergent Medical Transportation (NEMT) services have been optional services provided by CCOs since July 2013. All sixteen CCOs will offer NEMT through the duration of the CY17 contract period. The NEMT adjustments were developed at a CCO specific level, using CCO reported financial data for CY15, trended forward to CY17. The table found in Appendix I.E shows the PMPM impacts by CCO and cohort.

## Dental Rate

**Optumas** used CY14-15 encounter data, trended forward to CY17 as the primary data source for the dental rate development. The dental rates were developed for two regions, Tri-county and Non-Tri-county, to account for varied utilization levels for each region. Additionally, the base data was summarized by COA.

Since dental services are provided via a variety of delivery systems, including staff model systems and subcapitation by the CCOs, the encounter data does not contain reliable paid amounts, only utilization. To develop a unit cost component for the CCO dental base data, **Optumas** shadow priced the CY14 and CY15 encounter data using procedure code level unit costs from Colorado's Delta Dental CHP+ program. In the event that the external fee schedule could not produce a proxy cost, **Optumas** utilized the 20<sup>th</sup> percentile of the 2013 American Dental Association (ADA) Survey of Dental Fees to reprice the remaining encounters. Cost-of-Living Adjustments (COLA) were applied to the repriced encounters to account for underlying reimbursement differences inherent in the use of cost information derived from a program in a different state; this adjustment has been applied to all COAs as 10% increase.

Additionally, an annualized utilization trend and unit cost trend were applied, by COA and COS. Finally, a flat administrative load of 8% was applied to all COAs. Appendix I.F shows a rate development summary (RDS), including the summarized utilization, unit cost, and PMPM trend by COA and region. Appendix I.G shows the final dental rates, by CCO and COA.

## Breakthrough Therapy Adjustment

Due to increased utilization of breakthrough therapies (Hepatitis C pharmaceutical therapies), **Optumas** deemed it necessary to incorporate an adjustment to more accurately predict the risk associated with high-cost pharmaceutical therapies. **Optumas** relied on multiple sources of information, both quantitative and qualitative, as shown below, to develop the adjustment factors.

1. CY15 encounter data for all CCOs
2. CY15 supplemental Hep-C data and emerging CY16 Hep-C pharmacy experience provided by CCOs

**Optumas** reviewed the aforementioned informational sources, along with emerging trend and internal analyses using emerging data in other states, to ensure the resulting adjustment factors are both reasonable and appropriate for the proposed contract period. While the CY15 data includes some experience for the new breakthrough therapies, this experience is expected to be significantly lower than costs that will be incurred for breakthrough therapies in the CY17 contract period due to changes in policy surrounding Hep-C stage requirements. As a result, **Optumas** has adjusted the base to reflect anticipated increased costs moving forward. Due to the uncertainty surrounding future utilization of these therapies, a risk corridor will be in place during CY17 for all Hep-C pharmaceuticals. Information surrounding the risk corridor policy for Hep-C pharmaceuticals can be found in Appendix IX. The table found in Appendix I.H shows the PMPM impacts by CCO and cohort.

## Assertive Community Treatment and Supported Employment Services Adjustment

Assertive Community Treatment and Supported Employment Services (ACT/SE) were introduced in January 2013. The CCOs have very different outreach with respect to this service as it requires the CCO to assemble costly care management teams that specialize in providing this service. Since the level of outreach was different between CCOs, **Optumas** made the ACT/SE adjustment CCO specific. The adjustment was based on the CY15 expenditures reported by each CCO on their submitted CY15 financial template. OHA has implemented policy that will expand the ACT/SE services to 2,000 members by the end of CY18 with an interim target of expanding services to 1,200 members by mid CY17. There

were approximately 800 members serviced across the program in CY15 which is the base data time period. This increase of 400 members by mid CY17 implies a 50% increase over 24 months or approximately a 25% annual increase in utilization.

**Optumas** assumed that every CCO that reported ACT/SE expenditures for CY15 will contribute to the increased outreach such that the distribution of members served across CCOs in CY17 would be consistent with the distribution seen within CY15. **Optumas/OHA** had discussions with each CCO surrounding their intent to create more ACT/SE teams to assist in increasing the outreach; all CCOs that reported ACT/SE expenditures plan to promote the increased outreach by ramping up staff for ACT/SE teams and improving outreach for existing ACT/SE teams.

The CCO specific PMPM impacts by cohort are shown in Appendix I.D.

## Mental Health Children's Wraparound Adjustment

As an optional service provided by the CCOs, the Mental Health Children's Wraparound adjustment accounts for peer partner, care coordination, and other wrap around services provided to children in Adoptive, Substitute, or Foster Care (CAF). All CCOs currently offer these services.

**Optumas** developed the adjustments by using CCO specific experience reported on their CY15 financial template. It should be noted that using CCO specific experience for this adjustment was a recommendation by CMS upon previous rate review. This experience was then trended to the CY17 contract period, which results in the following PMPM impacts by CCO to the CAF cohort:

CCO	Children's Wrap
Allcare CCO, Inc.	\$ 30.39
Cascade Health Alliance, LLC.	\$ 86.62
Columbia-Pacific CCO, LLC.	\$ 32.28
Eastern Oregon Coordinated Care Org., LLC.	\$ 105.42
FamilyCare, Inc.	\$ 61.93
Health Share of Oregon	\$ 89.54
InterCommunity Health Network, Inc.	\$ 0.90
Jackson County CCO, LLC.	\$ -
PacificSource Community Solutions, Inc. (Central)	\$ 86.62
PacificSource Community Solutions, Inc. (Gorge)	\$ 86.62
Primary Health of Josephine County, LLC	\$ 40.57
Trillium Community Health Plan, Inc.	\$ 27.35
DCIPA, LLC. Abn Umpqua Health Alliance	\$ 67.82
Western Oregon Advanced Health, LLC	\$ 16.38
Willamette Valley Community Health, LLC	\$ 81.71
Yamhill County Care Organization, Inc.	\$ 113.91

### Children's and Adolescent's Needs and Strength Assessment Adjustment

These services are provided to children in Adoptive, Substitute, or Foster Care (CAF). Per previous CMS guidance, **Optumas** used actual reported CCO CY15 experience for this adjustment, and trended the experience forward to the CY17 contract period. The regional PMPM impacts by CCO are shown below to the CAF cohort:

CCO	CANS Adjustment
Allcare CCO, Inc.	\$ 2.96
Cascade Health Alliance, LLC.	\$ 2.62
Columbia-Pacific CCO, LLC.	\$ -
Eastern Oregon Coordinated Care Org., LLC.	\$ -
FamilyCare, Inc.	\$ 1.86
Health Share of Oregon	\$ -
InterCommunity Health Network, Inc.	\$ 0.23
Jackson County CCO, LLC.	\$ -
PacificSource Community Solutions, Inc. (Central)	\$ -
PacificSource Community Solutions, Inc. (Gorge)	\$ -
Primary Health of Josephine County, LLC	\$ 2.99
Trillium Community Health Plan, Inc.	\$ 0.24
DCIPA, LLC. Abn Umpqua Health Alliance	\$ 2.99
Western Oregon Advanced Health, LLC	\$ -

### Maternity Rates

CCO-specific maternity case rates were developed using CY14 and CY15 encounter data, trended to the midpoint of 2017. Cost per delivery was developed by region, broken out by vaginal and caesarean deliveries, as well as A/B vs. DRG hospital, and in-state vs. out of state. CCO-specific adjustments were made to the regional base data for hospital reimbursement mix, vaginal and caesarean section delivery mix, and out of state hospital delivery costs. Once the medical component of the rate was developed, the next step was to apply non-medical load. The non-medical load consists of a flat 8% load to the medical component of the case rate; additionally, the maternity case rates have been grossed up for Tier 1 HRA, Tier 1 HRA admin, and Tier 2 HRA; the details surrounding the calculation of HRA can be found in section 2.07. The resulting fully loaded CCO-specific maternity case rates are shown below, compared to the rates developed for CY16:

CCO	CY 2016 Rate	CY 2017 Rate	Rate Change
Allcare CCO, Inc.	\$ 11,022.30	\$ 10,899.21	-1.1%
Cascade Health Alliance, LLC.	\$ 10,979.46	\$ 10,892.78	-0.8%
Columbia-Pacific CCO, LLC.	\$ 13,546.70	\$ 13,393.34	-1.1%
Eastern Oregon Coordinated Care Org., LLC.	\$ 13,321.95	\$ 13,023.05	-2.2%

CCO	CY 2016 Rate	CY 2017 Rate	Rate Change
FamilyCare, Inc.	\$ 12,130.29	\$ 12,067.21	-0.5%
Health Share of Oregon	\$ 12,105.38	\$ 11,983.55	-1.0%
InterCommunity Health Network, Inc.	\$ 12,795.57	\$ 12,547.22	-1.9%
Jackson County CCO, LLC.	\$ 11,683.57	\$ 11,366.25	-2.7%
PacificSource Community Solutions, Inc. (Central)	\$ 12,488.01	\$ 12,138.77	-2.8%
PacificSource Community Solutions, Inc. (Gorge)	\$ 14,351.88	\$ 14,084.96	-1.9%
Primary Health of Josephine County, LLC	\$ 10,803.57	\$ 10,924.01	1.1%
Trillium Community Health Plan, Inc.	\$ 11,263.87	\$ 11,254.71	-0.1%
DCIPA, LLC. Abn Umpqua Health Alliance	\$ 10,903.44	\$ 10,860.74	-0.4%
Western Oregon Advanced Health, LLC	\$ 12,985.56	\$ 12,944.25	-0.3%
Willamette Valley Community Health, LLC	\$ 12,162.38	\$ 11,815.97	-2.8%
Yamhill County Care Organization, Inc.	\$ 12,964.90	\$ 12,286.94	-5.2%

## 2.06 Trend

Trend factors were applied to estimate the change in utilization rate (frequency of services) and unit cost (pure price change, technology, acuity/intensity, and mix of services) of services over time. These trend factors were used to project the costs from the base period to the future contract period. Trends were developed on an annualized basis and applied by major service category from the midpoint of the base period to the midpoint of the contract period. Annual trend rates, by COA and COS, are shown in Appendix I.I.

Trend factors were developed for both utilization and unit cost using historical CCO data, reported financial data, and supplemental information reflecting emerging data provided by CCOs. The historical CCO data was aggregated by rating region and analyzed by population and COS. The data was arrayed such that 3 month moving averages (MMA), 6 MMA, and 12 MMA could be calculated. These resulting averages were evaluated and weighted to best reflect the expected annual trend. There was not a pre-determined algorithm related to the weighting, it was based on each data extracts' results and varied depending on particular nuances with that COS or population.

## 2.07 Non-Medical Loading

Non-medical loading was loaded to the projected medical costs to account for CCO expenditures associated with the following items: general administration, underwriting gains, risk/contingency margin, Case Management, Hospital Reimbursement Adjustments (HRA), and Health Insurance Providers Fee (HIPF). The magnitude of each of the aforementioned non-medical loading components were developed separately, using a combination of CCO financial data and State-directed policies.

### Base Non-Medical Load

Upon review of the administrative levels reported in the CCO financial submissions, **Optumas** has developed a regional specific non-medical load that is applied to the regional base data in order to



develop regional benchmarks to which risk factors could be applied. The components of the regional non-medical load are shown below

Region	Administration	Care Management and Flexible Services	Profit	Risk/Contingency	Total
Tri County	7.7%	0.9%	1.0%	0.5%	10.1%
Northwest	8.0%	0.2%	1.0%	0.5%	9.7%
Southwest	8.5%	1.8%	1.0%	0.5%	11.8%
Central/Eastern	8.6%	1.4%	1.0%	0.5%	11.5%

The maternity case rate and dental rates receive an 8% non-medical load consistent with historical policy.

## Hospital Reimbursement Adjustment (HRA)

Due to certain legislation passed in 2011, DRG hospitals (hospitals that receive reimbursement based on Medicare diagnostic related group reimbursement) are required to pay a special provider assessment. Effective October 1, 2011, additional hospital reimbursement adjustments (HRA) were included in the capitation rates for FCHPs, PCOs, and MHOs (now CCOs) to account for this new special tax paid by DRG hospitals. HRA is broken down into 2 parts: Tier 1 HRA and Tier 2 HRA.

Tier 1 HRA brings DRG hospital reimbursement from 68% of Medicare to 100% of Medicare. Tier 2 HRA is an additional provider tax allowance or adjustment to compensate for the new special provider assessment that these hospitals pay. Tier 2 HRA is an additional enhancement in the capitation rates that provides an allowance for additional provider tax instituted by the 2011 Oregon legislative session. Tier 2 HRA is considered a provider tax allowance, which is built in at 3% of premium for the CY17 rates. Tier 2 HRA is referred to as the Hospital Provider Tax Allowance in the contract rate sheets. There is a 2% administrative allowance on Tier 1 HRA (there is no administrative load on Tier 2) to allow for the additional administrative requirements of the CCOs to administer the program.

The CCOs pay supplemental payments to the DRG hospitals, due to the additional costs to the DRG hospitals in provider tax assessments. However, it is important to note that per federal requirements, the DRG hospitals are assessed on their entire net patient premiums, including all payer types, commercial, Medicare and Medicaid; and they are not held harmless as a result of the aforementioned payments. Individual DRG hospitals are reimbursed by individual CCOs based on the hospital's level of Medicaid claims, not based on the amount the hospital was assessed.

Tier 1 and Tier 2 HRA for CCOs are calculated in the same way as they were calculated for FCHPs:

Tier 1 is calculated as a 32% load on Inpatient and Outpatient non-A/B hospital services, prior to any other non-medical load. In addition to the Tier 1 load, an administrative component for the handling of Tier 1 HRA funding has been included as a 2% load on the resulting Tier 1 HRA PMPM built into the rates.



Tier 2 is calculated as a 3% load on all services, with the exception of Mental Health non-Inpatient, NEMT, and Dental. The 3% load is applied after base administrative and Tier 1 HRA adjustments have been applied.

For an illustrative example of the Tier 1 and Tier 2 HRA calculations for the DRG Inpatient COS, please see below:

PMPM Net Base NML (A)	Example Base NML % of Prem (B)	PMPM Gross Base NML (C) = (A)/[1-(B)]
\$ 88.00	12%	\$ 100.00

Tier 1 HRA % of Prem. (D)	Tier 1 PMPM (E) = (A)/[1-(D)] - (A)	Tier 1 HRA Admin % of Prem. (F)	Tier 1 Admin (G) = (E)/[1-(F)]-(E)
32.0%	\$ 41.41	2.0%	\$ 0.85

Tier 1 Adjusted PMPM (H)=(C)+(E)+(G)	Tier 2 HRA % of Prem. (I)	Tier 2 PMPM (J)=(H)/[1-(I)]-(H)	Tier 2 Adjusted PMPM (K)=(H)+(J)
\$ 142.26	3.0%	\$ 4.40	\$ 146.66

## Health Insurance Provider's Fee

Since a moratorium is in place for the Health Insurance Provider's Fee (HIPF) for CY17, no adjustment has been made for the HIPF in the CY17 rates.

## 2.08 Risk Factor

The risk factor is designed to quantify a CCO's specific risk, relative to the rating region in which it belongs. When developing the risk factor, **Optumas** considered different aspects of risk. Member risk (Member Health Status) is measured by using the risk tool CDPS+RX, which assigns each member a risk score based on their demographics, pharmacy utilization, and diagnosis information. Differences in hospital costs across CCOs are captured through the adjustment called A/B Hospital Adjustment; this adjustment quantifies the impact of CCOs having varying mix of services between DRG and A/B hospitals. This is necessary, as A/B hospitals are generally much more expensive than DRG hospitals.

As discussed throughout the document, the general approach underlying the rate methodology is:

- 1) Development of a regional benchmark for each rating cohort for each rating region.
- 2) Development of a risk factor for each unique CCO for each rating cohort. This risk factor is applied to each payment rate chosen by OHA within the regional benchmark range to develop a CCO specific payment rate.
- 3) The risk factors are applied in a way which is budget neutral to the specific rating region, so no dollars are added or removed to the regional spend due to the application of the risk factors.
- 4) By applying the risk factors to the regional benchmark, the resulting payment rate better matches payment to risk for each specific CCO in that rating region.
- 5) Risk Factors are comprised of two components: CDPS+RX Risk Score and A/B Hospital Adjustment.

## Risk Score

Consistent with ASOP 45, The Use of Health Status Based Risk Adjustment Methodologies, a few key questions were considered when making the decision to use the CDPS+RX risk tool:

1) *How did CDPS+RX compare to Medicaid RX tool within the OR program?*

In order to determine which risk tool to use, **Optumas** completed a correlation analysis for both the Medicaid Rx and CDPS+RX risk tools. The correlation analysis is designed to ensure that members with high risk scores have high annual expenditures and members with low risk scores have low annual expenditures. The correlation analysis is conducted by rating cohort on a statewide and regional basis. The results of this analysis indicated that CDPS+RX had a slightly higher correlation than Medicaid RX, so the decision was made to use the CDPS+RX risk tool.

2) *Was there significant correlation across each rating cohort between risk scores and annual medical expenditures at the member level, such that the data provided evidence that the risk tool was producing reasonable results?*

Once the risk tool was chosen, **Optumas** had to decide which rating cohorts the CDPS+RX risk tool would not be a good predictor of risk. The table below summarizes which rating cohorts are subject to CDPS+RX risk tool analysis – cohorts with an 'x' indicate risk-adjusted cohorts.

COA	Risk-Adjusted?
TANF	X
PLMA	
CHILD 00-01	
CHILD 01-05	X
CHILD 06-18	X
DUAL-MEDS	
ABAD & OAA	X
CAF	
ACA 19-44	X
ACA 45-54	X
ACA 55-64	X
BCCP	

The following reasons have been considered as to why certain cohorts are not risk-adjusted:

1. **PLMA** – Since the PLMA cohort consists of pregnant women, challenges exist when using a tool such as CDPS+Rx to measure risk of the population. This population typically has shorter enrollment duration than other cohorts, and the largest cost driver is typically the delivery event incurred by these members, which is accounted for through the maternity case rate payment.
2. **Child 00-01** – This cohort consists of children under the age of 1. Since the driver of cost differences within this cohort are typically indicative of costs associated with the birth of a newborn, rather than a chronic condition. Additionally, durational concerns play a role in this decision, since the majority of these members will reside in a different cohort the following year, which conflicts with the prospective nature of the risk score tool.

3. **Dual-Meds** – Since not all claims for Medicare eligibles are available in Medicaid data, the full spectrum of diagnosis codes that relate to this population cannot be used in the calculation of each members' risk score. Furthermore, the majority of costs are the responsibility of Medicare, and not necessarily reflective of costs that CCOs are responsible for. Therefore, the CDPS+Rx tool has not been used for this cohort.
4. **CAF** – Due to the transient nature of foster care children, as well as the unique utilization profile that these members have, the CDPS+Rx tool may not necessarily capture the true risk of this population.

- 3) *Did the data have all the necessary data elements to support the risk tool? If so, were they consistently reported for all CCOs?*

**Optumas** worked with OHA to ensure that the data being used in the risk score analysis had all the relevant data elements; in particular, four diagnosis codes from encounter claims were used in producing the risk score for specific members. This was consistent across all CCOs; therefore, no bias results due to some CCOs reporting more/less robust diagnosis information in encounter data. Future rate cycles will include additional studies on the marginal impact of including more diagnosis information within the risk score analysis.

- 4) *Which weights should be used, State specific or National?*

After discussions with OHA regarding the state specific weights, the decision was made to use the national weights until state specific weights can be developed using more recent data. The existing state specific weights were developed using a methodology that was based on 2010 data that had limited substantiation and relied on cost to charge ratios, rather than actual paid amounts, to develop the weights. **Optumas** will work with OHA to develop state specific weights using more recent data and provide the substantiation in future rate cycles when they are used in risk analysis.

- 5) *Should concurrent or prospective models be used?*

**Optumas** reviewed both models, but chose the prospective because of how the risk score is being applied. The risk score is being applied by using an experience period to project the risk of that population in a future contract period, which is consistent with the prospective model.

- 6) *How to handle members with limited data due to duration within experience period?*

**Optumas** reviewed the impact of duration for members across the state. Based on this approach, it was decided to use a 6 month duration requirement in which a member had to have 6 or more months of duration before their risk score counts. Any member with fewer than 6 months of duration received the average for that CCO and rate cohort.

Please see Appendix II.B for a summary of scored and non-scored members by CCO, based on the durational requirement noted above.

- 7) *How to recalibrate the risk tool for future rate cycles?*

**Optumas** will work with OHA to develop state specific weights for use in future rate cycles..

Please see Appendix II.C for a summary of risk scores, and Appendix X for a narrative describing the risk factor analysis.

## A/B Hospital Adjustment

The A/B Hospital Adjustment is designed to account for differences in hospital mix between the CCOs across a specific rating region. There are two types of hospitals in the Oregon program; DRG hospitals and A/B hospitals. The A/B hospitals are usually located in more rural areas and are reimbursed using a cost to charge methodology that results in higher cost than the more urban DRG hospitals. Because of this, an adjustment is necessary to ensure that a CCO's specific hospital mix is accounted for within the risk factor calculation.

The A/B Hospital Adjustment was based on CY15 data, so that the most recent practice patterns could be used from each CCO. The factor is developed by calculating the aggregate distribution of utilization between the two hospital types within a given region; CCO specific distributions are then compared to the regional aggregate distribution, to develop a factor that represents the CCOs' A/B hospital utilization compared to the regional average.

Please see Appendix II.D for a summary of A/B factors.

## Aggregating to Create Risk Factor

The risk score from CDPS+RX tool and the A/B Hospital Adjustment are aggregated for each CCO to create an aggregate risk factor. This risk factor is then applied in a budget neutral manner such that when applied to the regional benchmark, the weighted average of CCO specific payment rates will weight back to the regional payment rate for that rating cohort.

Please see Appendix II.E for demonstration of budget neutrality.

### 3. Rate Certification

I, Zach Aters, a Senior Actuary at **Optumas**, Member of the American Academy of Actuaries (MAAA), and an Associate of the Society of Actuaries (ASA), am certifying the calculation of payment rates described within this certification document. Appendices III – VII contain the RDS and final capitation rates for all cohorts. I meet the qualification standards established by the American Academy of Actuaries and have followed the practice standards established from time to time by the Actuarial Standards Board.

The capitation rates provided with this certification are considered actuarially sound for purposes of the 42 CFR 438.6(c), according to the following criteria:

- The capitation rates have been developed in accordance with generally accepted actuarial principles and practices;
- The capitation rates are appropriate for the populations to be covered, and the services to be furnished under the contract; and
- The capitation rates meet the requirements of 42 CFR 438.6(c).

The actuarially sound rates that are associated with this certification are effective January 1, 2017 through December 31, 2017 for the Oregon CCO managed care program.

The actuarially sound capitation rates are based on a projection of future events. Actual experience may vary from the experience assumed within their rate projection. The capitation rates offered may not be appropriate for any specific Managed Care Entity (MCE). An individual MCE should review the rates in relation to the benefits that it is obligated to provide to the covered population and to its specific business model. The MCE should evaluate the rates in the context of its own experience, expenses, capital, surplus, and profit requirements prior to agreeing to contract with OHA. As a result of this evaluation, the MCE may require rates above or below the actuarially sound rates associated with this certification.

Please feel free to contact me at 480.588.2495 for any additional information.

Sincerely,

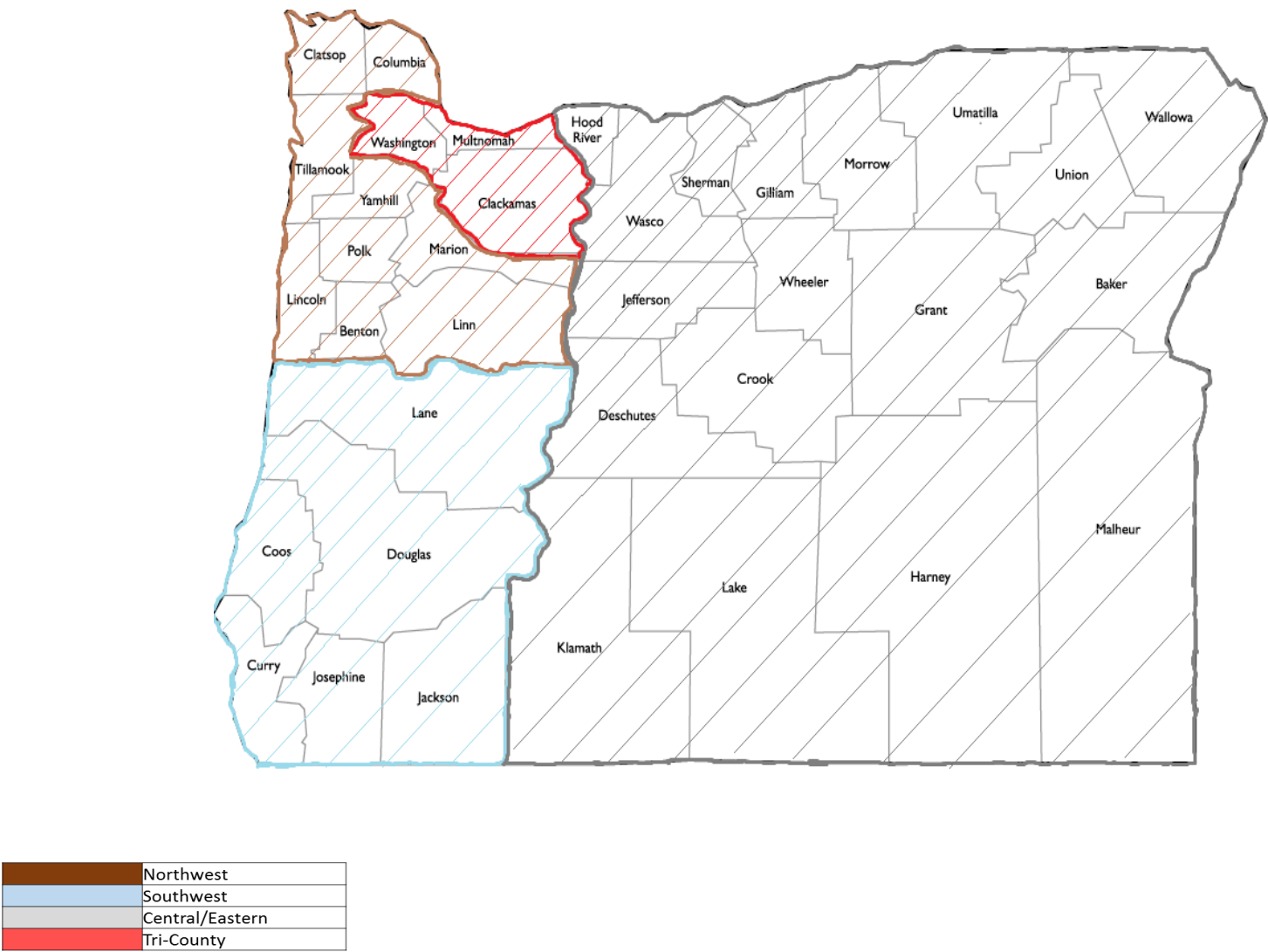


Zach Aters, ASA, MAAA  
Senior Actuary, Optumas

## 4. Appendices

**Appendix I. Rate Development**

Appendix I.A: Regional Map





## Appendix I.B: Underreporting and Reconciliation Impacts

### Underreporting Factors

CCO	TANF	PLMA	CHILD 00-01	CHILD 01-05	CHILD 06-18	DUAL-MEDS	ABAD & OAA	CAF	ACA 19-44	ACA 45-54	ACA 55-65
Allcare CCO, Inc.	2.6%	2.7%	3.2%	3.0%	2.4%	2.2%	2.2%	2.2%	2.4%	2.5%	2.4%
Cascade Health Alliance, LLC.	10.5%	14.4%	15.2%	12.3%	12.1%	11.9%	8.8%	14.5%	11.2%	9.8%	9.6%
Columbia-Pacific CCO, LLC.	1.3%	1.6%	3.2%	1.5%	1.2%	0.8%	1.5%	0.6%	1.4%	1.5%	1.6%
Eastern Oregon Coordinated Care Org., LLC.	2.7%	2.7%	2.7%	2.7%	2.7%	2.5%	2.7%	2.8%	2.7%	2.7%	2.7%
FamilyCare, Inc.	2.3%	2.5%	3.2%	2.6%	2.1%	2.3%	2.1%	2.1%	2.3%	2.3%	2.2%
Health Share of Oregon	3.8%	4.0%	3.9%	3.5%	4.4%	3.9%	3.7%	6.5%	4.0%	3.6%	3.5%
InterCommunity Health Network, Inc.	1.9%	1.8%	3.2%	2.3%	2.1%	3.3%	3.0%	2.3%	1.8%	1.8%	2.0%
Jackson County CCO, LLC.	2.7%	3.3%	4.4%	3.8%	3.2%	2.8%	2.6%	4.4%	2.8%	2.7%	3.1%
PacificSource Community Solutions, Inc. (Central)	11.6%	17.2%	18.7%	16.6%	12.8%	16.5%	10.0%	18.5%	11.0%	10.1%	8.5%
PacificSource Community Solutions, Inc. (Gorge)	9.7%	10.3%	10.6%	10.2%	10.0%	9.7%	9.4%	9.4%	9.6%	9.4%	9.6%
Primary Health of Josephine County, LLC	1.7%	1.8%	2.1%	1.8%	1.4%	1.4%	1.3%	1.6%	1.6%	1.5%	1.5%
Trillium Community Health Plan, Inc.	6.7%	7.0%	9.2%	6.8%	6.8%	7.6%	7.5%	6.5%	6.8%	7.0%	7.1%
DCIPA, LLC. Abn Umpqua Health Alliance	11.7%	11.9%	13.7%	11.5%	10.9%	11.6%	10.4%	10.8%	11.4%	11.0%	10.8%
Western Oregon Advanced Health, LLC <sup>1</sup>	4.2%	4.2%	4.2%	4.2%	4.2%	4.2%	4.2%	4.2%	4.2%	4.2%	4.2%
Willamette Valley Community Health, LLC <sup>2</sup>											
Yamhill County Care Organization, Inc.	2.9%	3.4%	4.7%	2.9%	3.0%	2.8%	3.0%	2.3%	2.9%	3.1%	3.1%

<sup>1</sup> WOA's Underreporting and Reconciliation factors are shown at an aggregate level due to their costs being allocated based on regional data.

<sup>2</sup> WVCH's factors are shown as a single aggregate Reconciliation Factor due to inclusion of subcapitated encounters within their encounter data and an allocation methodology based on regional data.

### Reconciliation Factors

CCO	TANF	PLMA	CHILD 00-01	CHILD 01-05	CHILD 06-18	DUAL-MEDS	ABAD & OAA	CAF	ACA 19-44	ACA 45-54	ACA 55-65
Allcare CCO, Inc.	1.5%	0.7%	0.2%	1.1%	2.4%	3.4%	4.6%	1.4%	2.1%	3.1%	3.8%
Cascade Health Alliance, LLC.	0.0%	0.0%	0.0%	0.0%	0.0%	0.0%	0.0%	0.0%	0.0%	0.0%	0.0%
Columbia-Pacific CCO, LLC.	0.0%	0.0%	0.0%	0.0%	0.0%	0.0%	0.0%	0.0%	0.0%	0.0%	0.0%
Eastern Oregon Coordinated Care Org., LLC.	-3.9%	-3.7%	-0.1%	-0.7%	-8.4%	-7.6%	-1.8%	-47.0%	-4.6%	-2.2%	-0.7%
FamilyCare, Inc.	2.5%	1.1%	0.4%	1.8%	3.4%	-10.9%	2.3%	1.9%	2.8%	3.6%	3.9%
Health Share of Oregon	-7.3%	-5.8%	-0.4%	-4.7%	-16.9%	-23.9%	-6.6%	-29.6%	-8.3%	-5.1%	-3.2%
InterCommunity Health Network, Inc.	-3.7%	-2.7%	-0.2%	-2.6%	-9.8%	-19.8%	-2.3%	-17.0%	-3.4%	-1.0%	0.2%
Jackson County CCO, LLC.	-0.8%	0.0%	0.0%	0.0%	-1.9%	-0.4%	-1.9%	-1.4%	-2.1%	-0.9%	-0.4%
PacificSource Community Solutions, Inc. (Central)	-8.0%	-5.7%	-0.4%	-1.2%	-8.1%	-4.6%	-1.9%	-22.9%	-6.8%	-2.7%	-1.3%
PacificSource Community Solutions, Inc. (Gorge)	-0.9%	-0.7%	-0.1%	-0.7%	-3.1%	-0.7%	-1.1%	-51.2%	-2.1%	-0.3%	-0.3%
Primary Health of Josephine County, LLC	0.0%	0.0%	0.0%	0.0%	0.0%	0.0%	0.0%	0.0%	0.0%	0.0%	0.0%
Trillium Community Health Plan, Inc.	0.0%	0.0%	0.0%	0.0%	0.0%	0.0%	0.0%	0.0%	0.0%	0.0%	0.0%
DCIPA, LLC. Abn Umpqua Health Alliance	-0.1%	0.0%	0.0%	0.0%	-0.5%	0.0%	-0.4%	-0.1%	-0.8%	-0.4%	0.0%
Western Oregon Advanced Health, LLC <sup>1</sup>	-5.1%	-5.1%	-5.1%	-5.1%	-5.1%	-5.1%	-5.1%	-5.1%	-5.1%	-5.1%	-5.1%
Willamette Valley Community Health, LLC <sup>2</sup>	-70.9%	-70.9%	-70.9%	-70.9%	-70.9%	-70.9%	-70.9%	-70.9%	-70.9%	-70.9%	-70.9%
Yamhill County Care Organization, Inc.	0.0%	0.0%	0.0%	0.0%	0.0%	0.0%	0.0%	0.0%	0.0%	0.0%	0.0%

<sup>1</sup> WOA's Underreporting and Reconciliation factors are shown at an aggregate level due to their costs being allocated based on regional data.

<sup>2</sup> WVCH's factors are shown as a single aggregate Reconciliation Factor due to inclusion of subcapitated encounters within their encounter data and an allocation methodology based on regional data.

## Appendix I.C: Regional Base Data

### Physical Health and Mental Health PMPMs (CCO-A and CCO-B)

COA	PMPM <sup>1</sup>			
	Central/Eastern	Southwest	Northwest	Tri-County
TANF	\$362.89	\$287.56	\$338.91	\$267.43
PLMA	\$311.35	\$265.39	\$296.67	\$262.89
CHILD 00-01	\$434.46	\$537.81	\$465.75	\$477.94
CHILD 01-05	\$112.37	\$100.19	\$110.65	\$89.99
CHILD 06-18	\$133.82	\$115.90	\$131.47	\$102.62
ABAD & OAA Duals	\$204.31	\$178.22	\$207.37	\$261.62
ABAD & OAA Medicaid Only	\$1,155.65	\$955.52	\$1,025.86	\$1,139.63
CAF	\$514.32	\$400.87	\$407.45	\$373.91
ACA 19-44	\$322.04	\$237.23	\$293.91	\$228.65
ACA 45-54	\$514.23	\$423.49	\$498.57	\$423.17
ACA 55-64	\$587.34	\$481.98	\$555.27	\$459.54
BCCP	\$1,683.61	\$1,095.79	\$1,156.13	\$1,347.21

### Mental Health Only PMPMs (CCO-E and CCO-G)

COA	PMPM <sup>1</sup>			
	Central/Eastern	Southwest	Northwest	Tri-County
TANF	\$33.36	\$38.74	\$37.28	\$29.46
PLMA	\$15.03	\$27.64	\$26.91	\$18.38
CHILD 00-01	\$1.16	\$11.99	\$17.35	\$1.46
CHILD 01-05	\$4.56	\$14.12	\$19.66	\$4.80
CHILD 06-18	\$29.08	\$33.47	\$35.05	\$25.40
ABAD & OAA Duals	\$60.37	\$46.24	\$51.29	\$95.55
ABAD & OAA Medicaid Only	\$133.86	\$138.78	\$91.77	\$154.42
CAF	\$258.51	\$215.37	\$167.73	\$153.13
ACA 19-44	\$33.61	\$41.22	\$40.42	\$30.22
ACA 45-54	\$41.53	\$46.07	\$42.24	\$33.36
ACA 55-64	\$43.66	\$42.91	\$37.07	\$22.53
BCCP	\$55.00	\$54.39	\$26.77	\$34.93

<sup>1</sup> PMPMs reflect CY15 regional base data. This reflects figures after incorporating the non-BCCP SNRG members into other rating cohorts

## Appendix I.D: ACT/SE Adjustment

CCO	TANF	PLMA	CHILD 00-01	CHILD 01-05	CHILD 06-18	ABAD & OAA Duals	ABAD & OAA Medicaid Only	CAF	ACA 19-44	ACA 45-54	ACA 55-64	BCCP
Allcare CCO, Inc.	\$1.26	\$0.00	\$0.00	\$0.00	\$0.00	\$5.29	\$10.62	\$0.00	\$1.26	\$1.26	\$1.26	\$10.62
Cascade Health Alliance, LLC.	\$0.50	\$0.00	\$0.00	\$0.00	\$0.00	\$0.72	\$0.40	\$0.00	\$0.53	\$2.54	\$0.00	\$0.40
Columbia-Pacific CCO, LLC.	\$0.56	\$0.14	\$0.00	\$0.00	\$0.00	\$16.66	\$27.54	\$0.30	\$0.99	\$1.53	\$0.70	\$27.54
Eastern Oregon Coordinated Care Org., LLC.	\$0.79	\$0.00	\$0.00	\$0.00	\$0.00	\$8.40	\$13.72	\$0.00	\$0.79	\$0.79	\$0.79	\$13.72
FamilyCare, Inc.	\$0.58	\$0.06	\$0.00	\$0.00	\$0.01	\$0.66	\$1.29	\$0.03	\$0.21	\$0.20	\$0.16	\$1.29
Health Share of Oregon	\$2.12	\$0.58	\$0.00	\$0.16	\$0.91	\$17.72	\$24.26	\$5.85	\$2.88	\$1.32	\$0.84	\$24.26
InterCommunity Health Network, Inc.	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00	\$0.22	\$0.00	\$0.02	\$0.00	\$0.00	\$0.22
Jackson County CCO, LLC.	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00	\$7.28	\$0.00	\$0.00	\$0.00	\$0.00	\$7.28
PacificSource Community Solutions, Inc. (Central)	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00
PacificSource Community Solutions, Inc. (Gorge)	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00
Primary Health of Josephine County, LLC	\$1.09	\$0.00	\$0.00	\$0.00	\$0.00	\$2.97	\$21.71	\$0.00	\$0.00	\$0.00	\$0.00	\$21.71
Trillium Community Health Plan, Inc.	\$1.57	\$1.64	\$3.35	\$0.45	\$0.60	\$0.64	\$5.10	\$1.72	\$1.22	\$2.38	\$2.60	\$5.10
DCIPA, LLC. Abn Umpqua Health Alliance	\$1.09	\$0.00	\$0.00	\$0.00	\$0.00	\$6.99	\$12.37	\$0.00	\$1.07	\$1.11	\$1.11	\$12.37
Western Oregon Advanced Health, LLC 1	\$2.01	\$0.07	\$0.06	\$0.05	\$0.17	\$0.24	\$0.69	\$1.40	\$0.18	\$0.23	\$3.93	\$0.69
Willamette Valley Community Health, LLC	\$0.61	\$0.00	\$0.00	\$0.00	\$0.00	\$6.80	\$12.77	\$0.00	\$0.62	\$0.62	\$0.63	\$12.77
Yamhill County Care Organization, Inc.	\$4.52	\$0.79	\$0.00	\$0.00	\$0.02	\$7.80	\$12.71	\$0.00	\$3.09	\$6.60	\$3.34	\$12.71

## Appendix I.E: Non-Emergent Medical Transportation Adjustment

CCO	TANF	PLMA	CHILD 00-01	CHILD 01-05	CHILD 06-18	ABAD & OAA Duals	ABAD & OAA Medicaid Only	CAF	ACA 19-44	ACA 45-54	ACA 55-64	BCCP
Allcare CCO, Inc.	\$3.88	\$4.12	\$0.27	\$0.25	\$0.39	\$31.64	\$33.79	\$1.40	\$3.52	\$7.05	\$4.47	\$33.79
Cascade Health Alliance, LLC.	\$9.23	\$4.32	\$0.84	\$0.56	\$0.98	\$52.90	\$41.04	\$2.69	\$12.65	\$16.80	\$19.99	\$41.04
Columbia-Pacific CCO, LLC.	\$6.29	\$6.68	\$0.43	\$0.40	\$0.63	\$51.31	\$54.80	\$2.27	\$5.72	\$11.43	\$7.26	\$54.80
Eastern Oregon Coordinated Care Org., LLC.	\$9.53	\$4.36	\$0.65	\$0.64	\$0.99	\$61.43	\$46.78	\$3.20	\$14.75	\$18.49	\$22.45	\$46.78
FamilyCare, Inc.	\$6.77	\$6.61	\$0.36	\$0.17	\$0.37	\$36.44	\$40.41	\$2.17	\$7.23	\$11.96	\$9.07	\$40.41
Health Share of Oregon	\$6.25	\$5.40	\$0.68	\$0.35	\$0.44	\$55.86	\$43.65	\$4.08	\$3.40	\$7.53	\$5.70	\$43.65
InterCommunity Health Network, Inc.	\$9.51	\$10.10	\$0.65	\$0.61	\$0.95	\$77.57	\$82.84	\$3.43	\$8.64	\$17.27	\$10.97	\$82.84
Jackson County CCO, LLC.	\$3.23	\$3.43	\$0.22	\$0.21	\$0.32	\$26.34	\$28.13	\$1.17	\$2.93	\$5.87	\$3.73	\$28.13
PacificSource Community Solutions, Inc. (Central)	\$5.36	\$5.69	\$0.37	\$0.34	\$0.54	\$43.72	\$46.69	\$1.94	\$4.87	\$9.74	\$6.18	\$46.69
PacificSource Community Solutions, Inc. (Gorge)	\$2.89	\$3.07	\$0.20	\$0.18	\$0.29	\$23.59	\$25.20	\$1.04	\$2.63	\$5.25	\$3.34	\$25.20
Primary Health of Josephine County, LLC	\$3.33	\$3.53	\$0.23	\$0.21	\$0.33	\$27.14	\$28.98	\$1.20	\$3.02	\$6.04	\$3.84	\$28.98
Trillium Community Health Plan, Inc.	\$4.85	\$5.15	\$0.33	\$0.31	\$0.49	\$39.58	\$42.27	\$1.75	\$4.41	\$8.81	\$5.60	\$42.27
DCIPA, LLC. Abn Umpqua Health Alliance	\$4.35	\$4.62	\$0.30	\$0.28	\$0.44	\$35.47	\$37.88	\$1.57	\$3.95	\$7.90	\$5.02	\$37.88
Western Oregon Advanced Health, LLC 1	\$5.40	\$5.74	\$0.37	\$0.34	\$0.54	\$44.07	\$47.07	\$1.95	\$4.91	\$9.81	\$6.23	\$47.07
Willamette Valley Community Health, LLC	\$5.15	\$5.47	\$0.35	\$0.33	\$0.52	\$42.00	\$44.85	\$1.86	\$4.68	\$9.35	\$5.94	\$44.85
Yamhill County Care Organization, Inc.	\$7.28	\$7.73	\$0.50	\$0.46	\$0.73	\$59.35	\$63.38	\$2.63	\$6.61	\$13.22	\$8.39	\$63.38

# Appendix I. Rate Development **Optumas**

## Appendix I.F: Regional Dental RDS

### Tri-County Region

COA	Base Data PMPM		IBNR Adjusted PMPM		Blended Base	COLA Adjustment		Prospective Trend				Dental Buy-Back Adjustment		Non-Medical Load	
	CY14	CY15	CY14	CY15	CY14/15 PMPM	% Adjustment	PMPM	Annualized Util/1,000 %	Annualized Unit Cost %	Annualized PMPM %	PMPM	Adjustment	PMPM	% of Premium	PMPM
TANF	\$ 17.19	\$ 18.71	\$ 17.19	\$ 19.04	\$ 18.01	10%	\$ 19.81	6.4%	2.1%	8.6%	\$ 24.33	\$ 3.55	\$ 27.87	8.0%	\$ 30.30
PLMA	\$ 15.90	\$ 16.98	\$ 15.90	\$ 17.55	\$ 16.80	10%	\$ 18.48	7.5%	1.8%	9.5%	\$ 23.17	\$ -	\$ 23.17	8.0%	\$ 25.18
CHILD 00-01	\$ 0.58	\$ 0.55	\$ 0.58	\$ 0.56	\$ 0.57	10%	\$ 0.63	7.3%	2.6%	10.2%	\$ 0.80	\$ -	\$ 0.80	8.0%	\$ 0.87
CHILD 01-05	\$ 14.23	\$ 16.05	\$ 14.23	\$ 16.34	\$ 15.27	10%	\$ 16.80	7.6%	3.2%	11.0%	\$ 21.82	\$ -	\$ 21.82	8.0%	\$ 23.72
CHILD 06-18	\$ 16.46	\$ 18.21	\$ 16.46	\$ 18.50	\$ 17.50	10%	\$ 19.25	7.3%	2.3%	9.7%	\$ 24.28	\$ -	\$ 24.28	8.0%	\$ 26.39
ABAD & OAA Duals	\$ 19.44	\$ 21.58	\$ 19.44	\$ 22.29	\$ 20.89	10%	\$ 22.98	5.9%	2.8%	8.9%	\$ 28.41	\$ 3.97	\$ 32.38	8.0%	\$ 35.19
ABAD & OAA Medicaid Only	\$ 19.88	\$ 21.18	\$ 19.88	\$ 21.67	\$ 20.75	10%	\$ 22.83	6.1%	1.5%	7.7%	\$ 27.48	\$ 3.87	\$ 31.35	8.0%	\$ 34.07
CAF	\$ 15.99	\$ 18.60	\$ 15.99	\$ 19.00	\$ 17.50	10%	\$ 19.25	7.8%	2.6%	10.6%	\$ 24.75	\$ -	\$ 24.75	8.0%	\$ 26.90
ACA 19-44	\$ 20.10	\$ 16.95	\$ 20.10	\$ 17.49	\$ 18.58	10%	\$ 20.43	4.0%	2.4%	6.5%	\$ 23.90	\$ 3.21	\$ 27.11	8.0%	\$ 29.46
ACA 45-54	\$ 28.72	\$ 24.80	\$ 28.72	\$ 25.54	\$ 26.93	10%	\$ 29.62	3.7%	2.5%	6.3%	\$ 34.50	\$ 6.25	\$ 40.75	8.0%	\$ 44.30
ACA 55-64	\$ 28.78	\$ 25.17	\$ 28.78	\$ 25.72	\$ 27.03	10%	\$ 29.74	4.0%	2.6%	6.8%	\$ 35.03	\$ 5.44	\$ 40.47	8.0%	\$ 43.99
BCCP															\$ 34.07

### Non Tri-County Regions

COA	Base Data PMPM		IBNR Adjusted PMPM		Blended Base	COLA Adjustment		Prospective Trend				Dental Buy-Back Adjustment		Non-Medical Load	
	CY14	CY15	CY14	CY15	CY14/15 PMPM	% Adjustment	PMPM	Annualized Util/1,000 %	Annualized Unit Cost %	Annualized PMPM %	PMPM	Adjustment	PMPM	% of Premium	PMPM
TANF	\$ 13.70	\$ 13.90	\$ 13.70	\$ 14.03	\$ 13.84	10%	\$ 15.23	7.9%	1.6%	9.7%	\$ 19.20	\$ 2.87	\$ 22.07	8.0%	\$ 23.99
PLMA	\$ 12.49	\$ 12.34	\$ 12.49	\$ 12.42	\$ 12.45	10%	\$ 13.70	7.4%	1.9%	9.5%	\$ 17.20	\$ -	\$ 17.20	8.0%	\$ 18.70
CHILD 00-01	\$ 0.89	\$ 0.98	\$ 0.89	\$ 0.99	\$ 0.95	10%	\$ 1.04	7.1%	2.2%	9.4%	\$ 1.30	\$ -	\$ 1.30	8.0%	\$ 1.42
CHILD 01-05	\$ 13.90	\$ 14.58	\$ 13.90	\$ 14.76	\$ 14.33	10%	\$ 15.76	8.0%	3.0%	11.3%	\$ 20.59	\$ -	\$ 20.59	8.0%	\$ 22.38
CHILD 06-18	\$ 14.37	\$ 14.64	\$ 14.37	\$ 14.67	\$ 14.52	10%	\$ 15.97	8.3%	2.2%	10.6%	\$ 20.55	\$ -	\$ 20.55	8.0%	\$ 22.34
ABAD & OAA Duals	\$ 14.99	\$ 15.30	\$ 14.99	\$ 15.63	\$ 15.32	10%	\$ 16.85	8.2%	3.2%	11.6%	\$ 22.19	\$ 2.77	\$ 24.96	8.0%	\$ 27.13
ABAD & OAA Medicaid Only	\$ 16.87	\$ 16.41	\$ 16.87	\$ 16.78	\$ 16.83	10%	\$ 18.51	7.1%	2.1%	9.3%	\$ 23.12	\$ 3.01	\$ 26.12	8.0%	\$ 28.39
CAF	\$ 15.52	\$ 16.75	\$ 15.52	\$ 16.88	\$ 16.21	10%	\$ 17.83	8.2%	2.5%	10.8%	\$ 23.06	\$ -	\$ 23.06	8.0%	\$ 25.07
ACA 19-44	\$ 14.74	\$ 13.02	\$ 14.74	\$ 13.15	\$ 13.82	10%	\$ 15.21	4.7%	2.9%	7.8%	\$ 18.36	\$ 2.70	\$ 21.07	8.0%	\$ 22.90
ACA 45-54	\$ 21.04	\$ 18.53	\$ 21.04	\$ 18.72	\$ 19.76	10%	\$ 21.73	4.5%	2.9%	7.6%	\$ 26.08	\$ 4.29	\$ 30.37	8.0%	\$ 33.01
ACA 55-64	\$ 19.12	\$ 17.62	\$ 19.12	\$ 17.95	\$ 18.45	10%	\$ 20.30	5.1%	2.5%	7.7%	\$ 24.42	\$ 4.92	\$ 29.34	8.0%	\$ 31.89
BCCP															\$ 28.39

## Appendix I.G: CCO Specific Dental Rates

CCO	TANF	PLMA	CHILD 00-01	CHILD 01-05	CHILD 06-18	ABAD & OAA Duals	ABAD & OAA Medicaid Only	CAF	ACA 19-44	ACA 45-54	ACA 55-64	BCCP
Allcare CCO, Inc.	\$23.99	\$18.70	\$1.42	\$22.38	\$22.34	\$27.13	\$28.39	\$25.07	\$22.90	\$33.01	\$31.89	\$28.39
Cascade Health Alliance, LLC.	\$23.99	\$18.70	\$1.42	\$22.38	\$22.34	\$27.13	\$28.39	\$25.07	\$22.90	\$33.01	\$31.89	\$28.39
Columbia-Pacific CCO, LLC.	\$23.99	\$18.70	\$1.42	\$22.38	\$22.34	\$27.13	\$28.39	\$25.07	\$22.90	\$33.01	\$31.89	\$28.39
Eastern Oregon Coordinated Care Org., LLC.	\$23.99	\$18.70	\$1.42	\$22.38	\$22.34	\$27.13	\$28.39	\$25.07	\$22.90	\$33.01	\$31.89	\$28.39
FamilyCare, Inc.	\$30.30	\$25.18	\$0.87	\$23.72	\$26.39	\$35.19	\$34.07	\$26.90	\$29.46	\$44.30	\$43.99	\$34.07
Health Share of Oregon	\$30.30	\$25.18	\$0.87	\$23.72	\$26.39	\$35.19	\$34.07	\$26.90	\$29.46	\$44.30	\$43.99	\$34.07
InterCommunity Health Network, Inc.	\$23.99	\$18.70	\$1.42	\$22.38	\$22.34	\$27.13	\$28.39	\$25.07	\$22.90	\$33.01	\$31.89	\$28.39
Jackson County CCO, LLC.	\$23.99	\$18.70	\$1.42	\$22.38	\$22.34	\$27.13	\$28.39	\$25.07	\$22.90	\$33.01	\$31.89	\$28.39
PacificSource Community Solutions, Inc. (Central)	\$23.99	\$18.70	\$1.42	\$22.38	\$22.34	\$27.13	\$28.39	\$25.07	\$22.90	\$33.01	\$31.89	\$28.39
PacificSource Community Solutions, Inc. (Gorge)	\$23.99	\$18.70	\$1.42	\$22.38	\$22.34	\$27.13	\$28.39	\$25.07	\$22.90	\$33.01	\$31.89	\$28.39
Primary Health of Josephine County, LLC	\$23.99	\$18.70	\$1.42	\$22.38	\$22.34	\$27.13	\$28.39	\$25.07	\$22.90	\$33.01	\$31.89	\$28.39
Trillium Community Health Plan, Inc.	\$23.99	\$18.70	\$1.42	\$22.38	\$22.34	\$27.13	\$28.39	\$25.07	\$22.90	\$33.01	\$31.89	\$28.39
DCIPA, LLC. Abn Umpqua Health Alliance	\$23.99	\$18.70	\$1.42	\$22.38	\$22.34	\$27.13	\$28.39	\$25.07	\$22.90	\$33.01	\$31.89	\$28.39
Western Oregon Advanced Health, LLC 1	\$23.99	\$18.70	\$1.42	\$22.38	\$22.34	\$27.13	\$28.39	\$25.07	\$22.90	\$33.01	\$31.89	\$28.39
Willamette Valley Community Health, LLC	\$23.99	\$18.70	\$1.42	\$22.38	\$22.34	\$27.13	\$28.39	\$25.07	\$22.90	\$33.01	\$31.89	\$28.39
Yamhill County Care Organization, Inc.	\$23.99	\$18.70	\$1.42	\$22.38	\$22.34	\$27.13	\$28.39	\$25.07	\$22.90	\$33.01	\$31.89	\$28.39

## Appendix I.H: Breakthrough Therapy Adjustment

CCO	TANF	PLMA	CHILD 00-01	CHILD 01-05	CHILD 06-18	ABAD & OAA Duals	ABAD & OAA Medicaid Only	CAF	ACA 19-44	ACA 45-54	ACA 55-64	BCCP
Allcare CCO, Inc.	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00	\$27.92	\$0.00	\$0.00	\$0.72	\$0.00	\$20.64	\$0.00
Cascade Health Alliance, LLC.	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00	\$64.17	\$0.00	\$0.97	\$10.60	\$13.28	\$64.17
Columbia-Pacific CCO, LLC.	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00	\$52.99	\$0.00	\$0.00	\$19.24	\$44.34	\$52.99
Eastern Oregon Coordinated Care Org., LLC.	\$9.21	\$0.00	\$0.00	\$0.00	\$0.00	\$10.46	\$24.11	\$0.00	\$1.70	\$19.48	\$22.76	\$24.11
FamilyCare, Inc.	\$1.10	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00	\$19.43	\$0.00	\$0.21	\$9.19	\$14.77	\$19.43
Health Share of Oregon	\$2.25	\$0.00	\$0.00	\$0.00	\$0.00	\$0.56	\$54.98	\$0.00	\$1.80	\$22.43	\$47.59	\$54.98
InterCommunity Health Network, Inc.	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00	\$19.51	\$0.00	\$2.82	\$0.00	\$21.93	\$19.51
Jackson County CCO, LLC.	\$7.75	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00	\$52.93	\$0.00	\$2.52	\$20.27	\$93.43	\$52.93
PacificSource Community Solutions, Inc. (Central)	\$0.88	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00	\$40.16	\$0.00	\$1.48	\$5.78	\$56.34	\$40.16
PacificSource Community Solutions, Inc. (Gorge)	\$0.88	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00	\$40.16	\$0.00	\$1.48	\$5.78	\$56.34	\$40.16
Primary Health of Josephine County, LLC	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00	\$33.60	\$0.00
Trillium Community Health Plan, Inc.	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00	\$30.89	\$0.00	\$1.16	\$18.39	\$35.73	\$30.89
DCIPA, LLC. Abn Umpqua Health Alliance	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00	\$21.86	\$0.00	\$5.05	\$0.00	\$3.98	\$21.86
Western Oregon Advanced Health, LLC 1	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00	\$15.85	\$0.00	\$0.60	\$9.44	\$18.33	\$15.85
Willamette Valley Community Health, LLC	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00	\$12.49	\$0.00	\$0.99	\$7.27	\$4.07	\$12.49
Yamhill County Care Organization, Inc.	\$7.32	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00	\$29.15	\$0.00	\$0.00	\$23.38	\$33.04	\$29.15

## Appendix I.I: Annual Trend Rates

Northwest Annualized PMPM Trends												
COS/COA	TANF	PLMA	CHILD 00-01	CHILD 01-05	CHILD 06-18	ABAD & OAA Duals	ABAD & OAA Medicaid Only	CAF	ACA 19-44	ACA 45-54	ACA 55-64	BCCP
Inpatient - A & B Hospital	4.8%	4.8%	4.8%	4.8%	4.8%	4.8%	4.8%	4.8%	4.8%	4.8%	4.8%	4.8%
Inpatient - DRG Hospital	2.1%	2.1%	4.1%	4.1%	4.1%	4.6%	1.7%	4.1%	1.6%	1.6%	1.6%	1.7%
Inpatient - Other	2.1%	2.1%	4.1%	4.1%	4.1%	4.6%	1.7%	4.1%	1.6%	1.6%	1.6%	1.7%
Outpatient - A & B Hospital	4.6%	4.6%	6.2%	6.2%	6.2%	4.6%	4.6%	5.6%	4.9%	4.9%	4.9%	4.6%
Outpatient - DRG Hospital	2.1%	2.1%	2.0%	2.0%	2.0%	3.1%	1.6%	4.3%	4.1%	4.1%	4.1%	1.6%
Outpatient - Other	2.1%	2.1%	2.0%	2.0%	2.0%	3.1%	1.6%	4.3%	4.1%	4.1%	4.1%	1.6%
Physician Services	1.6%	1.6%	2.1%	2.1%	2.1%	4.1%	0.7%	3.6%	1.6%	1.6%	1.6%	0.7%
Substance Abuse	1.1%	1.1%	1.1%	1.1%	1.1%	2.1%	2.1%	2.1%	2.1%	2.1%	2.1%	2.1%
Prescription Drugs	5.3%	4.8%	15.3%	16.3%	16.3%	17.2%	17.3%	18.2%	20.3%	21.4%	21.7%	17.0%
DME and Miscellaneous	3.1%	3.1%	3.1%	3.1%	3.1%	1.6%	1.6%	2.6%	3.1%	3.1%	3.1%	1.6%
Mental Health Services Inpatient	1.1%	1.1%	1.1%	1.1%	1.1%	1.6%	1.6%	3.1%	1.6%	1.6%	1.6%	1.6%
A&D Residential	1.1%	1.1%	1.1%	1.1%	1.1%	2.1%	2.1%	2.1%	2.1%	2.1%	2.1%	2.1%
Mental Health Other Non-Inpatient	1.6%	1.6%	1.1%	1.1%	1.1%	1.8%	1.6%	4.1%	2.9%	2.9%	2.9%	1.6%
<b>Total</b>	<b>2.9%</b>	<b>2.7%</b>	<b>3.8%</b>	<b>4.0%</b>	<b>4.5%</b>	<b>5.2%</b>	<b>5.8%</b>	<b>5.1%</b>	<b>5.7%</b>	<b>6.6%</b>	<b>6.8%</b>	<b>4.3%</b>

Northwest Annualized Util/1,000 Trends												
COS/COA	TANF	PLMA	CHILD 00-01	CHILD 01-05	CHILD 06-18	ABAD & OAA Duals	ABAD & OAA Medicaid Only	CAF	ACA 19-44	ACA 45-54	ACA 55-64	BCCP
Inpatient - A & B Hospital	0.1%	0.1%	0.1%	0.1%	0.1%	0.1%	0.1%	0.1%	0.1%	0.1%	0.1%	0.1%
Inpatient - DRG Hospital	1.1%	1.1%	3.1%	3.1%	3.1%	3.6%	0.7%	3.1%	0.6%	0.6%	0.6%	0.7%
Inpatient - Other	1.1%	1.1%	3.1%	3.1%	3.1%	3.6%	0.7%	3.1%	0.6%	0.6%	0.6%	0.7%
Outpatient - A & B Hospital	-0.4%	-0.4%	1.1%	1.1%	1.1%	-0.4%	-0.4%	0.6%	-0.1%	-0.1%	-0.1%	-0.4%
Outpatient - DRG Hospital	1.5%	1.5%	1.6%	1.6%	1.6%	1.6%	2.1%	2.1%	2.1%	2.1%	2.1%	2.1%
Outpatient - Other	1.5%	1.5%	1.6%	1.6%	1.6%	1.6%	2.1%	2.1%	2.1%	2.1%	2.1%	2.1%
Physician Services	0.1%	0.1%	2.6%	2.6%	2.6%	2.6%	0.6%	1.6%	0.1%	0.1%	0.1%	0.6%
Substance Abuse	0.6%	0.6%	0.6%	0.6%	0.6%	1.6%	1.6%	1.6%	1.6%	1.6%	1.6%	1.6%
Prescription Drugs	-0.4%	-0.4%	10.5%	10.5%	10.5%	9.2%	9.2%	9.7%	9.5%	9.6%	9.6%	9.3%
DME and Miscellaneous	2.1%	2.1%	2.1%	2.1%	2.1%	1.6%	1.6%	1.6%	2.1%	2.1%	2.1%	1.6%
Mental Health Services Inpatient	0.1%	0.1%	0.1%	0.1%	0.1%	0.6%	0.6%	2.1%	0.6%	0.6%	0.6%	0.6%
A&D Residential	0.6%	0.6%	0.6%	0.6%	0.6%	1.6%	1.6%	1.6%	1.6%	1.6%	1.6%	1.6%
Mental Health Other Non-Inpatient	-0.4%	-0.4%	1.6%	1.6%	1.6%	-0.4%	-0.4%	2.1%	2.1%	2.1%	2.1%	-0.4%
<b>Total</b>	<b>0.0%</b>	<b>0.1%</b>	<b>3.3%</b>	<b>4.0%</b>	<b>4.4%</b>	<b>4.1%</b>	<b>5.4%</b>	<b>4.4%</b>	<b>4.5%</b>	<b>5.4%</b>	<b>5.6%</b>	<b>5.0%</b>



# Appendix I. Rate Development **Optumas**

Northwest Annualized Unit Cost Trends												
COS/COA	TANF	PLMA	CHILD 00-01	CHILD 01-05	CHILD 06-18	ABAD & OAA Duals	ABAD & OAA Medicaid Only	CAF	ACA 19-44	ACA 45-54	ACA 55-64	BCCP
Inpatient - A & B Hospital	4.8%	4.8%	4.8%	4.8%	4.8%	4.8%	4.8%	4.8%	4.8%	4.8%	4.8%	4.8%
Inpatient - DRG Hospital	1.1%	1.1%	1.1%	1.1%	1.1%	1.1%	1.1%	1.1%	1.1%	1.1%	1.1%	1.1%
Inpatient - Other	1.1%	1.1%	1.1%	1.1%	1.1%	1.1%	1.1%	1.1%	1.1%	1.1%	1.1%	1.1%
Outpatient - A & B Hospital	5.1%	5.1%	5.1%	5.1%	5.1%	5.1%	5.1%	5.1%	5.1%	5.1%	5.1%	5.1%
Outpatient - DRG Hospital	0.6%	0.6%	0.4%	0.4%	0.4%	1.6%	-0.4%	2.2%	2.1%	2.1%	2.1%	-0.4%
Outpatient - Other	0.6%	0.6%	0.4%	0.4%	0.4%	1.6%	-0.4%	2.2%	2.1%	2.1%	2.1%	-0.4%
Physician Services	1.6%	1.6%	-0.4%	-0.4%	-0.4%	1.6%	0.2%	2.1%	1.6%	1.6%	1.6%	0.2%
Substance Abuse	0.6%	0.6%	0.6%	0.6%	0.6%	0.6%	0.6%	0.6%	0.6%	0.6%	0.6%	0.6%
Prescription Drugs	5.7%	5.2%	4.4%	5.2%	5.3%	7.3%	7.5%	7.7%	9.9%	10.8%	11.0%	7.1%
DME and Miscellaneous	1.1%	1.1%	1.1%	1.1%	1.1%	0.1%	0.1%	1.1%	1.1%	1.1%	1.1%	0.1%
Mental Health Services Inpatient	1.1%	1.1%	1.1%	1.1%	1.1%	1.1%	1.1%	1.1%	1.1%	1.1%	1.1%	1.1%
A&D Residential	0.6%	0.6%	0.6%	0.6%	0.6%	0.6%	0.6%	0.6%	0.6%	0.6%	0.6%	0.6%
Mental Health Other Non-Inpatient	2.1%	2.1%	-0.4%	-0.4%	-0.4%	2.2%	2.1%	2.1%	0.8%	0.8%	0.8%	2.1%
<b>Total</b>	<b>2.9%</b>	<b>2.7%</b>	<b>0.6%</b>	<b>0.0%</b>	<b>0.1%</b>	<b>1.0%</b>	<b>0.3%</b>	<b>0.6%</b>	<b>1.1%</b>	<b>1.2%</b>	<b>1.2%</b>	<b>-0.6%</b>

Southwest Annualized PMPM Trends												
COS/COA	TANF	PLMA	CHILD 00-01	CHILD 01-05	CHILD 06-18	ABAD & OAA Duals	ABAD & OAA Medicaid Only	CAF	ACA 19-44	ACA 45-54	ACA 55-64	BCCP
Inpatient - A & B Hospital	5.6%	5.6%	5.6%	5.6%	5.6%	5.6%	5.6%	5.6%	5.6%	5.6%	5.6%	5.6%
Inpatient - DRG Hospital	2.1%	2.1%	3.1%	3.1%	3.1%	1.1%	2.6%	3.1%	1.1%	1.1%	1.1%	2.6%
Inpatient - Other	2.1%	2.1%	3.1%	3.1%	3.1%	1.1%	2.6%	3.1%	1.1%	1.1%	1.1%	2.6%
Outpatient - A & B Hospital	7.9%	7.9%	7.9%	7.9%	7.9%	7.3%	7.3%	6.3%	7.3%	7.3%	7.3%	7.3%
Outpatient - DRG Hospital	3.4%	3.4%	4.8%	4.8%	4.8%	2.6%	5.2%	2.6%	3.4%	3.4%	3.4%	5.2%
Outpatient - Other	3.4%	3.4%	4.8%	4.8%	4.8%	2.6%	5.2%	2.6%	3.4%	3.4%	3.4%	5.2%
Physician Services	3.6%	3.6%	2.9%	2.9%	2.9%	1.7%	1.8%	5.0%	3.3%	3.3%	3.3%	1.8%
Substance Abuse	1.6%	1.6%	0.6%	0.6%	0.6%	1.1%	2.1%	0.6%	2.1%	2.1%	2.1%	2.1%
Prescription Drugs	8.1%	6.2%	15.6%	13.0%	13.7%	6.6%	9.0%	19.2%	13.3%	13.7%	13.5%	7.9%
DME and Miscellaneous	3.6%	3.6%	3.6%	3.6%	3.6%	1.4%	4.8%	3.1%	5.3%	5.3%	5.3%	4.8%
Mental Health Services Inpatient	1.1%	1.1%	1.1%	1.1%	1.1%	0.6%	2.1%	0.6%	0.6%	0.6%	0.6%	2.1%
A&D Residential	1.6%	1.6%	0.6%	0.6%	0.6%	1.1%	2.1%	0.6%	2.1%	2.1%	2.1%	2.1%
Mental Health Other Non-Inpatient	5.4%	5.4%	1.1%	1.1%	1.1%	3.2%	2.4%	2.1%	4.8%	4.8%	4.8%	2.4%
<b>Total</b>	<b>4.3%</b>	<b>3.7%</b>	<b>3.5%</b>	<b>4.1%</b>	<b>4.5%</b>	<b>2.5%</b>	<b>4.7%</b>	<b>4.5%</b>	<b>5.1%</b>	<b>5.6%</b>	<b>5.5%</b>	<b>4.0%</b>

# Appendix I. Rate Development **Optumas**

Southwest Annualized Util/1,000 Trends												
COS/COA	TANF	PLMA	CHILD 00-01	CHILD 01-05	CHILD 06-18	ABAD & OAA Duals	ABAD & OAA Medicaid Only	CAF	ACA 19-44	ACA 45-54	ACA 55-64	BCCP
Inpatient - A & B Hospital	0.1%	0.1%	0.1%	0.1%	0.1%	0.1%	0.1%	0.1%	0.1%	0.1%	0.1%	0.1%
Inpatient - DRG Hospital	1.1%	1.1%	2.1%	2.1%	2.1%	0.1%	1.6%	2.1%	0.1%	0.1%	0.1%	1.6%
Inpatient - Other	1.1%	1.1%	2.1%	2.1%	2.1%	0.1%	1.6%	2.1%	0.1%	0.1%	0.1%	1.6%
Outpatient - A & B Hospital	1.1%	1.1%	1.1%	1.1%	1.1%	0.6%	0.6%	-0.4%	0.6%	0.6%	0.6%	0.6%
Outpatient - DRG Hospital	0.1%	0.1%	1.8%	1.8%	1.8%	-0.4%	2.1%	1.6%	0.1%	0.1%	0.1%	2.1%
Outpatient - Other	0.1%	0.1%	1.8%	1.8%	1.8%	-0.4%	2.1%	1.6%	0.1%	0.1%	0.1%	2.1%
Physician Services	1.0%	1.0%	1.0%	1.0%	1.0%	0.6%	2.1%	1.6%	0.6%	0.6%	0.6%	2.1%
Substance Abuse	1.6%	1.6%	0.1%	0.1%	0.1%	0.1%	1.6%	0.1%	1.6%	1.6%	1.6%	1.6%
Prescription Drugs	-0.4%	-0.4%	4.8%	4.9%	4.9%	3.5%	3.5%	4.7%	4.4%	4.4%	4.4%	3.4%
DME and Miscellaneous	2.1%	2.1%	2.1%	2.1%	2.1%	-0.4%	1.6%	1.6%	2.1%	2.1%	2.1%	1.6%
Mental Health Services Inpatient	0.1%	0.1%	0.1%	0.1%	0.1%	-0.4%	1.1%	-0.4%	-0.4%	-0.4%	-0.4%	1.1%
A&D Residential	1.6%	1.6%	0.1%	0.1%	0.1%	0.1%	1.6%	0.1%	1.6%	1.6%	1.6%	1.6%
Mental Health Other Non-Inpatient	2.1%	2.1%	1.1%	1.1%	1.1%	0.1%	-0.1%	2.1%	1.6%	1.6%	1.6%	-0.1%
<b>Total</b>	<b>0.6%</b>	<b>0.7%</b>	<b>1.7%</b>	<b>2.2%</b>	<b>2.2%</b>	<b>0.9%</b>	<b>2.5%</b>	<b>2.4%</b>	<b>2.4%</b>	<b>2.7%</b>	<b>2.8%</b>	<b>2.5%</b>

Southwest Annualized Unit Cost Trends												
COS/COA	TANF	PLMA	CHILD 00-01	CHILD 01-05	CHILD 06-18	ABAD & OAA Duals	ABAD & OAA Medicaid Only	CAF	ACA 19-44	ACA 45-54	ACA 55-64	BCCP
Inpatient - A & B Hospital	5.6%	5.6%	5.6%	5.6%	5.6%	5.6%	5.6%	5.6%	5.6%	5.6%	5.6%	5.6%
Inpatient - DRG Hospital	1.1%	1.1%	1.1%	1.1%	1.1%	1.1%	1.1%	1.1%	1.1%	1.1%	1.1%	1.1%
Inpatient - Other	1.1%	1.1%	1.1%	1.1%	1.1%	1.1%	1.1%	1.1%	1.1%	1.1%	1.1%	1.1%
Outpatient - A & B Hospital	6.8%	6.8%	6.8%	6.8%	6.8%	6.8%	6.8%	6.8%	6.8%	6.8%	6.8%	6.8%
Outpatient - DRG Hospital	3.4%	3.4%	3.0%	3.0%	3.0%	3.0%	3.0%	1.1%	3.4%	3.4%	3.4%	3.0%
Outpatient - Other	3.4%	3.4%	3.0%	3.0%	3.0%	3.0%	3.0%	1.1%	3.4%	3.4%	3.4%	3.0%
Physician Services	2.6%	2.6%	1.9%	1.9%	1.9%	1.1%	-0.3%	3.4%	2.8%	2.8%	2.8%	-0.3%
Substance Abuse	0.1%	0.1%	0.6%	0.6%	0.6%	1.1%	0.6%	0.6%	0.6%	0.6%	0.6%	0.6%
Prescription Drugs	8.6%	6.7%	10.3%	7.7%	8.5%	3.0%	5.3%	13.8%	8.5%	8.9%	8.7%	4.3%
DME and Miscellaneous	1.6%	1.6%	1.6%	1.6%	1.6%	1.9%	3.2%	1.6%	3.2%	3.2%	3.2%	3.2%
Mental Health Services Inpatient	1.1%	1.1%	1.1%	1.1%	1.1%	1.1%	1.1%	1.1%	1.1%	1.1%	1.1%	1.1%
A&D Residential	0.1%	0.1%	0.6%	0.6%	0.6%	1.1%	0.6%	0.6%	0.6%	0.6%	0.6%	0.6%
Mental Health Other Non-Inpatient	3.2%	3.2%	0.1%	0.1%	0.1%	3.1%	2.5%	0.1%	3.2%	3.2%	3.2%	2.5%
<b>Total</b>	<b>3.7%</b>	<b>3.0%</b>	<b>1.7%</b>	<b>1.8%</b>	<b>2.2%</b>	<b>1.5%</b>	<b>2.2%</b>	<b>2.1%</b>	<b>2.6%</b>	<b>2.8%</b>	<b>2.6%</b>	<b>1.4%</b>

# Appendix I. Rate Development **Optumas**

Tri-County Annualized PMPM Trends												
COS/COA	TANF	PLMA	CHILD 00-01	CHILD 01-05	CHILD 06-18	ABAD & OAA Duals	ABAD & OAA Medicaid Only	CAF	ACA 19-44	ACA 45-54	ACA 55-64	BCCP
Inpatient - A & B Hospital	5.1%	5.1%	5.1%	5.1%	5.1%	5.1%	5.1%	5.1%	5.1%	5.1%	5.1%	5.1%
Inpatient - DRG Hospital	2.1%	2.1%	4.1%	4.1%	4.1%	4.6%	4.2%	4.1%	1.6%	1.6%	1.6%	4.2%
Inpatient - Other	2.1%	2.1%	4.1%	4.1%	4.1%	4.6%	4.2%	4.1%	1.6%	1.6%	1.6%	4.2%
Outpatient - A & B Hospital	6.7%	6.7%	6.7%	6.7%	6.7%	6.1%	6.1%	7.6%	6.1%	6.1%	6.1%	6.1%
Outpatient - DRG Hospital	0.6%	0.6%	1.1%	1.1%	1.1%	3.1%	1.3%	4.7%	0.6%	0.6%	0.6%	1.3%
Outpatient - Other	0.6%	0.6%	1.1%	1.1%	1.1%	3.1%	1.3%	4.7%	0.6%	0.6%	0.6%	1.3%
Physician Services	2.1%	2.1%	1.1%	1.1%	1.1%	3.2%	3.4%	3.6%	1.1%	1.1%	1.1%	3.4%
Substance Abuse	1.1%	1.1%	1.1%	1.1%	1.1%	2.1%	2.1%	2.1%	2.1%	2.1%	2.1%	2.1%
Prescription Drugs	12.1%	8.0%	7.5%	7.5%	7.6%	7.3%	14.9%	7.7%	22.1%	21.6%	20.1%	14.2%
DME and Miscellaneous	5.1%	5.1%	5.1%	5.1%	5.1%	1.9%	1.6%	4.6%	2.1%	2.1%	2.1%	1.6%
Mental Health Services Inpatient	1.1%	1.1%	1.1%	1.1%	1.1%	1.6%	1.6%	3.1%	1.6%	1.6%	1.6%	1.6%
A&D Residential	1.1%	1.1%	1.1%	1.1%	1.1%	2.1%	2.1%	2.1%	2.1%	2.1%	2.1%	2.1%
Mental Health Other Non-Inpatient	3.8%	3.8%	3.2%	3.2%	3.2%	3.5%	2.9%	4.2%	3.3%	3.3%	3.3%	2.9%
<b>Total</b>	<b>4.0%</b>	<b>2.8%</b>	<b>3.3%</b>	<b>2.6%</b>	<b>3.2%</b>	<b>3.5%</b>	<b>5.6%</b>	<b>4.3%</b>	<b>6.1%</b>	<b>6.5%</b>	<b>6.0%</b>	<b>4.0%</b>

Tri-County Annualized Util/1,000 Trends												
COS/COA	TANF	PLMA	CHILD 00-01	CHILD 01-05	CHILD 06-18	ABAD & OAA Duals	ABAD & OAA Medicaid Only	CAF	ACA 19-44	ACA 45-54	ACA 55-64	BCCP
Inpatient - A & B Hospital	0.1%	0.1%	0.1%	0.1%	0.1%	0.1%	0.1%	0.1%	0.1%	0.1%	0.1%	0.1%
Inpatient - DRG Hospital	1.1%	1.1%	3.1%	3.1%	3.1%	3.6%	3.1%	3.1%	0.6%	0.6%	0.6%	3.1%
Inpatient - Other	1.1%	1.1%	3.1%	3.1%	3.1%	3.6%	3.1%	3.1%	0.6%	0.6%	0.6%	3.1%
Outpatient - A & B Hospital	1.1%	1.1%	1.1%	1.1%	1.1%	0.6%	0.6%	1.9%	0.6%	0.6%	0.6%	0.6%
Outpatient - DRG Hospital	0.1%	0.1%	0.5%	0.5%	0.5%	2.5%	0.7%	3.6%	0.1%	0.1%	0.1%	0.7%
Outpatient - Other	0.1%	0.1%	0.5%	0.5%	0.5%	2.5%	0.7%	3.6%	0.1%	0.1%	0.1%	0.7%
Physician Services	0.6%	0.6%	0.6%	0.6%	0.6%	0.6%	0.6%	1.6%	0.6%	0.6%	0.6%	0.6%
Substance Abuse	0.6%	0.6%	0.6%	0.6%	0.6%	1.6%	1.6%	1.6%	1.6%	1.6%	1.6%	1.6%
Prescription Drugs	-0.4%	-0.4%	2.2%	2.2%	2.2%	1.9%	2.3%	2.6%	2.1%	2.1%	2.0%	2.0%
DME and Miscellaneous	2.1%	2.1%	2.1%	2.1%	2.1%	1.9%	1.6%	1.6%	2.1%	2.1%	2.1%	1.6%
Mental Health Services Inpatient	0.1%	0.1%	0.1%	0.1%	0.1%	0.6%	0.6%	2.1%	0.6%	0.6%	0.6%	0.6%
A&D Residential	0.6%	0.6%	0.6%	0.6%	0.6%	1.6%	1.6%	1.6%	1.6%	1.6%	1.6%	1.6%
Mental Health Other Non-Inpatient	1.1%	1.1%	1.1%	1.1%	1.1%	0.6%	0.6%	2.1%	0.6%	0.6%	0.6%	0.6%
<b>Total</b>	<b>0.2%</b>	<b>0.3%</b>	<b>1.1%</b>	<b>1.2%</b>	<b>1.3%</b>	<b>1.3%</b>	<b>1.7%</b>	<b>2.1%</b>	<b>1.3%</b>	<b>1.4%</b>	<b>1.4%</b>	<b>1.4%</b>

# Appendix I. Rate Development **Optumas**

Tri-County Annualized Unit Cost Trends												
COS/COA	TANF	PLMA	CHILD 00-01	CHILD 01-05	CHILD 06-18	ABAD & OAA Duals	ABAD & OAA Medicaid Only	CAF	ACA 19-44	ACA 45-54	ACA 55-64	BCCP
Inpatient - A & B Hospital	5.1%	5.1%	5.1%	5.1%	5.1%	5.1%	5.1%	5.1%	5.1%	5.1%	5.1%	5.1%
Inpatient - DRG Hospital	1.1%	1.1%	1.1%	1.1%	1.1%	1.1%	1.1%	1.1%	1.1%	1.1%	1.1%	1.1%
Inpatient - Other	1.1%	1.1%	1.1%	1.1%	1.1%	1.1%	1.1%	1.1%	1.1%	1.1%	1.1%	1.1%
Outpatient - A & B Hospital	5.6%	5.6%	5.6%	5.6%	5.6%	5.6%	5.6%	5.6%	5.6%	5.6%	5.6%	5.6%
Outpatient - DRG Hospital	0.6%	0.6%	0.6%	0.6%	0.6%	0.6%	0.6%	1.1%	0.6%	0.6%	0.6%	0.6%
Outpatient - Other	0.6%	0.6%	0.6%	0.6%	0.6%	0.6%	0.6%	1.1%	0.6%	0.6%	0.6%	0.6%
Physician Services	1.6%	1.6%	0.6%	0.6%	0.6%	2.6%	2.9%	2.1%	0.6%	0.6%	0.6%	2.9%
Substance Abuse	0.6%	0.6%	0.6%	0.6%	0.6%	0.6%	0.6%	0.6%	0.6%	0.6%	0.6%	0.6%
Prescription Drugs	12.5%	8.5%	5.1%	5.2%	5.2%	5.3%	12.3%	5.0%	19.7%	19.2%	17.7%	12.0%
DME and Miscellaneous	3.0%	3.0%	3.0%	3.0%	3.0%	0.1%	0.1%	3.0%	0.1%	0.1%	0.1%	0.1%
Mental Health Services Inpatient	1.1%	1.1%	1.1%	1.1%	1.1%	1.1%	1.1%	1.1%	1.1%	1.1%	1.1%	1.1%
A&D Residential	0.6%	0.6%	0.6%	0.6%	0.6%	0.6%	0.6%	0.6%	0.6%	0.6%	0.6%	0.6%
Mental Health Other Non-Inpatient	2.7%	2.7%	2.1%	2.1%	2.1%	3.0%	2.3%	2.1%	2.7%	2.7%	2.7%	2.3%
<b>Total</b>	<b>3.9%</b>	<b>2.5%</b>	<b>2.1%</b>	<b>1.4%</b>	<b>1.9%</b>	<b>2.1%</b>	<b>3.9%</b>	<b>2.1%</b>	<b>4.7%</b>	<b>5.0%</b>	<b>4.5%</b>	<b>2.6%</b>

Central/Eastern Annualized PMPM Trends												
COS/COA	TANF	PLMA	CHILD 00-01	CHILD 01-05	CHILD 06-18	ABAD & OAA Duals	ABAD & OAA Medicaid Only	CAF	ACA 19-44	ACA 45-54	ACA 55-64	BCCP
Inpatient - A & B Hospital	5.0%	5.0%	5.0%	5.0%	5.0%	5.0%	5.0%	5.0%	5.0%	5.0%	5.0%	5.0%
Inpatient - DRG Hospital	2.1%	2.1%	4.1%	4.1%	4.1%	4.6%	3.1%	4.1%	1.6%	1.6%	1.6%	3.1%
Inpatient - Other	2.1%	2.1%	4.1%	4.1%	4.1%	4.6%	3.1%	4.1%	1.6%	1.6%	1.6%	3.1%
Outpatient - A & B Hospital	7.0%	7.0%	7.0%	7.0%	7.0%	7.0%	7.0%	7.0%	7.0%	7.0%	7.0%	7.0%
Outpatient - DRG Hospital	3.1%	3.1%	2.1%	2.1%	2.1%	2.1%	2.1%	2.1%	3.6%	3.6%	3.6%	2.1%
Outpatient - Other	3.1%	3.1%	2.1%	2.1%	2.1%	2.1%	2.1%	2.1%	3.6%	3.6%	3.6%	2.1%
Physician Services	2.1%	2.1%	1.0%	1.0%	1.0%	3.6%	2.0%	3.6%	1.6%	1.6%	1.6%	2.0%
Substance Abuse	0.1%	0.1%	0.1%	0.1%	0.1%	1.1%	1.1%	1.1%	1.1%	1.1%	1.1%	1.1%
Prescription Drugs	6.5%	3.6%	15.9%	11.1%	12.2%	12.8%	12.8%	11.8%	24.0%	22.7%	22.1%	14.6%
DME and Miscellaneous	3.1%	3.1%	3.1%	3.1%	3.1%	2.8%	1.6%	2.6%	3.0%	3.0%	3.0%	1.6%
Mental Health Services Inpatient	1.1%	1.1%	1.1%	1.1%	1.1%	1.6%	1.1%	1.1%	1.6%	1.6%	1.6%	1.1%
A&D Residential	0.1%	0.1%	0.1%	0.1%	0.1%	1.1%	1.1%	1.1%	1.1%	1.1%	1.1%	1.1%
Mental Health Other Non-Inpatient	2.1%	2.1%	3.8%	3.8%	3.8%	1.6%	0.1%	1.6%	2.6%	2.6%	2.6%	0.1%
<b>Total</b>	<b>3.7%</b>	<b>3.2%</b>	<b>3.7%</b>	<b>3.4%</b>	<b>4.0%</b>	<b>4.6%</b>	<b>5.0%</b>	<b>3.3%</b>	<b>6.4%</b>	<b>7.0%</b>	<b>6.9%</b>	<b>4.9%</b>

# Appendix I. Rate Development **Optumas**

Central/Eastern Annualized Util/1,000 Trends												
COS/COA	TANF	PLMA	CHILD 00-01	CHILD 01-05	CHILD 06-18	ABAD & OAA Duals	ABAD & OAA Medicaid Only	CAF	ACA 19-44	ACA 45-54	ACA 55-64	BCCP
Inpatient - A & B Hospital	0.1%	0.1%	0.1%	0.1%	0.1%	0.1%	0.1%	0.1%	0.1%	0.1%	0.1%	0.1%
Inpatient - DRG Hospital	1.1%	1.1%	3.1%	3.1%	3.1%	3.6%	2.1%	3.1%	0.6%	0.6%	0.6%	2.1%
Inpatient - Other	1.1%	1.1%	3.1%	3.1%	3.1%	3.6%	2.1%	3.1%	0.6%	0.6%	0.6%	2.1%
Outpatient - A & B Hospital	1.6%	1.6%	1.6%	1.6%	1.6%	1.6%	1.6%	1.6%	1.6%	1.6%	1.6%	1.6%
Outpatient - DRG Hospital	2.6%	2.6%	2.6%	2.6%	2.6%	2.6%	2.6%	2.6%	2.6%	2.6%	2.6%	2.6%
Outpatient - Other	2.6%	2.6%	2.6%	2.6%	2.6%	2.6%	2.6%	2.6%	2.6%	2.6%	2.6%	2.6%
Physician Services	0.6%	0.6%	0.5%	0.5%	0.5%	2.1%	0.6%	1.6%	0.6%	0.6%	0.6%	0.6%
Substance Abuse	0.6%	0.6%	0.6%	0.6%	0.6%	1.6%	1.6%	1.6%	1.6%	1.6%	1.6%	1.6%
Prescription Drugs	-0.3%	-0.4%	3.2%	2.9%	2.9%	3.1%	3.1%	2.8%	0.3%	0.2%	0.2%	3.2%
DME and Miscellaneous	2.1%	2.1%	2.1%	2.1%	2.1%	2.8%	1.6%	1.6%	2.1%	2.1%	2.1%	1.6%
Mental Health Services Inpatient	0.1%	0.1%	0.1%	0.1%	0.1%	0.6%	0.1%	0.1%	0.6%	0.6%	0.6%	0.1%
A&D Residential	0.6%	0.6%	0.6%	0.6%	0.6%	1.6%	1.6%	1.6%	1.6%	1.6%	1.6%	1.6%
Mental Health Other Non-Inpatient	1.1%	1.1%	1.1%	1.1%	1.1%	0.6%	0.6%	0.6%	1.5%	1.5%	1.5%	0.6%
<b>Total</b>	<b>0.4%</b>	<b>0.6%</b>	<b>1.2%</b>	<b>1.3%</b>	<b>1.5%</b>	<b>2.1%</b>	<b>2.1%</b>	<b>1.5%</b>	<b>0.8%</b>	<b>0.7%</b>	<b>0.7%</b>	<b>1.8%</b>

Central/Eastern Annualized Unit Cost Trends												
COS/COA	TANF	PLMA	CHILD 00-01	CHILD 01-05	CHILD 06-18	ABAD & OAA Duals	ABAD & OAA Medicaid Only	CAF	ACA 19-44	ACA 45-54	ACA 55-64	BCCP
Inpatient - A & B Hospital	5.0%	5.0%	5.0%	5.0%	5.0%	5.0%	5.0%	5.0%	5.0%	5.0%	5.0%	5.0%
Inpatient - DRG Hospital	1.1%	1.1%	1.1%	1.1%	1.1%	1.1%	1.1%	1.1%	1.1%	1.1%	1.1%	1.1%
Inpatient - Other	1.1%	1.1%	1.1%	1.1%	1.1%	1.1%	1.1%	1.1%	1.1%	1.1%	1.1%	1.1%
Outpatient - A & B Hospital	5.4%	5.4%	5.4%	5.4%	5.4%	5.4%	5.4%	5.4%	5.4%	5.4%	5.4%	5.4%
Outpatient - DRG Hospital	0.6%	0.6%	-0.4%	-0.4%	-0.4%	-0.4%	-0.4%	-0.4%	1.1%	1.1%	1.1%	-0.4%
Outpatient - Other	0.6%	0.6%	-0.4%	-0.4%	-0.4%	-0.4%	-0.4%	-0.4%	1.1%	1.1%	1.1%	-0.4%
Physician Services	1.6%	1.6%	0.6%	0.6%	0.6%	1.6%	1.5%	2.1%	1.1%	1.1%	1.1%	1.5%
Substance Abuse	-0.4%	-0.4%	-0.4%	-0.4%	-0.4%	-0.4%	-0.4%	-0.4%	-0.4%	-0.4%	-0.4%	-0.4%
Prescription Drugs	6.9%	4.1%	12.3%	8.0%	9.0%	9.5%	9.3%	8.8%	23.7%	22.4%	21.8%	11.0%
DME and Miscellaneous	1.1%	1.1%	1.1%	1.1%	1.1%	0.1%	0.1%	1.1%	1.0%	1.0%	1.0%	0.1%
Mental Health Services Inpatient	1.1%	1.1%	1.1%	1.1%	1.1%	1.1%	1.1%	1.1%	1.1%	1.1%	1.1%	1.1%
A&D Residential	-0.4%	-0.4%	-0.4%	-0.4%	-0.4%	-0.4%	-0.4%	-0.4%	-0.4%	-0.4%	-0.4%	-0.4%
Mental Health Other Non-Inpatient	1.1%	1.1%	2.7%	2.7%	2.7%	1.1%	-0.4%	1.1%	1.1%	1.1%	1.1%	-0.4%
<b>Total</b>	<b>3.3%</b>	<b>2.5%</b>	<b>2.5%</b>	<b>2.1%</b>	<b>2.5%</b>	<b>2.4%</b>	<b>2.9%</b>	<b>1.8%</b>	<b>5.6%</b>	<b>6.4%</b>	<b>6.2%</b>	<b>3.0%</b>

**Appendix II. Payment Rates**

## Appendix II.A: Regional Rates

### Central Region Rate

		Base Data		Hep-C Removal		Rate Add-ons Removal		Prospective Trend		Back Pain Adjustment		ABA Adjustment		Non-Medical Load	
COA	CY15 MMs	PMPM	% Adj	PMPM	% Adj	PMPM	Annual Trend	PMPM	PMPM Adj	PMPM	PMPM Adj	PMPM	Admin	PMPM	
TANF	91,784	\$ 362.89	-0.8%	\$ 359.88	-1.5%	\$ 354.61	3.7%	\$ 381.34	\$ 8.11	\$ 389.45	\$ -	\$ 389.45	11.5%	\$ 440.05	
PLMA	28,227	\$ 311.35	0.0%	\$ 311.35	-0.8%	\$ 308.75	3.2%	\$ 328.58	\$ 2.60	\$ 331.18	\$ -	\$ 331.18	11.5%	\$ 374.22	
CHILD 00-01	50,722	\$ 434.46	0.0%	\$ 434.46	-0.2%	\$ 433.56	3.7%	\$ 466.41	\$ -	\$ 466.41	\$ 0.01	\$ 466.42	11.5%	\$ 527.03	
CHILD 01-05	194,512	\$ 112.37	0.0%	\$ 112.37	-0.8%	\$ 111.48	3.4%	\$ 119.23	\$ -	\$ 119.23	\$ 7.89	\$ 127.12	11.5%	\$ 143.63	
CHILD 06-18	434,169	\$ 133.82	0.0%	\$ 133.82	-0.8%	\$ 132.74	4.0%	\$ 143.63	\$ -	\$ 143.63	\$ 0.85	\$ 144.48	11.5%	\$ 163.25	
ABAD & OAA Duals	57,686	\$ 204.31	-0.3%	\$ 203.75	-14.8%	\$ 173.60	4.6%	\$ 189.90	\$ 3.92	\$ 193.82	\$ -	\$ 193.82	11.5%	\$ 219.00	
ABAD & OAA Medicaid Only	67,546	\$ 1,155.65	-2.5%	\$ 1,126.92	-2.4%	\$ 1,099.37	5.0%	\$ 1,213.07	\$ 6.83	\$ 1,219.90	\$ 0.37	\$ 1,220.27	11.5%	\$ 1,378.84	
CAF	22,042	\$ 514.32	0.0%	\$ 514.32	-7.9%	\$ 473.60	3.3%	\$ 505.34	\$ -	\$ 505.34	\$ 2.30	\$ 507.64	11.5%	\$ 573.60	
ACA 19-44	366,646	\$ 322.04	-0.5%	\$ 320.56	-2.1%	\$ 313.81	6.4%	\$ 355.53	\$ 6.36	\$ 361.89	\$ -	\$ 361.89	11.5%	\$ 408.92	
ACA 45-54	125,646	\$ 514.23	-2.3%	\$ 502.37	-1.7%	\$ 493.73	7.0%	\$ 565.76	\$ 8.64	\$ 574.40	\$ -	\$ 574.40	11.5%	\$ 649.04	
ACA 55-64	110,752	\$ 587.34	-5.1%	\$ 557.19	-1.8%	\$ 547.18	6.9%	\$ 625.49	\$ 7.39	\$ 632.88	\$ -	\$ 632.88	11.5%	\$ 715.11	
BCCP	923	\$ 1,683.61	0.0%	\$ 1,683.61	-0.3%	\$ 1,678.42	4.9%	\$ 1,846.80	\$ -	\$ 1,846.80	\$ -	\$ 1,846.80	11.5%	\$ 2,086.78	
Total	1,550,655	\$ 318.94		\$ 314.02		\$ 307.31		\$ 341.75		\$ 345.45		\$ 346.73		\$ 391.78	

## Northwest Region Rate

COA	CY15 MMs	Base Data	Hep-C Removal		Rate Add-ons Removal		Prospective Trend		Back Pain Adjustment		ABA Adjustment		Non-Medical Load	
		PMPM	% Adj	PMPM	% Adj	PMPM	Annual Trend	PMPM	PMPM Adj	PMPM	PMPM Adj	PMPM	Admin	PMPM
TANF	132,619	\$ 338.91	-0.2%	\$ 338.24	-2.1%	\$ 331.09	2.9%	\$ 350.27	\$ 7.28	\$ 357.55	\$ -	\$ 357.55	9.7%	\$ 395.96
PLMA	41,594	\$ 296.67	0.0%	\$ 296.67	-1.9%	\$ 291.11	2.7%	\$ 307.34	\$ 2.62	\$ 309.97	\$ -	\$ 309.97	9.7%	\$ 343.26
CHILD 00-01	75,620	\$ 465.75	0.0%	\$ 465.75	-1.1%	\$ 460.78	3.8%	\$ 496.85	\$ -	\$ 496.85	\$ 0.02	\$ 496.87	9.7%	\$ 550.24
CHILD 01-05	302,864	\$ 110.65	0.0%	\$ 110.65	-4.5%	\$ 105.68	4.0%	\$ 114.23	\$ -	\$ 114.23	\$ 7.98	\$ 122.21	9.7%	\$ 135.34
CHILD 06-18	679,431	\$ 131.47	0.0%	\$ 131.47	-4.0%	\$ 126.26	4.5%	\$ 137.94	\$ -	\$ 137.94	\$ 0.87	\$ 138.81	9.7%	\$ 153.72
ABAD & OAA Duals	101,434	\$ 207.37	0.0%	\$ 207.37	-9.3%	\$ 188.06	5.2%	\$ 207.98	\$ 4.72	\$ 212.70	\$ -	\$ 212.70	9.7%	\$ 235.54
ABAD & OAA Medicaid Only	116,496	\$ 1,025.86	-1.0%	\$ 1,015.60	-2.0%	\$ 995.79	5.8%	\$ 1,113.81	\$ 6.37	\$ 1,120.18	\$ 0.38	\$ 1,120.56	9.7%	\$ 1,240.93
CAF	34,185	\$ 407.45	0.0%	\$ 407.45	-9.6%	\$ 368.42	5.1%	\$ 406.83	\$ -	\$ 406.83	\$ 2.22	\$ 409.05	9.7%	\$ 452.99
ACA 19-44	574,664	\$ 293.91	-0.2%	\$ 293.46	-2.6%	\$ 285.73	5.7%	\$ 319.28	\$ 5.43	\$ 324.71	\$ -	\$ 324.71	9.7%	\$ 359.59
ACA 45-54	184,919	\$ 498.57	-1.2%	\$ 492.79	-1.8%	\$ 483.82	6.6%	\$ 550.20	\$ 7.65	\$ 557.85	\$ -	\$ 557.85	9.7%	\$ 617.77
ACA 55-64	154,173	\$ 555.27	-1.9%	\$ 544.74	-1.7%	\$ 535.63	6.8%	\$ 611.24	\$ 6.93	\$ 618.18	\$ -	\$ 618.18	9.7%	\$ 684.58
BCCP	900	\$ 1,156.13	0.0%	\$ 1,156.13	-1.2%	\$ 1,142.23	4.3%	\$ 1,243.13	\$ -	\$ 1,243.13	\$ -	\$ 1,243.13	9.7%	\$ 1,376.67
<b>Total</b>	<b>2,398,899</b>	<b>\$ 299.12</b>		<b>\$ 297.35</b>		<b>\$ 289.14</b>		<b>\$ 321.17</b>		<b>\$ 324.47</b>		<b>\$ 325.77</b>		<b>\$ 360.76</b>



## Appendix II. Payment Rates **Optumas**

### Southwest Region Rate

		Base Data		Hep-C Removal		Rate Add-ons Removal		Prospective Trend		Back Pain Adjustment		ABA Adjustment		Non-Medical Load	
COA	CY15 MMs	PMPM	% Adj	PMPM	% Adj	PMPM	Annual Trend	PMPM	PMPM Adj	PMPM	PMPM Adj	PMPM	Admin	PMPM	
TANF	155,069	\$ 287.56	-0.2%	\$ 286.95	-2.0%	\$ 281.14	4.3%	\$ 305.94	\$ 6.40	\$ 312.34	\$ -	\$ 312.34	11.8%	\$ 354.13	
PLMA	49,328	\$ 265.39	0.0%	\$ 265.39	-2.2%	\$ 259.63	3.7%	\$ 279.14	\$ 2.64	\$ 281.78	\$ -	\$ 281.78	11.8%	\$ 319.48	
CHILD 00-01	74,635	\$ 537.81	0.0%	\$ 537.81	-1.0%	\$ 532.40	3.5%	\$ 569.77	\$ -	\$ 569.77	\$ 0.01	\$ 569.79	11.8%	\$ 646.02	
CHILD 01-05	283,309	\$ 100.19	0.0%	\$ 100.19	-4.4%	\$ 95.81	4.1%	\$ 103.77	\$ -	\$ 103.77	\$ 7.90	\$ 111.67	11.8%	\$ 126.61	
CHILD 06-18	627,216	\$ 115.90	0.0%	\$ 115.90	-3.8%	\$ 111.49	4.5%	\$ 121.66	\$ -	\$ 121.66	\$ 0.84	\$ 122.50	11.8%	\$ 138.88	
ABAD & OAA Duals	129,598	\$ 178.22	-0.6%	\$ 177.23	-6.3%	\$ 165.98	2.5%	\$ 174.37	\$ 5.44	\$ 179.80	\$ -	\$ 179.80	11.8%	\$ 203.86	
ABAD & OAA Medicaid Only	153,205	\$ 955.52	-0.9%	\$ 946.59	-1.5%	\$ 932.85	4.7%	\$ 1,023.07	\$ 5.68	\$ 1,028.74	\$ 0.29	\$ 1,029.03	11.8%	\$ 1,166.70	
CAF	54,335	\$ 400.87	0.0%	\$ 400.87	-8.8%	\$ 365.66	4.5%	\$ 398.97	\$ -	\$ 398.97	\$ 2.43	\$ 401.40	11.8%	\$ 455.10	
ACA 19-44	713,885	\$ 237.23	-0.1%	\$ 236.90	-2.7%	\$ 230.42	5.1%	\$ 254.34	\$ 5.08	\$ 259.42	\$ -	\$ 259.42	11.8%	\$ 294.12	
ACA 45-54	236,659	\$ 423.49	-0.7%	\$ 420.54	-1.6%	\$ 413.95	5.6%	\$ 461.82	\$ 6.87	\$ 468.69	\$ -	\$ 468.69	11.8%	\$ 531.39	
ACA 55-64	218,144	\$ 481.98	-2.0%	\$ 472.48	-1.5%	\$ 465.45	5.5%	\$ 517.79	\$ 6.15	\$ 523.93	\$ -	\$ 523.93	11.8%	\$ 594.03	
BCCP	1,649	\$ 1,095.79	0.0%	\$ 1,095.79	-0.8%	\$ 1,087.08	4.0%	\$ 1,175.82	\$ -	\$ 1,175.82	\$ -	\$ 1,175.82	11.8%	\$ 1,333.12	
Total	2,697,033	\$ 284.27		\$ 282.57		\$ 275.60		\$ 302.63		\$ 306.08		\$ 307.17		\$ 348.26	

## Appendix II. Payment Rates **Optumas**

### Tri-County Region Rate

COA	CY15 MMs	Base Data	Hep-C Removal		Rate Add-ons Removal		Prospective Trend		Back Pain Adjustment		ABA Adjustment		Non-Medical Load	
		PMPM	% Adj	PMPM	% Adj	PMPM	Annual Trend	PMPM	PMPM Adj	PMPM	PMPM Adj	PMPM	Admin	PMPM
TANF	219,883	\$ 267.43	-0.4%	\$ 266.27	-2.5%	\$ 259.59	4.0%	\$ 280.86	\$ 6.22	\$ 287.08	\$ -	\$ 287.08	10.1%	\$ 319.33
PLMA	74,831	\$ 262.89	0.0%	\$ 262.89	-2.2%	\$ 257.14	2.8%	\$ 271.93	\$ 2.48	\$ 274.41	\$ -	\$ 274.41	10.1%	\$ 305.24
CHILD 00-01	122,869	\$ 477.94	0.0%	\$ 477.94	-0.1%	\$ 477.33	3.3%	\$ 509.43	\$ -	\$ 509.43	\$ 0.02	\$ 509.45	10.1%	\$ 566.69
CHILD 01-05	482,998	\$ 89.99	0.0%	\$ 89.99	-0.5%	\$ 89.57	2.6%	\$ 94.37	\$ -	\$ 94.37	\$ 7.93	\$ 102.31	10.1%	\$ 113.80
CHILD 06-18	1,075,879	\$ 102.62	0.0%	\$ 102.62	-3.3%	\$ 99.19	3.2%	\$ 105.67	\$ -	\$ 105.67	\$ 0.85	\$ 106.51	10.1%	\$ 118.48
ABAD & OAA Duals	224,873	\$ 261.62	-0.1%	\$ 261.29	-21.9%	\$ 204.15	3.5%	\$ 218.68	\$ 5.72	\$ 224.41	\$ -	\$ 224.41	10.1%	\$ 249.62
ABAD & OAA Medicaid Only	203,326	\$ 1,139.63	-2.9%	\$ 1,106.27	-4.6%	\$ 1,054.89	5.6%	\$ 1,177.21	\$ 6.66	\$ 1,183.87	\$ 0.34	\$ 1,184.21	10.1%	\$ 1,317.25
CAF	52,749	\$ 373.91	0.0%	\$ 373.91	-6.6%	\$ 349.20	4.3%	\$ 379.76	\$ -	\$ 379.76	\$ 2.30	\$ 382.06	10.1%	\$ 424.99
ACA 19-44	1,177,953	\$ 228.65	-0.4%	\$ 227.78	-2.4%	\$ 222.25	6.1%	\$ 249.96	\$ 4.54	\$ 254.50	\$ -	\$ 254.50	10.1%	\$ 283.10
ACA 45-54	338,909	\$ 423.17	-3.0%	\$ 410.39	-2.1%	\$ 401.60	6.5%	\$ 455.73	\$ 6.73	\$ 462.46	\$ -	\$ 462.46	10.1%	\$ 514.42
ACA 55-64	272,219	\$ 459.54	-5.4%	\$ 434.57	-1.5%	\$ 427.95	6.0%	\$ 480.43	\$ 5.65	\$ 486.08	\$ -	\$ 486.08	10.1%	\$ 540.69
BCCP	1,662	\$ 1,347.21	0.0%	\$ 1,347.21	-0.3%	\$ 1,342.66	4.0%	\$ 1,452.57	\$ -	\$ 1,452.57	\$ -	\$ 1,452.57	10.1%	\$ 1,615.76
<b>Total</b>	<b>4,248,152</b>	<b>\$ 268.69</b>		<b>\$ 264.15</b>		<b>\$ 254.32</b>		<b>\$ 281.21</b>		<b>\$ 284.36</b>		<b>\$ 285.52</b>		<b>\$ 317.59</b>

## Appendix II.B: Risk Score Durational Summary

COA	Allcare CCO, Inc.		Cascade Health Alliance, LLC.		Columbia-Pacific CCO, LLC.		Eastern Oregon Coordinated Care Org., LLC.	
	Member Count (Scored Members) <sup>1</sup>	Non Scored Members <sup>2</sup>	Member Count (Scored Members) <sup>1</sup>	Non Scored Members <sup>2</sup>	Member Count (Scored Members) <sup>1</sup>	Non Scored Members <sup>2</sup>	Member Count (Scored Members) <sup>1</sup>	Non Scored Members <sup>2</sup>
TANF	3,499	740	1,114	325	1,612	433	3,272	932
CHILD 01-05	5,986	806	2,127	390	2,932	471	7,019	1,300
CHILD 06-18	12,039	1,682	4,296	701	6,708	1,084	15,123	2,263
ABAD & OAA	2,389	168	949	85	1,257	150	2,357	303
ACA 19-44	12,909	2,686	4,039	981	6,633	1,501	10,471	2,526
ACA 45-54	4,563	764	1,447	308	2,489	413	3,537	656
ACA 55-64	4,453	616	1,233	238	2,370	322	3,314	519

COA	FamilyCare, Inc.		Health Share of Oregon		InterCommunity Health Network, Inc.		Jackson County CCO, LLC.	
	Member Count (Scored Members) <sup>1</sup>	Non Scored Members <sup>2</sup>	Member Count (Scored Members) <sup>1</sup>	Non Scored Members <sup>2</sup>	Member Count (Scored Members) <sup>1</sup>	Non Scored Members <sup>2</sup>	Member Count (Scored Members) <sup>1</sup>	Non Scored Members <sup>2</sup>
TANF	7,602	2,002	13,041	2,885	3,503	846	1,859	440
CHILD 01-05	15,299	2,573	27,084	3,358	6,576	975	3,541	469
CHILD 06-18	30,581	4,631	66,561	7,028	14,561	1,958	8,758	1,006
ABAD & OAA	2,986	467	14,025	905	3,140	223	1,392	118
ACA 19-44	41,406	9,416	61,762	11,740	14,931	3,248	7,535	1,516
ACA 45-54	11,068	2,111	18,438	2,654	4,637	815	2,460	418
ACA 55-64	8,959	1,406	15,143	1,874	4,252	625	2,240	278

COA	PacificSource Community Solutions, Inc. (Central)		PacificSource Community Solutions, Inc. (Gorge)		Primary Health of Josephine County, LLC		Trillium Community Health Plan, Inc.	
	Member Count (Scored Members) <sup>1</sup>	Non Scored Members <sup>2</sup>	Member Count (Scored Members) <sup>1</sup>	Non Scored Members <sup>2</sup>	Member Count (Scored Members) <sup>1</sup>	Non Scored Members <sup>2</sup>	Member Count (Scored Members) <sup>1</sup>	Non Scored Members <sup>2</sup>
TANF	3,436	851	644	157	739	211	5,608	1,306
CHILD 01-05	6,270	865	1,781	242	1,009	161	9,569	1,334
CHILD 06-18	15,482	1,941	4,257	446	2,617	387	21,964	2,962
ABAD & OAA	1,943	174	481	30	581	59	5,510	383
ACA 19-44	14,331	2,927	3,027	606	3,062	793	26,546	5,348
ACA 45-54	4,690	863	1,130	178	1,204	220	7,755	1,294
ACA 55-64	4,253	615	988	143	1,214	181	7,096	1,061

COA	DCIPA, LLC. Abn Umpqua Health Alliance		Western Oregon Advanced Health, LLC		Willamette Valley Community Health, LLC		Yamhill County Care Organization, Inc.	
	Member Count (Scored Members) <sup>1</sup>	Non Scored Members <sup>2</sup>	Member Count (Scored Members) <sup>1</sup>	Non Scored Members <sup>2</sup>	Member Count (Scored Members) <sup>1</sup>	Non Scored Members <sup>2</sup>	Member Count (Scored Members) <sup>1</sup>	Non Scored Members <sup>2</sup>
TANF	1,931	431	1,286	271	6,029	1,437	1,512	330
CHILD 01-05	2,824	453	2,091	276	14,214	1,957	3,019	430
CHILD 06-18	6,312	947	4,466	692	32,629	4,391	7,485	918
ABAD & OAA	1,548	113	1,471	120	4,715	344	757	83
ACA 19-44	6,876	1,562	4,966	1,098	22,651	4,805	5,583	1,263
ACA 45-54	2,366	426	1,947	404	7,017	1,248	1,841	349
ACA 55-64	2,224	341	1,997	328	5,415	877	1,529	241

<sup>1</sup> Member Count (Scored Members) reflects members enrolled at least 6 months in CY15.

<sup>2</sup> Non Scored Members reflects members with fewer than 6 months of enrollment in CY15.

## Appendix II.C: Risk Score Summary

### Central/Eastern Region

COA	Normalized Risk Score			
	Eastern Oregon Coordinated Care Org., LLC.	PacificSource Community Solutions, Inc. (Central)	PacificSource Community Solutions, Inc. (Gorge)	Cascade Health Alliance, LLC.
TANF	1.07	0.93	0.97	1.02
PLMA	1.00	1.00	1.00	1.00
CHILD 00-01	1.00	1.00	1.00	1.00
CHILD 01-05	0.93	1.04	1.08	1.03
CHILD 06-18	0.96	1.04	0.98	1.04
DUAL-MEDS	1.00	1.00	1.00	1.00
ABAD & OAA	1.00	1.01	0.99	1.00
CAF	1.00	1.00	1.00	1.00
ACA 19-44	1.05	0.96	0.93	1.05
ACA 45-54	1.04	0.98	0.90	1.05
ACA 55-64	1.03	0.99	0.90	1.04
BCCP	1.00	1.00	1.00	1.00

### Northwest Region

COA	Normalized Risk Score			
	Columbia-Pacific CCO, LLC.	InterCommunity Health Network, Inc.	Willamette Valley Community Health, LLC	Yamhill County Care Organization, Inc.
TANF	1.02	1.02	0.98	1.03
PLMA	1.00	1.00	1.00	1.00
CHILD 00-01	1.00	1.00	1.00	1.00
CHILD 01-05	0.94	1.00	1.01	1.01
CHILD 06-18	0.98	1.08	0.97	1.01
DUAL-MEDS	1.00	1.00	1.00	1.00
ABAD & OAA	0.96	0.99	1.01	1.08
CAF	1.00	1.00	1.00	1.00
ACA 19-44	1.01	1.01	0.97	1.07
ACA 45-54	0.99	1.01	0.99	1.04
ACA 55-64	0.97	1.01	1.00	1.01
BCCP	1.00	1.00	1.00	1.00

## Appendix II. Payment Rates | Optumas

### Southwest Region

COA	Normalized Risk Score					
	Allcare CCO, Inc.	Trillium Community Health Plan, Inc.	Jackson County CCO, LLC.	Primary Health of Josephine County, LLC	DCIPA, LLC. Abn Umpqua Health Alliance	Western Oregon Advanced Health, LLC
TANF	0.96	1.01	1.02	0.95	1.08	0.97
PLMA	1.00	1.00	1.00	1.00	1.00	1.00
CHILD 00-01	1.00	1.00	1.00	1.00	1.00	1.00
CHILD 01-05	0.96	1.05	0.99	0.95	0.99	0.92
CHILD 06-18	0.93	1.06	0.97	0.89	1.01	1.02
DUAL-MEDS	1.00	1.00	1.00	1.00	1.00	1.00
ABAD & OAA	1.01	0.99	1.06	1.01	1.01	0.94
CAF	1.00	1.00	1.00	1.00	1.00	1.00
ACA 19-44	0.99	1.00	1.03	0.86	1.09	0.96
ACA 45-54	0.98	1.00	1.00	0.95	1.09	0.96
ACA 55-64	0.99	1.00	0.98	1.00	1.10	0.93
BCCP	1.00	1.00	1.00	1.00	1.00	1.00

### Tri-County Region

COA	Normalized Risk Score	
	FamilyCare, Inc.	Health Share of Oregon
TANF	0.95	1.03
PLMA	1.00	1.00
CHILD 00-01	1.00	1.00
CHILD 01-05	0.97	1.01
CHILD 06-18	1.01	1.00
DUAL-MEDS	1.00	1.00
ABAD & OAA	0.86	1.03
CAF	1.00	1.00
ACA 19-44	0.94	1.04
ACA 45-54	0.94	1.04
ACA 55-64	0.95	1.03
BCCP	1.00	1.00

## Appendix II.D: A/B Hospital Factors

### Central/Eastern Region

COA	A/B Hospital Adjustment			
	Eastern Oregon Coordinated Care Org., LLC.	PacificSource Community Solutions, Inc. (Central)	PacificSource Community Solutions, Inc. (Gorge)	Cascade Health Alliance, LLC.
TANF	1.10	0.94	1.11	0.80
PLMA	1.10	0.94	1.11	0.80
CHILD 00-01	1.09	0.94	1.11	0.80
CHILD 01-05	1.09	0.94	1.11	0.80
CHILD 06-18	1.09	0.94	1.11	0.80
DUAL-MEDS	1.11	0.96	1.13	0.82
ABAD & OAA	1.10	0.95	1.12	0.81
CAF	1.10	0.94	1.11	0.80
ACA 19-44	1.11	0.95	1.12	0.81
ACA 45-54	1.11	0.95	1.12	0.81
ACA 55-64	1.10	0.95	1.12	0.81
BCCP	1.11	0.95	1.12	0.81

### Northwest Region

COA	A/B Hospital Adjustment			
	Columbia-Pacific CCO, LLC.	InterCommunity Health Network, Inc.	Willamette Valley Community Health, LLC	Yamhill County Care Organization, Inc.
TANF	1.08	1.05	0.96	0.95
PLMA	1.09	1.05	0.96	0.95
CHILD 00-01	1.09	1.06	0.96	0.96
CHILD 01-05	1.09	1.06	0.96	0.96
CHILD 06-18	1.09	1.06	0.96	0.96
DUAL-MEDS	1.09	1.05	0.96	0.96
ABAD & OAA	1.08	1.05	0.96	0.95
CAF	1.08	1.05	0.95	0.95
ACA 19-44	1.08	1.05	0.96	0.95
ACA 45-54	1.08	1.05	0.95	0.95
ACA 55-64	1.07	1.04	0.95	0.95
BCCP	1.07	1.04	0.95	0.95

## Southwest Region

COA	A/B Hospital Adjustment					
	Allcare CCO, Inc.	Trillium Community Health Plan, Inc.	Jackson County CCO, LLC.	Primary Health of Josephine County, LLC	DCIPA, LLC. Abn Umpqua Health Alliance	Western Oregon Advanced Health, LLC
TANF	0.98	1.05	0.93	0.95	0.94	1.08
PLMA	0.97	1.05	0.93	0.94	0.93	1.08
CHILD 00-01	0.97	1.05	0.93	0.94	0.93	1.08
CHILD 01-05	0.98	1.05	0.93	0.94	0.93	1.08
CHILD 06-18	0.97	1.05	0.93	0.94	0.93	1.08
DUAL-MEDS	0.97	1.04	0.93	0.94	0.93	1.08
ABAD & OAA	0.97	1.04	0.92	0.94	0.93	1.08
CAF	0.97	1.04	0.92	0.94	0.93	1.07
ACA 19-44	0.97	1.05	0.93	0.94	0.93	1.08
ACA 45-54	0.97	1.05	0.93	0.94	0.93	1.08
ACA 55-64	0.98	1.05	0.93	0.94	0.93	1.08
BCCP	0.98	1.05	0.94	0.95	0.94	1.09

## Tri-County Region

COA	A/B Hospital Adjustment	
	FamilyCare, Inc.	Health Share of Oregon
TANF	1.00	1.00
PLMA	1.00	1.00
CHILD 00-01	1.00	1.00
CHILD 01-05	1.00	1.00
CHILD 06-18	1.00	1.00
DUAL-MEDS	1.00	1.00
ABAD & OAA	1.00	1.00
CAF	1.00	1.00
ACA 19-44	1.00	1.00
ACA 45-54	1.00	1.00
ACA 55-64	1.00	1.00
BCCP	1.00	1.00

## Appendix II.E: Budget Neutrality Summary

Central/Eastern Region

COA	May 2015 MMs					Regional	Regional Payment Rate (Net Add-Ons)
	Eastern Oregon Coordinated Care Org., LLC.	PacificSource Community Solutions, Inc. (Central)	PacificSource Community Solutions, Inc. (Gorge)	Cascade Health Alliance, LLC.			
TANF	35,140	37,593	6,934	12,116		91,784	\$440.05
PLMA	10,728	10,676	2,995	3,828		28,227	\$374.22
CHILD 00-01	19,960	19,035	5,073	6,653		50,722	\$527.03
CHILD 01-05	79,747	70,368	20,443	23,954		194,512	\$143.63
CHILD 06-18	166,877	172,046	47,576	47,670		434,169	\$163.25
DUAL-MEDS	19,203	25,538	4,049	8,896		57,686	\$219.00
ABAD & OAA	27,719	22,804	5,753	11,271		67,546	\$1,378.84
CAF	8,679	6,955	2,571	3,836		22,042	\$573.60
ACA 19-44	120,655	164,445	34,571	46,975		366,646	\$408.92
ACA 45-54	41,610	54,291	12,849	16,896		125,646	\$649.04
ACA 55-64	37,243	48,275	11,136	14,098		110,752	\$715.11
BCCP	227	550	95	52		923	\$2,086.78
<b>Total</b>	<b>567,788</b>	<b>632,577</b>	<b>154,046</b>	<b>196,245</b>		<b>1,550,655</b>	<b>\$391.78</b>

COA	CCO-Specific Payment Rates (Net Add-Ons)					Regional	Regional Check
	Eastern Oregon Coordinated Care Org., LLC.	PacificSource Community Solutions, Inc. (Central)	PacificSource Community Solutions, Inc. (Gorge)	Cascade Health Alliance, LLC.			
TANF	\$516.54	\$387.63	\$475.00	\$360.88		\$440.05	\$0.00
PLMA	\$410.26	\$352.57	\$416.42	\$300.53		\$374.22	\$0.00
CHILD 00-01	\$576.85	\$495.73	\$585.50	\$422.55		\$527.03	\$0.00
CHILD 01-05	\$146.41	\$140.45	\$172.78	\$118.89		\$143.63	\$0.00
CHILD 06-18	\$171.08	\$159.34	\$177.52	\$135.77		\$163.25	\$0.00
DUAL-MEDS	\$244.00	\$209.69	\$247.66	\$178.74		\$219.00	\$0.00
ABAD & OAA	\$1,510.02	\$1,317.32	\$1,520.71	\$1,108.27		\$1,378.84	\$0.00
CAF	\$629.76	\$541.20	\$639.21	\$461.32		\$573.60	\$0.00
ACA 19-44	\$476.54	\$372.63	\$428.52	\$347.83		\$408.92	\$0.00
ACA 45-54	\$747.15	\$602.21	\$656.53	\$552.21		\$649.04	\$0.00
ACA 55-64	\$811.15	\$673.02	\$721.30	\$600.69		\$715.11	\$0.00
BCCP	\$2,311.32	\$1,986.29	\$2,346.01	\$1,693.11		\$2,086.78	\$0.00
<b>Total</b>	<b>\$432.59</b>	<b>\$366.41</b>	<b>\$405.01</b>	<b>\$345.13</b>		<b>\$391.78</b>	<b>\$0.00</b>



## Appendix II. Payment Rates **Optumas**

### Northwest Region

COA	May 2015 MMs					Regional	Regional Payment Rate (Net Add-Ons)
	Columbia-Pacific CCO, LLC.	InterCommunity Health Network, Inc.	Willamette Valley Community Health, LLC	Yamhill County Care Organization, Inc.			
TANF	17,437	37,242	62,434	15,506	132,619		\$395.96
PLMA	5,221	11,402	20,065	4,907	41,594		\$343.26
CHILD 00-01	8,497	19,126	39,643	8,354	75,620		\$550.24
CHILD 01-05	33,251	74,130	160,642	34,842	302,864		\$135.34
CHILD 06-18	74,203	161,389	361,728	82,112	679,431		\$153.72
DUAL-MEDS	9,401	31,670	53,859	6,505	101,434		\$235.54
ABAD & OAA	14,886	37,543	55,258	8,809	116,496		\$1,240.93
CAF	5,112	9,998	15,686	3,389	34,185		\$452.99
ACA 19-44	76,337	172,948	260,640	64,738	574,664		\$359.59
ACA 45-54	28,729	54,224	80,639	21,328	184,919		\$617.77
ACA 55-64	26,667	48,668	61,642	17,196	154,173		\$684.58
BCCP	195	237	346	122	900		\$1,376.67
<b>Total</b>	<b>299,935</b>	<b>658,578</b>	<b>1,172,579</b>	<b>267,808</b>	<b>2,398,899</b>		<b>\$360.76</b>

COA	CCO-Specific Payment Rates (Net Add-Ons)					Regional	Regional Check
	Columbia-Pacific CCO, LLC.	InterCommunity Health Network, Inc.	Willamette Valley Community Health, LLC	Yamhill County Care Organization, Inc.			
TANF	\$437.60	\$422.36	\$370.08	\$389.89	\$395.96		\$0.00
PLMA	\$372.49	\$361.17	\$329.26	\$327.79	\$343.26		\$0.00
CHILD 00-01	\$599.26	\$581.03	\$529.71	\$527.34	\$550.24		\$0.00
CHILD 01-05	\$139.07	\$142.49	\$132.17	\$131.15	\$135.34		\$0.00
CHILD 06-18	\$164.47	\$175.69	\$142.93	\$148.40	\$153.72		\$0.00
DUAL-MEDS	\$255.70	\$247.92	\$226.02	\$225.01	\$235.54		\$0.00
ABAD & OAA	\$1,281.94	\$1,284.34	\$1,194.51	\$1,277.80	\$1,240.93		\$0.00
CAF	\$489.21	\$474.33	\$432.44	\$430.51	\$452.99		\$0.00
ACA 19-44	\$393.83	\$380.82	\$334.16	\$364.83	\$359.59		\$0.00
ACA 45-54	\$660.62	\$653.48	\$580.92	\$608.63	\$617.77		\$0.00
ACA 55-64	\$710.37	\$722.00	\$652.60	\$653.34	\$684.58		\$0.00
BCCP	\$1,478.60	\$1,433.64	\$1,307.01	\$1,301.17	\$1,376.67		\$0.00
<b>Total</b>	<b>\$412.62</b>	<b>\$406.12</b>	<b>\$326.82</b>	<b>\$339.75</b>	<b>\$360.76</b>		<b>\$0.00</b>

## Appendix II. Payment Rates **Optumas**

### Southwest Region

COA	May 2015 MMs							Regional Payment Rate (Net Add-Ons)
	Allcare CCO, Inc.	Trillium Community Health Plan, Inc.	Jackson County CCO, LLC.	Primary Health of Josephine County, LLC	DCIPA, LLC. Abn Umpqua Health Alliance	Western Oregon Advanced Health, LLC	Regional	
TANF	36,134	57,779	19,577	7,942	20,416	13,221	155,069	\$354.13
PLMA	11,984	20,080	5,637	2,556	5,376	3,695	49,328	\$319.48
CHILD 00-01	17,505	29,600	9,401	3,267	8,818	6,044	74,635	\$646.02
CHILD 01-05	68,111	107,817	40,414	11,458	32,205	23,304	283,309	\$126.61
CHILD 06-18	133,596	245,824	97,699	29,617	70,266	50,214	627,216	\$138.88
DUAL-MEDS	26,572	49,880	13,179	6,081	18,343	15,543	129,598	\$203.86
ABAD & OAA	28,522	65,231	16,823	6,999	18,401	17,229	153,205	\$1,166.70
CAF	8,496	24,757	6,353	2,176	6,740	5,814	54,335	\$455.10
ACA 19-44	150,902	301,144	87,059	36,261	80,000	58,519	713,885	\$294.12
ACA 45-54	53,628	89,008	28,687	14,252	27,667	23,417	236,659	\$531.39
ACA 55-64	51,012	79,765	25,043	14,043	25,376	22,905	218,144	\$594.03
BCCP	354	514	290	122	197	172	1,649	\$1,333.12
<b>Total</b>	<b>586,817</b>	<b>1,071,399</b>	<b>350,162</b>	<b>134,771</b>	<b>313,807</b>	<b>240,077</b>	<b>2,697,033</b>	<b>\$348.26</b>

COA	CCO-Specific Payment Rates (Net Add-Ons)							Regional Check
	Allcare CCO, Inc.	Trillium Community Health Plan, Inc.	Jackson County CCO, LLC.	Primary Health of Josephine County, LLC	DCIPA, LLC. Abn Umpqua Health Alliance	Western Oregon Advanced Health, LLC	Regional	
TANF	\$331.26	\$374.55	\$336.64	\$317.54	\$356.99	\$370.85	\$354.13	\$0.00
PLMA	\$311.12	\$334.18	\$296.63	\$301.42	\$298.14	\$345.07	\$319.48	\$0.00
CHILD 00-01	\$629.61	\$676.26	\$600.28	\$609.96	\$603.34	\$698.31	\$646.02	\$0.00
CHILD 01-05	\$118.31	\$139.77	\$116.82	\$113.38	\$117.27	\$126.37	\$126.61	\$0.00
CHILD 06-18	\$125.83	\$153.56	\$124.78	\$117.27	\$130.73	\$153.35	\$138.88	\$0.00
DUAL-MEDS	\$198.02	\$212.69	\$188.79	\$191.84	\$189.76	\$219.63	\$203.86	\$0.00
ABAD & OAA	\$1,145.25	\$1,205.29	\$1,143.16	\$1,103.15	\$1,094.13	\$1,182.46	\$1,166.70	\$0.00
CAF	\$440.32	\$472.95	\$419.81	\$426.58	\$421.95	\$488.37	\$455.10	\$0.00
ACA 19-44	\$282.27	\$307.26	\$282.23	\$238.77	\$297.92	\$303.88	\$294.12	\$0.00
ACA 45-54	\$505.82	\$558.85	\$492.25	\$477.62	\$541.86	\$553.87	\$531.39	\$0.00
ACA 55-64	\$572.06	\$623.11	\$542.83	\$558.88	\$612.61	\$598.63	\$594.03	\$0.00
BCCP	\$1,308.27	\$1,405.21	\$1,247.32	\$1,267.45	\$1,253.69	\$1,451.03	\$1,333.12	\$0.00
<b>Total</b>	<b>\$328.25</b>	<b>\$368.51</b>	<b>\$308.00</b>	<b>\$321.58</b>	<b>\$344.96</b>	<b>\$384.81</b>	<b>\$348.26</b>	<b>\$0.00</b>

### Tri-County Region

COA	May 2015 MMIs			Regional Payment Rate (Net Add-Ons)
	FamilyCare, Inc.	Health Share of Oregon	Regional	
TANF	81,512	138,371	219,883	\$354.13
PLMA	31,363	43,468	74,831	\$319.48
CHILD 00-01	51,492	71,377	122,869	\$646.02
CHILD 01-05	171,505	311,494	482,998	\$126.61
CHILD 06-18	335,194	740,685	1,075,879	\$138.88
DUAL-MEDS	27,114	197,759	224,873	\$203.86
ABAD & OAA	35,750	167,576	203,326	\$1,166.70
CAF	18,916	33,833	52,749	\$455.10
ACA 19-44	473,722	704,231	1,177,953	\$294.12
ACA 45-54	127,549	211,360	338,909	\$531.39
ACA 55-64	101,009	171,210	272,219	\$594.03
BCCP	916	747	1,662	\$1,333.12
<b>Total</b>	<b>1,456,042</b>	<b>2,792,111</b>	<b>4,248,152</b>	<b>\$327.03</b>

CCO-Specific Payment Rates (Net Add-Ons)				
COA	FamilyCare, Inc.	Health Share of Oregon	Regional	Regional Check
TANF	\$334.72	\$365.56	\$354.13	\$0.00
PLMA	\$319.48	\$319.48	\$319.48	\$0.00
CHILD 00-01	\$646.02	\$646.02	\$646.02	\$0.00
CHILD 01-05	\$123.37	\$128.39	\$126.61	\$0.00
CHILD 06-18	\$140.40	\$138.20	\$138.88	\$0.00
DUAL-MEDS	\$203.86	\$203.86	\$203.86	\$0.00
ABAD & OAA	\$1,006.20	\$1,200.95	\$1,166.70	\$0.00
CAF	\$455.10	\$455.10	\$455.10	\$0.00
ACA 19-44	\$276.96	\$305.67	\$294.12	\$0.00
ACA 45-54	\$500.04	\$550.31	\$531.39	\$0.00
ACA 55-64	\$563.05	\$612.31	\$594.03	\$0.00
BCCP	\$1,333.12	\$1,333.12	\$1,333.12	\$0.00
<b>Total</b>	<b>\$303.54</b>	<b>\$339.28</b>	<b>\$327.03</b>	<b>\$0.00</b>

**Appendix III. CCO-A Rate Development Summary (RDS)**

# Appendix III. CCO-A Rate Development Summary (RDS) **Optumas**

## Appendix III.A: Allcare CCO, Inc.

COA	CY 2015 MMs	Regional	Risk Factor				Breakthrough	ACT/SE <sup>1</sup>	Children's
		Base PMPM	Risk Score	A/B Adjustment	CCO Adjustment	PMPM	Therapy		Wraparound <sup>1</sup>
TANF	36,134	\$ 354.13	0.96	0.98	0.94	\$ 331.26	\$ -	\$ 1.42	\$ -
PLMA	11,984	\$ 319.48	1.00	0.97	0.97	\$ 311.12	\$ -	\$ -	\$ -
CHILD 00-01	17,505	\$ 646.02	1.00	0.97	0.97	\$ 629.61	\$ -	\$ -	\$ -
CHILD 01-05	68,111	\$ 126.61	0.96	0.98	0.93	\$ 118.31	\$ -	\$ -	\$ -
CHILD 06-18	133,596	\$ 138.88	0.93	0.97	0.91	\$ 125.83	\$ -	\$ -	\$ -
ABAD & OAA Duals	26,572	\$ 203.86	1.00	0.97	0.97	\$ 198.02	\$ 31.66	\$ 6.00	\$ -
ABAD & OAA Medicaid Only	28,522	\$ 1,166.70	1.01	0.97	0.98	\$ 1,145.25	\$ -	\$ 12.04	\$ -
CAF	8,496	\$ 455.10	1.00	0.97	0.97	\$ 440.32	\$ -	\$ -	\$ 34.46
ACA 19-44	150,902	\$ 294.12	0.99	0.97	0.96	\$ 282.27	\$ 0.81	\$ 1.42	\$ -
ACA 45-54	53,628	\$ 531.39	0.98	0.97	0.95	\$ 505.82	\$ -	\$ 1.43	\$ -
ACA 55-64	51,012	\$ 594.03	0.99	0.98	0.96	\$ 572.06	\$ 23.40	\$ 1.43	\$ -
BCCP	354	\$ 1,333.12	1.00	0.98	0.98	\$ 1,308.27	\$ -	\$ 12.04	\$ -
<b>Total</b>	<b>586,817</b>	<b>\$ 343.08</b>				<b>\$ 328.25</b>	<b>\$ 3.68</b>	<b>\$ 1.57</b>	<b>\$ 0.50</b>

COA	CY 2015 MMs	NEMT <sup>1</sup>	CANS <sup>1</sup>	Tier 1 HRA	Tier 1 HRA Admin	Tier 2 HRA	Health Insurer Fee	Dental	CY17 Payment Rate
TANF	36,134	\$ 4.40	\$ -	\$ 24.09	\$ 0.49	\$ 11.15	\$ -	\$ 23.99	\$ 396.80
PLMA	11,984	\$ 4.67	\$ -	\$ 15.62	\$ 0.32	\$ 10.28	\$ -	\$ 18.70	\$ 360.71
CHILD 00-01	17,505	\$ 0.30	\$ -	\$ 119.50	\$ 2.44	\$ 25.43	\$ -	\$ 1.42	\$ 778.69
CHILD 01-05	68,111	\$ 0.28	\$ -	\$ 15.52	\$ 0.32	\$ 3.77	\$ -	\$ 22.38	\$ 160.57
CHILD 06-18	133,596	\$ 0.44	\$ -	\$ 10.17	\$ 0.21	\$ 3.73	\$ -	\$ 22.34	\$ 162.72
ABAD & OAA Duals	26,572	\$ 35.88	\$ -	\$ 7.94	\$ 0.16	\$ 5.95	\$ -	\$ 27.13	\$ 312.74
ABAD & OAA Medicaid Only	28,522	\$ 38.31	\$ -	\$ 167.64	\$ 3.42	\$ 39.04	\$ -	\$ 28.39	\$ 1,434.11
CAF	8,496	\$ 1.59	\$ 3.35	\$ 26.86	\$ 0.55	\$ 8.87	\$ -	\$ 25.07	\$ 541.06
ACA 19-44	150,902	\$ 4.00	\$ -	\$ 33.57	\$ 0.69	\$ 9.22	\$ -	\$ 22.90	\$ 354.87
ACA 45-54	53,628	\$ 7.99	\$ -	\$ 58.30	\$ 1.19	\$ 17.74	\$ -	\$ 33.01	\$ 625.48
ACA 55-64	51,012	\$ 5.07	\$ -	\$ 61.57	\$ 1.26	\$ 20.88	\$ -	\$ 31.89	\$ 717.56
BCCP	354	\$ 38.31	\$ -	\$ 148.16	\$ 3.02	\$ 44.87	\$ -	\$ 28.39	\$ 1,583.08
<b>Total</b>	<b>586,817</b>	<b>\$ 6.24</b>	<b>\$ 0.05</b>	<b>\$ 37.78</b>	<b>\$ 0.77</b>	<b>\$ 11.07</b>	<b>\$ -</b>	<b>\$ 24.25</b>	<b>\$ 414.16</b>

<sup>1</sup> Rate Add-Ons are inclusive of a 11.8% non-medical load

# Appendix III. CCO-A Rate Development Summary (RDS) **Optumas**

## Appendix III.B: Cascade Health Alliance, LLC.

COA	CY 2015 MMs	Regional	Risk Factor				Breakthrough	ACT/SE <sup>1</sup>	Children's
		Base PMPM	Risk Score	A/B Adjustment	CCO Adjustment	PMPM	Therapy		Wraparound <sup>1</sup>
TANF	12,116	\$ 440.05	1.02	0.80	0.82	\$ 360.88	\$ -	\$ 0.57	\$ -
PLMA	3,828	\$ 374.22	1.00	0.80	0.80	\$ 300.53	\$ -	\$ -	\$ -
CHILD 00-01	6,653	\$ 527.03	1.00	0.80	0.80	\$ 422.55	\$ -	\$ -	\$ -
CHILD 01-05	23,954	\$ 143.63	1.03	0.80	0.83	\$ 118.89	\$ -	\$ -	\$ -
CHILD 06-18	47,670	\$ 163.25	1.04	0.80	0.83	\$ 135.77	\$ -	\$ -	\$ -
ABAD & OAA Duals	8,896	\$ 219.00	1.00	0.82	0.82	\$ 178.74	\$ -	\$ 0.81	\$ -
ABAD & OAA Medicaid Only	11,271	\$ 1,378.84	1.00	0.81	0.80	\$ 1,108.27	\$ 72.50	\$ 0.45	\$ -
CAF	3,836	\$ 573.60	1.00	0.80	0.80	\$ 461.32	\$ -	\$ -	\$ 97.87
ACA 19-44	46,975	\$ 408.92	1.05	0.81	0.85	\$ 347.83	\$ 1.09	\$ 0.60	\$ -
ACA 45-54	16,896	\$ 649.04	1.05	0.81	0.85	\$ 552.21	\$ 11.97	\$ 2.87	\$ -
ACA 55-64	14,098	\$ 715.11	1.04	0.81	0.84	\$ 600.69	\$ 15.01	\$ -	\$ -
BCCP	52	\$ 2,086.78	1.00	0.81	0.81	\$ 1,693.11	\$ 72.50	\$ 0.45	\$ -
<b>Total</b>	<b>196,245</b>	<b>\$ 415.54</b>				<b>\$ 345.13</b>	<b>\$ 6.55</b>	<b>\$ 0.49</b>	<b>\$ 1.91</b>

COA	CY 2015 MMs	NEMT <sup>1</sup>	CANS <sup>1</sup>	Tier 1 HRA	Tier 1 HRA Admin	Tier 2 HRA	Health Insurer Fee	Dental	CY17 Payment Rate
TANF	12,116	\$ 10.43	\$ -	\$ 53.75	\$ 1.10	\$ 14.41	\$ -	\$ 23.99	\$ 465.12
PLMA	3,828	\$ 4.88	\$ -	\$ 54.90	\$ 1.12	\$ 12.37	\$ -	\$ 18.70	\$ 392.50
CHILD 00-01	6,653	\$ 0.95	\$ -	\$ 174.72	\$ 3.57	\$ 20.16	\$ -	\$ 1.42	\$ 623.37
CHILD 01-05	23,954	\$ 0.63	\$ -	\$ 11.35	\$ 0.23	\$ 4.43	\$ -	\$ 22.38	\$ 157.92
CHILD 06-18	47,670	\$ 1.11	\$ -	\$ 7.74	\$ 0.16	\$ 4.40	\$ -	\$ 22.34	\$ 171.52
ABAD & OAA Duals	8,896	\$ 59.78	\$ -	\$ 31.70	\$ 0.65	\$ 6.27	\$ -	\$ 27.13	\$ 305.07
ABAD & OAA Medicaid Only	11,271	\$ 46.37	\$ -	\$ 200.19	\$ 4.09	\$ 46.26	\$ -	\$ 28.39	\$ 1,506.52
CAF	3,836	\$ 3.04	\$ 2.96	\$ 26.26	\$ 0.54	\$ 11.61	\$ -	\$ 25.07	\$ 628.65
ACA 19-44	46,975	\$ 14.29	\$ -	\$ 39.33	\$ 0.80	\$ 13.34	\$ -	\$ 22.90	\$ 440.19
ACA 45-54	16,896	\$ 18.98	\$ -	\$ 67.89	\$ 1.39	\$ 21.77	\$ -	\$ 33.01	\$ 710.09
ACA 55-64	14,098	\$ 22.59	\$ -	\$ 119.19	\$ 2.43	\$ 25.15	\$ -	\$ 31.89	\$ 816.95
BCCP	52	\$ 46.37	\$ -	\$ 639.86	\$ 13.06	\$ 73.76	\$ -	\$ 28.39	\$ 2,567.50
<b>Total</b>	<b>196,245</b>	<b>\$ 13.24</b>	<b>\$ 0.06</b>	<b>\$ 51.02</b>	<b>\$ 1.04</b>	<b>\$ 13.49</b>	<b>\$ -</b>	<b>\$ 24.02</b>	<b>\$ 456.95</b>

<sup>1</sup> Rate Add-Ons are inclusive of a 11.5% non-medical load

# Appendix III. CCO-A Rate Development Summary (RDS) **Optumas**

## Appendix III.C: Columbia-Pacific CCO, LLC.

COA	CY 2015 MMs	Regional	Risk Factor				Breakthrough	ACT/SE <sup>1</sup>	Children's
		Base PMPM	Risk Score	A/B Adjustment	CCO Adjustment	PMPM	Therapy		Wraparound <sup>1</sup>
TANF	17,437	\$ 395.96	1.02	1.08	1.11	\$ 437.60	\$ -	\$ 0.62	\$ -
PLMA	5,221	\$ 343.26	1.00	1.09	1.09	\$ 372.49	\$ -	\$ 0.16	\$ -
CHILD 00-01	8,497	\$ 550.24	1.00	1.09	1.09	\$ 599.26	\$ -	\$ -	\$ -
CHILD 01-05	33,251	\$ 135.34	0.94	1.09	1.03	\$ 139.07	\$ -	\$ -	\$ -
CHILD 06-18	74,203	\$ 153.72	0.98	1.09	1.07	\$ 164.47	\$ -	\$ 0.00	\$ -
ABAD & OAA Duals	9,401	\$ 235.54	1.00	1.09	1.09	\$ 255.70	\$ -	\$ 18.44	\$ -
ABAD & OAA Medicaid Only	14,886	\$ 1,240.93	0.96	1.08	1.03	\$ 1,281.94	\$ 58.69	\$ 30.49	\$ -
CAF	5,112	\$ 452.99	1.00	1.08	1.08	\$ 489.21	\$ -	\$ 0.33	\$ 35.75
ACA 19-44	76,337	\$ 359.59	1.01	1.08	1.10	\$ 393.83	\$ -	\$ 1.10	\$ -
ACA 45-54	28,729	\$ 617.77	0.99	1.08	1.07	\$ 660.62	\$ 21.31	\$ 1.70	\$ -
ACA 55-64	26,667	\$ 684.58	0.97	1.07	1.04	\$ 710.37	\$ 49.11	\$ 0.78	\$ -
BCCP	195	\$ 1,376.67	1.00	1.07	1.07	\$ 1,478.60	\$ 58.69	\$ 30.49	\$ -
<b>Total</b>	<b>299,935</b>	<b>\$ 386.76</b>				<b>\$ 412.62</b>	<b>\$ 9.36</b>	<b>\$ 2.67</b>	<b>\$ 0.61</b>

COA	CY 2015 MMs	NEMT <sup>1</sup>	CANS <sup>1</sup>	Tier 1 HRA	Tier 1 HRA Admin	Tier 2 HRA	Health Insurer Fee	Dental	CY17 Payment Rate
TANF	17,437	\$ 6.97	\$ -	\$ 33.21	\$ 0.68	\$ 12.46	\$ -	\$ 23.99	\$ 515.53
PLMA	5,221	\$ 7.40	\$ -	\$ 23.40	\$ 0.48	\$ 10.55	\$ -	\$ 18.70	\$ 433.18
CHILD 00-01	8,497	\$ 0.48	\$ -	\$ 98.44	\$ 2.01	\$ 20.56	\$ -	\$ 1.42	\$ 722.15
CHILD 01-05	33,251	\$ 0.44	\$ -	\$ 11.96	\$ 0.24	\$ 3.79	\$ -	\$ 22.38	\$ 177.89
CHILD 06-18	74,203	\$ 0.70	\$ -	\$ 7.85	\$ 0.16	\$ 4.06	\$ -	\$ 22.34	\$ 199.58
ABAD & OAA Duals	9,401	\$ 56.83	\$ -	\$ 19.52	\$ 0.40	\$ 6.73	\$ -	\$ 27.13	\$ 384.75
ABAD & OAA Medicaid Only	14,886	\$ 60.68	\$ -	\$ 129.20	\$ 2.64	\$ 41.74	\$ -	\$ 28.39	\$ 1,633.77
CAF	5,112	\$ 2.52	\$ -	\$ 23.76	\$ 0.48	\$ 9.76	\$ -	\$ 25.07	\$ 586.88
ACA 19-44	76,337	\$ 6.33	\$ -	\$ 28.47	\$ 0.58	\$ 11.18	\$ -	\$ 22.90	\$ 464.39
ACA 45-54	28,729	\$ 12.65	\$ -	\$ 63.95	\$ 1.31	\$ 20.30	\$ -	\$ 33.01	\$ 814.84
ACA 55-64	26,667	\$ 8.04	\$ -	\$ 63.34	\$ 1.29	\$ 23.20	\$ -	\$ 31.89	\$ 888.02
BCCP	195	\$ 60.68	\$ -	\$ 71.53	\$ 1.46	\$ 48.04	\$ -	\$ 28.39	\$ 1,777.89
<b>Total</b>	<b>299,935</b>	<b>\$ 9.18</b>	<b>\$ -</b>	<b>\$ 34.87</b>	<b>\$ 0.71</b>	<b>\$ 12.25</b>	<b>\$ -</b>	<b>\$ 24.30</b>	<b>\$ 506.56</b>

<sup>1</sup> Rate Add-Ons are inclusive of a 9.7% non-medical load

# Appendix III. CCO-A Rate Development Summary (RDS) **Optumas**

## Appendix III.D: Eastern Oregon Coordinated Care Org., LLC.

COA	CY 2015 MMs	Regional	Risk Factor				Breakthrough	ACT/SE <sup>1</sup>	Children's
		Base PMPM	Risk Score	A/B Adjustment	CCO Adjustment	PMPM	Therapy		Wraparound <sup>1</sup>
TANF	35,140	\$ 440.05	1.07	1.10	1.17	\$ 516.54	\$ 10.40	\$ 0.89	\$ -
PLMA	10,728	\$ 374.22	1.00	1.10	1.10	\$ 410.26	\$ -	\$ -	\$ -
CHILD 00-01	19,960	\$ 527.03	1.00	1.09	1.09	\$ 576.85	\$ -	\$ -	\$ -
CHILD 01-05	79,747	\$ 143.63	0.93	1.09	1.02	\$ 146.41	\$ -	\$ -	\$ -
CHILD 06-18	166,877	\$ 163.25	0.96	1.09	1.05	\$ 171.08	\$ -	\$ -	\$ -
ABAD & OAA Duals	19,203	\$ 219.00	1.00	1.11	1.11	\$ 244.00	\$ 11.82	\$ 9.49	\$ -
ABAD & OAA Medicaid Only	27,719	\$ 1,378.84	1.00	1.10	1.10	\$ 1,510.02	\$ 27.25	\$ 15.50	\$ -
CAF	8,679	\$ 573.60	1.00	1.10	1.10	\$ 629.76	\$ -	\$ -	\$ 119.12
ACA 19-44	120,655	\$ 408.92	1.05	1.11	1.17	\$ 476.54	\$ 1.93	\$ 0.89	\$ -
ACA 45-54	41,610	\$ 649.04	1.04	1.11	1.15	\$ 747.15	\$ 22.01	\$ 0.89	\$ -
ACA 55-64	37,243	\$ 715.11	1.03	1.10	1.13	\$ 811.15	\$ 25.72	\$ 0.89	\$ -
BCCP	227	\$ 2,086.78	1.00	1.11	1.11	\$ 2,311.32	\$ 27.25	\$ 15.50	\$ -
<b>Total</b>	<b>567,788</b>	<b>\$ 386.67</b>				<b>\$ 432.59</b>	<b>\$ 6.09</b>	<b>\$ 1.45</b>	<b>\$ 1.82</b>

COA	CY 2015 MMs	NEMT <sup>1</sup>	CANS <sup>1</sup>	Tier 1 HRA	Tier 1 HRA Admin	Tier 2 HRA	Health Insurer Fee	Dental	CY17 Payment Rate
TANF	35,140	\$ 10.77	\$ -	\$ 69.94	\$ 1.43	\$ 14.41	\$ -	\$ 23.99	\$ 648.37
PLMA	10,728	\$ 4.93	\$ -	\$ 58.20	\$ 1.19	\$ 12.37	\$ -	\$ 18.70	\$ 505.65
CHILD 00-01	19,960	\$ 0.73	\$ -	\$ 99.43	\$ 2.03	\$ 20.16	\$ -	\$ 1.42	\$ 700.61
CHILD 01-05	79,747	\$ 0.72	\$ -	\$ 13.13	\$ 0.27	\$ 4.43	\$ -	\$ 22.38	\$ 187.34
CHILD 06-18	166,877	\$ 1.12	\$ -	\$ 18.71	\$ 0.38	\$ 4.40	\$ -	\$ 22.34	\$ 218.02
ABAD & OAA Duals	19,203	\$ 69.41	\$ -	\$ 20.39	\$ 0.42	\$ 6.27	\$ -	\$ 27.13	\$ 388.93
ABAD & OAA Medicaid Only	27,719	\$ 52.86	\$ -	\$ 202.31	\$ 4.13	\$ 46.26	\$ -	\$ 28.39	\$ 1,886.72
CAF	8,679	\$ 3.61	\$ -	\$ 109.90	\$ 2.24	\$ 11.61	\$ -	\$ 25.07	\$ 901.31
ACA 19-44	120,655	\$ 16.67	\$ -	\$ 63.72	\$ 1.30	\$ 13.34	\$ -	\$ 22.90	\$ 597.28
ACA 45-54	41,610	\$ 20.89	\$ -	\$ 111.23	\$ 2.27	\$ 21.77	\$ -	\$ 33.01	\$ 959.22
ACA 55-64	37,243	\$ 25.37	\$ -	\$ 121.73	\$ 2.48	\$ 25.15	\$ -	\$ 31.89	\$ 1,044.39
BCCP	227	\$ 52.86	\$ -	\$ 177.55	\$ 3.62	\$ 73.76	\$ -	\$ 28.39	\$ 2,690.25
<b>Total</b>	<b>567,788</b>	<b>\$ 12.96</b>	<b>\$ -</b>	<b>\$ 58.26</b>	<b>\$ 1.19</b>	<b>\$ 12.51</b>	<b>\$ -</b>	<b>\$ 23.67</b>	<b>\$ 550.54</b>

<sup>1</sup> Rate Add-Ons are inclusive of a 11.5% non-medical load



# Appendix III. CCO-A Rate Development Summary (RDS) **Optumas**

## Appendix III.E: FamilyCare, Inc.

COA	CY 2015 MMs	Regional	Risk Factor				Breakthrough	ACT/SE <sup>1</sup>	Children's
		Base PMPM	Risk Score	A/B Adjustment	CCO Adjustment	PMPM	Therapy		Wraparound <sup>1</sup>
TANF	81,512	\$ 319.33	0.95	1.00	0.95	\$ 301.83	\$ 1.22	\$ 0.64	\$ -
PLMA	31,363	\$ 305.24	1.00	1.00	1.00	\$ 305.24	\$ -	\$ 0.07	\$ -
CHILD 00-01	51,492	\$ 566.69	1.00	1.00	1.00	\$ 566.69	\$ -	\$ -	\$ -
CHILD 01-05	171,505	\$ 113.80	0.97	1.00	0.97	\$ 110.88	\$ -	\$ -	\$ -
CHILD 06-18	335,194	\$ 118.48	1.01	1.00	1.01	\$ 119.77	\$ -	\$ 0.01	\$ -
ABAD & OAA Duals	27,114	\$ 249.62	1.00	1.00	1.00	\$ 249.62	\$ -	\$ 0.74	\$ -
ABAD & OAA Medicaid Only	35,750	\$ 1,317.25	0.86	1.00	0.86	\$ 1,136.03	\$ 21.61	\$ 1.43	\$ -
CAF	18,916	\$ 424.99	1.00	1.00	1.00	\$ 424.99	\$ -	\$ 0.04	\$ 68.88
ACA 19-44	473,722	\$ 283.10	0.94	1.00	0.94	\$ 266.58	\$ 0.24	\$ 0.24	\$ -
ACA 45-54	127,549	\$ 514.42	0.94	1.00	0.94	\$ 484.07	\$ 10.22	\$ 0.22	\$ -
ACA 55-64	101,009	\$ 540.69	0.95	1.00	0.95	\$ 512.49	\$ 16.43	\$ 0.18	\$ -
BCCP	916	\$ 1,615.76	1.00	1.00	1.00	\$ 1,615.76	\$ 21.61	\$ 1.43	\$ -
<b>Total</b>	<b>1,456,042</b>	<b>\$ 303.38</b>				<b>\$ 287.91</b>	<b>\$ 2.72</b>	<b>\$ 0.20</b>	<b>\$ 0.89</b>

COA	CY 2015 MMs	NEMT <sup>1</sup>	CANS <sup>1</sup>	Tier 1 HRA	Tier 1 HRA Admin	Tier 2 HRA	Health Insurer Fee	Dental	CY17 Payment Rate
TANF	81,512	\$ 7.53	\$ -	\$ 33.19	\$ 0.68	\$ 10.55	\$ -	\$ 30.30	\$ 385.94
PLMA	31,363	\$ 7.36	\$ -	\$ 18.88	\$ 0.39	\$ 10.03	\$ -	\$ 25.18	\$ 367.15
CHILD 00-01	51,492	\$ 0.40	\$ -	\$ 133.88	\$ 2.73	\$ 22.30	\$ -	\$ 0.87	\$ 726.87
CHILD 01-05	171,505	\$ 0.19	\$ -	\$ 15.57	\$ 0.32	\$ 3.63	\$ -	\$ 23.72	\$ 154.31
CHILD 06-18	335,194	\$ 0.41	\$ -	\$ 12.42	\$ 0.25	\$ 3.50	\$ -	\$ 26.39	\$ 162.75
ABAD & OAA Duals	27,114	\$ 40.54	\$ -	\$ 19.07	\$ 0.39	\$ 7.66	\$ -	\$ 35.19	\$ 353.20
ABAD & OAA Medicaid Only	35,750	\$ 44.95	\$ -	\$ 154.20	\$ 3.15	\$ 46.73	\$ -	\$ 34.07	\$ 1,442.17
CAF	18,916	\$ 2.42	\$ 2.07	\$ 33.06	\$ 0.67	\$ 10.39	\$ -	\$ 26.90	\$ 569.42
ACA 19-44	473,722	\$ 8.04	\$ -	\$ 29.47	\$ 0.60	\$ 9.20	\$ -	\$ 29.46	\$ 343.83
ACA 45-54	127,549	\$ 13.30	\$ -	\$ 57.08	\$ 1.16	\$ 18.09	\$ -	\$ 44.30	\$ 628.45
ACA 55-64	101,009	\$ 10.09	\$ -	\$ 63.17	\$ 1.29	\$ 20.08	\$ -	\$ 43.99	\$ 667.71
BCCP	916	\$ 44.95	\$ -	\$ 230.91	\$ 4.71	\$ 60.33	\$ -	\$ 34.07	\$ 2,013.78
<b>Total</b>	<b>1,456,042</b>	<b>\$ 7.11</b>	<b>\$ 0.03</b>	<b>\$ 35.38</b>	<b>\$ 0.72</b>	<b>\$ 10.26</b>	<b>\$ -</b>	<b>\$ 29.52</b>	<b>\$ 374.75</b>

<sup>1</sup> Rate Add-Ons are inclusive of a 10.1% non-medical load

# Appendix III. CCO-A Rate Development Summary (RDS) **Optumas**

## Appendix III.F: Health Share of Oregon

COA	CY 2015 MMs	Regional	Risk Factor				Breakthrough	ACT/SE <sup>1</sup>	Children's
		Base PMPM	Risk Score	A/B Adjustment	CCO Adjustment	PMPM	Therapy		Wraparound <sup>1</sup>
TANF	138,371	\$ 319.33	1.03	1.00	1.03	\$ 329.64	\$ 2.50	\$ 2.36	\$ -
PLMA	43,468	\$ 305.24	1.00	1.00	1.00	\$ 305.24	\$ -	\$ 0.64	\$ -
CHILD 00-01	71,377	\$ 566.69	1.00	1.00	1.00	\$ 566.69	\$ -	\$ -	\$ -
CHILD 01-05	311,494	\$ 113.80	1.01	1.00	1.01	\$ 115.40	\$ -	\$ 0.18	\$ -
CHILD 06-18	740,685	\$ 118.48	1.00	1.00	1.00	\$ 117.89	\$ -	\$ 1.01	\$ -
ABAD & OAA Duals	197,759	\$ 249.62	1.00	1.00	1.00	\$ 249.62	\$ 0.62	\$ 19.71	\$ -
ABAD & OAA Medicaid Only	167,576	\$ 1,317.25	1.03	1.00	1.03	\$ 1,355.91	\$ 61.16	\$ 26.99	\$ -
CAF	33,833	\$ 424.99	1.00	1.00	1.00	\$ 424.99	\$ -	\$ 6.51	\$ 99.60
ACA 19-44	704,231	\$ 283.10	1.04	1.00	1.04	\$ 294.21	\$ 2.00	\$ 3.20	\$ -
ACA 45-54	211,360	\$ 514.42	1.04	1.00	1.04	\$ 532.73	\$ 24.95	\$ 1.47	\$ -
ACA 55-64	171,210	\$ 540.69	1.03	1.00	1.03	\$ 557.33	\$ 52.94	\$ 0.93	\$ -
BCCP	747	\$ 1,615.76	1.00	1.00	1.00	\$ 1,615.76	\$ 61.16	\$ 26.99	\$ -
<b>Total</b>	<b>2,792,111</b>	<b>\$ 325.01</b>				<b>\$ 333.07</b>	<b>\$ 9.50</b>	<b>\$ 4.49</b>	<b>\$ 1.21</b>

COA	CY 2015 MMs	NEMT <sup>1</sup>	CANS <sup>1</sup>	Tier 1 HRA	Tier 1 HRA Admin	Tier 2 HRA	Health Insurer Fee	Dental	CY17 Payment Rate
TANF	138,371	\$ 6.95	\$ -	\$ 45.74	\$ 0.93	\$ 10.55	\$ -	\$ 30.30	\$ 428.99
PLMA	43,468	\$ 6.01	\$ -	\$ 40.85	\$ 0.83	\$ 10.03	\$ -	\$ 25.18	\$ 388.78
CHILD 00-01	71,377	\$ 0.75	\$ -	\$ 165.40	\$ 3.38	\$ 22.30	\$ -	\$ 0.87	\$ 759.39
CHILD 01-05	311,494	\$ 0.38	\$ -	\$ 16.57	\$ 0.34	\$ 3.63	\$ -	\$ 23.72	\$ 160.22
CHILD 06-18	740,685	\$ 0.49	\$ -	\$ 15.89	\$ 0.32	\$ 3.50	\$ -	\$ 26.39	\$ 165.51
ABAD & OAA Duals	197,759	\$ 62.13	\$ -	\$ 36.89	\$ 0.75	\$ 7.66	\$ -	\$ 35.19	\$ 412.58
ABAD & OAA Medicaid Only	167,576	\$ 48.55	\$ -	\$ 236.97	\$ 4.84	\$ 46.73	\$ -	\$ 34.07	\$ 1,815.22
CAF	33,833	\$ 4.54	\$ -	\$ 38.58	\$ 0.79	\$ 10.39	\$ -	\$ 26.90	\$ 612.28
ACA 19-44	704,231	\$ 3.78	\$ -	\$ 37.73	\$ 0.77	\$ 9.20	\$ -	\$ 29.46	\$ 380.36
ACA 45-54	211,360	\$ 8.38	\$ -	\$ 80.78	\$ 1.65	\$ 18.09	\$ -	\$ 44.30	\$ 712.34
ACA 55-64	171,210	\$ 6.34	\$ -	\$ 93.37	\$ 1.91	\$ 20.08	\$ -	\$ 43.99	\$ 776.88
BCCP	747	\$ 48.55	\$ -	\$ 412.79	\$ 8.42	\$ 60.33	\$ -	\$ 34.07	\$ 2,268.08
<b>Total</b>	<b>2,792,111</b>	<b>\$ 9.99</b>	<b>\$ -</b>	<b>\$ 51.96</b>	<b>\$ 1.06</b>	<b>\$ 10.99</b>	<b>\$ -</b>	<b>\$ 29.92</b>	<b>\$ 452.19</b>

<sup>1</sup> Rate Add-Ons are inclusive of a 10.1% non-medical load

# Appendix III. CCO-A Rate Development Summary (RDS) **Optumas**

## Appendix III.G: InterCommunity Health Network, Inc.

COA	CY 2015 MMs	Regional	Risk Factor				Breakthrough	ACT/SE <sup>1</sup>	Children's
		Base PMPM	Risk Score	A/B Adjustment	CCO Adjustment	PMPM	Therapy		Wraparound <sup>1</sup>
TANF	37,242	\$ 395.96	1.02	1.05	1.07	\$ 422.36	\$ -	\$ -	\$ -
PLMA	11,402	\$ 343.26	1.00	1.05	1.05	\$ 361.17	\$ -	\$ -	\$ -
CHILD 00-01	19,126	\$ 550.24	1.00	1.06	1.06	\$ 581.03	\$ -	\$ -	\$ -
CHILD 01-05	74,130	\$ 135.34	1.00	1.06	1.05	\$ 142.49	\$ -	\$ -	\$ -
CHILD 06-18	161,389	\$ 153.72	1.08	1.06	1.14	\$ 175.69	\$ -	\$ -	\$ -
ABAD & OAA Duals	31,670	\$ 235.54	1.00	1.05	1.05	\$ 247.92	\$ -	\$ -	\$ -
ABAD & OAA Medicaid Only	37,543	\$ 1,240.93	0.99	1.05	1.03	\$ 1,284.34	\$ 21.60	\$ 0.24	\$ -
CAF	9,998	\$ 452.99	1.00	1.05	1.05	\$ 474.33	\$ -	\$ -	\$ 1.00
ACA 19-44	172,948	\$ 359.59	1.01	1.05	1.06	\$ 380.82	\$ 3.12	\$ 0.03	\$ -
ACA 45-54	54,224	\$ 617.77	1.01	1.05	1.06	\$ 653.48	\$ -	\$ -	\$ -
ACA 55-64	48,668	\$ 684.58	1.01	1.04	1.05	\$ 722.00	\$ 24.29	\$ -	\$ -
BCCP	237	\$ 1,376.67	1.00	1.04	1.04	\$ 1,433.64	\$ 21.60	\$ 0.24	\$ -
<b>Total</b>	<b>658,578</b>	<b>\$ 382.54</b>				<b>\$ 406.12</b>	<b>\$ 3.85</b>	<b>\$ 0.02</b>	<b>\$ 0.02</b>

COA	CY 2015 MMs	NEMT <sup>1</sup>	CANS <sup>1</sup>	Tier 1 HRA	Tier 1 HRA Admin	Tier 2 HRA	Health Insurer Fee	Dental	CY17 Payment Rate
TANF	37,242	\$ 10.54	\$ -	\$ 37.10	\$ 0.76	\$ 12.46	\$ -	\$ 23.99	\$ 507.21
PLMA	11,402	\$ 11.19	\$ -	\$ 13.20	\$ 0.27	\$ 10.55	\$ -	\$ 18.70	\$ 415.07
CHILD 00-01	19,126	\$ 0.72	\$ -	\$ 144.66	\$ 2.95	\$ 20.56	\$ -	\$ 1.42	\$ 751.34
CHILD 01-05	74,130	\$ 0.67	\$ -	\$ 15.45	\$ 0.32	\$ 3.79	\$ -	\$ 22.38	\$ 185.10
CHILD 06-18	161,389	\$ 1.06	\$ -	\$ 14.19	\$ 0.29	\$ 4.06	\$ -	\$ 22.34	\$ 217.61
ABAD & OAA Duals	31,670	\$ 85.91	\$ -	\$ 24.43	\$ 0.50	\$ 6.73	\$ -	\$ 27.13	\$ 392.62
ABAD & OAA Medicaid Only	37,543	\$ 91.74	\$ -	\$ 138.16	\$ 2.82	\$ 41.74	\$ -	\$ 28.39	\$ 1,609.03
CAF	9,998	\$ 3.80	\$ 0.25	\$ 19.88	\$ 0.41	\$ 9.76	\$ -	\$ 25.07	\$ 534.50
ACA 19-44	172,948	\$ 9.57	\$ -	\$ 37.65	\$ 0.77	\$ 11.18	\$ -	\$ 22.90	\$ 466.03
ACA 45-54	54,224	\$ 19.13	\$ -	\$ 71.12	\$ 1.45	\$ 20.30	\$ -	\$ 33.01	\$ 798.48
ACA 55-64	48,668	\$ 12.15	\$ -	\$ 77.67	\$ 1.59	\$ 23.20	\$ -	\$ 31.89	\$ 892.79
BCCP	237	\$ 91.74	\$ -	\$ 287.16	\$ 5.86	\$ 48.04	\$ -	\$ 28.39	\$ 1,916.67
<b>Total</b>	<b>658,578</b>	<b>\$ 15.58</b>	<b>\$ 0.00</b>	<b>\$ 42.68</b>	<b>\$ 0.87</b>	<b>\$ 12.10</b>	<b>\$ -</b>	<b>\$ 24.12</b>	<b>\$ 505.37</b>

<sup>1</sup> Rate Add-Ons are inclusive of a 9.7% non-medical load

# Appendix III. CCO-A Rate Development Summary (RDS) **Optumas**

## Appendix III.H: Jackson County CCO, LLC.

COA	CY 2015 MMs	Regional	Risk Factor				Breakthrough	ACT/SE <sup>1</sup>	Children's
		Base PMPM	Risk Score	A/B Adjustment	CCO Adjustment	PMPM	Therapy		Wraparound <sup>1</sup>
TANF	19,577	\$ 354.13	1.02	0.93	0.95	\$ 336.64	\$ 8.79	\$ -	\$ -
PLMA	5,637	\$ 319.48	1.00	0.93	0.93	\$ 296.63	\$ -	\$ -	\$ -
CHILD 00-01	9,401	\$ 646.02	1.00	0.93	0.93	\$ 600.28	\$ -	\$ -	\$ -
CHILD 01-05	40,414	\$ 126.61	0.99	0.93	0.92	\$ 116.82	\$ -	\$ -	\$ -
CHILD 06-18	97,699	\$ 138.88	0.97	0.93	0.90	\$ 124.78	\$ -	\$ -	\$ -
ABAD & OAA Duals	13,179	\$ 203.86	1.00	0.93	0.93	\$ 188.79	\$ -	\$ -	\$ -
ABAD & OAA Medicaid Only	16,823	\$ 1,166.70	1.06	0.92	0.98	\$ 1,143.16	\$ 60.02	\$ 8.26	\$ -
CAF	6,353	\$ 455.10	1.00	0.92	0.92	\$ 419.81	\$ -	\$ -	\$ -
ACA 19-44	87,059	\$ 294.12	1.03	0.93	0.96	\$ 282.23	\$ 2.86	\$ -	\$ -
ACA 45-54	28,687	\$ 531.39	1.00	0.93	0.93	\$ 492.25	\$ 22.98	\$ -	\$ -
ACA 55-64	25,043	\$ 594.03	0.98	0.93	0.91	\$ 542.83	\$ 105.93	\$ -	\$ -
BCCP	290	\$ 1,333.12	1.00	0.94	0.94	\$ 1,247.32	\$ 60.02	\$ 8.26	\$ -
<b>Total</b>	<b>350,162</b>	<b>\$ 327.88</b>				<b>\$ 308.00</b>	<b>\$ 13.59</b>	<b>\$ 0.40</b>	<b>\$ -</b>

COA	CY 2015 MMs	NEMT <sup>1</sup>	CANS <sup>1</sup>	Tier 1 HRA	Tier 1 HRA Admin	Tier 2 HRA	Health Insurer Fee	Dental	CY17 Payment Rate
TANF	19,577	\$ 3.66	\$ -	\$ 40.90	\$ 0.83	\$ 11.15	\$ -	\$ 23.99	\$ 425.95
PLMA	5,637	\$ 3.89	\$ -	\$ 41.70	\$ 0.85	\$ 10.28	\$ -	\$ 18.70	\$ 372.05
CHILD 00-01	9,401	\$ 0.25	\$ -	\$ 168.98	\$ 3.45	\$ 25.43	\$ -	\$ 1.42	\$ 799.79
CHILD 01-05	40,414	\$ 0.23	\$ -	\$ 9.48	\$ 0.19	\$ 3.77	\$ -	\$ 22.38	\$ 152.87
CHILD 06-18	97,699	\$ 0.37	\$ -	\$ 11.15	\$ 0.23	\$ 3.73	\$ -	\$ 22.34	\$ 162.59
ABAD & OAA Duals	13,179	\$ 29.87	\$ -	\$ 9.27	\$ 0.19	\$ 5.95	\$ -	\$ 27.13	\$ 261.20
ABAD & OAA Medicaid Only	16,823	\$ 31.90	\$ -	\$ 184.00	\$ 3.76	\$ 39.04	\$ -	\$ 28.39	\$ 1,498.51
CAF	6,353	\$ 1.32	\$ -	\$ 22.52	\$ 0.46	\$ 8.87	\$ -	\$ 25.07	\$ 478.05
ACA 19-44	87,059	\$ 3.33	\$ -	\$ 33.93	\$ 0.69	\$ 9.22	\$ -	\$ 22.90	\$ 355.16
ACA 45-54	28,687	\$ 6.65	\$ -	\$ 61.49	\$ 1.25	\$ 17.74	\$ -	\$ 33.01	\$ 635.37
ACA 55-64	25,043	\$ 4.22	\$ -	\$ 89.93	\$ 1.84	\$ 20.88	\$ -	\$ 31.89	\$ 797.51
BCCP	290	\$ 31.90	\$ -	\$ 50.79	\$ 1.04	\$ 44.87	\$ -	\$ 28.39	\$ 1,472.58
<b>Total</b>	<b>350,162</b>	<b>\$ 4.78</b>	<b>\$ -</b>	<b>\$ 41.24</b>	<b>\$ 0.84</b>	<b>\$ 10.48</b>	<b>\$ -</b>	<b>\$ 24.04</b>	<b>\$ 403.39</b>

<sup>1</sup> Rate Add-Ons are inclusive of a 11.8% non-medical load

# Appendix III. CCO-A Rate Development Summary (RDS) **Optumas**

## Appendix III.I: PacificSource Community Solutions, Inc. (Central)

COA	CY 2015 MMs	Regional	Risk Factor				Breakthrough	ACT/SE <sup>1</sup>	Children's
		Base PMPM	Risk Score	A/B Adjustment	CCO Adjustment	PMPM	Therapy		Wraparound <sup>1</sup>
TANF	37,593	\$ 440.05	0.93	0.94	0.88	\$ 387.63	\$ 1.00	\$ -	\$ -
PLMA	10,676	\$ 374.22	1.00	0.94	0.94	\$ 352.57	\$ -	\$ -	\$ -
CHILD 00-01	19,035	\$ 527.03	1.00	0.94	0.94	\$ 495.73	\$ -	\$ -	\$ -
CHILD 01-05	70,368	\$ 143.63	1.04	0.94	0.98	\$ 140.45	\$ -	\$ -	\$ -
CHILD 06-18	172,046	\$ 163.25	1.04	0.94	0.98	\$ 159.34	\$ -	\$ -	\$ -
ABAD & OAA Duals	25,538	\$ 219.00	1.00	0.96	0.96	\$ 209.69	\$ -	\$ -	\$ -
ABAD & OAA Medicaid Only	22,804	\$ 1,378.84	1.01	0.95	0.96	\$ 1,317.32	\$ 45.37	\$ -	\$ -
CAF	6,955	\$ 573.60	1.00	0.94	0.94	\$ 541.20	\$ -	\$ -	\$ 97.87
ACA 19-44	164,445	\$ 408.92	0.96	0.95	0.91	\$ 372.63	\$ 1.67	\$ -	\$ -
ACA 45-54	54,291	\$ 649.04	0.98	0.95	0.93	\$ 602.21	\$ 6.53	\$ -	\$ -
ACA 55-64	48,275	\$ 715.11	0.99	0.95	0.94	\$ 673.02	\$ 63.66	\$ -	\$ -
BCCP	550	\$ 2,086.78	1.00	0.95	0.95	\$ 1,986.29	\$ 45.37	\$ -	\$ -
<b>Total</b>	<b>632,577</b>	<b>\$ 391.95</b>				<b>\$ 366.41</b>	<b>\$ 7.59</b>	<b>\$ -</b>	<b>\$ 1.08</b>

COA	CY 2015 MMs	NEMT <sup>1</sup>	CANS <sup>1</sup>	Tier 1 HRA	Tier 1 HRA Admin	Tier 2 HRA	Health Insurer Fee	Dental	CY17 Payment Rate
TANF	37,593	\$ 6.06	\$ -	\$ 38.07	\$ 0.78	\$ 14.41	\$ -	\$ 23.99	\$ 471.93
PLMA	10,676	\$ 6.43	\$ -	\$ 23.01	\$ 0.47	\$ 12.37	\$ -	\$ 18.70	\$ 413.55
CHILD 00-01	19,035	\$ 0.42	\$ -	\$ 138.86	\$ 2.83	\$ 20.16	\$ -	\$ 1.42	\$ 659.42
CHILD 01-05	70,368	\$ 0.39	\$ -	\$ 13.63	\$ 0.28	\$ 4.43	\$ -	\$ 22.38	\$ 181.55
CHILD 06-18	172,046	\$ 0.61	\$ -	\$ 9.25	\$ 0.19	\$ 4.40	\$ -	\$ 22.34	\$ 196.12
ABAD & OAA Duals	25,538	\$ 49.40	\$ -	\$ 5.62	\$ 0.11	\$ 6.27	\$ -	\$ 27.13	\$ 298.22
ABAD & OAA Medicaid Only	22,804	\$ 52.76	\$ -	\$ 165.32	\$ 3.37	\$ 46.26	\$ -	\$ 28.39	\$ 1,658.80
CAF	6,955	\$ 2.19	\$ -	\$ 17.41	\$ 0.36	\$ 11.61	\$ -	\$ 25.07	\$ 695.70
ACA 19-44	164,445	\$ 5.50	\$ -	\$ 49.41	\$ 1.01	\$ 13.34	\$ -	\$ 22.90	\$ 466.46
ACA 45-54	54,291	\$ 11.00	\$ -	\$ 65.03	\$ 1.33	\$ 21.77	\$ -	\$ 33.01	\$ 740.87
ACA 55-64	48,275	\$ 6.99	\$ -	\$ 68.35	\$ 1.39	\$ 25.15	\$ -	\$ 31.89	\$ 870.46
BCCP	550	\$ 52.76	\$ -	\$ 375.77	\$ 7.67	\$ 73.76	\$ -	\$ 28.39	\$ 2,570.01
<b>Total</b>	<b>632,577</b>	<b>\$ 7.56</b>	<b>\$ -</b>	<b>\$ 41.21</b>	<b>\$ 0.84</b>	<b>\$ 12.73</b>	<b>\$ -</b>	<b>\$ 23.99</b>	<b>\$ 461.40</b>

<sup>1</sup> Rate Add-Ons are inclusive of a 11.5% non-medical load

# Appendix III. CCO-A Rate Development Summary (RDS) **Optumas**

## Appendix III.J: PacificSource Community Solutions, Inc. (Gorge)

COA	CY 2015 MMs	Regional	Risk Factor				Breakthrough	ACT/SE <sup>1</sup>	Children's
		Base PMPM	Risk Score	A/B Adjustment	CCO Adjustment	PMPM	Therapy		Wraparound <sup>1</sup>
TANF	6,934	\$ 440.05	0.97	1.11	1.08	\$ 475.00	\$ 1.00	\$ -	\$ -
PLMA	2,995	\$ 374.22	1.00	1.11	1.11	\$ 416.42	\$ -	\$ -	\$ -
CHILD 00-01	5,073	\$ 527.03	1.00	1.11	1.11	\$ 585.50	\$ -	\$ -	\$ -
CHILD 01-05	20,443	\$ 143.63	1.08	1.11	1.20	\$ 172.78	\$ -	\$ -	\$ -
CHILD 06-18	47,576	\$ 163.25	0.98	1.11	1.09	\$ 177.52	\$ -	\$ -	\$ -
ABAD & OAA Duals	4,049	\$ 219.00	1.00	1.13	1.13	\$ 247.66	\$ -	\$ -	\$ -
ABAD & OAA Medicaid Only	5,753	\$ 1,378.84	0.99	1.12	1.10	\$ 1,520.71	\$ 45.37	\$ -	\$ -
CAF	2,571	\$ 573.60	1.00	1.11	1.11	\$ 639.21	\$ -	\$ -	\$ 97.87
ACA 19-44	34,571	\$ 408.92	0.93	1.12	1.05	\$ 428.52	\$ 1.67	\$ -	\$ -
ACA 45-54	12,849	\$ 649.04	0.90	1.12	1.01	\$ 656.53	\$ 6.53	\$ -	\$ -
ACA 55-64	11,136	\$ 715.11	0.90	1.12	1.01	\$ 721.30	\$ 63.66	\$ -	\$ -
BCCP	95	\$ 2,086.78	1.00	1.12	1.12	\$ 2,346.01	\$ 45.37	\$ -	\$ -
<b>Total</b>	<b>154,046</b>	<b>\$ 379.64</b>				<b>\$ 405.01</b>	<b>\$ 7.29</b>	<b>\$ -</b>	<b>\$ 1.63</b>

COA	CY 2015 MMs	NEMT <sup>1</sup>	CANS <sup>1</sup>	Tier 1 HRA	Tier 1 HRA Admin	Tier 2 HRA	Health Insurer Fee	Dental	CY17 Payment Rate
TANF	6,934	\$ 3.27	\$ -	\$ 22.85	\$ 0.47	\$ 14.41	\$ -	\$ 23.99	\$ 540.98
PLMA	2,995	\$ 3.47	\$ -	\$ 6.41	\$ 0.13	\$ 12.37	\$ -	\$ 18.70	\$ 457.50
CHILD 00-01	5,073	\$ 0.22	\$ -	\$ 85.35	\$ 1.74	\$ 20.16	\$ -	\$ 1.42	\$ 694.40
CHILD 01-05	20,443	\$ 0.21	\$ -	\$ 8.42	\$ 0.17	\$ 4.43	\$ -	\$ 22.38	\$ 208.39
CHILD 06-18	47,576	\$ 0.33	\$ -	\$ 7.94	\$ 0.16	\$ 4.40	\$ -	\$ 22.34	\$ 212.68
ABAD & OAA Duals	4,049	\$ 26.66	\$ -	\$ 2.99	\$ 0.06	\$ 6.27	\$ -	\$ 27.13	\$ 310.77
ABAD & OAA Medicaid Only	5,753	\$ 28.47	\$ -	\$ 92.78	\$ 1.89	\$ 46.26	\$ -	\$ 28.39	\$ 1,763.88
CAF	2,571	\$ 1.18	\$ -	\$ 7.37	\$ 0.15	\$ 11.61	\$ -	\$ 25.07	\$ 782.46
ACA 19-44	34,571	\$ 2.97	\$ -	\$ 12.32	\$ 0.25	\$ 13.34	\$ -	\$ 22.90	\$ 481.98
ACA 45-54	12,849	\$ 5.94	\$ -	\$ 34.13	\$ 0.70	\$ 21.77	\$ -	\$ 33.01	\$ 758.60
ACA 55-64	11,136	\$ 3.77	\$ -	\$ 41.81	\$ 0.85	\$ 25.15	\$ -	\$ 31.89	\$ 888.44
BCCP	95	\$ 28.47	\$ -	\$ 22.33	\$ 0.46	\$ 73.76	\$ -	\$ 28.39	\$ 2,544.79
<b>Total</b>	<b>154,046</b>	<b>\$ 3.59</b>	<b>\$ -</b>	<b>\$ 19.85</b>	<b>\$ 0.41</b>	<b>\$ 12.26</b>	<b>\$ -</b>	<b>\$ 23.77</b>	<b>\$ 473.80</b>

<sup>1</sup> Rate Add-Ons are inclusive of a 11.5% non-medical load

# Appendix III. CCO-A Rate Development Summary (RDS) **Optumas**

## Appendix III.K: Primary Health of Josephine County, LLC

COA	CY 2015 MMs	Regional	Risk Factor				Breakthrough	ACT/SE <sup>1</sup>	Children's
		Base PMPM	Risk Score	A/B Adjustment	CCO Adjustment	PMPM	Therapy		Wraparound <sup>1</sup>
TANF	7,942	\$ 354.13	0.95	0.95	0.90	\$ 317.54	\$ -	\$ 1.24	\$ -
PLMA	2,556	\$ 319.48	1.00	0.94	0.94	\$ 301.42	\$ -	\$ -	\$ -
CHILD 00-01	3,267	\$ 646.02	1.00	0.94	0.94	\$ 609.96	\$ -	\$ -	\$ -
CHILD 01-05	11,458	\$ 126.61	0.95	0.94	0.90	\$ 113.38	\$ -	\$ -	\$ -
CHILD 06-18	29,617	\$ 138.88	0.89	0.94	0.84	\$ 117.27	\$ -	\$ -	\$ -
ABAD & OAA Duals	6,081	\$ 203.86	1.00	0.94	0.94	\$ 191.84	\$ -	\$ 3.36	\$ -
ABAD & OAA Medicaid Only	6,999	\$ 1,166.70	1.01	0.94	0.95	\$ 1,103.15	\$ -	\$ 24.62	\$ -
CAF	2,176	\$ 455.10	1.00	0.94	0.94	\$ 426.58	\$ -	\$ -	\$ 46.00
ACA 19-44	36,261	\$ 294.12	0.86	0.94	0.81	\$ 238.77	\$ -	\$ -	\$ -
ACA 45-54	14,252	\$ 531.39	0.95	0.94	0.90	\$ 477.62	\$ -	\$ -	\$ -
ACA 55-64	14,043	\$ 594.03	1.00	0.94	0.94	\$ 558.88	\$ 38.09	\$ -	\$ -
BCCP	122	\$ 1,333.12	1.00	0.95	0.95	\$ 1,267.45	\$ -	\$ 24.62	\$ -
<b>Total</b>	<b>134,771</b>	<b>\$ 359.43</b>				<b>\$ 321.58</b>	<b>\$ 3.97</b>	<b>\$ 1.53</b>	<b>\$ 0.74</b>

COA	CY 2015 MMs	NEMT <sup>1</sup>	CANS <sup>1</sup>	Tier 1 HRA	Tier 1 HRA Admin	Tier 2 HRA	Health Insurer Fee	Dental	CY17 Payment Rate
TANF	7,942	\$ 3.77	\$ -	\$ 29.44	\$ 0.60	\$ 11.15	\$ -	\$ 23.99	\$ 387.73
PLMA	2,556	\$ 4.01	\$ -	\$ 33.83	\$ 0.69	\$ 10.28	\$ -	\$ 18.70	\$ 368.92
CHILD 00-01	3,267	\$ 0.26	\$ -	\$ 209.29	\$ 4.27	\$ 25.43	\$ -	\$ 1.42	\$ 850.62
CHILD 01-05	11,458	\$ 0.24	\$ -	\$ 7.33	\$ 0.15	\$ 3.77	\$ -	\$ 22.38	\$ 147.25
CHILD 06-18	29,617	\$ 0.38	\$ -	\$ 6.70	\$ 0.14	\$ 3.73	\$ -	\$ 22.34	\$ 150.55
ABAD & OAA Duals	6,081	\$ 30.77	\$ -	\$ 2.95	\$ 0.06	\$ 5.95	\$ -	\$ 27.13	\$ 262.06
ABAD & OAA Medicaid Only	6,999	\$ 32.85	\$ -	\$ 118.59	\$ 2.42	\$ 39.04	\$ -	\$ 28.39	\$ 1,349.06
CAF	2,176	\$ 1.36	\$ 3.39	\$ 22.60	\$ 0.46	\$ 8.87	\$ -	\$ 25.07	\$ 534.33
ACA 19-44	36,261	\$ 3.43	\$ -	\$ 26.04	\$ 0.53	\$ 9.22	\$ -	\$ 22.90	\$ 300.89
ACA 45-54	14,252	\$ 6.85	\$ -	\$ 51.30	\$ 1.05	\$ 17.74	\$ -	\$ 33.01	\$ 587.57
ACA 55-64	14,043	\$ 4.35	\$ -	\$ 66.96	\$ 1.37	\$ 20.88	\$ -	\$ 31.89	\$ 722.42
BCCP	122	\$ 32.85	\$ -	\$ 125.10	\$ 2.55	\$ 44.87	\$ -	\$ 28.39	\$ 1,525.85
<b>Total</b>	<b>134,771</b>	<b>\$ 5.65</b>	<b>\$ 0.05</b>	<b>\$ 35.72</b>	<b>\$ 0.73</b>	<b>\$ 11.62</b>	<b>\$ -</b>	<b>\$ 24.72</b>	<b>\$ 406.32</b>

<sup>1</sup> Rate Add-Ons are inclusive of a 11.8% non-medical load

# Appendix III. CCO-A Rate Development Summary (RDS) **Optumas**

## Appendix III.L: Trillium Community Health Plan, Inc.

COA	CY 2015 MMs	Regional	Risk Factor				Breakthrough	ACT/SE <sup>1</sup>	Children's
		Base PMPM	Risk Score	A/B Adjustment	CCO Adjustment	PMPM	Therapy		Wraparound <sup>1</sup>
TANF	57,779	\$ 354.13	1.01	1.05	1.06	\$ 374.55	\$ -	\$ 1.78	\$ -
PLMA	20,080	\$ 319.48	1.00	1.05	1.05	\$ 334.18	\$ -	\$ 1.86	\$ -
CHILD 00-01	29,600	\$ 646.02	1.00	1.05	1.05	\$ 676.26	\$ -	\$ 3.80	\$ -
CHILD 01-05	107,817	\$ 126.61	1.05	1.05	1.10	\$ 139.77	\$ -	\$ 0.51	\$ -
CHILD 06-18	245,824	\$ 138.88	1.06	1.05	1.11	\$ 153.56	\$ -	\$ 0.67	\$ -
ABAD & OAA Duals	49,880	\$ 203.86	1.00	1.04	1.04	\$ 212.69	\$ -	\$ 0.73	\$ -
ABAD & OAA Medicaid Only	65,231	\$ 1,166.70	0.99	1.04	1.03	\$ 1,205.29	\$ 35.02	\$ 5.78	\$ -
CAF	24,757	\$ 455.10	1.00	1.04	1.04	\$ 472.95	\$ -	\$ 1.95	\$ 31.01
ACA 19-44	301,144	\$ 294.12	1.00	1.05	1.04	\$ 307.26	\$ 1.32	\$ 1.38	\$ -
ACA 45-54	89,008	\$ 531.39	1.00	1.05	1.05	\$ 558.85	\$ 20.86	\$ 2.69	\$ -
ACA 55-64	79,765	\$ 594.03	1.00	1.05	1.05	\$ 623.11	\$ 40.51	\$ 2.95	\$ -
BCCP	514	\$ 1,333.12	1.00	1.05	1.05	\$ 1,405.21	\$ 35.02	\$ 5.78	\$ -
<b>Total</b>	<b>1,071,399</b>	<b>\$ 350.26</b>				<b>\$ 368.51</b>	<b>\$ 7.27</b>	<b>\$ 1.71</b>	<b>\$ 0.72</b>

COA	CY 2015 MMs	NEMT <sup>1</sup>	CANS <sup>1</sup>	Tier 1 HRA	Tier 1 HRA Admin	Tier 2 HRA	Health Insurer Fee	Dental	CY17 Payment Rate
TANF	57,779	\$ 5.50	\$ -	\$ 43.55	\$ 0.89	\$ 11.15	\$ -	\$ 23.99	\$ 461.40
PLMA	20,080	\$ 5.84	\$ -	\$ 39.10	\$ 0.80	\$ 10.28	\$ -	\$ 18.70	\$ 410.75
CHILD 00-01	29,600	\$ 0.38	\$ -	\$ 210.96	\$ 4.31	\$ 25.43	\$ -	\$ 1.42	\$ 922.55
CHILD 01-05	107,817	\$ 0.35	\$ -	\$ 16.69	\$ 0.34	\$ 3.77	\$ -	\$ 22.38	\$ 183.81
CHILD 06-18	245,824	\$ 0.55	\$ -	\$ 14.41	\$ 0.29	\$ 3.73	\$ -	\$ 22.34	\$ 195.56
ABAD & OAA Duals	49,880	\$ 44.87	\$ -	\$ 32.02	\$ 0.65	\$ 5.95	\$ -	\$ 27.13	\$ 324.05
ABAD & OAA Medicaid Only	65,231	\$ 47.92	\$ -	\$ 160.47	\$ 3.27	\$ 39.04	\$ -	\$ 28.39	\$ 1,525.20
CAF	24,757	\$ 1.99	\$ 0.27	\$ 24.08	\$ 0.49	\$ 8.87	\$ -	\$ 25.07	\$ 566.68
ACA 19-44	301,144	\$ 5.00	\$ -	\$ 31.41	\$ 0.64	\$ 9.22	\$ -	\$ 22.90	\$ 379.12
ACA 45-54	89,008	\$ 9.99	\$ -	\$ 69.45	\$ 1.42	\$ 17.74	\$ -	\$ 33.01	\$ 714.00
ACA 55-64	79,765	\$ 6.35	\$ -	\$ 69.35	\$ 1.42	\$ 20.88	\$ -	\$ 31.89	\$ 796.46
BCCP	514	\$ 47.92	\$ -	\$ 115.39	\$ 2.35	\$ 44.87	\$ -	\$ 28.39	\$ 1,684.96
<b>Total</b>	<b>1,071,399</b>	<b>\$ 8.36</b>	<b>\$ 0.01</b>	<b>\$ 45.53</b>	<b>\$ 0.93</b>	<b>\$ 11.23</b>	<b>\$ -</b>	<b>\$ 24.20</b>	<b>\$ 468.46</b>

<sup>1</sup> Rate Add-Ons are inclusive of a 11.8% non-medical load



# Appendix III. CCO-A Rate Development Summary (RDS) **Optumas**

## Appendix III.M: DCIPA, LLC. Abn Umpqua Health Alliance

COA	CY 2015 MMs	Regional	Risk Factor				Breakthrough	ACT/SE <sup>1</sup>	Children's
		Base PMPM	Risk Score	A/B Adjustment	CCO Adjustment	PMPM	Therapy		Wraparound <sup>1</sup>
TANF	20,416	\$ 354.13	1.08	0.94	1.01	\$ 356.99	\$ -	\$ 1.24	\$ -
PLMA	5,376	\$ 319.48	1.00	0.93	0.93	\$ 298.14	\$ -	\$ -	\$ -
CHILD 00-01	8,818	\$ 646.02	1.00	0.93	0.93	\$ 603.34	\$ -	\$ -	\$ -
CHILD 01-05	32,205	\$ 126.61	0.99	0.93	0.93	\$ 117.27	\$ -	\$ -	\$ -
CHILD 06-18	70,266	\$ 138.88	1.01	0.93	0.94	\$ 130.73	\$ -	\$ -	\$ -
ABAD & OAA Duals	18,343	\$ 203.86	1.00	0.93	0.93	\$ 189.76	\$ -	\$ 7.92	\$ -
ABAD & OAA Medicaid Only	18,401	\$ 1,166.70	1.01	0.93	0.94	\$ 1,094.13	\$ 24.79	\$ 14.03	\$ -
CAF	6,740	\$ 455.10	1.00	0.93	0.93	\$ 421.95	\$ -	\$ -	\$ 76.89
ACA 19-44	80,000	\$ 294.12	1.09	0.93	1.01	\$ 297.92	\$ 5.73	\$ 1.22	\$ -
ACA 45-54	27,667	\$ 531.39	1.09	0.93	1.02	\$ 541.86	\$ -	\$ 1.26	\$ -
ACA 55-64	25,376	\$ 594.03	1.10	0.93	1.03	\$ 612.61	\$ 4.51	\$ 1.26	\$ -
BCCP	197	\$ 1,333.12	1.00	0.94	0.94	\$ 1,253.69	\$ 24.79	\$ 14.03	\$ -
<b>Total</b>	<b>313,807</b>	<b>\$ 351.57</b>				<b>\$ 344.96</b>	<b>\$ 3.29</b>	<b>\$ 1.90</b>	<b>\$ 1.65</b>

COA	CY 2015 MMs	NEMT <sup>1</sup>	CANS <sup>1</sup>	Tier 1 HRA	Tier 1 HRA Admin	Tier 2 HRA	Health Insurer Fee	Dental	CY17 Payment Rate
TANF	20,416	\$ 4.93	\$ -	\$ 42.90	\$ 0.88	\$ 11.15	\$ -	\$ 23.99	\$ 442.07
PLMA	5,376	\$ 5.24	\$ -	\$ 31.97	\$ 0.65	\$ 10.28	\$ -	\$ 18.70	\$ 364.99
CHILD 00-01	8,818	\$ 0.34	\$ -	\$ 220.09	\$ 4.49	\$ 25.43	\$ -	\$ 1.42	\$ 855.10
CHILD 01-05	32,205	\$ 0.31	\$ -	\$ 12.16	\$ 0.25	\$ 3.77	\$ -	\$ 22.38	\$ 156.14
CHILD 06-18	70,266	\$ 0.49	\$ -	\$ 11.44	\$ 0.23	\$ 3.73	\$ -	\$ 22.34	\$ 168.97
ABAD & OAA Duals	18,343	\$ 40.22	\$ -	\$ 1.93	\$ 0.04	\$ 5.95	\$ -	\$ 27.13	\$ 272.95
ABAD & OAA Medicaid Only	18,401	\$ 42.95	\$ -	\$ 182.18	\$ 3.72	\$ 39.04	\$ -	\$ 28.39	\$ 1,429.23
CAF	6,740	\$ 1.78	\$ 3.39	\$ 23.05	\$ 0.47	\$ 8.87	\$ -	\$ 25.07	\$ 561.47
ACA 19-44	80,000	\$ 4.48	\$ -	\$ 33.65	\$ 0.69	\$ 9.22	\$ -	\$ 22.90	\$ 375.81
ACA 45-54	27,667	\$ 8.96	\$ -	\$ 60.69	\$ 1.24	\$ 17.74	\$ -	\$ 33.01	\$ 664.75
ACA 55-64	25,376	\$ 5.69	\$ -	\$ 78.06	\$ 1.59	\$ 20.88	\$ -	\$ 31.89	\$ 756.49
BCCP	197	\$ 42.95	\$ -	\$ 139.36	\$ 2.84	\$ 44.87	\$ -	\$ 28.39	\$ 1,550.92
<b>Total</b>	<b>313,807</b>	<b>\$ 7.89</b>	<b>\$ 0.07</b>	<b>\$ 44.95</b>	<b>\$ 0.92</b>	<b>\$ 11.30</b>	<b>\$ -</b>	<b>\$ 24.35</b>	<b>\$ 441.29</b>

<sup>1</sup> Rate Add-Ons are inclusive of a 11.8% non-medical load

# Appendix III. CCO-A Rate Development Summary (RDS) **Optumas**

## Appendix III.N: Western Oregon Advanced Health, LLC

COA	CY 2015 MMs	Regional	Risk Factor				Breakthrough	ACT/SE <sup>1</sup>	Children's
		Base PMPM	Risk Score	A/B Adjustment	CCO Adjustment	PMPM	Therapy		Wraparound <sup>1</sup>
TANF	13,221	\$ 354.13	0.97	1.08	1.05	\$ 370.85	\$ -	\$ 2.28	\$ -
PLMA	3,695	\$ 319.48	1.00	1.08	1.08	\$ 345.07	\$ -	\$ 0.08	\$ -
CHILD 00-01	6,044	\$ 646.02	1.00	1.08	1.08	\$ 698.31	\$ -	\$ 0.07	\$ -
CHILD 01-05	23,304	\$ 126.61	0.92	1.08	1.00	\$ 126.37	\$ -	\$ 0.06	\$ -
CHILD 06-18	50,214	\$ 138.88	1.02	1.08	1.10	\$ 153.35	\$ -	\$ 0.19	\$ -
ABAD & OAA Duals	15,543	\$ 203.86	1.00	1.08	1.08	\$ 219.63	\$ -	\$ 0.27	\$ -
ABAD & OAA Medicaid Only	17,229	\$ 1,166.70	0.94	1.08	1.01	\$ 1,182.46	\$ 17.97	\$ 0.78	\$ -
CAF	5,814	\$ 455.10	1.00	1.07	1.07	\$ 488.37	\$ -	\$ 1.59	\$ 18.57
ACA 19-44	58,519	\$ 294.12	0.96	1.08	1.03	\$ 303.88	\$ 0.67	\$ 0.20	\$ -
ACA 45-54	23,417	\$ 531.39	0.96	1.08	1.04	\$ 553.87	\$ 10.70	\$ 0.26	\$ -
ACA 55-64	22,905	\$ 594.03	0.93	1.08	1.01	\$ 598.63	\$ 20.78	\$ 4.46	\$ -
BCCP	172	\$ 1,333.12	1.00	1.09	1.09	\$ 1,451.03	\$ 17.97	\$ 0.78	\$ -
<b>Total</b>	<b>240,077</b>	<b>\$ 371.12</b>				<b>\$ 384.81</b>	<b>\$ 4.49</b>	<b>\$ 0.79</b>	<b>\$ 0.45</b>

COA	CY 2015 MMs	NEMT <sup>1</sup>	CANS <sup>1</sup>	Tier 1 HRA	Tier 1 HRA Admin	Tier 2 HRA	Health Insurer Fee	Dental	CY17 Payment Rate
TANF	13,221	\$ 6.13	\$ -	\$ 75.33	\$ 1.54	\$ 11.15	\$ -	\$ 23.99	\$ 491.26
PLMA	3,695	\$ 6.51	\$ -	\$ 78.59	\$ 1.60	\$ 10.28	\$ -	\$ 18.70	\$ 460.83
CHILD 00-01	6,044	\$ 0.42	\$ -	\$ 146.56	\$ 2.99	\$ 25.43	\$ -	\$ 1.42	\$ 875.19
CHILD 01-05	23,304	\$ 0.39	\$ -	\$ 16.30	\$ 0.33	\$ 3.77	\$ -	\$ 22.38	\$ 169.60
CHILD 06-18	50,214	\$ 0.61	\$ -	\$ 14.44	\$ 0.29	\$ 3.73	\$ -	\$ 22.34	\$ 194.95
ABAD & OAA Duals	15,543	\$ 49.97	\$ -	\$ 32.47	\$ 0.66	\$ 5.95	\$ -	\$ 27.13	\$ 336.08
ABAD & OAA Medicaid Only	17,229	\$ 53.36	\$ -	\$ 203.08	\$ 4.14	\$ 39.04	\$ -	\$ 28.39	\$ 1,529.23
CAF	5,814	\$ 2.21	\$ -	\$ 41.65	\$ 0.85	\$ 8.87	\$ -	\$ 25.07	\$ 587.19
ACA 19-44	58,519	\$ 5.57	\$ -	\$ 57.80	\$ 1.18	\$ 9.22	\$ -	\$ 22.90	\$ 401.43
ACA 45-54	23,417	\$ 11.13	\$ -	\$ 103.18	\$ 2.11	\$ 17.74	\$ -	\$ 33.01	\$ 731.98
ACA 55-64	22,905	\$ 7.07	\$ -	\$ 138.80	\$ 2.83	\$ 20.88	\$ -	\$ 31.89	\$ 825.34
BCCP	172	\$ 53.36	\$ -	\$ 328.98	\$ 6.71	\$ 44.87	\$ -	\$ 28.39	\$ 1,932.10
<b>Total</b>	<b>240,077</b>	<b>\$ 10.89</b>	<b>\$ -</b>	<b>\$ 68.97</b>	<b>\$ 1.41</b>	<b>\$ 11.96</b>	<b>\$ -</b>	<b>\$ 24.75</b>	<b>\$ 508.51</b>

<sup>1</sup> Rate Add-Ons are inclusive of a 11.8% non-medical load

# Appendix III. CCO-A Rate Development Summary (RDS) **Optumas**

## Appendix III.O: Willamette Valley Community Health, LLC

COA	CY 2015 MMs	Regional	Risk Factor				Breakthrough	ACT/SE <sup>1</sup>	Children's
		Base PMPM	Risk Score	A/B Adjustment	CCO Adjustment	PMPM	Therapy		Wraparound <sup>1</sup>
TANF	62,434	\$ 395.96	0.98	0.96	0.93	\$ 370.08	\$ -	\$ 0.68	\$ -
PLMA	20,065	\$ 343.26	1.00	0.96	0.96	\$ 329.26	\$ -	\$ -	\$ -
CHILD 00-01	39,643	\$ 550.24	1.00	0.96	0.96	\$ 529.71	\$ -	\$ -	\$ -
CHILD 01-05	160,642	\$ 135.34	1.01	0.96	0.98	\$ 132.17	\$ -	\$ -	\$ -
CHILD 06-18	361,728	\$ 153.72	0.97	0.96	0.93	\$ 142.93	\$ -	\$ -	\$ -
ABAD & OAA Duals	53,859	\$ 235.54	1.00	0.96	0.96	\$ 226.02	\$ -	\$ 7.53	\$ -
ABAD & OAA Medicaid Only	55,258	\$ 1,240.93	1.01	0.96	0.96	\$ 1,194.51	\$ 13.83	\$ 14.14	\$ -
CAF	15,686	\$ 452.99	1.00	0.95	0.95	\$ 432.44	\$ -	\$ -	\$ 90.49
ACA 19-44	260,640	\$ 359.59	0.97	0.96	0.93	\$ 334.16	\$ 1.09	\$ 0.69	\$ -
ACA 45-54	80,639	\$ 617.77	0.99	0.95	0.94	\$ 580.92	\$ 8.06	\$ 0.69	\$ -
ACA 55-64	61,642	\$ 684.58	1.00	0.95	0.95	\$ 652.60	\$ 4.50	\$ 0.70	\$ -
BCCP	346	\$ 1,376.67	1.00	0.95	0.95	\$ 1,307.01	\$ 13.83	\$ 14.14	\$ -
<b>Total</b>	<b>1,172,579</b>	<b>\$ 345.69</b>				<b>\$ 326.82</b>	<b>\$ 1.69</b>	<b>\$ 1.29</b>	<b>\$ 1.21</b>

COA	CY 2015 MMs	NEMT <sup>1</sup>	CANS <sup>1</sup>	Tier 1 HRA	Tier 1 HRA Admin	Tier 2 HRA	Health Insurer Fee	Dental	CY17 Payment Rate
TANF	62,434	\$ 5.70	\$ -	\$ 36.06	\$ 0.74	\$ 12.46	\$ -	\$ 23.99	\$ 449.72
PLMA	20,065	\$ 6.06	\$ -	\$ 24.07	\$ 0.49	\$ 10.55	\$ -	\$ 18.70	\$ 389.13
CHILD 00-01	39,643	\$ 0.39	\$ -	\$ 127.86	\$ 2.61	\$ 20.56	\$ -	\$ 1.42	\$ 682.54
CHILD 01-05	160,642	\$ 0.36	\$ -	\$ 11.47	\$ 0.23	\$ 3.79	\$ -	\$ 22.38	\$ 170.41
CHILD 06-18	361,728	\$ 0.57	\$ -	\$ 8.66	\$ 0.18	\$ 4.06	\$ -	\$ 22.34	\$ 178.73
ABAD & OAA Duals	53,859	\$ 46.51	\$ -	\$ 13.19	\$ 0.27	\$ 6.73	\$ -	\$ 27.13	\$ 327.37
ABAD & OAA Medicaid Only	55,258	\$ 49.67	\$ -	\$ 146.45	\$ 2.99	\$ 41.74	\$ -	\$ 28.39	\$ 1,491.72
CAF	15,686	\$ 2.06	\$ 3.05	\$ 11.64	\$ 0.24	\$ 9.76	\$ -	\$ 25.07	\$ 574.74
ACA 19-44	260,640	\$ 5.18	\$ -	\$ 29.75	\$ 0.61	\$ 11.18	\$ -	\$ 22.90	\$ 405.56
ACA 45-54	80,639	\$ 10.36	\$ -	\$ 59.31	\$ 1.21	\$ 20.30	\$ -	\$ 33.01	\$ 713.85
ACA 55-64	61,642	\$ 6.58	\$ -	\$ 72.54	\$ 1.48	\$ 23.20	\$ -	\$ 31.89	\$ 793.49
BCCP	346	\$ 49.67	\$ -	\$ 150.55	\$ 3.07	\$ 48.04	\$ -	\$ 28.39	\$ 1,614.70
<b>Total</b>	<b>1,172,579</b>	<b>\$ 7.38</b>	<b>\$ 0.04</b>	<b>\$ 33.11</b>	<b>\$ 0.68</b>	<b>\$ 10.83</b>	<b>\$ -</b>	<b>\$ 23.57</b>	<b>\$ 406.61</b>

<sup>1</sup> Rate Add-Ons are inclusive of a 9.7% non-medical load

# Appendix III. CCO-A Rate Development Summary (RDS) **Optumas**

## Appendix III.P: Yamhill County Care Organization, Inc.

COA	CY 2015 MMs	Regional	Risk Factor				Breakthrough	ACT/SE <sup>1</sup>	Children's
		Base PMPM	Risk Score	A/B Adjustment	CCO Adjustment	PMPM	Therapy		Wraparound <sup>1</sup>
TANF	15,506	\$ 395.96	1.03	0.95	0.98	\$ 389.89	\$ 8.10	\$ 5.00	\$ -
PLMA	4,907	\$ 343.26	1.00	0.95	0.95	\$ 327.79	\$ -	\$ 0.87	\$ -
CHILD 00-01	8,354	\$ 550.24	1.00	0.96	0.96	\$ 527.34	\$ -	\$ -	\$ -
CHILD 01-05	34,842	\$ 135.34	1.01	0.96	0.97	\$ 131.15	\$ -	\$ -	\$ -
CHILD 06-18	82,112	\$ 153.72	1.01	0.96	0.97	\$ 148.40	\$ -	\$ 0.02	\$ -
ABAD & OAA Duals	6,505	\$ 235.54	1.00	0.96	0.96	\$ 225.01	\$ -	\$ 8.63	\$ -
ABAD & OAA Medicaid Only	8,809	\$ 1,240.93	1.08	0.95	1.03	\$ 1,277.80	\$ 32.28	\$ 14.07	\$ -
CAF	3,389	\$ 452.99	1.00	0.95	0.95	\$ 430.51	\$ -	\$ -	\$ 126.14
ACA 19-44	64,738	\$ 359.59	1.07	0.95	1.01	\$ 364.83	\$ -	\$ 3.42	\$ -
ACA 45-54	21,328	\$ 617.77	1.04	0.95	0.99	\$ 608.63	\$ 25.89	\$ 7.31	\$ -
ACA 55-64	17,196	\$ 684.58	1.01	0.95	0.95	\$ 653.34	\$ 36.59	\$ 3.70	\$ -
BCCP	122	\$ 1,376.67	1.00	0.95	0.95	\$ 1,301.17	\$ 32.28	\$ 14.07	\$ -
<b>Total</b>	<b>267,808</b>	<b>\$ 344.10</b>				<b>\$ 339.75</b>	<b>\$ 5.96</b>	<b>\$ 2.64</b>	<b>\$ 1.60</b>

COA	CY 2015 MMs	NEMT <sup>1</sup>	CANS <sup>1</sup>	Tier 1 HRA	Tier 1 HRA Admin	Tier 2 HRA	Health Insurer Fee	Dental	CY17 Payment Rate
TANF	15,506	\$ 8.06	\$ -	\$ 49.30	\$ 1.01	\$ 12.46	\$ -	\$ 23.99	\$ 497.81
PLMA	4,907	\$ 8.56	\$ -	\$ 29.52	\$ 0.60	\$ 10.55	\$ -	\$ 18.70	\$ 396.59
CHILD 00-01	8,354	\$ 0.55	\$ -	\$ 101.08	\$ 2.06	\$ 20.56	\$ -	\$ 1.42	\$ 653.01
CHILD 01-05	34,842	\$ 0.51	\$ -	\$ 10.66	\$ 0.22	\$ 3.79	\$ -	\$ 22.38	\$ 168.71
CHILD 06-18	82,112	\$ 0.81	\$ -	\$ 17.21	\$ 0.35	\$ 4.06	\$ -	\$ 22.34	\$ 193.18
ABAD & OAA Duals	6,505	\$ 65.72	\$ -	\$ 18.83	\$ 0.38	\$ 6.73	\$ -	\$ 27.13	\$ 352.44
ABAD & OAA Medicaid Only	8,809	\$ 70.19	\$ -	\$ 248.34	\$ 5.07	\$ 41.74	\$ -	\$ 28.39	\$ 1,717.88
CAF	3,389	\$ 2.91	\$ 2.07	\$ 19.54	\$ 0.40	\$ 9.76	\$ -	\$ 25.07	\$ 616.39
ACA 19-44	64,738	\$ 7.32	\$ -	\$ 38.10	\$ 0.78	\$ 11.18	\$ -	\$ 22.90	\$ 448.53
ACA 45-54	21,328	\$ 14.64	\$ -	\$ 54.99	\$ 1.12	\$ 20.30	\$ -	\$ 33.01	\$ 765.88
ACA 55-64	17,196	\$ 9.29	\$ -	\$ 79.68	\$ 1.63	\$ 23.20	\$ -	\$ 31.89	\$ 839.32
BCCP	122	\$ 70.19	\$ -	\$ 81.45	\$ 1.66	\$ 48.04	\$ -	\$ 28.39	\$ 1,577.25
<b>Total</b>	<b>267,808</b>	<b>\$ 8.46</b>	<b>\$ 0.03</b>	<b>\$ 40.83</b>	<b>\$ 0.83</b>	<b>\$ 10.79</b>	<b>\$ -</b>	<b>\$ 23.67</b>	<b>\$ 434.54</b>

<sup>1</sup> Rate Add-Ons are inclusive of a 9.7% non-medical load

**Appendix IV. CCO-B Rate Development Summary (RDS)**

# Appendix IV. CCO-B Rate Development Summary (RDS) **Optumas**

## Appendix IV.A: Allcare CCO, Inc.

COA	CY 2015 MMs	Regional	Risk Factor				Breakthrough	ACT/SE <sup>1</sup>	Children's
		Base PMPM	Risk Score	A/B Adjustment	CCO Adjustment	PMPM	Therapy		Wraparound <sup>1</sup>
TANF	36,134	\$ 354.13	0.96	0.98	0.94	\$ 331.26	\$ -	\$ 1.42	\$ -
PLMA	11,984	\$ 319.48	1.00	0.97	0.97	\$ 311.12	\$ -	\$ -	\$ -
CHILD 00-01	17,505	\$ 646.02	1.00	0.97	0.97	\$ 629.61	\$ -	\$ -	\$ -
CHILD 01-05	68,111	\$ 126.61	0.96	0.98	0.93	\$ 118.31	\$ -	\$ -	\$ -
CHILD 06-18	133,596	\$ 138.88	0.93	0.97	0.91	\$ 125.83	\$ -	\$ -	\$ -
ABAD & OAA Duals	26,572	\$ 203.86	1.00	0.97	0.97	\$ 198.02	\$ 31.66	\$ 6.00	\$ -
ABAD & OAA Medicaid Only	28,522	\$ 1,166.70	1.01	0.97	0.98	\$ 1,145.25	\$ -	\$ 12.04	\$ -
CAF	8,496	\$ 455.10	1.00	0.97	0.97	\$ 440.32	\$ -	\$ -	\$ 34.46
ACA 19-44	150,902	\$ 294.12	0.99	0.97	0.96	\$ 282.27	\$ 0.81	\$ 1.42	\$ -
ACA 45-54	53,628	\$ 531.39	0.98	0.97	0.95	\$ 505.82	\$ -	\$ 1.43	\$ -
ACA 55-64	51,012	\$ 594.03	0.99	0.98	0.96	\$ 572.06	\$ 23.40	\$ 1.43	\$ -
BCCP	354	\$ 1,333.12	1.00	0.98	0.98	\$ 1,308.27	\$ -	\$ 12.04	\$ -
<b>Total</b>	<b>586,817</b>	<b>\$ 343.08</b>				<b>\$ 328.25</b>	<b>\$ 3.68</b>	<b>\$ 1.57</b>	<b>\$ 0.50</b>

COA	CY 2015 MMs	NEMT <sup>1</sup>	CANS <sup>1</sup>	Tier 1 HRA	Tier 1 HRA Admin	Tier 2 HRA	Health Insurer Fee	Dental	CY17 Payment Rate
TANF	36,134	\$ 4.40	\$ -	\$ 24.09	\$ 0.49	\$ 11.15	\$ -	\$ -	\$ 372.81
PLMA	11,984	\$ 4.67	\$ -	\$ 15.62	\$ 0.32	\$ 10.28	\$ -	\$ -	\$ 342.02
CHILD 00-01	17,505	\$ 0.30	\$ -	\$ 119.50	\$ 2.44	\$ 25.43	\$ -	\$ -	\$ 777.28
CHILD 01-05	68,111	\$ 0.28	\$ -	\$ 15.52	\$ 0.32	\$ 3.77	\$ -	\$ -	\$ 138.20
CHILD 06-18	133,596	\$ 0.44	\$ -	\$ 10.17	\$ 0.21	\$ 3.73	\$ -	\$ -	\$ 140.38
ABAD & OAA Duals	26,572	\$ 35.88	\$ -	\$ 7.94	\$ 0.16	\$ 5.95	\$ -	\$ -	\$ 285.61
ABAD & OAA Medicaid Only	28,522	\$ 38.31	\$ -	\$ 167.64	\$ 3.42	\$ 39.04	\$ -	\$ -	\$ 1,405.71
CAF	8,496	\$ 1.59	\$ 3.35	\$ 26.86	\$ 0.55	\$ 8.87	\$ -	\$ -	\$ 516.00
ACA 19-44	150,902	\$ 4.00	\$ -	\$ 33.57	\$ 0.69	\$ 9.22	\$ -	\$ -	\$ 331.98
ACA 45-54	53,628	\$ 7.99	\$ -	\$ 58.30	\$ 1.19	\$ 17.74	\$ -	\$ -	\$ 592.47
ACA 55-64	51,012	\$ 5.07	\$ -	\$ 61.57	\$ 1.26	\$ 20.88	\$ -	\$ -	\$ 685.67
BCCP	354	\$ 38.31	\$ -	\$ 148.16	\$ 3.02	\$ 44.87	\$ -	\$ -	\$ 1,554.68
<b>Total</b>	<b>586,817</b>	<b>\$ 6.24</b>	<b>\$ 0.05</b>	<b>\$ 37.78</b>	<b>\$ 0.77</b>	<b>\$ 11.07</b>	<b>\$ -</b>	<b>\$ -</b>	<b>\$ 389.91</b>

<sup>1</sup> Rate Add-Ons are inclusive of a 11.8% non-medical load

# Appendix IV. CCO-B Rate Development Summary (RDS) **Optumas**

## Appendix IV.B: Cascade Health Alliance, LLC.

COA	CY 2015 MMs	Regional	Risk Factor				Breakthrough	ACT/SE <sup>1</sup>	Children's
		Base PMPM	Risk Score	A/B Adjustment	CCO Adjustment	PMPM	Therapy		Wraparound <sup>1</sup>
TANF	12,116	\$ 440.05	1.02	0.80	0.82	\$ 360.88	\$ -	\$ 0.57	\$ -
PLMA	3,828	\$ 374.22	1.00	0.80	0.80	\$ 300.53	\$ -	\$ -	\$ -
CHILD 00-01	6,653	\$ 527.03	1.00	0.80	0.80	\$ 422.55	\$ -	\$ -	\$ -
CHILD 01-05	23,954	\$ 143.63	1.03	0.80	0.83	\$ 118.89	\$ -	\$ -	\$ -
CHILD 06-18	47,670	\$ 163.25	1.04	0.80	0.83	\$ 135.77	\$ -	\$ -	\$ -
ABAD & OAA Duals	8,896	\$ 219.00	1.00	0.82	0.82	\$ 178.74	\$ -	\$ 0.81	\$ -
ABAD & OAA Medicaid Only	11,271	\$ 1,378.84	1.00	0.81	0.80	\$ 1,108.27	\$ 72.50	\$ 0.45	\$ -
CAF	3,836	\$ 573.60	1.00	0.80	0.80	\$ 461.32	\$ -	\$ -	\$ 97.87
ACA 19-44	46,975	\$ 408.92	1.05	0.81	0.85	\$ 347.83	\$ 1.09	\$ 0.60	\$ -
ACA 45-54	16,896	\$ 649.04	1.05	0.81	0.85	\$ 552.21	\$ 11.97	\$ 2.87	\$ -
ACA 55-64	14,098	\$ 715.11	1.04	0.81	0.84	\$ 600.69	\$ 15.01	\$ -	\$ -
BCCP	52	\$ 2,086.78	1.00	0.81	0.81	\$ 1,693.11	\$ 72.50	\$ 0.45	\$ -
<b>Total</b>	<b>196,245</b>	<b>\$ 415.54</b>				<b>\$ 345.13</b>	<b>\$ 6.55</b>	<b>\$ 0.49</b>	<b>\$ 1.91</b>

COA	CY 2015 MMs	NEMT <sup>1</sup>	CANS <sup>1</sup>	Tier 1 HRA	Tier 1 HRA Admin	Tier 2 HRA	Health Insurer Fee	Dental	CY17 Payment Rate
TANF	12,116	\$ 10.43	\$ -	\$ 53.75	\$ 1.10	\$ 14.41	\$ -	\$ -	\$ 441.13
PLMA	3,828	\$ 4.88	\$ -	\$ 54.90	\$ 1.12	\$ 12.37	\$ -	\$ -	\$ 373.80
CHILD 00-01	6,653	\$ 0.95	\$ -	\$ 174.72	\$ 3.57	\$ 20.16	\$ -	\$ -	\$ 621.95
CHILD 01-05	23,954	\$ 0.63	\$ -	\$ 11.35	\$ 0.23	\$ 4.43	\$ -	\$ -	\$ 135.54
CHILD 06-18	47,670	\$ 1.11	\$ -	\$ 7.74	\$ 0.16	\$ 4.40	\$ -	\$ -	\$ 149.18
ABAD & OAA Duals	8,896	\$ 59.78	\$ -	\$ 31.70	\$ 0.65	\$ 6.27	\$ -	\$ -	\$ 277.94
ABAD & OAA Medicaid Only	11,271	\$ 46.37	\$ -	\$ 200.19	\$ 4.09	\$ 46.26	\$ -	\$ -	\$ 1,478.13
CAF	3,836	\$ 3.04	\$ 2.96	\$ 26.26	\$ 0.54	\$ 11.61	\$ -	\$ -	\$ 603.58
ACA 19-44	46,975	\$ 14.29	\$ -	\$ 39.33	\$ 0.80	\$ 13.34	\$ -	\$ -	\$ 417.29
ACA 45-54	16,896	\$ 18.98	\$ -	\$ 67.89	\$ 1.39	\$ 21.77	\$ -	\$ -	\$ 677.08
ACA 55-64	14,098	\$ 22.59	\$ -	\$ 119.19	\$ 2.43	\$ 25.15	\$ -	\$ -	\$ 785.05
BCCP	52	\$ 46.37	\$ -	\$ 639.86	\$ 13.06	\$ 73.76	\$ -	\$ -	\$ 2,539.10
<b>Total</b>	<b>196,245</b>	<b>\$ 13.24</b>	<b>\$ 0.06</b>	<b>\$ 51.02</b>	<b>\$ 1.04</b>	<b>\$ 13.49</b>	<b>\$ -</b>	<b>\$ -</b>	<b>\$ 432.93</b>

<sup>1</sup> Rate Add-Ons are inclusive of a 11.5% non-medical load

## Appendix IV. CCO-B Rate Development Summary (RDS) **Optumas**

### Appendix IV.C: Columbia-Pacific CCO, LLC.

COA	CY 2015 MMs	Regional	Risk Factor				Breakthrough	ACT/SE <sup>1</sup>	Children's
		Base PMPM	Risk Score	A/B Adjustment	CCO Adjustment	PMPM	Therapy		Wraparound <sup>1</sup>
TANF	17,437	\$ 395.96	1.02	1.08	1.11	\$ 437.60	\$ -	\$ 0.62	\$ -
PLMA	5,221	\$ 343.26	1.00	1.09	1.09	\$ 372.49	\$ -	\$ 0.16	\$ -
CHILD 00-01	8,497	\$ 550.24	1.00	1.09	1.09	\$ 599.26	\$ -	\$ -	\$ -
CHILD 01-05	33,251	\$ 135.34	0.94	1.09	1.03	\$ 139.07	\$ -	\$ -	\$ -
CHILD 06-18	74,203	\$ 153.72	0.98	1.09	1.07	\$ 164.47	\$ -	\$ 0.00	\$ -
ABAD & OAA Duals	9,401	\$ 235.54	1.00	1.09	1.09	\$ 255.70	\$ -	\$ 18.44	\$ -
ABAD & OAA Medicaid Only	14,886	\$ 1,240.93	0.96	1.08	1.03	\$ 1,281.94	\$ 58.69	\$ 30.49	\$ -
CAF	5,112	\$ 452.99	1.00	1.08	1.08	\$ 489.21	\$ -	\$ 0.33	\$ 35.75
ACA 19-44	76,337	\$ 359.59	1.01	1.08	1.10	\$ 393.83	\$ -	\$ 1.10	\$ -
ACA 45-54	28,729	\$ 617.77	0.99	1.08	1.07	\$ 660.62	\$ 21.31	\$ 1.70	\$ -
ACA 55-64	26,667	\$ 684.58	0.97	1.07	1.04	\$ 710.37	\$ 49.11	\$ 0.78	\$ -
BCCP	195	\$ 1,376.67	1.00	1.07	1.07	\$ 1,478.60	\$ 58.69	\$ 30.49	\$ -
<b>Total</b>	<b>299,935</b>	<b>\$ 386.76</b>				<b>\$ 412.62</b>	<b>\$ 9.36</b>	<b>\$ 2.67</b>	<b>\$ 0.61</b>

COA	CY 2015 MMs	NEMT <sup>1</sup>	CANS <sup>1</sup>	Tier 1 HRA	Tier 1 HRA Admin	Tier 2 HRA	Health Insurer Fee	Dental	CY17 Payment Rate
TANF	17,437	\$ 6.97	\$ -	\$ 33.21	\$ 0.68	\$ 12.46	\$ -	\$ -	\$ 491.54
PLMA	5,221	\$ 7.40	\$ -	\$ 23.40	\$ 0.48	\$ 10.55	\$ -	\$ -	\$ 414.48
CHILD 00-01	8,497	\$ 0.48	\$ -	\$ 98.44	\$ 2.01	\$ 20.56	\$ -	\$ -	\$ 720.73
CHILD 01-05	33,251	\$ 0.44	\$ -	\$ 11.96	\$ 0.24	\$ 3.79	\$ -	\$ -	\$ 155.51
CHILD 06-18	74,203	\$ 0.70	\$ -	\$ 7.85	\$ 0.16	\$ 4.06	\$ -	\$ -	\$ 177.24
ABAD & OAA Duals	9,401	\$ 56.83	\$ -	\$ 19.52	\$ 0.40	\$ 6.73	\$ -	\$ -	\$ 357.62
ABAD & OAA Medicaid Only	14,886	\$ 60.68	\$ -	\$ 129.20	\$ 2.64	\$ 41.74	\$ -	\$ -	\$ 1,605.38
CAF	5,112	\$ 2.52	\$ -	\$ 23.76	\$ 0.48	\$ 9.76	\$ -	\$ -	\$ 561.81
ACA 19-44	76,337	\$ 6.33	\$ -	\$ 28.47	\$ 0.58	\$ 11.18	\$ -	\$ -	\$ 441.49
ACA 45-54	28,729	\$ 12.65	\$ -	\$ 63.95	\$ 1.31	\$ 20.30	\$ -	\$ -	\$ 781.83
ACA 55-64	26,667	\$ 8.04	\$ -	\$ 63.34	\$ 1.29	\$ 23.20	\$ -	\$ -	\$ 856.12
BCCP	195	\$ 60.68	\$ -	\$ 71.53	\$ 1.46	\$ 48.04	\$ -	\$ -	\$ 1,749.49
<b>Total</b>	<b>299,935</b>	<b>\$ 9.18</b>	<b>\$ -</b>	<b>\$ 34.87</b>	<b>\$ 0.71</b>	<b>\$ 12.25</b>	<b>\$ -</b>	<b>\$ -</b>	<b>\$ 482.26</b>

<sup>1</sup> Rate Add-Ons are inclusive of a 9.7% non-medical load



# Appendix IV. CCO-B Rate Development Summary (RDS) **Optumas**

## Appendix IV.D: Eastern Oregon Coordinated Care Org., LLC.

COA	CY 2015 MMs	Regional	Risk Factor				Breakthrough	ACT/SE <sup>1</sup>	Children's
		Base PMPM	Risk Score	A/B Adjustment	CCO Adjustment	PMPM	Therapy		Wraparound <sup>1</sup>
TANF	35,140	\$ 440.05	1.07	1.10	1.17	\$ 516.54	\$ 10.40	\$ 0.89	\$ -
PLMA	10,728	\$ 374.22	1.00	1.10	1.10	\$ 410.26	\$ -	\$ -	\$ -
CHILD 00-01	19,960	\$ 527.03	1.00	1.09	1.09	\$ 576.85	\$ -	\$ -	\$ -
CHILD 01-05	79,747	\$ 143.63	0.93	1.09	1.02	\$ 146.41	\$ -	\$ -	\$ -
CHILD 06-18	166,877	\$ 163.25	0.96	1.09	1.05	\$ 171.08	\$ -	\$ -	\$ -
ABAD & OAA Duals	19,203	\$ 219.00	1.00	1.11	1.11	\$ 244.00	\$ 11.82	\$ 9.49	\$ -
ABAD & OAA Medicaid Only	27,719	\$ 1,378.84	1.00	1.10	1.10	\$ 1,510.02	\$ 27.25	\$ 15.50	\$ -
CAF	8,679	\$ 573.60	1.00	1.10	1.10	\$ 629.76	\$ -	\$ -	\$ 119.12
ACA 19-44	120,655	\$ 408.92	1.05	1.11	1.17	\$ 476.54	\$ 1.93	\$ 0.89	\$ -
ACA 45-54	41,610	\$ 649.04	1.04	1.11	1.15	\$ 747.15	\$ 22.01	\$ 0.89	\$ -
ACA 55-64	37,243	\$ 715.11	1.03	1.10	1.13	\$ 811.15	\$ 25.72	\$ 0.89	\$ -
BCCP	227	\$ 2,086.78	1.00	1.11	1.11	\$ 2,311.32	\$ 27.25	\$ 15.50	\$ -
<b>Total</b>	<b>567,788</b>	<b>\$ 386.67</b>				<b>\$ 432.59</b>	<b>\$ 6.09</b>	<b>\$ 1.45</b>	<b>\$ 1.82</b>

COA	CY 2015 MMs	NEMT <sup>1</sup>	CANS <sup>1</sup>	Tier 1 HRA	Tier 1 HRA Admin	Tier 2 HRA	Health Insurer Fee	Dental	CY17 Payment Rate
TANF	35,140	\$ 10.77	\$ -	\$ 69.94	\$ 1.43	\$ 14.41	\$ -	\$ -	\$ 624.38
PLMA	10,728	\$ 4.93	\$ -	\$ 58.20	\$ 1.19	\$ 12.37	\$ -	\$ -	\$ 486.96
CHILD 00-01	19,960	\$ 0.73	\$ -	\$ 99.43	\$ 2.03	\$ 20.16	\$ -	\$ -	\$ 699.20
CHILD 01-05	79,747	\$ 0.72	\$ -	\$ 13.13	\$ 0.27	\$ 4.43	\$ -	\$ -	\$ 164.96
CHILD 06-18	166,877	\$ 1.12	\$ -	\$ 18.71	\$ 0.38	\$ 4.40	\$ -	\$ -	\$ 195.68
ABAD & OAA Duals	19,203	\$ 69.41	\$ -	\$ 20.39	\$ 0.42	\$ 6.27	\$ -	\$ -	\$ 361.80
ABAD & OAA Medicaid Only	27,719	\$ 52.86	\$ -	\$ 202.31	\$ 4.13	\$ 46.26	\$ -	\$ -	\$ 1,858.33
CAF	8,679	\$ 3.61	\$ -	\$ 109.90	\$ 2.24	\$ 11.61	\$ -	\$ -	\$ 876.24
ACA 19-44	120,655	\$ 16.67	\$ -	\$ 63.72	\$ 1.30	\$ 13.34	\$ -	\$ -	\$ 574.39
ACA 45-54	41,610	\$ 20.89	\$ -	\$ 111.23	\$ 2.27	\$ 21.77	\$ -	\$ -	\$ 926.22
ACA 55-64	37,243	\$ 25.37	\$ -	\$ 121.73	\$ 2.48	\$ 25.15	\$ -	\$ -	\$ 1,012.49
BCCP	227	\$ 52.86	\$ -	\$ 177.55	\$ 3.62	\$ 73.76	\$ -	\$ -	\$ 2,661.86
<b>Total</b>	<b>567,788</b>	<b>\$ 12.96</b>	<b>\$ -</b>	<b>\$ 58.26</b>	<b>\$ 1.19</b>	<b>\$ 12.51</b>	<b>\$ -</b>	<b>\$ -</b>	<b>\$ 526.87</b>

<sup>1</sup> Rate Add-Ons are inclusive of a 11.5% non-medical load

## Appendix IV. CCO-B Rate Development Summary (RDS) **Optumas**

### Appendix IV.E: FamilyCare, Inc.

COA	CY 2015 MMs	Regional	Risk Factor				Breakthrough	ACT/SE <sup>1</sup>	Children's
		Base PMPM	Risk Score	A/B Adjustment	CCO Adjustment	PMPM	Therapy		Wraparound <sup>1</sup>
TANF	81,512	\$ 319.33	0.95	1.00	0.95	\$ 301.83	\$ 1.22	\$ 0.64	\$ -
PLMA	31,363	\$ 305.24	1.00	1.00	1.00	\$ 305.24	\$ -	\$ 0.07	\$ -
CHILD 00-01	51,492	\$ 566.69	1.00	1.00	1.00	\$ 566.69	\$ -	\$ -	\$ -
CHILD 01-05	171,505	\$ 113.80	0.97	1.00	0.97	\$ 110.88	\$ -	\$ -	\$ -
CHILD 06-18	335,194	\$ 118.48	1.01	1.00	1.01	\$ 119.77	\$ -	\$ 0.01	\$ -
ABAD & OAA Duals	27,114	\$ 249.62	1.00	1.00	1.00	\$ 249.62	\$ -	\$ 0.74	\$ -
ABAD & OAA Medicaid Only	35,750	\$ 1,317.25	0.86	1.00	0.86	\$ 1,136.03	\$ 21.61	\$ 1.43	\$ -
CAF	18,916	\$ 424.99	1.00	1.00	1.00	\$ 424.99	\$ -	\$ 0.04	\$ 68.88
ACA 19-44	473,722	\$ 283.10	0.94	1.00	0.94	\$ 266.58	\$ 0.24	\$ 0.24	\$ -
ACA 45-54	127,549	\$ 514.42	0.94	1.00	0.94	\$ 484.07	\$ 10.22	\$ 0.22	\$ -
ACA 55-64	101,009	\$ 540.69	0.95	1.00	0.95	\$ 512.49	\$ 16.43	\$ 0.18	\$ -
BCCP	916	\$ 1,615.76	1.00	1.00	1.00	\$ 1,615.76	\$ 21.61	\$ 1.43	\$ -
<b>Total</b>	<b>1,456,042</b>	<b>\$ 303.38</b>				<b>\$ 287.91</b>	<b>\$ 2.72</b>	<b>\$ 0.20</b>	<b>\$ 0.89</b>

COA	CY 2015 MMs	NEMT <sup>1</sup>	CANS <sup>1</sup>	Tier 1 HRA	Tier 1 HRA Admin	Tier 2 HRA	Health Insurer Fee	Dental	CY17 Payment Rate
TANF	81,512	\$ 7.53	\$ -	\$ 33.19	\$ 0.68	\$ 10.55	\$ -	\$ -	\$ 355.64
PLMA	31,363	\$ 7.36	\$ -	\$ 18.88	\$ 0.39	\$ 10.03	\$ -	\$ -	\$ 341.97
CHILD 00-01	51,492	\$ 0.40	\$ -	\$ 133.88	\$ 2.73	\$ 22.30	\$ -	\$ -	\$ 726.00
CHILD 01-05	171,505	\$ 0.19	\$ -	\$ 15.57	\$ 0.32	\$ 3.63	\$ -	\$ -	\$ 130.59
CHILD 06-18	335,194	\$ 0.41	\$ -	\$ 12.42	\$ 0.25	\$ 3.50	\$ -	\$ -	\$ 136.36
ABAD & OAA Duals	27,114	\$ 40.54	\$ -	\$ 19.07	\$ 0.39	\$ 7.66	\$ -	\$ -	\$ 318.01
ABAD & OAA Medicaid Only	35,750	\$ 44.95	\$ -	\$ 154.20	\$ 3.15	\$ 46.73	\$ -	\$ -	\$ 1,408.09
CAF	18,916	\$ 2.42	\$ 2.07	\$ 33.06	\$ 0.67	\$ 10.39	\$ -	\$ -	\$ 542.52
ACA 19-44	473,722	\$ 8.04	\$ -	\$ 29.47	\$ 0.60	\$ 9.20	\$ -	\$ -	\$ 314.37
ACA 45-54	127,549	\$ 13.30	\$ -	\$ 57.08	\$ 1.16	\$ 18.09	\$ -	\$ -	\$ 584.15
ACA 55-64	101,009	\$ 10.09	\$ -	\$ 63.17	\$ 1.29	\$ 20.08	\$ -	\$ -	\$ 623.72
BCCP	916	\$ 44.95	\$ -	\$ 230.91	\$ 4.71	\$ 60.33	\$ -	\$ -	\$ 1,979.71
<b>Total</b>	<b>1,456,042</b>	<b>\$ 7.11</b>	<b>\$ 0.03</b>	<b>\$ 35.38</b>	<b>\$ 0.72</b>	<b>\$ 10.26</b>	<b>\$ -</b>	<b>\$ -</b>	<b>\$ 345.23</b>

<sup>1</sup> Rate Add-Ons are inclusive of a 10.1% non-medical load

## Appendix IV. CCO-B Rate Development Summary (RDS) **Optumas**

### Appendix IV.F: Health Share of Oregon

COA	CY 2015 MMs	Regional	Risk Factor				Breakthrough	ACT/SE <sup>1</sup>	Children's
		Base PMPM	Risk Score	A/B Adjustment	CCO Adjustment	PMPM	Therapy		Wraparound <sup>1</sup>
TANF	138,371	\$ 319.33	1.03	1.00	1.03	\$ 329.64	\$ 2.50	\$ 2.36	\$ -
PLMA	43,468	\$ 305.24	1.00	1.00	1.00	\$ 305.24	\$ -	\$ 0.64	\$ -
CHILD 00-01	71,377	\$ 566.69	1.00	1.00	1.00	\$ 566.69	\$ -	\$ -	\$ -
CHILD 01-05	311,494	\$ 113.80	1.01	1.00	1.01	\$ 115.40	\$ -	\$ 0.18	\$ -
CHILD 06-18	740,685	\$ 118.48	1.00	1.00	1.00	\$ 117.89	\$ -	\$ 1.01	\$ -
ABAD & OAA Duals	197,759	\$ 249.62	1.00	1.00	1.00	\$ 249.62	\$ 0.62	\$ 19.71	\$ -
ABAD & OAA Medicaid Only	167,576	\$ 1,317.25	1.03	1.00	1.03	\$ 1,355.91	\$ 61.16	\$ 26.99	\$ -
CAF	33,833	\$ 424.99	1.00	1.00	1.00	\$ 424.99	\$ -	\$ 6.51	\$ 99.60
ACA 19-44	704,231	\$ 283.10	1.04	1.00	1.04	\$ 294.21	\$ 2.00	\$ 3.20	\$ -
ACA 45-54	211,360	\$ 514.42	1.04	1.00	1.04	\$ 532.73	\$ 24.95	\$ 1.47	\$ -
ACA 55-64	171,210	\$ 540.69	1.03	1.00	1.03	\$ 557.33	\$ 52.94	\$ 0.93	\$ -
BCCP	747	\$ 1,615.76	1.00	1.00	1.00	\$ 1,615.76	\$ 61.16	\$ 26.99	\$ -
<b>Total</b>	<b>2,792,111</b>	<b>\$ 325.01</b>				<b>\$ 333.07</b>	<b>\$ 9.50</b>	<b>\$ 4.49</b>	<b>\$ 1.21</b>

COA	CY 2015 MMs	NEMT <sup>1</sup>	CANS <sup>1</sup>	Tier 1 HRA	Tier 1 HRA Admin	Tier 2 HRA	Health Insurer Fee	Dental	CY17 Payment Rate
TANF	138,371	\$ 6.95	\$ -	\$ 45.74	\$ 0.93	\$ 10.55	\$ -	\$ -	\$ 398.69
PLMA	43,468	\$ 6.01	\$ -	\$ 40.85	\$ 0.83	\$ 10.03	\$ -	\$ -	\$ 363.60
CHILD 00-01	71,377	\$ 0.75	\$ -	\$ 165.40	\$ 3.38	\$ 22.30	\$ -	\$ -	\$ 758.52
CHILD 01-05	311,494	\$ 0.38	\$ -	\$ 16.57	\$ 0.34	\$ 3.63	\$ -	\$ -	\$ 136.50
CHILD 06-18	740,685	\$ 0.49	\$ -	\$ 15.89	\$ 0.32	\$ 3.50	\$ -	\$ -	\$ 139.12
ABAD & OAA Duals	197,759	\$ 62.13	\$ -	\$ 36.89	\$ 0.75	\$ 7.66	\$ -	\$ -	\$ 377.39
ABAD & OAA Medicaid Only	167,576	\$ 48.55	\$ -	\$ 236.97	\$ 4.84	\$ 46.73	\$ -	\$ -	\$ 1,781.14
CAF	33,833	\$ 4.54	\$ -	\$ 38.58	\$ 0.79	\$ 10.39	\$ -	\$ -	\$ 585.38
ACA 19-44	704,231	\$ 3.78	\$ -	\$ 37.73	\$ 0.77	\$ 9.20	\$ -	\$ -	\$ 350.89
ACA 45-54	211,360	\$ 8.38	\$ -	\$ 80.78	\$ 1.65	\$ 18.09	\$ -	\$ -	\$ 668.05
ACA 55-64	171,210	\$ 6.34	\$ -	\$ 93.37	\$ 1.91	\$ 20.08	\$ -	\$ -	\$ 732.89
BCCP	747	\$ 48.55	\$ -	\$ 412.79	\$ 8.42	\$ 60.33	\$ -	\$ -	\$ 2,234.01
<b>Total</b>	<b>2,792,111</b>	<b>\$ 9.99</b>	<b>\$ -</b>	<b>\$ 51.96</b>	<b>\$ 1.06</b>	<b>\$ 10.99</b>	<b>\$ -</b>	<b>\$ -</b>	<b>\$ 422.28</b>

<sup>1</sup> Rate Add-Ons are inclusive of a 10.1% non-medical load

## Appendix IV. CCO-B Rate Development Summary (RDS) **Optumas**

### Appendix IV.G: InterCommunity Health Network, Inc.

COA	CY 2015 MMs	Regional	Risk Factor				Breakthrough	ACT/SE <sup>1</sup>	Children's
		Base PMPM	Risk Score	A/B Adjustment	CCO Adjustment	PMPM	Therapy		Wraparound <sup>1</sup>
TANF	37,242	\$ 395.96	1.02	1.05	1.07	\$ 422.36	\$ -	\$ -	\$ -
PLMA	11,402	\$ 343.26	1.00	1.05	1.05	\$ 361.17	\$ -	\$ -	\$ -
CHILD 00-01	19,126	\$ 550.24	1.00	1.06	1.06	\$ 581.03	\$ -	\$ -	\$ -
CHILD 01-05	74,130	\$ 135.34	1.00	1.06	1.05	\$ 142.49	\$ -	\$ -	\$ -
CHILD 06-18	161,389	\$ 153.72	1.08	1.06	1.14	\$ 175.69	\$ -	\$ -	\$ -
ABAD & OAA Duals	31,670	\$ 235.54	1.00	1.05	1.05	\$ 247.92	\$ -	\$ -	\$ -
ABAD & OAA Medicaid Only	37,543	\$ 1,240.93	0.99	1.05	1.03	\$ 1,284.34	\$ 21.60	\$ 0.24	\$ -
CAF	9,998	\$ 452.99	1.00	1.05	1.05	\$ 474.33	\$ -	\$ -	\$ 1.00
ACA 19-44	172,948	\$ 359.59	1.01	1.05	1.06	\$ 380.82	\$ 3.12	\$ 0.03	\$ -
ACA 45-54	54,224	\$ 617.77	1.01	1.05	1.06	\$ 653.48	\$ -	\$ -	\$ -
ACA 55-64	48,668	\$ 684.58	1.01	1.04	1.05	\$ 722.00	\$ 24.29	\$ -	\$ -
BCCP	237	\$ 1,376.67	1.00	1.04	1.04	\$ 1,433.64	\$ 21.60	\$ 0.24	\$ -
<b>Total</b>	<b>658,578</b>	<b>\$ 382.54</b>				<b>\$ 406.12</b>	<b>\$ 3.85</b>	<b>\$ 0.02</b>	<b>\$ 0.02</b>

COA	CY 2015 MMs	NEMT <sup>1</sup>	CANS <sup>1</sup>	Tier 1 HRA	Tier 1 HRA Admin	Tier 2 HRA	Health Insurer Fee	Dental	CY17 Payment Rate
TANF	37,242	\$ 10.54	\$ -	\$ 37.10	\$ 0.76	\$ 12.46	\$ -	\$ -	\$ 483.22
PLMA	11,402	\$ 11.19	\$ -	\$ 13.20	\$ 0.27	\$ 10.55	\$ -	\$ -	\$ 396.38
CHILD 00-01	19,126	\$ 0.72	\$ -	\$ 144.66	\$ 2.95	\$ 20.56	\$ -	\$ -	\$ 749.92
CHILD 01-05	74,130	\$ 0.67	\$ -	\$ 15.45	\$ 0.32	\$ 3.79	\$ -	\$ -	\$ 162.73
CHILD 06-18	161,389	\$ 1.06	\$ -	\$ 14.19	\$ 0.29	\$ 4.06	\$ -	\$ -	\$ 195.28
ABAD & OAA Duals	31,670	\$ 85.91	\$ -	\$ 24.43	\$ 0.50	\$ 6.73	\$ -	\$ -	\$ 365.49
ABAD & OAA Medicaid Only	37,543	\$ 91.74	\$ -	\$ 138.16	\$ 2.82	\$ 41.74	\$ -	\$ -	\$ 1,580.64
CAF	9,998	\$ 3.80	\$ 0.25	\$ 19.88	\$ 0.41	\$ 9.76	\$ -	\$ -	\$ 509.43
ACA 19-44	172,948	\$ 9.57	\$ -	\$ 37.65	\$ 0.77	\$ 11.18	\$ -	\$ -	\$ 443.14
ACA 45-54	54,224	\$ 19.13	\$ -	\$ 71.12	\$ 1.45	\$ 20.30	\$ -	\$ -	\$ 765.47
ACA 55-64	48,668	\$ 12.15	\$ -	\$ 77.67	\$ 1.59	\$ 23.20	\$ -	\$ -	\$ 860.90
BCCP	237	\$ 91.74	\$ -	\$ 287.16	\$ 5.86	\$ 48.04	\$ -	\$ -	\$ 1,888.28
<b>Total</b>	<b>658,578</b>	<b>\$ 15.58</b>	<b>\$ 0.00</b>	<b>\$ 42.68</b>	<b>\$ 0.87</b>	<b>\$ 12.10</b>	<b>\$ -</b>	<b>\$ -</b>	<b>\$ 481.25</b>

<sup>1</sup> Rate Add-Ons are inclusive of a 9.7% non-medical load

# Appendix IV. CCO-B Rate Development Summary (RDS) **Optumas**

## Appendix IV.H: Jackson County CCO, LLC.

COA	CY 2015 MMs	Regional	Risk Factor				Breakthrough	ACT/SE <sup>1</sup>	Children's
		Base PMPM	Risk Score	A/B Adjustment	CCO Adjustment	PMPM	Therapy		Wraparound <sup>1</sup>
TANF	19,577	\$ 354.13	1.02	0.93	0.95	\$ 336.64	\$ 8.79	\$ -	\$ -
PLMA	5,637	\$ 319.48	1.00	0.93	0.93	\$ 296.63	\$ -	\$ -	\$ -
CHILD 00-01	9,401	\$ 646.02	1.00	0.93	0.93	\$ 600.28	\$ -	\$ -	\$ -
CHILD 01-05	40,414	\$ 126.61	0.99	0.93	0.92	\$ 116.82	\$ -	\$ -	\$ -
CHILD 06-18	97,699	\$ 138.88	0.97	0.93	0.90	\$ 124.78	\$ -	\$ -	\$ -
ABAD & OAA Duals	13,179	\$ 203.86	1.00	0.93	0.93	\$ 188.79	\$ -	\$ -	\$ -
ABAD & OAA Medicaid Only	16,823	\$ 1,166.70	1.06	0.92	0.98	\$ 1,143.16	\$ 60.02	\$ 8.26	\$ -
CAF	6,353	\$ 455.10	1.00	0.92	0.92	\$ 419.81	\$ -	\$ -	\$ -
ACA 19-44	87,059	\$ 294.12	1.03	0.93	0.96	\$ 282.23	\$ 2.86	\$ -	\$ -
ACA 45-54	28,687	\$ 531.39	1.00	0.93	0.93	\$ 492.25	\$ 22.98	\$ -	\$ -
ACA 55-64	25,043	\$ 594.03	0.98	0.93	0.91	\$ 542.83	\$ 105.93	\$ -	\$ -
BCCP	290	\$ 1,333.12	1.00	0.94	0.94	\$ 1,247.32	\$ 60.02	\$ 8.26	\$ -
<b>Total</b>	<b>350,162</b>	<b>\$ 327.88</b>				<b>\$ 308.00</b>	<b>\$ 13.59</b>	<b>\$ 0.40</b>	<b>\$ -</b>

COA	CY 2015 MMs	NEMT <sup>1</sup>	CANS <sup>1</sup>	Tier 1 HRA	Tier 1 HRA Admin	Tier 2 HRA	Health Insurer Fee	Dental	CY17 Payment Rate
TANF	19,577	\$ 3.66	\$ -	\$ 40.90	\$ 0.83	\$ 11.15	\$ -	\$ -	\$ 401.96
PLMA	5,637	\$ 3.89	\$ -	\$ 41.70	\$ 0.85	\$ 10.28	\$ -	\$ -	\$ 353.36
CHILD 00-01	9,401	\$ 0.25	\$ -	\$ 168.98	\$ 3.45	\$ 25.43	\$ -	\$ -	\$ 798.38
CHILD 01-05	40,414	\$ 0.23	\$ -	\$ 9.48	\$ 0.19	\$ 3.77	\$ -	\$ -	\$ 130.49
CHILD 06-18	97,699	\$ 0.37	\$ -	\$ 11.15	\$ 0.23	\$ 3.73	\$ -	\$ -	\$ 140.25
ABAD & OAA Duals	13,179	\$ 29.87	\$ -	\$ 9.27	\$ 0.19	\$ 5.95	\$ -	\$ -	\$ 234.07
ABAD & OAA Medicaid Only	16,823	\$ 31.90	\$ -	\$ 184.00	\$ 3.76	\$ 39.04	\$ -	\$ -	\$ 1,470.12
CAF	6,353	\$ 1.32	\$ -	\$ 22.52	\$ 0.46	\$ 8.87	\$ -	\$ -	\$ 452.98
ACA 19-44	87,059	\$ 3.33	\$ -	\$ 33.93	\$ 0.69	\$ 9.22	\$ -	\$ -	\$ 332.26
ACA 45-54	28,687	\$ 6.65	\$ -	\$ 61.49	\$ 1.25	\$ 17.74	\$ -	\$ -	\$ 602.36
ACA 55-64	25,043	\$ 4.22	\$ -	\$ 89.93	\$ 1.84	\$ 20.88	\$ -	\$ -	\$ 765.62
BCCP	290	\$ 31.90	\$ -	\$ 50.79	\$ 1.04	\$ 44.87	\$ -	\$ -	\$ 1,444.19
<b>Total</b>	<b>350,162</b>	<b>\$ 4.78</b>	<b>\$ -</b>	<b>\$ 41.24</b>	<b>\$ 0.84</b>	<b>\$ 10.48</b>	<b>\$ -</b>	<b>\$ -</b>	<b>\$ 379.35</b>

<sup>1</sup> Rate Add-Ons are inclusive of a 11.8% non-medical load

# Appendix IV. CCO-B Rate Development Summary (RDS) **Optumas**

## Appendix IV.I: PacificSource Community Solutions, Inc. (Central)

COA	CY 2015 MMs	Regional	Risk Factor				Breakthrough	ACT/SE <sup>1</sup>	Children's
		Base PMPM	Risk Score	A/B Adjustment	CCO Adjustment	PMPM	Therapy		Wraparound <sup>1</sup>
TANF	37,593	\$ 440.05	0.93	0.94	0.88	\$ 387.63	\$ 1.00	\$ -	\$ -
PLMA	10,676	\$ 374.22	1.00	0.94	0.94	\$ 352.57	\$ -	\$ -	\$ -
CHILD 00-01	19,035	\$ 527.03	1.00	0.94	0.94	\$ 495.73	\$ -	\$ -	\$ -
CHILD 01-05	70,368	\$ 143.63	1.04	0.94	0.98	\$ 140.45	\$ -	\$ -	\$ -
CHILD 06-18	172,046	\$ 163.25	1.04	0.94	0.98	\$ 159.34	\$ -	\$ -	\$ -
ABAD & OAA Duals	25,538	\$ 219.00	1.00	0.96	0.96	\$ 209.69	\$ -	\$ -	\$ -
ABAD & OAA Medicaid Only	22,804	\$ 1,378.84	1.01	0.95	0.96	\$ 1,317.32	\$ 45.37	\$ -	\$ -
CAF	6,955	\$ 573.60	1.00	0.94	0.94	\$ 541.20	\$ -	\$ -	\$ 97.87
ACA 19-44	164,445	\$ 408.92	0.96	0.95	0.91	\$ 372.63	\$ 1.67	\$ -	\$ -
ACA 45-54	54,291	\$ 649.04	0.98	0.95	0.93	\$ 602.21	\$ 6.53	\$ -	\$ -
ACA 55-64	48,275	\$ 715.11	0.99	0.95	0.94	\$ 673.02	\$ 63.66	\$ -	\$ -
BCCP	550	\$ 2,086.78	1.00	0.95	0.95	\$ 1,986.29	\$ 45.37	\$ -	\$ -
<b>Total</b>	<b>632,577</b>	<b>\$ 391.95</b>				<b>\$ 366.41</b>	<b>\$ 7.59</b>	<b>\$ -</b>	<b>\$ 1.08</b>

COA	CY 2015 MMs	NEMT <sup>1</sup>	CANS <sup>1</sup>	Tier 1 HRA	Tier 1 HRA Admin	Tier 2 HRA	Health Insurer Fee	Dental	CY17 Payment Rate
TANF	37,593	\$ 6.06	\$ -	\$ 38.07	\$ 0.78	\$ 14.41	\$ -	\$ -	\$ 447.94
PLMA	10,676	\$ 6.43	\$ -	\$ 23.01	\$ 0.47	\$ 12.37	\$ -	\$ -	\$ 394.85
CHILD 00-01	19,035	\$ 0.42	\$ -	\$ 138.86	\$ 2.83	\$ 20.16	\$ -	\$ -	\$ 658.00
CHILD 01-05	70,368	\$ 0.39	\$ -	\$ 13.63	\$ 0.28	\$ 4.43	\$ -	\$ -	\$ 159.17
CHILD 06-18	172,046	\$ 0.61	\$ -	\$ 9.25	\$ 0.19	\$ 4.40	\$ -	\$ -	\$ 173.78
ABAD & OAA Duals	25,538	\$ 49.40	\$ -	\$ 5.62	\$ 0.11	\$ 6.27	\$ -	\$ -	\$ 271.09
ABAD & OAA Medicaid Only	22,804	\$ 52.76	\$ -	\$ 165.32	\$ 3.37	\$ 46.26	\$ -	\$ -	\$ 1,630.41
CAF	6,955	\$ 2.19	\$ -	\$ 17.41	\$ 0.36	\$ 11.61	\$ -	\$ -	\$ 670.63
ACA 19-44	164,445	\$ 5.50	\$ -	\$ 49.41	\$ 1.01	\$ 13.34	\$ -	\$ -	\$ 443.57
ACA 45-54	54,291	\$ 11.00	\$ -	\$ 65.03	\$ 1.33	\$ 21.77	\$ -	\$ -	\$ 707.87
ACA 55-64	48,275	\$ 6.99	\$ -	\$ 68.35	\$ 1.39	\$ 25.15	\$ -	\$ -	\$ 838.56
BCCP	550	\$ 52.76	\$ -	\$ 375.77	\$ 7.67	\$ 73.76	\$ -	\$ -	\$ 2,541.62
<b>Total</b>	<b>632,577</b>	<b>\$ 7.56</b>	<b>\$ -</b>	<b>\$ 41.21</b>	<b>\$ 0.84</b>	<b>\$ 12.73</b>	<b>\$ -</b>	<b>\$ -</b>	<b>\$ 437.42</b>

<sup>1</sup> Rate Add-Ons are inclusive of a 11.5% non-medical load

# Appendix IV. CCO-B Rate Development Summary (RDS) **Optumas**

## Appendix IV.J: PacificSource Community Solutions, Inc. (Gorge)

COA	CY 2015 MMs	Regional	Risk Factor				Breakthrough	ACT/SE <sup>1</sup>	Children's
		Base PMPM	Risk Score	A/B Adjustment	CCO Adjustment	PMPM	Therapy		Wraparound <sup>1</sup>
TANF	6,934	\$ 440.05	0.97	1.11	1.08	\$ 475.00	\$ 1.00	\$ -	\$ -
PLMA	2,995	\$ 374.22	1.00	1.11	1.11	\$ 416.42	\$ -	\$ -	\$ -
CHILD 00-01	5,073	\$ 527.03	1.00	1.11	1.11	\$ 585.50	\$ -	\$ -	\$ -
CHILD 01-05	20,443	\$ 143.63	1.08	1.11	1.20	\$ 172.78	\$ -	\$ -	\$ -
CHILD 06-18	47,576	\$ 163.25	0.98	1.11	1.09	\$ 177.52	\$ -	\$ -	\$ -
ABAD & OAA Duals	4,049	\$ 219.00	1.00	1.13	1.13	\$ 247.66	\$ -	\$ -	\$ -
ABAD & OAA Medicaid Only	5,753	\$ 1,378.84	0.99	1.12	1.10	\$ 1,520.71	\$ 45.37	\$ -	\$ -
CAF	2,571	\$ 573.60	1.00	1.11	1.11	\$ 639.21	\$ -	\$ -	\$ 97.87
ACA 19-44	34,571	\$ 408.92	0.93	1.12	1.05	\$ 428.52	\$ 1.67	\$ -	\$ -
ACA 45-54	12,849	\$ 649.04	0.90	1.12	1.01	\$ 656.53	\$ 6.53	\$ -	\$ -
ACA 55-64	11,136	\$ 715.11	0.90	1.12	1.01	\$ 721.30	\$ 63.66	\$ -	\$ -
BCCP	95	\$ 2,086.78	1.00	1.12	1.12	\$ 2,346.01	\$ 45.37	\$ -	\$ -
<b>Total</b>	<b>154,046</b>	<b>\$ 379.64</b>				<b>\$ 405.01</b>	<b>\$ 7.29</b>	<b>\$ -</b>	<b>\$ 1.63</b>

COA	CY 2015 MMs	NEMT <sup>1</sup>	CANS <sup>1</sup>	Tier 1 HRA	Tier 1 HRA Admin	Tier 2 HRA	Health Insurer Fee	Dental	CY17 Payment Rate
TANF	6,934	\$ 3.27	\$ -	\$ 22.85	\$ 0.47	\$ 14.41	\$ -	\$ -	\$ 516.99
PLMA	2,995	\$ 3.47	\$ -	\$ 6.41	\$ 0.13	\$ 12.37	\$ -	\$ -	\$ 438.81
CHILD 00-01	5,073	\$ 0.22	\$ -	\$ 85.35	\$ 1.74	\$ 20.16	\$ -	\$ -	\$ 692.98
CHILD 01-05	20,443	\$ 0.21	\$ -	\$ 8.42	\$ 0.17	\$ 4.43	\$ -	\$ -	\$ 186.01
CHILD 06-18	47,576	\$ 0.33	\$ -	\$ 7.94	\$ 0.16	\$ 4.40	\$ -	\$ -	\$ 190.34
ABAD & OAA Duals	4,049	\$ 26.66	\$ -	\$ 2.99	\$ 0.06	\$ 6.27	\$ -	\$ -	\$ 283.64
ABAD & OAA Medicaid Only	5,753	\$ 28.47	\$ -	\$ 92.78	\$ 1.89	\$ 46.26	\$ -	\$ -	\$ 1,735.48
CAF	2,571	\$ 1.18	\$ -	\$ 7.37	\$ 0.15	\$ 11.61	\$ -	\$ -	\$ 757.39
ACA 19-44	34,571	\$ 2.97	\$ -	\$ 12.32	\$ 0.25	\$ 13.34	\$ -	\$ -	\$ 459.08
ACA 45-54	12,849	\$ 5.94	\$ -	\$ 34.13	\$ 0.70	\$ 21.77	\$ -	\$ -	\$ 725.60
ACA 55-64	11,136	\$ 3.77	\$ -	\$ 41.81	\$ 0.85	\$ 25.15	\$ -	\$ -	\$ 856.54
BCCP	95	\$ 28.47	\$ -	\$ 22.33	\$ 0.46	\$ 73.76	\$ -	\$ -	\$ 2,516.39
<b>Total</b>	<b>154,046</b>	<b>\$ 3.59</b>	<b>\$ -</b>	<b>\$ 19.85</b>	<b>\$ 0.41</b>	<b>\$ 12.26</b>	<b>\$ -</b>	<b>\$ -</b>	<b>\$ 450.03</b>

<sup>1</sup> Rate Add-Ons are inclusive of a 11.5% non-medical load

# Appendix IV. CCO-B Rate Development Summary (RDS) **Optumas**

## Appendix IV.K: Primary Health of Josephine County, LLC

COA	CY 2015 MMs	Regional	Risk Factor				Breakthrough	ACT/SE <sup>1</sup>	Children's
		Base PMPM	Risk Score	A/B Adjustment	CCO Adjustment	PMPM	Therapy		Wraparound <sup>1</sup>
TANF	7,942	\$ 354.13	0.95	0.95	0.90	\$ 317.54	\$ -	\$ 1.24	\$ -
PLMA	2,556	\$ 319.48	1.00	0.94	0.94	\$ 301.42	\$ -	\$ -	\$ -
CHILD 00-01	3,267	\$ 646.02	1.00	0.94	0.94	\$ 609.96	\$ -	\$ -	\$ -
CHILD 01-05	11,458	\$ 126.61	0.95	0.94	0.90	\$ 113.38	\$ -	\$ -	\$ -
CHILD 06-18	29,617	\$ 138.88	0.89	0.94	0.84	\$ 117.27	\$ -	\$ -	\$ -
ABAD & OAA Duals	6,081	\$ 203.86	1.00	0.94	0.94	\$ 191.84	\$ -	\$ 3.36	\$ -
ABAD & OAA Medicaid Only	6,999	\$ 1,166.70	1.01	0.94	0.95	\$ 1,103.15	\$ -	\$ 24.62	\$ -
CAF	2,176	\$ 455.10	1.00	0.94	0.94	\$ 426.58	\$ -	\$ -	\$ 46.00
ACA 19-44	36,261	\$ 294.12	0.86	0.94	0.81	\$ 238.77	\$ -	\$ -	\$ -
ACA 45-54	14,252	\$ 531.39	0.95	0.94	0.90	\$ 477.62	\$ -	\$ -	\$ -
ACA 55-64	14,043	\$ 594.03	1.00	0.94	0.94	\$ 558.88	\$ 38.09	\$ -	\$ -
BCCP	122	\$ 1,333.12	1.00	0.95	0.95	\$ 1,267.45	\$ -	\$ 24.62	\$ -
<b>Total</b>	<b>134,771</b>	<b>\$ 359.43</b>				<b>\$ 321.58</b>	<b>\$ 3.97</b>	<b>\$ 1.53</b>	<b>\$ 0.74</b>

COA	CY 2015 MMs	NEMT <sup>1</sup>	CANS <sup>1</sup>	Tier 1 HRA	Tier 1 HRA Admin	Tier 2 HRA	Health Insurer Fee	Dental	CY17 Payment Rate
TANF	7,942	\$ 3.77	\$ -	\$ 29.44	\$ 0.60	\$ 11.15	\$ -	\$ -	\$ 363.74
PLMA	2,556	\$ 4.01	\$ -	\$ 33.83	\$ 0.69	\$ 10.28	\$ -	\$ -	\$ 350.22
CHILD 00-01	3,267	\$ 0.26	\$ -	\$ 209.29	\$ 4.27	\$ 25.43	\$ -	\$ -	\$ 849.21
CHILD 01-05	11,458	\$ 0.24	\$ -	\$ 7.33	\$ 0.15	\$ 3.77	\$ -	\$ -	\$ 124.87
CHILD 06-18	29,617	\$ 0.38	\$ -	\$ 6.70	\$ 0.14	\$ 3.73	\$ -	\$ -	\$ 128.21
ABAD & OAA Duals	6,081	\$ 30.77	\$ -	\$ 2.95	\$ 0.06	\$ 5.95	\$ -	\$ -	\$ 234.93
ABAD & OAA Medicaid Only	6,999	\$ 32.85	\$ -	\$ 118.59	\$ 2.42	\$ 39.04	\$ -	\$ -	\$ 1,320.67
CAF	2,176	\$ 1.36	\$ 3.39	\$ 22.60	\$ 0.46	\$ 8.87	\$ -	\$ -	\$ 509.26
ACA 19-44	36,261	\$ 3.43	\$ -	\$ 26.04	\$ 0.53	\$ 9.22	\$ -	\$ -	\$ 277.99
ACA 45-54	14,252	\$ 6.85	\$ -	\$ 51.30	\$ 1.05	\$ 17.74	\$ -	\$ -	\$ 554.56
ACA 55-64	14,043	\$ 4.35	\$ -	\$ 66.96	\$ 1.37	\$ 20.88	\$ -	\$ -	\$ 690.52
BCCP	122	\$ 32.85	\$ -	\$ 125.10	\$ 2.55	\$ 44.87	\$ -	\$ -	\$ 1,497.45
<b>Total</b>	<b>134,771</b>	<b>\$ 5.65</b>	<b>\$ 0.05</b>	<b>\$ 35.72</b>	<b>\$ 0.73</b>	<b>\$ 11.62</b>	<b>\$ -</b>	<b>\$ -</b>	<b>\$ 381.60</b>

<sup>1</sup> Rate Add-Ons are inclusive of a 11.8% non-medical load



# Appendix IV. CCO-B Rate Development Summary (RDS) **Optumas**

## Appendix IV.L: Trillium Community Health Plan, Inc.

COA	CY 2015 MMs	Regional	Risk Factor				Breakthrough	ACT/SE <sup>1</sup>	Children's
		Base PMPM	Risk Score	A/B Adjustment	CCO Adjustment	PMPM	Therapy		Wraparound <sup>1</sup>
TANF	57,779	\$ 354.13	1.01	1.05	1.06	\$ 374.55	\$ -	\$ 1.78	\$ -
PLMA	20,080	\$ 319.48	1.00	1.05	1.05	\$ 334.18	\$ -	\$ 1.86	\$ -
CHILD 00-01	29,600	\$ 646.02	1.00	1.05	1.05	\$ 676.26	\$ -	\$ 3.80	\$ -
CHILD 01-05	107,817	\$ 126.61	1.05	1.05	1.10	\$ 139.77	\$ -	\$ 0.51	\$ -
CHILD 06-18	245,824	\$ 138.88	1.06	1.05	1.11	\$ 153.56	\$ -	\$ 0.67	\$ -
ABAD & OAA Duals	49,880	\$ 203.86	1.00	1.04	1.04	\$ 212.69	\$ -	\$ 0.73	\$ -
ABAD & OAA Medicaid Only	65,231	\$ 1,166.70	0.99	1.04	1.03	\$ 1,205.29	\$ 35.02	\$ 5.78	\$ -
CAF	24,757	\$ 455.10	1.00	1.04	1.04	\$ 472.95	\$ -	\$ 1.95	\$ 31.01
ACA 19-44	301,144	\$ 294.12	1.00	1.05	1.04	\$ 307.26	\$ 1.32	\$ 1.38	\$ -
ACA 45-54	89,008	\$ 531.39	1.00	1.05	1.05	\$ 558.85	\$ 20.86	\$ 2.69	\$ -
ACA 55-64	79,765	\$ 594.03	1.00	1.05	1.05	\$ 623.11	\$ 40.51	\$ 2.95	\$ -
BCCP	514	\$ 1,333.12	1.00	1.05	1.05	\$ 1,405.21	\$ 35.02	\$ 5.78	\$ -
<b>Total</b>	<b>1,071,399</b>	<b>\$ 350.26</b>				<b>\$ 368.51</b>	<b>\$ 7.27</b>	<b>\$ 1.71</b>	<b>\$ 0.72</b>

COA	CY 2015 MMs	NEMT <sup>1</sup>	CANS <sup>1</sup>	Tier 1 HRA	Tier 1 HRA Admin	Tier 2 HRA	Health Insurer Fee	Dental	CY17 Payment Rate
TANF	57,779	\$ 5.50	\$ -	\$ 43.55	\$ 0.89	\$ 11.15	\$ -	\$ -	\$ 437.41
PLMA	20,080	\$ 5.84	\$ -	\$ 39.10	\$ 0.80	\$ 10.28	\$ -	\$ -	\$ 392.06
CHILD 00-01	29,600	\$ 0.38	\$ -	\$ 210.96	\$ 4.31	\$ 25.43	\$ -	\$ -	\$ 921.13
CHILD 01-05	107,817	\$ 0.35	\$ -	\$ 16.69	\$ 0.34	\$ 3.77	\$ -	\$ -	\$ 161.43
CHILD 06-18	245,824	\$ 0.55	\$ -	\$ 14.41	\$ 0.29	\$ 3.73	\$ -	\$ -	\$ 173.23
ABAD & OAA Duals	49,880	\$ 44.87	\$ -	\$ 32.02	\$ 0.65	\$ 5.95	\$ -	\$ -	\$ 296.92
ABAD & OAA Medicaid Only	65,231	\$ 47.92	\$ -	\$ 160.47	\$ 3.27	\$ 39.04	\$ -	\$ -	\$ 1,496.80
CAF	24,757	\$ 1.99	\$ 0.27	\$ 24.08	\$ 0.49	\$ 8.87	\$ -	\$ -	\$ 541.61
ACA 19-44	301,144	\$ 5.00	\$ -	\$ 31.41	\$ 0.64	\$ 9.22	\$ -	\$ -	\$ 356.23
ACA 45-54	89,008	\$ 9.99	\$ -	\$ 69.45	\$ 1.42	\$ 17.74	\$ -	\$ -	\$ 680.99
ACA 55-64	79,765	\$ 6.35	\$ -	\$ 69.35	\$ 1.42	\$ 20.88	\$ -	\$ -	\$ 764.56
BCCP	514	\$ 47.92	\$ -	\$ 115.39	\$ 2.35	\$ 44.87	\$ -	\$ -	\$ 1,656.56
<b>Total</b>	<b>1,071,399</b>	<b>\$ 8.36</b>	<b>\$ 0.01</b>	<b>\$ 45.53</b>	<b>\$ 0.93</b>	<b>\$ 11.23</b>	<b>\$ -</b>	<b>\$ -</b>	<b>\$ 444.26</b>

<sup>1</sup> Rate Add-Ons are inclusive of a 11.8% non-medical load

# Appendix IV. CCO-B Rate Development Summary (RDS) **Optumas**

## Appendix IV.M: DCIPA, LLC. Abn Umpqua Health Alliance

COA	CY 2015 MMs	Regional	Risk Factor				Breakthrough	ACT/SE <sup>1</sup>	Children's
		Base PMPM	Risk Score	A/B Adjustment	CCO Adjustment	PMPM	Therapy		Wraparound <sup>1</sup>
TANF	20,416	\$ 354.13	1.08	0.94	1.01	\$ 356.99	\$ -	\$ 1.24	\$ -
PLMA	5,376	\$ 319.48	1.00	0.93	0.93	\$ 298.14	\$ -	\$ -	\$ -
CHILD 00-01	8,818	\$ 646.02	1.00	0.93	0.93	\$ 603.34	\$ -	\$ -	\$ -
CHILD 01-05	32,205	\$ 126.61	0.99	0.93	0.93	\$ 117.27	\$ -	\$ -	\$ -
CHILD 06-18	70,266	\$ 138.88	1.01	0.93	0.94	\$ 130.73	\$ -	\$ -	\$ -
ABAD & OAA Duals	18,343	\$ 203.86	1.00	0.93	0.93	\$ 189.76	\$ -	\$ 7.92	\$ -
ABAD & OAA Medicaid Only	18,401	\$ 1,166.70	1.01	0.93	0.94	\$ 1,094.13	\$ 24.79	\$ 14.03	\$ -
CAF	6,740	\$ 455.10	1.00	0.93	0.93	\$ 421.95	\$ -	\$ -	\$ 76.89
ACA 19-44	80,000	\$ 294.12	1.09	0.93	1.01	\$ 297.92	\$ 5.73	\$ 1.22	\$ -
ACA 45-54	27,667	\$ 531.39	1.09	0.93	1.02	\$ 541.86	\$ -	\$ 1.26	\$ -
ACA 55-64	25,376	\$ 594.03	1.10	0.93	1.03	\$ 612.61	\$ 4.51	\$ 1.26	\$ -
BCCP	197	\$ 1,333.12	1.00	0.94	0.94	\$ 1,253.69	\$ 24.79	\$ 14.03	\$ -
<b>Total</b>	<b>313,807</b>	<b>\$ 351.57</b>				<b>\$ 344.96</b>	<b>\$ 3.29</b>	<b>\$ 1.90</b>	<b>\$ 1.65</b>

COA	CY 2015 MMs	NEMT <sup>1</sup>	CANS <sup>1</sup>	Tier 1 HRA	Tier 1 HRA Admin	Tier 2 HRA	Health Insurer Fee	Dental	CY17 Payment Rate
TANF	20,416	\$ 4.93	\$ -	\$ 42.90	\$ 0.88	\$ 11.15	\$ -	\$ -	\$ 418.08
PLMA	5,376	\$ 5.24	\$ -	\$ 31.97	\$ 0.65	\$ 10.28	\$ -	\$ -	\$ 346.29
CHILD 00-01	8,818	\$ 0.34	\$ -	\$ 220.09	\$ 4.49	\$ 25.43	\$ -	\$ -	\$ 853.69
CHILD 01-05	32,205	\$ 0.31	\$ -	\$ 12.16	\$ 0.25	\$ 3.77	\$ -	\$ -	\$ 133.77
CHILD 06-18	70,266	\$ 0.49	\$ -	\$ 11.44	\$ 0.23	\$ 3.73	\$ -	\$ -	\$ 146.64
ABAD & OAA Duals	18,343	\$ 40.22	\$ -	\$ 1.93	\$ 0.04	\$ 5.95	\$ -	\$ -	\$ 245.82
ABAD & OAA Medicaid Only	18,401	\$ 42.95	\$ -	\$ 182.18	\$ 3.72	\$ 39.04	\$ -	\$ -	\$ 1,400.83
CAF	6,740	\$ 1.78	\$ 3.39	\$ 23.05	\$ 0.47	\$ 8.87	\$ -	\$ -	\$ 536.40
ACA 19-44	80,000	\$ 4.48	\$ -	\$ 33.65	\$ 0.69	\$ 9.22	\$ -	\$ -	\$ 352.91
ACA 45-54	27,667	\$ 8.96	\$ -	\$ 60.69	\$ 1.24	\$ 17.74	\$ -	\$ -	\$ 631.74
ACA 55-64	25,376	\$ 5.69	\$ -	\$ 78.06	\$ 1.59	\$ 20.88	\$ -	\$ -	\$ 724.59
BCCP	197	\$ 42.95	\$ -	\$ 139.36	\$ 2.84	\$ 44.87	\$ -	\$ -	\$ 1,522.53
<b>Total</b>	<b>313,807</b>	<b>\$ 7.89</b>	<b>\$ 0.07</b>	<b>\$ 44.95</b>	<b>\$ 0.92</b>	<b>\$ 11.30</b>	<b>\$ -</b>	<b>\$ -</b>	<b>\$ 416.93</b>

<sup>1</sup> Rate Add-Ons are inclusive of a 11.8% non-medical load

# Appendix IV. CCO-B Rate Development Summary (RDS) **Optumas**

## Appendix IV.N: Western Oregon Advanced Health, LLC

COA	CY 2015 MMs	Regional	Risk Factor				Breakthrough	ACT/SE <sup>1</sup>	Children's
		Base PMPM	Risk Score	A/B Adjustment	CCO Adjustment	PMPM	Therapy		Wraparound <sup>1</sup>
TANF	13,221	\$ 354.13	0.97	1.08	1.05	\$ 370.85	\$ -	\$ 2.28	\$ -
PLMA	3,695	\$ 319.48	1.00	1.08	1.08	\$ 345.07	\$ -	\$ 0.08	\$ -
CHILD 00-01	6,044	\$ 646.02	1.00	1.08	1.08	\$ 698.31	\$ -	\$ 0.07	\$ -
CHILD 01-05	23,304	\$ 126.61	0.92	1.08	1.00	\$ 126.37	\$ -	\$ 0.06	\$ -
CHILD 06-18	50,214	\$ 138.88	1.02	1.08	1.10	\$ 153.35	\$ -	\$ 0.19	\$ -
ABAD & OAA Duals	15,543	\$ 203.86	1.00	1.08	1.08	\$ 219.63	\$ -	\$ 0.27	\$ -
ABAD & OAA Medicaid Only	17,229	\$ 1,166.70	0.94	1.08	1.01	\$ 1,182.46	\$ 17.97	\$ 0.78	\$ -
CAF	5,814	\$ 455.10	1.00	1.07	1.07	\$ 488.37	\$ -	\$ 1.59	\$ 18.57
ACA 19-44	58,519	\$ 294.12	0.96	1.08	1.03	\$ 303.88	\$ 0.67	\$ 0.20	\$ -
ACA 45-54	23,417	\$ 531.39	0.96	1.08	1.04	\$ 553.87	\$ 10.70	\$ 0.26	\$ -
ACA 55-64	22,905	\$ 594.03	0.93	1.08	1.01	\$ 598.63	\$ 20.78	\$ 4.46	\$ -
BCCP	172	\$ 1,333.12	1.00	1.09	1.09	\$ 1,451.03	\$ 17.97	\$ 0.78	\$ -
<b>Total</b>	<b>240,077</b>	<b>\$ 371.12</b>				<b>\$ 384.81</b>	<b>\$ 4.49</b>	<b>\$ 0.79</b>	<b>\$ 0.45</b>

COA	CY 2015 MMs	NEMT <sup>1</sup>	CANS <sup>1</sup>	Tier 1 HRA	Tier 1 HRA Admin	Tier 2 HRA	Health Insurer Fee	Dental	CY17 Payment Rate
TANF	13,221	\$ 6.13	\$ -	\$ 75.33	\$ 1.54	\$ 11.15	\$ -	\$ -	\$ 467.27
PLMA	3,695	\$ 6.51	\$ -	\$ 78.59	\$ 1.60	\$ 10.28	\$ -	\$ -	\$ 442.13
CHILD 00-01	6,044	\$ 0.42	\$ -	\$ 146.56	\$ 2.99	\$ 25.43	\$ -	\$ -	\$ 873.77
CHILD 01-05	23,304	\$ 0.39	\$ -	\$ 16.30	\$ 0.33	\$ 3.77	\$ -	\$ -	\$ 147.22
CHILD 06-18	50,214	\$ 0.61	\$ -	\$ 14.44	\$ 0.29	\$ 3.73	\$ -	\$ -	\$ 172.62
ABAD & OAA Duals	15,543	\$ 49.97	\$ -	\$ 32.47	\$ 0.66	\$ 5.95	\$ -	\$ -	\$ 308.95
ABAD & OAA Medicaid Only	17,229	\$ 53.36	\$ -	\$ 203.08	\$ 4.14	\$ 39.04	\$ -	\$ -	\$ 1,500.83
CAF	5,814	\$ 2.21	\$ -	\$ 41.65	\$ 0.85	\$ 8.87	\$ -	\$ -	\$ 562.12
ACA 19-44	58,519	\$ 5.57	\$ -	\$ 57.80	\$ 1.18	\$ 9.22	\$ -	\$ -	\$ 378.53
ACA 45-54	23,417	\$ 11.13	\$ -	\$ 103.18	\$ 2.11	\$ 17.74	\$ -	\$ -	\$ 698.97
ACA 55-64	22,905	\$ 7.07	\$ -	\$ 138.80	\$ 2.83	\$ 20.88	\$ -	\$ -	\$ 793.45
BCCP	172	\$ 53.36	\$ -	\$ 328.98	\$ 6.71	\$ 44.87	\$ -	\$ -	\$ 1,903.71
<b>Total</b>	<b>240,077</b>	<b>\$ 10.89</b>	<b>\$ -</b>	<b>\$ 68.97</b>	<b>\$ 1.41</b>	<b>\$ 11.96</b>	<b>\$ -</b>	<b>\$ -</b>	<b>\$ 483.76</b>

<sup>1</sup> Rate Add-Ons are inclusive of a 11.8% non-medical load

## Appendix IV. CCO-B Rate Development Summary (RDS) **Optumas**

### Appendix IV.O: Willamette Valley Community Health, LLC

COA	CY 2015 MMs	Regional	Risk Factor				Breakthrough	ACT/SE <sup>1</sup>	Children's
		Base PMPM	Risk Score	A/B Adjustment	CCO Adjustment	PMPM	Therapy		Wraparound <sup>1</sup>
TANF	62,434	\$ 395.96	0.98	0.96	0.93	\$ 370.08	\$ -	\$ 0.68	\$ -
PLMA	20,065	\$ 343.26	1.00	0.96	0.96	\$ 329.26	\$ -	\$ -	\$ -
CHILD 00-01	39,643	\$ 550.24	1.00	0.96	0.96	\$ 529.71	\$ -	\$ -	\$ -
CHILD 01-05	160,642	\$ 135.34	1.01	0.96	0.98	\$ 132.17	\$ -	\$ -	\$ -
CHILD 06-18	361,728	\$ 153.72	0.97	0.96	0.93	\$ 142.93	\$ -	\$ -	\$ -
ABAD & OAA Duals	53,859	\$ 235.54	1.00	0.96	0.96	\$ 226.02	\$ -	\$ 7.53	\$ -
ABAD & OAA Medicaid Only	55,258	\$ 1,240.93	1.01	0.96	0.96	\$ 1,194.51	\$ 13.83	\$ 14.14	\$ -
CAF	15,686	\$ 452.99	1.00	0.95	0.95	\$ 432.44	\$ -	\$ -	\$ 90.49
ACA 19-44	260,640	\$ 359.59	0.97	0.96	0.93	\$ 334.16	\$ 1.09	\$ 0.69	\$ -
ACA 45-54	80,639	\$ 617.77	0.99	0.95	0.94	\$ 580.92	\$ 8.06	\$ 0.69	\$ -
ACA 55-64	61,642	\$ 684.58	1.00	0.95	0.95	\$ 652.60	\$ 4.50	\$ 0.70	\$ -
BCCP	346	\$ 1,376.67	1.00	0.95	0.95	\$ 1,307.01	\$ 13.83	\$ 14.14	\$ -
<b>Total</b>	<b>1,172,579</b>	<b>\$ 345.69</b>				<b>\$ 326.82</b>	<b>\$ 1.69</b>	<b>\$ 1.29</b>	<b>\$ 1.21</b>

COA	CY 2015 MMs	NEMT <sup>1</sup>	CANS <sup>1</sup>	Tier 1 HRA	Tier 1 HRA Admin	Tier 2 HRA	Health Insurer Fee	Dental	CY17 Payment Rate
TANF	62,434	\$ 5.70	\$ -	\$ 36.06	\$ 0.74	\$ 12.46	\$ -	\$ -	\$ 425.73
PLMA	20,065	\$ 6.06	\$ -	\$ 24.07	\$ 0.49	\$ 10.55	\$ -	\$ -	\$ 370.43
CHILD 00-01	39,643	\$ 0.39	\$ -	\$ 127.86	\$ 2.61	\$ 20.56	\$ -	\$ -	\$ 681.13
CHILD 01-05	160,642	\$ 0.36	\$ -	\$ 11.47	\$ 0.23	\$ 3.79	\$ -	\$ -	\$ 148.03
CHILD 06-18	361,728	\$ 0.57	\$ -	\$ 8.66	\$ 0.18	\$ 4.06	\$ -	\$ -	\$ 156.39
ABAD & OAA Duals	53,859	\$ 46.51	\$ -	\$ 13.19	\$ 0.27	\$ 6.73	\$ -	\$ -	\$ 300.25
ABAD & OAA Medicaid Only	55,258	\$ 49.67	\$ -	\$ 146.45	\$ 2.99	\$ 41.74	\$ -	\$ -	\$ 1,463.32
CAF	15,686	\$ 2.06	\$ 3.05	\$ 11.64	\$ 0.24	\$ 9.76	\$ -	\$ -	\$ 549.68
ACA 19-44	260,640	\$ 5.18	\$ -	\$ 29.75	\$ 0.61	\$ 11.18	\$ -	\$ -	\$ 382.67
ACA 45-54	80,639	\$ 10.36	\$ -	\$ 59.31	\$ 1.21	\$ 20.30	\$ -	\$ -	\$ 680.84
ACA 55-64	61,642	\$ 6.58	\$ -	\$ 72.54	\$ 1.48	\$ 23.20	\$ -	\$ -	\$ 761.60
BCCP	346	\$ 49.67	\$ -	\$ 150.55	\$ 3.07	\$ 48.04	\$ -	\$ -	\$ 1,586.30
<b>Total</b>	<b>1,172,579</b>	<b>\$ 7.38</b>	<b>\$ 0.04</b>	<b>\$ 33.11</b>	<b>\$ 0.68</b>	<b>\$ 10.83</b>	<b>\$ -</b>	<b>\$ -</b>	<b>\$ 383.05</b>

<sup>1</sup> Rate Add-Ons are inclusive of a 9.7% non-medical load

## Appendix IV. CCO-B Rate Development Summary (RDS) **Optumas**

### Appendix IV.P: Yamhill County Care Organization, Inc.

COA	CY 2015 MMs	Regional	Risk Factor				Breakthrough	ACT/SE <sup>1</sup>	Children's
		Base PMPM	Risk Score	A/B Adjustment	CCO Adjustment	PMPM	Therapy		Wraparound <sup>1</sup>
TANF	15,506	\$ 395.96	1.03	0.95	0.98	\$ 389.89	\$ 8.10	\$ 5.00	\$ -
PLMA	4,907	\$ 343.26	1.00	0.95	0.95	\$ 327.79	\$ -	\$ 0.87	\$ -
CHILD 00-01	8,354	\$ 550.24	1.00	0.96	0.96	\$ 527.34	\$ -	\$ -	\$ -
CHILD 01-05	34,842	\$ 135.34	1.01	0.96	0.97	\$ 131.15	\$ -	\$ -	\$ -
CHILD 06-18	82,112	\$ 153.72	1.01	0.96	0.97	\$ 148.40	\$ -	\$ 0.02	\$ -
ABAD & OAA Duals	6,505	\$ 235.54	1.00	0.96	0.96	\$ 225.01	\$ -	\$ 8.63	\$ -
ABAD & OAA Medicaid Only	8,809	\$ 1,240.93	1.08	0.95	1.03	\$ 1,277.80	\$ 32.28	\$ 14.07	\$ -
CAF	3,389	\$ 452.99	1.00	0.95	0.95	\$ 430.51	\$ -	\$ -	\$ 126.14
ACA 19-44	64,738	\$ 359.59	1.07	0.95	1.01	\$ 364.83	\$ -	\$ 3.42	\$ -
ACA 45-54	21,328	\$ 617.77	1.04	0.95	0.99	\$ 608.63	\$ 25.89	\$ 7.31	\$ -
ACA 55-64	17,196	\$ 684.58	1.01	0.95	0.95	\$ 653.34	\$ 36.59	\$ 3.70	\$ -
BCCP	122	\$ 1,376.67	1.00	0.95	0.95	\$ 1,301.17	\$ 32.28	\$ 14.07	\$ -
<b>Total</b>	<b>267,808</b>	<b>\$ 344.10</b>				<b>\$ 339.75</b>	<b>\$ 5.96</b>	<b>\$ 2.64</b>	<b>\$ 1.60</b>

COA	CY 2015 MMs	NEMT <sup>1</sup>	CANS <sup>1</sup>	Tier 1 HRA	Tier 1 HRA Admin	Tier 2 HRA	Health Insurer Fee	Dental	CY17 Payment Rate
TANF	15,506	\$ 8.06	\$ -	\$ 49.30	\$ 1.01	\$ 12.46	\$ -	\$ -	\$ 473.82
PLMA	4,907	\$ 8.56	\$ -	\$ 29.52	\$ 0.60	\$ 10.55	\$ -	\$ -	\$ 377.90
CHILD 00-01	8,354	\$ 0.55	\$ -	\$ 101.08	\$ 2.06	\$ 20.56	\$ -	\$ -	\$ 651.60
CHILD 01-05	34,842	\$ 0.51	\$ -	\$ 10.66	\$ 0.22	\$ 3.79	\$ -	\$ -	\$ 146.33
CHILD 06-18	82,112	\$ 0.81	\$ -	\$ 17.21	\$ 0.35	\$ 4.06	\$ -	\$ -	\$ 170.85
ABAD & OAA Duals	6,505	\$ 65.72	\$ -	\$ 18.83	\$ 0.38	\$ 6.73	\$ -	\$ -	\$ 325.31
ABAD & OAA Medicaid Only	8,809	\$ 70.19	\$ -	\$ 248.34	\$ 5.07	\$ 41.74	\$ -	\$ -	\$ 1,689.48
CAF	3,389	\$ 2.91	\$ 2.07	\$ 19.54	\$ 0.40	\$ 9.76	\$ -	\$ -	\$ 591.32
ACA 19-44	64,738	\$ 7.32	\$ -	\$ 38.10	\$ 0.78	\$ 11.18	\$ -	\$ -	\$ 425.63
ACA 45-54	21,328	\$ 14.64	\$ -	\$ 54.99	\$ 1.12	\$ 20.30	\$ -	\$ -	\$ 732.88
ACA 55-64	17,196	\$ 9.29	\$ -	\$ 79.68	\$ 1.63	\$ 23.20	\$ -	\$ -	\$ 807.43
BCCP	122	\$ 70.19	\$ -	\$ 81.45	\$ 1.66	\$ 48.04	\$ -	\$ -	\$ 1,548.86
<b>Total</b>	<b>267,808</b>	<b>\$ 8.46</b>	<b>\$ 0.03</b>	<b>\$ 40.83</b>	<b>\$ 0.83</b>	<b>\$ 10.79</b>	<b>\$ -</b>	<b>\$ -</b>	<b>\$ 410.87</b>

<sup>1</sup> Rate Add-Ons are inclusive of a 9.7% non-medical load

**Appendix V. CCO-E Rate Development Summary (RDS)**

# Appendix V. CCO-E Rate Development Summary (RDS) **Optumas**

## Appendix V.A: Allcare CCO, Inc.

COA	CY 2015 MM\$s	Regional	Risk Factor				Breakthrough	ACT/SE <sup>1</sup>	Children's
		Base PMPM	Risk Score	A/B Adjustment	CCO Adjustment	PMPM	Therapy		Wraparound <sup>1</sup>
TANF	36,134	\$ 40.95	1.00	1.00	1.00	\$ 40.95	\$ -	\$ 1.42	\$ -
PLMA	11,984	\$ 27.20	1.00	1.00	1.00	\$ 27.20	\$ -	\$ -	\$ -
CHILD 00-01	17,505	\$ 7.64	1.00	1.00	1.00	\$ 7.64	\$ -	\$ -	\$ -
CHILD 01-05	68,111	\$ 20.24	1.00	1.00	1.00	\$ 20.24	\$ -	\$ -	\$ -
CHILD 06-18	133,596	\$ 34.63	1.00	1.00	1.00	\$ 34.63	\$ -	\$ -	\$ -
ABAD & OAA Duals	26,572	\$ 41.96	1.00	1.00	1.00	\$ 41.96	\$ -	\$ 6.00	\$ -
ABAD & OAA Medicaid Only	28,522	\$ 148.18	1.00	1.00	1.00	\$ 148.18	\$ -	\$ 12.04	\$ -
CAF	8,496	\$ 215.09	1.00	1.00	1.00	\$ 215.09	\$ -	\$ -	\$ 34.46
ACA 19-44	150,902	\$ 42.36	1.00	1.00	1.00	\$ 42.36	\$ -	\$ 1.42	\$ -
ACA 45-54	53,628	\$ 48.12	1.00	1.00	1.00	\$ 48.12	\$ -	\$ 1.43	\$ -
ACA 55-64	51,012	\$ 43.81	1.00	1.00	1.00	\$ 43.81	\$ -	\$ 1.43	\$ -
BCCP	354	\$ 54.26	1.00	1.00	1.00	\$ 54.26	\$ -	\$ 12.04	\$ -
<b>Total</b>	<b>586,817</b>	<b>\$ 44.89</b>				<b>\$ 44.89</b>	<b>\$ -</b>	<b>\$ 1.57</b>	<b>\$ 0.50</b>

COA	CY 2015 MM\$s	NEMT <sup>1</sup>	CANS <sup>1</sup>	Tier 1 HRA	Tier 1 HRA Admin	Tier 2 HRA	Health Insurer Fee	Dental	CY17 Payment Rate
TANF	36,134	\$ 4.40	\$ -	\$ 1.16	\$ 0.02	\$ -	\$ -	\$ -	\$ 47.95
PLMA	11,984	\$ 4.67	\$ -	\$ 0.71	\$ 0.01	\$ -	\$ -	\$ -	\$ 32.60
CHILD 00-01	17,505	\$ 0.30	\$ -	\$ 0.02	\$ 0.00	\$ -	\$ -	\$ -	\$ 7.96
CHILD 01-05	68,111	\$ 0.28	\$ -	\$ 0.35	\$ 0.01	\$ -	\$ -	\$ -	\$ 20.88
CHILD 06-18	133,596	\$ 0.44	\$ -	\$ 1.31	\$ 0.03	\$ -	\$ -	\$ -	\$ 36.41
ABAD & OAA Duals	26,572	\$ 35.88	\$ -	\$ 0.78	\$ 0.02	\$ -	\$ -	\$ -	\$ 84.62
ABAD & OAA Medicaid Only	28,522	\$ 38.31	\$ -	\$ 18.03	\$ 0.37	\$ -	\$ -	\$ -	\$ 216.93
CAF	8,496	\$ 1.59	\$ 3.35	\$ 8.71	\$ 0.18	\$ -	\$ -	\$ -	\$ 263.38
ACA 19-44	150,902	\$ 4.00	\$ -	\$ 3.91	\$ 0.08	\$ -	\$ -	\$ -	\$ 51.77
ACA 45-54	53,628	\$ 7.99	\$ -	\$ 3.59	\$ 0.07	\$ -	\$ -	\$ -	\$ 61.20
ACA 55-64	51,012	\$ 5.07	\$ -	\$ 2.47	\$ 0.05	\$ -	\$ -	\$ -	\$ 52.83
BCCP	354	\$ 38.31	\$ -	\$ 2.74	\$ 0.06	\$ -	\$ -	\$ -	\$ 107.41
<b>Total</b>	<b>586,817</b>	<b>\$ 6.24</b>	<b>\$ 0.05</b>	<b>\$ 3.01</b>	<b>\$ 0.06</b>	<b>\$ -</b>	<b>\$ -</b>	<b>\$ -</b>	<b>\$ 56.32</b>

<sup>1</sup> Rate Add-Ons are inclusive of a 11.8% non-medical load

# Appendix V. CCO-E Rate Development Summary (RDS) **Optumas**

## Appendix V.B: Cascade Health Alliance, LLC.

COA	CY 2015 MM\$	Regional	Risk Factor				Breakthrough	ACT/SE <sup>1</sup>	Children's
		Base PMPM	Risk Score	A/B Adjustment	CCO Adjustment	PMPM	Therapy		Wraparound <sup>1</sup>
TANF	12,116	\$ 33.06	1.00	1.00	1.00	\$ 33.06	\$ -	\$ 0.57	\$ -
PLMA	3,828	\$ 14.63	1.00	1.00	1.00	\$ 14.63	\$ -	\$ -	\$ -
CHILD 00-01	6,653	\$ 0.33	1.00	1.00	1.00	\$ 0.33	\$ -	\$ -	\$ -
CHILD 01-05	23,954	\$ 13.37	1.00	1.00	1.00	\$ 13.37	\$ -	\$ -	\$ -
CHILD 06-18	47,670	\$ 34.97	1.00	1.00	1.00	\$ 34.97	\$ -	\$ -	\$ -
ABAD & OAA Duals	8,896	\$ 35.25	1.00	1.00	1.00	\$ 35.25	\$ -	\$ 0.81	\$ -
ABAD & OAA Medicaid Only	11,271	\$ 121.00	1.00	1.00	1.00	\$ 121.00	\$ -	\$ 0.45	\$ -
CAF	3,836	\$ 256.64	1.00	1.00	1.00	\$ 256.64	\$ -	\$ -	\$ 97.87
ACA 19-44	46,975	\$ 31.90	1.00	1.00	1.00	\$ 31.90	\$ -	\$ 0.60	\$ -
ACA 45-54	16,896	\$ 39.08	1.00	1.00	1.00	\$ 39.08	\$ -	\$ 2.87	\$ -
ACA 55-64	14,098	\$ 40.01	1.00	1.00	1.00	\$ 40.01	\$ -	\$ -	\$ -
BCCP	52	\$ 56.41	1.00	1.00	1.00	\$ 56.41	\$ -	\$ 0.45	\$ -
<b>Total</b>	<b>196,245</b>	<b>\$ 39.92</b>				<b>\$ 39.92</b>	<b>\$ -</b>	<b>\$ 0.49</b>	<b>\$ 1.91</b>

COA	CY 2015 MM\$	NEMT <sup>1</sup>	CANS <sup>1</sup>	Tier 1 HRA	Tier 1 HRA Admin	Tier 2 HRA	Health Insurer Fee	Dental	CY17 Payment Rate
TANF	12,116	\$ 10.43	\$ -	\$ 0.98	\$ 0.02	\$ -	\$ -	\$ -	\$ 45.05
PLMA	3,828	\$ 4.88	\$ -	\$ 0.34	\$ 0.01	\$ -	\$ -	\$ -	\$ 19.87
CHILD 00-01	6,653	\$ 0.95	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -	\$ 1.27
CHILD 01-05	23,954	\$ 0.63	\$ -	\$ 0.07	\$ 0.00	\$ -	\$ -	\$ -	\$ 14.07
CHILD 06-18	47,670	\$ 1.11	\$ -	\$ 0.27	\$ 0.01	\$ -	\$ -	\$ -	\$ 36.36
ABAD & OAA Duals	8,896	\$ 59.78	\$ -	\$ 0.29	\$ 0.01	\$ -	\$ -	\$ -	\$ 96.13
ABAD & OAA Medicaid Only	11,271	\$ 46.37	\$ -	\$ 5.38	\$ 0.11	\$ -	\$ -	\$ -	\$ 173.31
CAF	3,836	\$ 3.04	\$ 2.96	\$ 0.60	\$ 0.01	\$ -	\$ -	\$ -	\$ 361.12
ACA 19-44	46,975	\$ 14.29	\$ -	\$ 0.77	\$ 0.02	\$ -	\$ -	\$ -	\$ 47.59
ACA 45-54	16,896	\$ 18.98	\$ -	\$ 0.84	\$ 0.02	\$ -	\$ -	\$ -	\$ 61.78
ACA 55-64	14,098	\$ 22.59	\$ -	\$ 0.81	\$ 0.02	\$ -	\$ -	\$ -	\$ 63.43
BCCP	52	\$ 46.37	\$ -	\$ 0.26	\$ 0.01	\$ -	\$ -	\$ -	\$ 103.50
<b>Total</b>	<b>196,245</b>	<b>\$ 13.24</b>	<b>\$ 0.06</b>	<b>\$ 0.79</b>	<b>\$ 0.02</b>	<b>\$ -</b>	<b>\$ -</b>	<b>\$ -</b>	<b>\$ 56.43</b>

<sup>1</sup> Rate Add-Ons are inclusive of a 11.5% non-medical load



# Appendix V. CCO-E Rate Development Summary (RDS) **Optumas**

## Appendix V.C: Columbia-Pacific CCO, LLC.

COA	CY 2015 MMs	Regional	Risk Factor				Breakthrough	ACT/SE <sup>1</sup>	Children's
		Base PMPM	Risk Score	A/B Adjustment	CCO Adjustment	PMPM	Therapy		Wraparound <sup>1</sup>
TANF	17,437	\$ 34.42	1.00	1.00	1.00	\$ 34.42	\$ -	\$ 0.62	\$ -
PLMA	5,221	\$ 24.41	1.00	1.00	1.00	\$ 24.41	\$ -	\$ 0.16	\$ -
CHILD 00-01	8,497	\$ 14.03	1.00	1.00	1.00	\$ 14.03	\$ -	\$ -	\$ -
CHILD 01-05	33,251	\$ 25.46	1.00	1.00	1.00	\$ 25.46	\$ -	\$ -	\$ -
CHILD 06-18	74,203	\$ 34.74	1.00	1.00	1.00	\$ 34.74	\$ -	\$ 0.00	\$ -
ABAD & OAA Duals	9,401	\$ 36.68	1.00	1.00	1.00	\$ 36.68	\$ -	\$ 18.44	\$ -
ABAD & OAA Medicaid Only	14,886	\$ 82.70	1.00	1.00	1.00	\$ 82.70	\$ -	\$ 30.49	\$ -
CAF	5,112	\$ 157.00	1.00	1.00	1.00	\$ 157.00	\$ -	\$ 0.33	\$ 35.75
ACA 19-44	76,337	\$ 38.17	1.00	1.00	1.00	\$ 38.17	\$ -	\$ 1.10	\$ -
ACA 45-54	28,729	\$ 38.90	1.00	1.00	1.00	\$ 38.90	\$ -	\$ 1.70	\$ -
ACA 55-64	26,667	\$ 32.71	1.00	1.00	1.00	\$ 32.71	\$ -	\$ 0.78	\$ -
BCCP	195	\$ 14.70	1.00	1.00	1.00	\$ 14.70	\$ -	\$ 30.49	\$ -
<b>Total</b>	<b>299,935</b>	<b>\$ 38.53</b>				<b>\$ 38.53</b>	<b>\$ -</b>	<b>\$ 2.67</b>	<b>\$ 0.61</b>

COA	CY 2015 MMs	NEMT <sup>1</sup>	CANS <sup>1</sup>	Tier 1 HRA	Tier 1 HRA Admin	Tier 2 HRA	Health Insurer Fee	Dental	CY17 Payment Rate
TANF	17,437	\$ 6.97	\$ -	\$ 0.85	\$ 0.02	\$ -	\$ -	\$ -	\$ 42.87
PLMA	5,221	\$ 7.40	\$ -	\$ 0.09	\$ 0.00	\$ -	\$ -	\$ -	\$ 32.06
CHILD 00-01	8,497	\$ 0.48	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -	\$ 14.50
CHILD 01-05	33,251	\$ 0.44	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -	\$ 25.90
CHILD 06-18	74,203	\$ 0.70	\$ -	\$ 0.32	\$ 0.01	\$ -	\$ -	\$ -	\$ 35.76
ABAD & OAA Duals	9,401	\$ 56.83	\$ -	\$ 0.32	\$ 0.01	\$ -	\$ -	\$ -	\$ 112.28
ABAD & OAA Medicaid Only	14,886	\$ 60.68	\$ -	\$ 5.74	\$ 0.12	\$ -	\$ -	\$ -	\$ 179.73
CAF	5,112	\$ 2.52	\$ -	\$ 1.53	\$ 0.03	\$ -	\$ -	\$ -	\$ 197.15
ACA 19-44	76,337	\$ 6.33	\$ -	\$ 1.91	\$ 0.04	\$ -	\$ -	\$ -	\$ 47.54
ACA 45-54	28,729	\$ 12.65	\$ -	\$ 1.46	\$ 0.03	\$ -	\$ -	\$ -	\$ 54.74
ACA 55-64	26,667	\$ 8.04	\$ -	\$ 0.55	\$ 0.01	\$ -	\$ -	\$ -	\$ 42.08
BCCP	195	\$ 60.68	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -	\$ 105.88
<b>Total</b>	<b>299,935</b>	<b>\$ 9.18</b>	<b>\$ -</b>	<b>\$ 1.12</b>	<b>\$ 0.02</b>	<b>\$ -</b>	<b>\$ -</b>	<b>\$ -</b>	<b>\$ 52.13</b>

<sup>1</sup> Rate Add-Ons are inclusive of a 9.7% non-medical load

## Appendix V. CCO-E Rate Development Summary (RDS) **Optumas**

### Appendix V.D: Eastern Oregon Coordinated Care Org., LLC.

COA	CY 2015 MMs	Regional	Risk Factor				Breakthrough	ACT/SE <sup>1</sup>	Children's
		Base PMPM	Risk Score	A/B Adjustment	CCO Adjustment	PMPM	Therapy		Wraparound <sup>1</sup>
TANF	35,140	\$ 33.06	1.00	1.00	1.00	\$ 33.06	\$ -	\$ 0.89	\$ -
PLMA	10,728	\$ 14.63	1.00	1.00	1.00	\$ 14.63	\$ -	\$ -	\$ -
CHILD 00-01	19,960	\$ 0.33	1.00	1.00	1.00	\$ 0.33	\$ -	\$ -	\$ -
CHILD 01-05	79,747	\$ 13.37	1.00	1.00	1.00	\$ 13.37	\$ -	\$ -	\$ -
CHILD 06-18	166,877	\$ 34.97	1.00	1.00	1.00	\$ 34.97	\$ -	\$ -	\$ -
ABAD & OAA Duals	19,203	\$ 35.25	1.00	1.00	1.00	\$ 35.25	\$ -	\$ 9.49	\$ -
ABAD & OAA Medicaid Only	27,719	\$ 121.00	1.00	1.00	1.00	\$ 121.00	\$ -	\$ 15.50	\$ -
CAF	8,679	\$ 256.64	1.00	1.00	1.00	\$ 256.64	\$ -	\$ -	\$ 119.12
ACA 19-44	120,655	\$ 31.90	1.00	1.00	1.00	\$ 31.90	\$ -	\$ 0.89	\$ -
ACA 45-54	41,610	\$ 39.08	1.00	1.00	1.00	\$ 39.08	\$ -	\$ 0.89	\$ -
ACA 55-64	37,243	\$ 40.01	1.00	1.00	1.00	\$ 40.01	\$ -	\$ 0.89	\$ -
BCCP	227	\$ 56.41	1.00	1.00	1.00	\$ 56.41	\$ -	\$ 15.50	\$ -
<b>Total</b>	<b>567,788</b>	<b>\$ 37.80</b>				<b>\$ 37.80</b>	<b>\$ -</b>	<b>\$ 1.45</b>	<b>\$ 1.82</b>

COA	CY 2015 MMs	NEMT <sup>1</sup>	CANS <sup>1</sup>	Tier 1 HRA	Tier 1 HRA Admin	Tier 2 HRA	Health Insurer Fee	Dental	CY17 Payment Rate
TANF	35,140	\$ 10.77	\$ -	\$ 1.27	\$ 0.03	\$ -	\$ -	\$ -	\$ 46.02
PLMA	10,728	\$ 4.93	\$ -	\$ 0.37	\$ 0.01	\$ -	\$ -	\$ -	\$ 19.94
CHILD 00-01	19,960	\$ 0.73	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -	\$ 1.06
CHILD 01-05	79,747	\$ 0.72	\$ -	\$ 0.08	\$ 0.00	\$ -	\$ -	\$ -	\$ 14.17
CHILD 06-18	166,877	\$ 1.12	\$ -	\$ 0.65	\$ 0.01	\$ -	\$ -	\$ -	\$ 36.75
ABAD & OAA Duals	19,203	\$ 69.41	\$ -	\$ 0.19	\$ 0.00	\$ -	\$ -	\$ -	\$ 114.35
ABAD & OAA Medicaid Only	27,719	\$ 52.86	\$ -	\$ 5.44	\$ 0.11	\$ -	\$ -	\$ -	\$ 194.90
CAF	8,679	\$ 3.61	\$ -	\$ 2.51	\$ 0.05	\$ -	\$ -	\$ -	\$ 381.93
ACA 19-44	120,655	\$ 16.67	\$ -	\$ 1.25	\$ 0.03	\$ -	\$ -	\$ -	\$ 50.75
ACA 45-54	41,610	\$ 20.89	\$ -	\$ 1.37	\$ 0.03	\$ -	\$ -	\$ -	\$ 62.26
ACA 55-64	37,243	\$ 25.37	\$ -	\$ 0.83	\$ 0.02	\$ -	\$ -	\$ -	\$ 67.11
BCCP	227	\$ 52.86	\$ -	\$ 0.07	\$ 0.00	\$ -	\$ -	\$ -	\$ 124.84
<b>Total</b>	<b>567,788</b>	<b>\$ 12.96</b>	<b>\$ -</b>	<b>\$ 1.02</b>	<b>\$ 0.02</b>	<b>\$ -</b>	<b>\$ -</b>	<b>\$ -</b>	<b>\$ 55.07</b>

<sup>1</sup> Rate Add-Ons are inclusive of a 11.5% non-medical load

# Appendix V. CCO-E Rate Development Summary (RDS) **Optumas**

## Appendix V.E: FamilyCare, Inc.

COA	CY 2015 MM\$	Regional Base PMPM	Risk Factor				Breakthrough Therapy	ACT/SE <sup>1</sup>	Children's Wraparound <sup>1</sup>
			Risk Score	A/B Adjustment	CCO Adjustment	PMPM			
TANF	81,512	\$ 27.05	1.00	1.00	1.00	\$ 27.05	\$ -	\$ 0.64	\$ -
PLMA	31,363	\$ 15.03	1.00	1.00	1.00	\$ 15.03	\$ -	\$ 0.07	\$ -
CHILD 00-01	51,492	\$ 1.02	1.00	1.00	1.00	\$ 1.02	\$ -	\$ -	\$ -
CHILD 01-05	171,505	\$ 13.97	1.00	1.00	1.00	\$ 13.97	\$ -	\$ -	\$ -
CHILD 06-18	335,194	\$ 26.69	1.00	1.00	1.00	\$ 26.69	\$ -	\$ 0.01	\$ -
ABAD & OAA Duals	27,114	\$ 45.52	1.00	1.00	1.00	\$ 45.52	\$ -	\$ 0.74	\$ -
ABAD & OAA Medicaid Only	35,750	\$ 120.82	1.00	1.00	1.00	\$ 120.82	\$ -	\$ 1.43	\$ -
CAF	18,916	\$ 157.09	1.00	1.00	1.00	\$ 157.09	\$ -	\$ 0.04	\$ 68.88
ACA 19-44	473,722	\$ 29.08	1.00	1.00	1.00	\$ 29.08	\$ -	\$ 0.24	\$ -
ACA 45-54	127,549	\$ 28.94	1.00	1.00	1.00	\$ 28.94	\$ -	\$ 0.22	\$ -
ACA 55-64	101,009	\$ 18.75	1.00	1.00	1.00	\$ 18.75	\$ -	\$ 0.18	\$ -
BCCP	916	\$ 35.45	1.00	1.00	1.00	\$ 35.45	\$ -	\$ 1.43	\$ -
<b>Total</b>	<b>1,456,042</b>	<b>\$ 28.84</b>				<b>\$ 28.84</b>	<b>\$ -</b>	<b>\$ 0.20</b>	<b>\$ 0.89</b>

COA	CY 2015 MM\$	NEMT <sup>1</sup>	CANS <sup>1</sup>	Tier 1 HRA	Tier 1 HRA Admin	Tier 2 HRA	Health Insurer Fee	Dental	CY17 Payment Rate
TANF	81,512	\$ 7.53	\$ -	\$ 1.72	\$ 0.04	\$ -	\$ -	\$ -	\$ 36.97
PLMA	31,363	\$ 7.36	\$ -	\$ 0.49	\$ 0.01	\$ -	\$ -	\$ -	\$ 22.96
CHILD 00-01	51,492	\$ 0.40	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -	\$ 1.42
CHILD 01-05	171,505	\$ 0.19	\$ -	\$ 0.35	\$ 0.01	\$ -	\$ -	\$ -	\$ 14.53
CHILD 06-18	335,194	\$ 0.41	\$ -	\$ 2.28	\$ 0.05	\$ -	\$ -	\$ -	\$ 29.44
ABAD & OAA Duals	27,114	\$ 40.54	\$ -	\$ 1.75	\$ 0.04	\$ -	\$ -	\$ -	\$ 88.58
ABAD & OAA Medicaid Only	35,750	\$ 44.95	\$ -	\$ 9.75	\$ 0.20	\$ -	\$ -	\$ -	\$ 177.15
CAF	18,916	\$ 2.42	\$ 2.07	\$ 11.71	\$ 0.24	\$ -	\$ -	\$ -	\$ 242.45
ACA 19-44	473,722	\$ 8.04	\$ -	\$ 2.60	\$ 0.05	\$ -	\$ -	\$ -	\$ 40.01
ACA 45-54	127,549	\$ 13.30	\$ -	\$ 2.25	\$ 0.05	\$ -	\$ -	\$ -	\$ 44.76
ACA 55-64	101,009	\$ 10.09	\$ -	\$ 1.34	\$ 0.03	\$ -	\$ -	\$ -	\$ 30.38
BCCP	916	\$ 44.95	\$ -	\$ 3.79	\$ 0.08	\$ -	\$ -	\$ -	\$ 85.69
<b>Total</b>	<b>1,456,042</b>	<b>\$ 7.11</b>	<b>\$ 0.03</b>	<b>\$ 2.24</b>	<b>\$ 0.05</b>	<b>\$ -</b>	<b>\$ -</b>	<b>\$ -</b>	<b>\$ 39.35</b>

<sup>1</sup> Rate Add-Ons are inclusive of a 10.1% non-medical load

# Appendix V. CCO-E Rate Development Summary (RDS) **Optumas**

## Appendix V.F: Health Share of Oregon

COA	CY 2015 MMs	Regional Base PMPM	Risk Factor				Breakthrough Therapy	ACT/SE <sup>1</sup>	Children's Wraparound <sup>1</sup>
			Risk Score	A/B Adjustment	CCO Adjustment	PMPM			
TANF	138,371	\$ 27.05	1.00	1.00	1.00	\$ 27.05	\$ -	\$ 2.36	\$ -
PLMA	43,468	\$ 15.03	1.00	1.00	1.00	\$ 15.03	\$ -	\$ 0.64	\$ -
CHILD 00-01	71,377	\$ 1.02	1.00	1.00	1.00	\$ 1.02	\$ -	\$ -	\$ -
CHILD 01-05	311,494	\$ 13.97	1.00	1.00	1.00	\$ 13.97	\$ -	\$ 0.18	\$ -
CHILD 06-18	740,685	\$ 26.69	1.00	1.00	1.00	\$ 26.69	\$ -	\$ 1.01	\$ -
ABAD & OAA Duals	197,759	\$ 45.52	1.00	1.00	1.00	\$ 45.52	\$ -	\$ 19.71	\$ -
ABAD & OAA Medicaid Only	167,576	\$ 120.82	1.00	1.00	1.00	\$ 120.82	\$ -	\$ 26.99	\$ -
CAF	33,833	\$ 157.09	1.00	1.00	1.00	\$ 157.09	\$ -	\$ 6.51	\$ 99.60
ACA 19-44	704,231	\$ 29.08	1.00	1.00	1.00	\$ 29.08	\$ -	\$ 3.20	\$ -
ACA 45-54	211,360	\$ 28.94	1.00	1.00	1.00	\$ 28.94	\$ -	\$ 1.47	\$ -
ACA 55-64	171,210	\$ 18.75	1.00	1.00	1.00	\$ 18.75	\$ -	\$ 0.93	\$ -
BCCP	747	\$ 35.45	1.00	1.00	1.00	\$ 35.45	\$ -	\$ 26.99	\$ -
<b>Total</b>	<b>2,792,111</b>	<b>\$ 33.30</b>				<b>\$ 33.30</b>	<b>\$ -</b>	<b>\$ 4.49</b>	<b>\$ 1.21</b>

COA	CY 2015 MMs	NEMT <sup>1</sup>	CANS <sup>1</sup>	Tier 1 HRA	Tier 1 HRA Admin	Tier 2 HRA	Health Insurer Fee	Dental	CY17 Payment Rate
TANF	138,371	\$ 6.95	\$ -	\$ 2.37	\$ 0.05	\$ -	\$ -	\$ -	\$ 38.78
PLMA	43,468	\$ 6.01	\$ -	\$ 1.06	\$ 0.02	\$ -	\$ -	\$ -	\$ 22.77
CHILD 00-01	71,377	\$ 0.75	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -	\$ 1.78
CHILD 01-05	311,494	\$ 0.38	\$ -	\$ 0.37	\$ 0.01	\$ -	\$ -	\$ -	\$ 14.92
CHILD 06-18	740,685	\$ 0.49	\$ -	\$ 2.92	\$ 0.06	\$ -	\$ -	\$ -	\$ 31.18
ABAD & OAA Duals	197,759	\$ 62.13	\$ -	\$ 3.39	\$ 0.07	\$ -	\$ -	\$ -	\$ 130.81
ABAD & OAA Medicaid Only	167,576	\$ 48.55	\$ -	\$ 14.99	\$ 0.31	\$ -	\$ -	\$ -	\$ 211.66
CAF	33,833	\$ 4.54	\$ -	\$ 13.66	\$ 0.28	\$ -	\$ -	\$ -	\$ 281.68
ACA 19-44	704,231	\$ 3.78	\$ -	\$ 3.33	\$ 0.07	\$ -	\$ -	\$ -	\$ 39.45
ACA 45-54	211,360	\$ 8.38	\$ -	\$ 3.19	\$ 0.07	\$ -	\$ -	\$ -	\$ 42.04
ACA 55-64	171,210	\$ 6.34	\$ -	\$ 1.98	\$ 0.04	\$ -	\$ -	\$ -	\$ 28.04
BCCP	747	\$ 48.55	\$ -	\$ 6.77	\$ 0.14	\$ -	\$ -	\$ -	\$ 117.90
<b>Total</b>	<b>2,792,111</b>	<b>\$ 9.99</b>	<b>\$ -</b>	<b>\$ 3.46</b>	<b>\$ 0.07</b>	<b>\$ -</b>	<b>\$ -</b>	<b>\$ -</b>	<b>\$ 52.52</b>

<sup>1</sup> Rate Add-Ons are inclusive of a 10.1% non-medical load

## Appendix V. CCO-E Rate Development Summary (RDS) **Optumas**

### Appendix V.G: InterCommunity Health Network, Inc.

COA	CY 2015 MMs	Regional	Risk Factor				Breakthrough	ACT/SE <sup>1</sup>	Children's
		Base PMPM	Risk Score	A/B Adjustment	CCO Adjustment	PMPM	Therapy		Wraparound <sup>1</sup>
TANF	37,242	\$ 34.42	1.00	1.00	1.00	\$ 34.42	\$ -	\$ -	\$ -
PLMA	11,402	\$ 24.41	1.00	1.00	1.00	\$ 24.41	\$ -	\$ -	\$ -
CHILD 00-01	19,126	\$ 14.03	1.00	1.00	1.00	\$ 14.03	\$ -	\$ -	\$ -
CHILD 01-05	74,130	\$ 25.46	1.00	1.00	1.00	\$ 25.46	\$ -	\$ -	\$ -
CHILD 06-18	161,389	\$ 34.74	1.00	1.00	1.00	\$ 34.74	\$ -	\$ -	\$ -
ABAD & OAA Duals	31,670	\$ 36.68	1.00	1.00	1.00	\$ 36.68	\$ -	\$ -	\$ -
ABAD & OAA Medicaid Only	37,543	\$ 82.70	1.00	1.00	1.00	\$ 82.70	\$ -	\$ 0.24	\$ -
CAF	9,998	\$ 157.00	1.00	1.00	1.00	\$ 157.00	\$ -	\$ -	\$ 1.00
ACA 19-44	172,948	\$ 38.17	1.00	1.00	1.00	\$ 38.17	\$ -	\$ 0.03	\$ -
ACA 45-54	54,224	\$ 38.90	1.00	1.00	1.00	\$ 38.90	\$ -	\$ -	\$ -
ACA 55-64	48,668	\$ 32.71	1.00	1.00	1.00	\$ 32.71	\$ -	\$ -	\$ -
BCCP	237	\$ 14.70	1.00	1.00	1.00	\$ 14.70	\$ -	\$ 0.24	\$ -
<b>Total</b>	<b>658,578</b>	<b>\$ 38.67</b>				<b>\$ 38.67</b>	<b>\$ -</b>	<b>\$ 0.02</b>	<b>\$ 0.02</b>

COA	CY 2015 MMs	NEMT <sup>1</sup>	CANS <sup>1</sup>	Tier 1 HRA	Tier 1 HRA Admin	Tier 2 HRA	Health Insurer Fee	Dental	CY17 Payment Rate
TANF	37,242	\$ 10.54	\$ -	\$ 0.95	\$ 0.02	\$ -	\$ -	\$ -	\$ 45.92
PLMA	11,402	\$ 11.19	\$ -	\$ 0.05	\$ 0.00	\$ -	\$ -	\$ -	\$ 35.65
CHILD 00-01	19,126	\$ 0.72	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -	\$ 14.75
CHILD 01-05	74,130	\$ 0.67	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -	\$ 26.13
CHILD 06-18	161,389	\$ 1.06	\$ -	\$ 0.57	\$ 0.01	\$ -	\$ -	\$ -	\$ 36.38
ABAD & OAA Duals	31,670	\$ 85.91	\$ -	\$ 0.40	\$ 0.01	\$ -	\$ -	\$ -	\$ 123.00
ABAD & OAA Medicaid Only	37,543	\$ 91.74	\$ -	\$ 6.14	\$ 0.13	\$ -	\$ -	\$ -	\$ 180.94
CAF	9,998	\$ 3.80	\$ 0.25	\$ 1.28	\$ 0.03	\$ -	\$ -	\$ -	\$ 163.36
ACA 19-44	172,948	\$ 9.57	\$ -	\$ 2.52	\$ 0.05	\$ -	\$ -	\$ -	\$ 50.34
ACA 45-54	54,224	\$ 19.13	\$ -	\$ 1.62	\$ 0.03	\$ -	\$ -	\$ -	\$ 59.69
ACA 55-64	48,668	\$ 12.15	\$ -	\$ 0.68	\$ 0.01	\$ -	\$ -	\$ -	\$ 45.55
BCCP	237	\$ 91.74	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -	\$ 106.69
<b>Total</b>	<b>658,578</b>	<b>\$ 15.58</b>	<b>\$ 0.00</b>	<b>\$ 1.43</b>	<b>\$ 0.03</b>	<b>\$ -</b>	<b>\$ -</b>	<b>\$ -</b>	<b>\$ 55.75</b>

<sup>1</sup> Rate Add-Ons are inclusive of a 9.7% non-medical load

# Appendix V. CCO-E Rate Development Summary (RDS) **Optumas**

## Appendix V.H: Jackson County CCO, LLC.

COA	CY 2015 MMs	Regional	Risk Factor				Breakthrough	ACT/SE <sup>1</sup>	Children's
		Base PMPM	Risk Score	A/B Adjustment	CCO Adjustment	PMPM	Therapy		Wraparound <sup>1</sup>
TANF	19,577	\$ 40.95	1.00	1.00	1.00	\$ 40.95	\$ -	\$ -	\$ -
PLMA	5,637	\$ 27.20	1.00	1.00	1.00	\$ 27.20	\$ -	\$ -	\$ -
CHILD 00-01	9,401	\$ 7.64	1.00	1.00	1.00	\$ 7.64	\$ -	\$ -	\$ -
CHILD 01-05	40,414	\$ 20.24	1.00	1.00	1.00	\$ 20.24	\$ -	\$ -	\$ -
CHILD 06-18	97,699	\$ 34.63	1.00	1.00	1.00	\$ 34.63	\$ -	\$ -	\$ -
ABAD & OAA Duals	13,179	\$ 41.96	1.00	1.00	1.00	\$ 41.96	\$ -	\$ -	\$ -
ABAD & OAA Medicaid Only	16,823	\$ 148.18	1.00	1.00	1.00	\$ 148.18	\$ -	\$ 8.26	\$ -
CAF	6,353	\$ 215.09	1.00	1.00	1.00	\$ 215.09	\$ -	\$ -	\$ -
ACA 19-44	87,059	\$ 42.36	1.00	1.00	1.00	\$ 42.36	\$ -	\$ -	\$ -
ACA 45-54	28,687	\$ 48.12	1.00	1.00	1.00	\$ 48.12	\$ -	\$ -	\$ -
ACA 55-64	25,043	\$ 43.81	1.00	1.00	1.00	\$ 43.81	\$ -	\$ -	\$ -
BCCP	290	\$ 54.26	1.00	1.00	1.00	\$ 54.26	\$ -	\$ 8.26	\$ -
<b>Total</b>	<b>350,162</b>	<b>\$ 45.18</b>				<b>\$ 45.18</b>	<b>\$ -</b>	<b>\$ 0.40</b>	<b>\$ -</b>

COA	CY 2015 MMs	NEMT <sup>1</sup>	CANS <sup>1</sup>	Tier 1 HRA	Tier 1 HRA Admin	Tier 2 HRA	Health Insurer Fee	Dental	CY17 Payment Rate
TANF	19,577	\$ 3.66	\$ -	\$ 1.96	\$ 0.04	\$ -	\$ -	\$ -	\$ 46.61
PLMA	5,637	\$ 3.89	\$ -	\$ 1.91	\$ 0.04	\$ -	\$ -	\$ -	\$ 33.04
CHILD 00-01	9,401	\$ 0.25	\$ -	\$ 0.03	\$ 0.00	\$ -	\$ -	\$ -	\$ 7.92
CHILD 01-05	40,414	\$ 0.23	\$ -	\$ 0.21	\$ 0.00	\$ -	\$ -	\$ -	\$ 20.69
CHILD 06-18	97,699	\$ 0.37	\$ -	\$ 1.44	\$ 0.03	\$ -	\$ -	\$ -	\$ 36.46
ABAD & OAA Duals	13,179	\$ 29.87	\$ -	\$ 0.91	\$ 0.02	\$ -	\$ -	\$ -	\$ 72.75
ABAD & OAA Medicaid Only	16,823	\$ 31.90	\$ -	\$ 19.79	\$ 0.40	\$ -	\$ -	\$ -	\$ 208.52
CAF	6,353	\$ 1.32	\$ -	\$ 7.30	\$ 0.15	\$ -	\$ -	\$ -	\$ 223.87
ACA 19-44	87,059	\$ 3.33	\$ -	\$ 3.95	\$ 0.08	\$ -	\$ -	\$ -	\$ 49.72
ACA 45-54	28,687	\$ 6.65	\$ -	\$ 3.79	\$ 0.08	\$ -	\$ -	\$ -	\$ 58.63
ACA 55-64	25,043	\$ 4.22	\$ -	\$ 3.61	\$ 0.07	\$ -	\$ -	\$ -	\$ 51.71
BCCP	290	\$ 31.90	\$ -	\$ 0.94	\$ 0.02	\$ -	\$ -	\$ -	\$ 95.37
<b>Total</b>	<b>350,162</b>	<b>\$ 4.78</b>	<b>\$ -</b>	<b>\$ 3.24</b>	<b>\$ 0.07</b>	<b>\$ -</b>	<b>\$ -</b>	<b>\$ -</b>	<b>\$ 53.67</b>

<sup>1</sup> Rate Add-Ons are inclusive of a 11.8% non-medical load

# Appendix V. CCO-E Rate Development Summary (RDS) **Optumas**

## Appendix V.I: PacificSource Community Solutions, Inc. (Central)

COA	CY 2015 MMs	Regional	Risk Factor				Breakthrough	ACT/SE <sup>1</sup>	Children's
		Base PMPM	Risk Score	A/B Adjustment	CCO Adjustment	PMPM	Therapy		Wraparound <sup>1</sup>
TANF	37,593	\$ 33.06	1.00	1.00	1.00	\$ 33.06	\$ -	\$ -	\$ -
PLMA	10,676	\$ 14.63	1.00	1.00	1.00	\$ 14.63	\$ -	\$ -	\$ -
CHILD 00-01	19,035	\$ 0.33	1.00	1.00	1.00	\$ 0.33	\$ -	\$ -	\$ -
CHILD 01-05	70,368	\$ 13.37	1.00	1.00	1.00	\$ 13.37	\$ -	\$ -	\$ -
CHILD 06-18	172,046	\$ 34.97	1.00	1.00	1.00	\$ 34.97	\$ -	\$ -	\$ -
ABAD & OAA Duals	25,538	\$ 35.25	1.00	1.00	1.00	\$ 35.25	\$ -	\$ -	\$ -
ABAD & OAA Medicaid Only	22,804	\$ 121.00	1.00	1.00	1.00	\$ 121.00	\$ -	\$ -	\$ -
CAF	6,955	\$ 256.64	1.00	1.00	1.00	\$ 256.64	\$ -	\$ -	\$ 97.87
ACA 19-44	164,445	\$ 31.90	1.00	1.00	1.00	\$ 31.90	\$ -	\$ -	\$ -
ACA 45-54	54,291	\$ 39.08	1.00	1.00	1.00	\$ 39.08	\$ -	\$ -	\$ -
ACA 55-64	48,275	\$ 40.01	1.00	1.00	1.00	\$ 40.01	\$ -	\$ -	\$ -
BCCP	550	\$ 56.41	1.00	1.00	1.00	\$ 56.41	\$ -	\$ -	\$ -
<b>Total</b>	<b>632,577</b>	<b>\$ 36.58</b>				<b>\$ 36.58</b>	<b>\$ -</b>	<b>\$ -</b>	<b>\$ 1.08</b>

COA	CY 2015 MMs	NEMT <sup>1</sup>	CANS <sup>1</sup>	Tier 1 HRA	Tier 1 HRA Admin	Tier 2 HRA	Health Insurer Fee	Dental	CY17 Payment Rate
TANF	37,593	\$ 6.06	\$ -	\$ 0.69	\$ 0.01	\$ -	\$ -	\$ -	\$ 39.82
PLMA	10,676	\$ 6.43	\$ -	\$ 0.14	\$ 0.00	\$ -	\$ -	\$ -	\$ 21.21
CHILD 00-01	19,035	\$ 0.42	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -	\$ 0.74
CHILD 01-05	70,368	\$ 0.39	\$ -	\$ 0.08	\$ 0.00	\$ -	\$ -	\$ -	\$ 13.84
CHILD 06-18	172,046	\$ 0.61	\$ -	\$ 0.32	\$ 0.01	\$ -	\$ -	\$ -	\$ 35.90
ABAD & OAA Duals	25,538	\$ 49.40	\$ -	\$ 0.05	\$ 0.00	\$ -	\$ -	\$ -	\$ 84.71
ABAD & OAA Medicaid Only	22,804	\$ 52.76	\$ -	\$ 4.44	\$ 0.09	\$ -	\$ -	\$ -	\$ 178.29
CAF	6,955	\$ 2.19	\$ -	\$ 0.40	\$ 0.01	\$ -	\$ -	\$ -	\$ 357.10
ACA 19-44	164,445	\$ 5.50	\$ -	\$ 0.97	\$ 0.02	\$ -	\$ -	\$ -	\$ 38.40
ACA 45-54	54,291	\$ 11.00	\$ -	\$ 0.80	\$ 0.02	\$ -	\$ -	\$ -	\$ 50.89
ACA 55-64	48,275	\$ 6.99	\$ -	\$ 0.47	\$ 0.01	\$ -	\$ -	\$ -	\$ 47.47
BCCP	550	\$ 52.76	\$ -	\$ 0.15	\$ 0.00	\$ -	\$ -	\$ -	\$ 109.32
<b>Total</b>	<b>632,577</b>	<b>\$ 7.56</b>	<b>\$ -</b>	<b>\$ 0.66</b>	<b>\$ 0.01</b>	<b>\$ -</b>	<b>\$ -</b>	<b>\$ -</b>	<b>\$ 45.89</b>

<sup>1</sup> Rate Add-Ons are inclusive of a 11.5% non-medical load

## Appendix V. CCO-E Rate Development Summary (RDS) **Optumas**

### Appendix V.J: PacificSource Community Solutions, Inc. (Gorge)

COA	CY 2015 MMs	Regional	Risk Factor				Breakthrough	ACT/SE <sup>1</sup>	Children's
		Base PMPM	Risk Score	A/B Adjustment	CCO Adjustment	PMPM	Therapy		Wraparound <sup>1</sup>
TANF	6,934	\$ 33.06	1.00	1.00	1.00	\$ 33.06	\$ -	\$ -	\$ -
PLMA	2,995	\$ 14.63	1.00	1.00	1.00	\$ 14.63	\$ -	\$ -	\$ -
CHILD 00-01	5,073	\$ 0.33	1.00	1.00	1.00	\$ 0.33	\$ -	\$ -	\$ -
CHILD 01-05	20,443	\$ 13.37	1.00	1.00	1.00	\$ 13.37	\$ -	\$ -	\$ -
CHILD 06-18	47,576	\$ 34.97	1.00	1.00	1.00	\$ 34.97	\$ -	\$ -	\$ -
ABAD & OAA Duals	4,049	\$ 35.25	1.00	1.00	1.00	\$ 35.25	\$ -	\$ -	\$ -
ABAD & OAA Medicaid Only	5,753	\$ 121.00	1.00	1.00	1.00	\$ 121.00	\$ -	\$ -	\$ -
CAF	2,571	\$ 256.64	1.00	1.00	1.00	\$ 256.64	\$ -	\$ -	\$ 97.87
ACA 19-44	34,571	\$ 31.90	1.00	1.00	1.00	\$ 31.90	\$ -	\$ -	\$ -
ACA 45-54	12,849	\$ 39.08	1.00	1.00	1.00	\$ 39.08	\$ -	\$ -	\$ -
ACA 55-64	11,136	\$ 40.01	1.00	1.00	1.00	\$ 40.01	\$ -	\$ -	\$ -
BCCP	95	\$ 56.41	1.00	1.00	1.00	\$ 56.41	\$ -	\$ -	\$ -
<b>Total</b>	<b>154,046</b>	<b>\$ 37.43</b>				<b>\$ 37.43</b>	<b>\$ -</b>	<b>\$ -</b>	<b>\$ 1.63</b>

COA	CY 2015 MMs	NEMT <sup>1</sup>	CANS <sup>1</sup>	Tier 1 HRA	Tier 1 HRA Admin	Tier 2 HRA	Health Insurer Fee	Dental	CY17 Payment Rate
TANF	6,934	\$ 3.27	\$ -	\$ 0.42	\$ 0.01	\$ -	\$ -	\$ -	\$ 36.75
PLMA	2,995	\$ 3.47	\$ -	\$ 0.04	\$ 0.00	\$ -	\$ -	\$ -	\$ 18.15
CHILD 00-01	5,073	\$ 0.22	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -	\$ 0.55
CHILD 01-05	20,443	\$ 0.21	\$ -	\$ 0.05	\$ 0.00	\$ -	\$ -	\$ -	\$ 13.63
CHILD 06-18	47,576	\$ 0.33	\$ -	\$ 0.28	\$ 0.01	\$ -	\$ -	\$ -	\$ 35.58
ABAD & OAA Duals	4,049	\$ 26.66	\$ -	\$ 0.03	\$ 0.00	\$ -	\$ -	\$ -	\$ 61.94
ABAD & OAA Medicaid Only	5,753	\$ 28.47	\$ -	\$ 2.49	\$ 0.05	\$ -	\$ -	\$ -	\$ 152.01
CAF	2,571	\$ 1.18	\$ -	\$ 0.17	\$ 0.00	\$ -	\$ -	\$ -	\$ 355.86
ACA 19-44	34,571	\$ 2.97	\$ -	\$ 0.24	\$ 0.00	\$ -	\$ -	\$ -	\$ 35.12
ACA 45-54	12,849	\$ 5.94	\$ -	\$ 0.42	\$ 0.01	\$ -	\$ -	\$ -	\$ 45.44
ACA 55-64	11,136	\$ 3.77	\$ -	\$ 0.28	\$ 0.01	\$ -	\$ -	\$ -	\$ 44.07
BCCP	95	\$ 28.47	\$ -	\$ 0.01	\$ 0.00	\$ -	\$ -	\$ -	\$ 84.89
<b>Total</b>	<b>154,046</b>	<b>\$ 3.59</b>	<b>\$ -</b>	<b>\$ 0.32</b>	<b>\$ 0.01</b>	<b>\$ -</b>	<b>\$ -</b>	<b>\$ -</b>	<b>\$ 42.98</b>

<sup>1</sup> Rate Add-Ons are inclusive of a 11.5% non-medical load



# Appendix V. CCO-E Rate Development Summary (RDS) **Optumas**

## Appendix V.K: Primary Health of Josephine County, LLC

COA	CY 2015 MMs	Regional	Risk Factor				Breakthrough	ACT/SE <sup>1</sup>	Children's
		Base PMPM	Risk Score	A/B Adjustment	CCO Adjustment	PMPM	Therapy		Wraparound <sup>1</sup>
TANF	7,942	\$ 40.95	1.00	1.00	1.00	\$ 40.95	\$ -	\$ 1.24	\$ -
PLMA	2,556	\$ 27.20	1.00	1.00	1.00	\$ 27.20	\$ -	\$ -	\$ -
CHILD 00-01	3,267	\$ 7.64	1.00	1.00	1.00	\$ 7.64	\$ -	\$ -	\$ -
CHILD 01-05	11,458	\$ 20.24	1.00	1.00	1.00	\$ 20.24	\$ -	\$ -	\$ -
CHILD 06-18	29,617	\$ 34.63	1.00	1.00	1.00	\$ 34.63	\$ -	\$ -	\$ -
ABAD & OAA Duals	6,081	\$ 41.96	1.00	1.00	1.00	\$ 41.96	\$ -	\$ 3.36	\$ -
ABAD & OAA Medicaid Only	6,999	\$ 148.18	1.00	1.00	1.00	\$ 148.18	\$ -	\$ 24.62	\$ -
CAF	2,176	\$ 215.09	1.00	1.00	1.00	\$ 215.09	\$ -	\$ -	\$ 46.00
ACA 19-44	36,261	\$ 42.36	1.00	1.00	1.00	\$ 42.36	\$ -	\$ -	\$ -
ACA 45-54	14,252	\$ 48.12	1.00	1.00	1.00	\$ 48.12	\$ -	\$ -	\$ -
ACA 55-64	14,043	\$ 43.81	1.00	1.00	1.00	\$ 43.81	\$ -	\$ -	\$ -
BCCP	122	\$ 54.26	1.00	1.00	1.00	\$ 54.26	\$ -	\$ 24.62	\$ -
<b>Total</b>	<b>134,771</b>	<b>\$ 46.60</b>				<b>\$ 46.60</b>	<b>\$ -</b>	<b>\$ 1.53</b>	<b>\$ 0.74</b>

COA	CY 2015 MMs	NEMT <sup>1</sup>	CANS <sup>1</sup>	Tier 1 HRA	Tier 1 HRA Admin	Tier 2 HRA	Health Insurer Fee	Dental	CY17 Payment Rate
TANF	7,942	\$ 3.77	\$ -	\$ 1.41	\$ 0.03	\$ -	\$ -	\$ -	\$ 47.40
PLMA	2,556	\$ 4.01	\$ -	\$ 1.55	\$ 0.03	\$ -	\$ -	\$ -	\$ 32.78
CHILD 00-01	3,267	\$ 0.26	\$ -	\$ 0.03	\$ 0.00	\$ -	\$ -	\$ -	\$ 7.93
CHILD 01-05	11,458	\$ 0.24	\$ -	\$ 0.16	\$ 0.00	\$ -	\$ -	\$ -	\$ 20.65
CHILD 06-18	29,617	\$ 0.38	\$ -	\$ 0.86	\$ 0.02	\$ -	\$ -	\$ -	\$ 35.89
ABAD & OAA Duals	6,081	\$ 30.77	\$ -	\$ 0.29	\$ 0.01	\$ -	\$ -	\$ -	\$ 76.38
ABAD & OAA Medicaid Only	6,999	\$ 32.85	\$ -	\$ 12.75	\$ 0.26	\$ -	\$ -	\$ -	\$ 218.66
CAF	2,176	\$ 1.36	\$ 3.39	\$ 7.33	\$ 0.15	\$ -	\$ -	\$ -	\$ 273.32
ACA 19-44	36,261	\$ 3.43	\$ -	\$ 3.03	\$ 0.06	\$ -	\$ -	\$ -	\$ 48.88
ACA 45-54	14,252	\$ 6.85	\$ -	\$ 3.16	\$ 0.06	\$ -	\$ -	\$ -	\$ 58.19
ACA 55-64	14,043	\$ 4.35	\$ -	\$ 2.68	\$ 0.05	\$ -	\$ -	\$ -	\$ 50.90
BCCP	122	\$ 32.85	\$ -	\$ 2.31	\$ 0.05	\$ -	\$ -	\$ -	\$ 114.09
<b>Total</b>	<b>134,771</b>	<b>\$ 5.65</b>	<b>\$ 0.05</b>	<b>\$ 2.54</b>	<b>\$ 0.05</b>	<b>\$ -</b>	<b>\$ -</b>	<b>\$ -</b>	<b>\$ 57.18</b>

<sup>1</sup> Rate Add-Ons are inclusive of a 11.8% non-medical load

# Appendix V. CCO-E Rate Development Summary (RDS) **Optumas**

## Appendix V.L: Trillium Community Health Plan, Inc.

COA	CY 2015 MMs	Regional	Risk Factor				Breakthrough	ACT/SE <sup>1</sup>	Children's
		Base PMPM	Risk Score	A/B Adjustment	CCO Adjustment	PMPM	Therapy		Wraparound <sup>1</sup>
TANF	57,779	\$ 40.95	1.00	1.00	1.00	\$ 40.95	\$ -	\$ 1.78	\$ -
PLMA	20,080	\$ 27.20	1.00	1.00	1.00	\$ 27.20	\$ -	\$ 1.86	\$ -
CHILD 00-01	29,600	\$ 7.64	1.00	1.00	1.00	\$ 7.64	\$ -	\$ 3.80	\$ -
CHILD 01-05	107,817	\$ 20.24	1.00	1.00	1.00	\$ 20.24	\$ -	\$ 0.51	\$ -
CHILD 06-18	245,824	\$ 34.63	1.00	1.00	1.00	\$ 34.63	\$ -	\$ 0.67	\$ -
ABAD & OAA Duals	49,880	\$ 41.96	1.00	1.00	1.00	\$ 41.96	\$ -	\$ 0.73	\$ -
ABAD & OAA Medicaid Only	65,231	\$ 148.18	1.00	1.00	1.00	\$ 148.18	\$ -	\$ 5.78	\$ -
CAF	24,757	\$ 215.09	1.00	1.00	1.00	\$ 215.09	\$ -	\$ 1.95	\$ 31.01
ACA 19-44	301,144	\$ 42.36	1.00	1.00	1.00	\$ 42.36	\$ -	\$ 1.38	\$ -
ACA 45-54	89,008	\$ 48.12	1.00	1.00	1.00	\$ 48.12	\$ -	\$ 2.69	\$ -
ACA 55-64	79,765	\$ 43.81	1.00	1.00	1.00	\$ 43.81	\$ -	\$ 2.95	\$ -
BCCP	514	\$ 54.26	1.00	1.00	1.00	\$ 54.26	\$ -	\$ 5.78	\$ -
<b>Total</b>	<b>1,071,399</b>	<b>\$ 48.05</b>				<b>\$ 48.05</b>	<b>\$ -</b>	<b>\$ 1.71</b>	<b>\$ 0.72</b>

COA	CY 2015 MMs	NEMT <sup>1</sup>	CANS <sup>1</sup>	Tier 1 HRA	Tier 1 HRA Admin	Tier 2 HRA	Health Insurer Fee	Dental	CY17 Payment Rate
TANF	57,779	\$ 5.50	\$ -	\$ 2.09	\$ 0.04	\$ -	\$ -	\$ -	\$ 50.36
PLMA	20,080	\$ 5.84	\$ -	\$ 1.79	\$ 0.04	\$ -	\$ -	\$ -	\$ 36.73
CHILD 00-01	29,600	\$ 0.38	\$ -	\$ 0.03	\$ 0.00	\$ -	\$ -	\$ -	\$ 11.85
CHILD 01-05	107,817	\$ 0.35	\$ -	\$ 0.37	\$ 0.01	\$ -	\$ -	\$ -	\$ 21.49
CHILD 06-18	245,824	\$ 0.55	\$ -	\$ 1.86	\$ 0.04	\$ -	\$ -	\$ -	\$ 37.75
ABAD & OAA Duals	49,880	\$ 44.87	\$ -	\$ 3.14	\$ 0.06	\$ -	\$ -	\$ -	\$ 90.76
ABAD & OAA Medicaid Only	65,231	\$ 47.92	\$ -	\$ 17.26	\$ 0.35	\$ -	\$ -	\$ -	\$ 219.49
CAF	24,757	\$ 1.99	\$ 0.27	\$ 7.81	\$ 0.16	\$ -	\$ -	\$ -	\$ 258.28
ACA 19-44	301,144	\$ 5.00	\$ -	\$ 3.66	\$ 0.07	\$ -	\$ -	\$ -	\$ 52.47
ACA 45-54	89,008	\$ 9.99	\$ -	\$ 4.28	\$ 0.09	\$ -	\$ -	\$ -	\$ 65.17
ACA 55-64	79,765	\$ 6.35	\$ -	\$ 2.78	\$ 0.06	\$ -	\$ -	\$ -	\$ 55.94
BCCP	514	\$ 47.92	\$ -	\$ 2.13	\$ 0.04	\$ -	\$ -	\$ -	\$ 110.14
<b>Total</b>	<b>1,071,399</b>	<b>\$ 8.36</b>	<b>\$ 0.01</b>	<b>\$ 3.58</b>	<b>\$ 0.07</b>	<b>\$ -</b>	<b>\$ -</b>	<b>\$ -</b>	<b>\$ 62.49</b>

<sup>1</sup> Rate Add-Ons are inclusive of a 11.8% non-medical load

# Appendix V. CCO-E Rate Development Summary (RDS) **Optumas**

## Appendix V.M: DCIPA, LLC. Abn Umpqua Health Alliance

COA	CY 2015 MMs	Regional	Risk Factor				Breakthrough	ACT/SE <sup>1</sup>	Children's
		Base PMPM	Risk Score	A/B Adjustment	CCO Adjustment	PMPM	Therapy		Wraparound <sup>1</sup>
TANF	20,416	\$ 40.95	1.00	1.00	1.00	\$ 40.95	\$ -	\$ 1.24	\$ -
PLMA	5,376	\$ 27.20	1.00	1.00	1.00	\$ 27.20	\$ -	\$ -	\$ -
CHILD 00-01	8,818	\$ 7.64	1.00	1.00	1.00	\$ 7.64	\$ -	\$ -	\$ -
CHILD 01-05	32,205	\$ 20.24	1.00	1.00	1.00	\$ 20.24	\$ -	\$ -	\$ -
CHILD 06-18	70,266	\$ 34.63	1.00	1.00	1.00	\$ 34.63	\$ -	\$ -	\$ -
ABAD & OAA Duals	18,343	\$ 41.96	1.00	1.00	1.00	\$ 41.96	\$ -	\$ 7.92	\$ -
ABAD & OAA Medicaid Only	18,401	\$ 148.18	1.00	1.00	1.00	\$ 148.18	\$ -	\$ 14.03	\$ -
CAF	6,740	\$ 215.09	1.00	1.00	1.00	\$ 215.09	\$ -	\$ -	\$ 76.89
ACA 19-44	80,000	\$ 42.36	1.00	1.00	1.00	\$ 42.36	\$ -	\$ 1.22	\$ -
ACA 45-54	27,667	\$ 48.12	1.00	1.00	1.00	\$ 48.12	\$ -	\$ 1.26	\$ -
ACA 55-64	25,376	\$ 43.81	1.00	1.00	1.00	\$ 43.81	\$ -	\$ 1.26	\$ -
BCCP	197	\$ 54.26	1.00	1.00	1.00	\$ 54.26	\$ -	\$ 14.03	\$ -
<b>Total</b>	<b>313,807</b>	<b>\$ 47.56</b>				<b>\$ 47.56</b>	<b>\$ -</b>	<b>\$ 1.90</b>	<b>\$ 1.65</b>

COA	CY 2015 MMs	NEMT <sup>1</sup>	CANS <sup>1</sup>	Tier 1 HRA	Tier 1 HRA Admin	Tier 2 HRA	Health Insurer Fee	Dental	CY17 Payment Rate
TANF	20,416	\$ 4.93	\$ -	\$ 2.06	\$ 0.04	\$ -	\$ -	\$ -	\$ 49.22
PLMA	5,376	\$ 5.24	\$ -	\$ 1.46	\$ 0.03	\$ -	\$ -	\$ -	\$ 33.93
CHILD 00-01	8,818	\$ 0.34	\$ -	\$ 0.03	\$ 0.00	\$ -	\$ -	\$ -	\$ 8.01
CHILD 01-05	32,205	\$ 0.31	\$ -	\$ 0.27	\$ 0.01	\$ -	\$ -	\$ -	\$ 20.83
CHILD 06-18	70,266	\$ 0.49	\$ -	\$ 1.48	\$ 0.03	\$ -	\$ -	\$ -	\$ 36.63
ABAD & OAA Duals	18,343	\$ 40.22	\$ -	\$ 0.19	\$ 0.00	\$ -	\$ -	\$ -	\$ 90.29
ABAD & OAA Medicaid Only	18,401	\$ 42.95	\$ -	\$ 19.59	\$ 0.40	\$ -	\$ -	\$ -	\$ 225.15
CAF	6,740	\$ 1.78	\$ 3.39	\$ 7.48	\$ 0.15	\$ -	\$ -	\$ -	\$ 304.78
ACA 19-44	80,000	\$ 4.48	\$ -	\$ 3.92	\$ 0.08	\$ -	\$ -	\$ -	\$ 52.06
ACA 45-54	27,667	\$ 8.96	\$ -	\$ 3.74	\$ 0.08	\$ -	\$ -	\$ -	\$ 62.15
ACA 55-64	25,376	\$ 5.69	\$ -	\$ 3.13	\$ 0.06	\$ -	\$ -	\$ -	\$ 53.95
BCCP	197	\$ 42.95	\$ -	\$ 2.57	\$ 0.05	\$ -	\$ -	\$ -	\$ 113.87
<b>Total</b>	<b>313,807</b>	<b>\$ 7.89</b>	<b>\$ 0.07</b>	<b>\$ 3.42</b>	<b>\$ 0.07</b>	<b>\$ -</b>	<b>\$ -</b>	<b>\$ -</b>	<b>\$ 62.56</b>

<sup>1</sup> Rate Add-Ons are inclusive of a 11.8% non-medical load

## Appendix V. CCO-E Rate Development Summary (RDS) **Optumas**

### Appendix V.N: Western Oregon Advanced Health, LLC

COA	CY 2015 MMs	Regional	Risk Factor				Breakthrough	ACT/SE <sup>1</sup>	Children's
		Base PMPM	Risk Score	A/B Adjustment	CCO Adjustment	PMPM	Therapy		Wraparound <sup>1</sup>
TANF	13,221	\$ 40.95	1.00	1.00	1.00	\$ 40.95	\$ -	\$ 2.28	\$ -
PLMA	3,695	\$ 27.20	1.00	1.00	1.00	\$ 27.20	\$ -	\$ 0.08	\$ -
CHILD 00-01	6,044	\$ 7.64	1.00	1.00	1.00	\$ 7.64	\$ -	\$ 0.07	\$ -
CHILD 01-05	23,304	\$ 20.24	1.00	1.00	1.00	\$ 20.24	\$ -	\$ 0.06	\$ -
CHILD 06-18	50,214	\$ 34.63	1.00	1.00	1.00	\$ 34.63	\$ -	\$ 0.19	\$ -
ABAD & OAA Duals	15,543	\$ 41.96	1.00	1.00	1.00	\$ 41.96	\$ -	\$ 0.27	\$ -
ABAD & OAA Medicaid Only	17,229	\$ 148.18	1.00	1.00	1.00	\$ 148.18	\$ -	\$ 0.78	\$ -
CAF	5,814	\$ 215.09	1.00	1.00	1.00	\$ 215.09	\$ -	\$ 1.59	\$ 18.57
ACA 19-44	58,519	\$ 42.36	1.00	1.00	1.00	\$ 42.36	\$ -	\$ 0.20	\$ -
ACA 45-54	23,417	\$ 48.12	1.00	1.00	1.00	\$ 48.12	\$ -	\$ 0.26	\$ -
ACA 55-64	22,905	\$ 43.81	1.00	1.00	1.00	\$ 43.81	\$ -	\$ 4.46	\$ -
BCCP	172	\$ 54.26	1.00	1.00	1.00	\$ 54.26	\$ -	\$ 0.78	\$ -
<b>Total</b>	<b>240,077</b>	<b>\$ 49.87</b>				<b>\$ 49.87</b>	<b>\$ -</b>	<b>\$ 0.79</b>	<b>\$ 0.45</b>

COA	CY 2015 MMs	NEMT <sup>1</sup>	CANS <sup>1</sup>	Tier 1 HRA	Tier 1 HRA Admin	Tier 2 HRA	Health Insurer Fee	Dental	CY17 Payment Rate
TANF	13,221	\$ 6.13	\$ -	\$ 3.61	\$ 0.07	\$ -	\$ -	\$ -	\$ 53.04
PLMA	3,695	\$ 6.51	\$ -	\$ 3.60	\$ 0.07	\$ -	\$ -	\$ -	\$ 37.45
CHILD 00-01	6,044	\$ 0.42	\$ -	\$ 0.02	\$ 0.00	\$ -	\$ -	\$ -	\$ 8.15
CHILD 01-05	23,304	\$ 0.39	\$ -	\$ 0.36	\$ 0.01	\$ -	\$ -	\$ -	\$ 21.07
CHILD 06-18	50,214	\$ 0.61	\$ -	\$ 1.86	\$ 0.04	\$ -	\$ -	\$ -	\$ 37.33
ABAD & OAA Duals	15,543	\$ 49.97	\$ -	\$ 3.18	\$ 0.06	\$ -	\$ -	\$ -	\$ 95.44
ABAD & OAA Medicaid Only	17,229	\$ 53.36	\$ -	\$ 21.84	\$ 0.45	\$ -	\$ -	\$ -	\$ 224.61
CAF	5,814	\$ 2.21	\$ -	\$ 13.51	\$ 0.28	\$ -	\$ -	\$ -	\$ 251.25
ACA 19-44	58,519	\$ 5.57	\$ -	\$ 6.73	\$ 0.14	\$ -	\$ -	\$ -	\$ 54.99
ACA 45-54	23,417	\$ 11.13	\$ -	\$ 6.36	\$ 0.13	\$ -	\$ -	\$ -	\$ 65.99
ACA 55-64	22,905	\$ 7.07	\$ -	\$ 5.57	\$ 0.11	\$ -	\$ -	\$ -	\$ 61.01
BCCP	172	\$ 53.36	\$ -	\$ 6.08	\$ 0.12	\$ -	\$ -	\$ -	\$ 114.61
<b>Total</b>	<b>240,077</b>	<b>\$ 10.89</b>	<b>\$ -</b>	<b>\$ 5.58</b>	<b>\$ 0.11</b>	<b>\$ -</b>	<b>\$ -</b>	<b>\$ -</b>	<b>\$ 67.68</b>

<sup>1</sup> Rate Add-Ons are inclusive of a 11.8% non-medical load

# Appendix V. CCO-E Rate Development Summary (RDS) **Optumas**

## Appendix V.O: Willamette Valley Community Health, LLC

COA	CY 2015 MMs	Regional	Risk Factor				Breakthrough	ACT/SE <sup>1</sup>	Children's
		Base PMPM	Risk Score	A/B Adjustment	CCO Adjustment	PMPM	Therapy		Wraparound <sup>1</sup>
TANF	62,434	\$ 34.42	1.00	1.00	1.00	\$ 34.42	\$ -	\$ 0.68	\$ -
PLMA	20,065	\$ 24.41	1.00	1.00	1.00	\$ 24.41	\$ -	\$ -	\$ -
CHILD 00-01	39,643	\$ 14.03	1.00	1.00	1.00	\$ 14.03	\$ -	\$ -	\$ -
CHILD 01-05	160,642	\$ 25.46	1.00	1.00	1.00	\$ 25.46	\$ -	\$ -	\$ -
CHILD 06-18	361,728	\$ 34.74	1.00	1.00	1.00	\$ 34.74	\$ -	\$ -	\$ -
ABAD & OAA Duals	53,859	\$ 36.68	1.00	1.00	1.00	\$ 36.68	\$ -	\$ 7.53	\$ -
ABAD & OAA Medicaid Only	55,258	\$ 82.70	1.00	1.00	1.00	\$ 82.70	\$ -	\$ 14.14	\$ -
CAF	15,686	\$ 157.00	1.00	1.00	1.00	\$ 157.00	\$ -	\$ -	\$ 90.49
ACA 19-44	260,640	\$ 38.17	1.00	1.00	1.00	\$ 38.17	\$ -	\$ 0.69	\$ -
ACA 45-54	80,639	\$ 38.90	1.00	1.00	1.00	\$ 38.90	\$ -	\$ 0.69	\$ -
ACA 55-64	61,642	\$ 32.71	1.00	1.00	1.00	\$ 32.71	\$ -	\$ 0.70	\$ -
BCCP	346	\$ 14.70	1.00	1.00	1.00	\$ 14.70	\$ -	\$ 14.14	\$ -
<b>Total</b>	<b>1,172,579</b>	<b>\$ 37.50</b>				<b>\$ 37.50</b>	<b>\$ -</b>	<b>\$ 1.29</b>	<b>\$ 1.21</b>

COA	CY 2015 MMs	NEMT <sup>1</sup>	CANS <sup>1</sup>	Tier 1 HRA	Tier 1 HRA Admin	Tier 2 HRA	Health Insurer Fee	Dental	CY17 Payment Rate
TANF	62,434	\$ 5.70	\$ -	\$ 0.92	\$ 0.02	\$ -	\$ -	\$ -	\$ 41.74
PLMA	20,065	\$ 6.06	\$ -	\$ 0.09	\$ 0.00	\$ -	\$ -	\$ -	\$ 30.56
CHILD 00-01	39,643	\$ 0.39	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -	\$ 14.42
CHILD 01-05	160,642	\$ 0.36	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -	\$ 25.82
CHILD 06-18	361,728	\$ 0.57	\$ -	\$ 0.35	\$ 0.01	\$ -	\$ -	\$ -	\$ 35.67
ABAD & OAA Duals	53,859	\$ 46.51	\$ -	\$ 0.22	\$ 0.00	\$ -	\$ -	\$ -	\$ 90.94
ABAD & OAA Medicaid Only	55,258	\$ 49.67	\$ -	\$ 6.51	\$ 0.13	\$ -	\$ -	\$ -	\$ 153.14
CAF	15,686	\$ 2.06	\$ 3.05	\$ 0.75	\$ 0.02	\$ -	\$ -	\$ -	\$ 253.36
ACA 19-44	260,640	\$ 5.18	\$ -	\$ 1.99	\$ 0.04	\$ -	\$ -	\$ -	\$ 46.08
ACA 45-54	80,639	\$ 10.36	\$ -	\$ 1.35	\$ 0.03	\$ -	\$ -	\$ -	\$ 51.33
ACA 55-64	61,642	\$ 6.58	\$ -	\$ 0.63	\$ 0.01	\$ -	\$ -	\$ -	\$ 40.63
BCCP	346	\$ 49.67	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -	\$ 78.51
<b>Total</b>	<b>1,172,579</b>	<b>\$ 7.38</b>	<b>\$ 0.04</b>	<b>\$ 1.05</b>	<b>\$ 0.02</b>	<b>\$ -</b>	<b>\$ -</b>	<b>\$ -</b>	<b>\$ 48.49</b>

<sup>1</sup> Rate Add-Ons are inclusive of a 9.7% non-medical load

# Appendix V. CCO-E Rate Development Summary (RDS) **Optumas**

## Appendix V.P: Yamhill County Care Organization, Inc.

COA	CY 2015 MMs	Regional	Risk Factor				Breakthrough	ACT/SE <sup>1</sup>	Children's
		Base PMPM	Risk Score	A/B Adjustment	CCO Adjustment	PMPM	Therapy		Wraparound <sup>1</sup>
TANF	15,506	\$ 34.42	1.00	1.00	1.00	\$ 34.42	\$ -	\$ 5.00	\$ -
PLMA	4,907	\$ 24.41	1.00	1.00	1.00	\$ 24.41	\$ -	\$ 0.87	\$ -
CHILD 00-01	8,354	\$ 14.03	1.00	1.00	1.00	\$ 14.03	\$ -	\$ -	\$ -
CHILD 01-05	34,842	\$ 25.46	1.00	1.00	1.00	\$ 25.46	\$ -	\$ -	\$ -
CHILD 06-18	82,112	\$ 34.74	1.00	1.00	1.00	\$ 34.74	\$ -	\$ 0.02	\$ -
ABAD & OAA Duals	6,505	\$ 36.68	1.00	1.00	1.00	\$ 36.68	\$ -	\$ 8.63	\$ -
ABAD & OAA Medicaid Only	8,809	\$ 82.70	1.00	1.00	1.00	\$ 82.70	\$ -	\$ 14.07	\$ -
CAF	3,389	\$ 157.00	1.00	1.00	1.00	\$ 157.00	\$ -	\$ -	\$ 126.14
ACA 19-44	64,738	\$ 38.17	1.00	1.00	1.00	\$ 38.17	\$ -	\$ 3.42	\$ -
ACA 45-54	21,328	\$ 38.90	1.00	1.00	1.00	\$ 38.90	\$ -	\$ 7.31	\$ -
ACA 55-64	17,196	\$ 32.71	1.00	1.00	1.00	\$ 32.71	\$ -	\$ 3.70	\$ -
BCCP	122	\$ 14.70	1.00	1.00	1.00	\$ 14.70	\$ -	\$ 14.07	\$ -
<b>Total</b>	<b>267,808</b>	<b>\$ 36.87</b>				<b>\$ 36.87</b>	<b>\$ -</b>	<b>\$ 2.64</b>	<b>\$ 1.60</b>

COA	CY 2015 MMs	NEMT <sup>1</sup>	CANS <sup>1</sup>	Tier 1 HRA	Tier 1 HRA Admin	Tier 2 HRA	Health Insurer Fee	Dental	CY17 Payment Rate
TANF	15,506	\$ 8.06	\$ -	\$ 1.26	\$ 0.03	\$ -	\$ -	\$ -	\$ 48.76
PLMA	4,907	\$ 8.56	\$ -	\$ 0.11	\$ 0.00	\$ -	\$ -	\$ -	\$ 33.95
CHILD 00-01	8,354	\$ 0.55	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -	\$ 14.58
CHILD 01-05	34,842	\$ 0.51	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -	\$ 25.97
CHILD 06-18	82,112	\$ 0.81	\$ -	\$ 0.69	\$ 0.01	\$ -	\$ -	\$ -	\$ 36.28
ABAD & OAA Duals	6,505	\$ 65.72	\$ -	\$ 0.31	\$ 0.01	\$ -	\$ -	\$ -	\$ 111.36
ABAD & OAA Medicaid Only	8,809	\$ 70.19	\$ -	\$ 11.04	\$ 0.23	\$ -	\$ -	\$ -	\$ 178.22
CAF	3,389	\$ 2.91	\$ 2.07	\$ 1.26	\$ 0.03	\$ -	\$ -	\$ -	\$ 289.40
ACA 19-44	64,738	\$ 7.32	\$ -	\$ 2.55	\$ 0.05	\$ -	\$ -	\$ -	\$ 51.52
ACA 45-54	21,328	\$ 14.64	\$ -	\$ 1.25	\$ 0.03	\$ -	\$ -	\$ -	\$ 62.12
ACA 55-64	17,196	\$ 9.29	\$ -	\$ 0.69	\$ 0.01	\$ -	\$ -	\$ -	\$ 46.41
BCCP	122	\$ 70.19	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -	\$ 98.96
<b>Total</b>	<b>267,808</b>	<b>\$ 8.46</b>	<b>\$ 0.03</b>	<b>\$ 1.44</b>	<b>\$ 0.03</b>	<b>\$ -</b>	<b>\$ -</b>	<b>\$ -</b>	<b>\$ 51.06</b>

<sup>1</sup> Rate Add-Ons are inclusive of a 9.7% non-medical load

**Appendix VI. CCO-F Rate Development Summary (RDS)**

## Appendix VI. CCO-F Rate Development Summary (RDS) **Optumas**

### Appendix VI.A: Allcare CCO, Inc.

COA	CY 2015 MM\$	Regional	Risk Factor				Breakthrough	ACT/SE <sup>1</sup>	Children's
		Base PMPM	Risk Score	A/B Adjustment	CCO Adjustment	PMPM	Therapy		Wraparound <sup>1</sup>
TANF	36,134	\$ -	-	-	-	\$ -	\$ -	\$ -	\$ -
PLMA	11,984	\$ -	-	-	-	\$ -	\$ -	\$ -	\$ -
CHILD 00-01	17,505	\$ -	-	-	-	\$ -	\$ -	\$ -	\$ -
CHILD 01-05	68,111	\$ -	-	-	-	\$ -	\$ -	\$ -	\$ -
CHILD 06-18	133,596	\$ -	-	-	-	\$ -	\$ -	\$ -	\$ -
ABAD & OAA Duals	26,572	\$ -	-	-	-	\$ -	\$ -	\$ -	\$ -
ABAD & OAA Medicaid Only	28,522	\$ -	-	-	-	\$ -	\$ -	\$ -	\$ -
CAF	8,496	\$ -	-	-	-	\$ -	\$ -	\$ -	\$ -
ACA 19-44	150,902	\$ -	-	-	-	\$ -	\$ -	\$ -	\$ -
ACA 45-54	53,628	\$ -	-	-	-	\$ -	\$ -	\$ -	\$ -
ACA 55-64	51,012	\$ -	-	-	-	\$ -	\$ -	\$ -	\$ -
BCCP	354	\$ -	-	-	-	\$ -	\$ -	\$ -	\$ -
<b>Total</b>	<b>586,817</b>	\$ -				\$ -	\$ -	\$ -	\$ -

COA	CY 2015 MM\$	NEMT <sup>1</sup>	CANS <sup>1</sup>	Tier 1 HRA	Tier 1 HRA Admin	Tier 2 HRA	Health Insurer Fee	Dental	CY17 Payment Rate
TANF	36,134	\$ 4.40	\$ -	\$ -	\$ -	\$ -	\$ -	\$ 23.99	\$ 28.39
PLMA	11,984	\$ 4.67	\$ -	\$ -	\$ -	\$ -	\$ -	\$ 18.70	\$ 23.37
CHILD 00-01	17,505	\$ 0.30	\$ -	\$ -	\$ -	\$ -	\$ -	\$ 1.42	\$ 1.72
CHILD 01-05	68,111	\$ 0.28	\$ -	\$ -	\$ -	\$ -	\$ -	\$ 22.38	\$ 22.66
CHILD 06-18	133,596	\$ 0.44	\$ -	\$ -	\$ -	\$ -	\$ -	\$ 22.34	\$ 22.78
ABAD & OAA Duals	26,572	\$ 35.88	\$ -	\$ -	\$ -	\$ -	\$ -	\$ 27.13	\$ 63.01
ABAD & OAA Medicaid Only	28,522	\$ 38.31	\$ -	\$ -	\$ -	\$ -	\$ -	\$ 28.39	\$ 66.71
CAF	8,496	\$ 1.59	\$ -	\$ -	\$ -	\$ -	\$ -	\$ 25.07	\$ 26.66
ACA 19-44	150,902	\$ 4.00	\$ -	\$ -	\$ -	\$ -	\$ -	\$ 22.90	\$ 26.89
ACA 45-54	53,628	\$ 7.99	\$ -	\$ -	\$ -	\$ -	\$ -	\$ 33.01	\$ 41.00
ACA 55-64	51,012	\$ 5.07	\$ -	\$ -	\$ -	\$ -	\$ -	\$ 31.89	\$ 36.97
BCCP	354	\$ 38.31	\$ -	\$ -	\$ -	\$ -	\$ -	\$ 28.39	\$ 66.71
<b>Total</b>	<b>586,817</b>	\$ 6.24	\$ -	\$ -	\$ -	\$ -	\$ -	\$ 24.25	\$ 30.49

<sup>1</sup> Rate Add-Ons are inclusive of a 11.8% non-medical load



# Appendix VI. CCO-F Rate Development Summary (RDS) **Optumas**

## Appendix VI.B: Cascade Health Alliance, LLC.

COA	CY 2015 MMs	Regional	Risk Factor				Breakthrough	ACT/SE <sup>1</sup>	Children's
		Base PMPM	Risk Score	A/B Adjustment	CCO Adjustment	PMPM	Therapy		Wraparound <sup>1</sup>
TANF	12,116	\$ -	-	-	-	\$ -	\$ -	\$ -	\$ -
PLMA	3,828	\$ -	-	-	-	\$ -	\$ -	\$ -	\$ -
CHILD 00-01	6,653	\$ -	-	-	-	\$ -	\$ -	\$ -	\$ -
CHILD 01-05	23,954	\$ -	-	-	-	\$ -	\$ -	\$ -	\$ -
CHILD 06-18	47,670	\$ -	-	-	-	\$ -	\$ -	\$ -	\$ -
ABAD & OAA Duals	8,896	\$ -	-	-	-	\$ -	\$ -	\$ -	\$ -
ABAD & OAA Medicaid Only	11,271	\$ -	-	-	-	\$ -	\$ -	\$ -	\$ -
CAF	3,836	\$ -	-	-	-	\$ -	\$ -	\$ -	\$ -
ACA 19-44	46,975	\$ -	-	-	-	\$ -	\$ -	\$ -	\$ -
ACA 45-54	16,896	\$ -	-	-	-	\$ -	\$ -	\$ -	\$ -
ACA 55-64	14,098	\$ -	-	-	-	\$ -	\$ -	\$ -	\$ -
BCCP	52	\$ -	-	-	-	\$ -	\$ -	\$ -	\$ -
<b>Total</b>	<b>196,245</b>	\$ -				\$ -	\$ -	\$ -	\$ -

COA	CY 2015 MMs	NEMT <sup>1</sup>	CANS <sup>1</sup>	Tier 1 HRA	Tier 1 HRA Admin	Tier 2 HRA	Health Insurer Fee	Dental	CY17 Payment Rate
TANF	12,116	\$ 10.43	\$ -	\$ -	\$ -	\$ -	\$ -	\$ 23.99	\$ 34.42
PLMA	3,828	\$ 4.88	\$ -	\$ -	\$ -	\$ -	\$ -	\$ 18.70	\$ 23.58
CHILD 00-01	6,653	\$ 0.95	\$ -	\$ -	\$ -	\$ -	\$ -	\$ 1.42	\$ 2.36
CHILD 01-05	23,954	\$ 0.63	\$ -	\$ -	\$ -	\$ -	\$ -	\$ 22.38	\$ 23.01
CHILD 06-18	47,670	\$ 1.11	\$ -	\$ -	\$ -	\$ -	\$ -	\$ 22.34	\$ 23.45
ABAD & OAA Duals	8,896	\$ 59.78	\$ -	\$ -	\$ -	\$ -	\$ -	\$ 27.13	\$ 86.91
ABAD & OAA Medicaid Only	11,271	\$ 46.37	\$ -	\$ -	\$ -	\$ -	\$ -	\$ 28.39	\$ 74.76
CAF	3,836	\$ 3.04	\$ -	\$ -	\$ -	\$ -	\$ -	\$ 25.07	\$ 28.11
ACA 19-44	46,975	\$ 14.29	\$ -	\$ -	\$ -	\$ -	\$ -	\$ 22.90	\$ 37.19
ACA 45-54	16,896	\$ 18.98	\$ -	\$ -	\$ -	\$ -	\$ -	\$ 33.01	\$ 51.99
ACA 55-64	14,098	\$ 22.59	\$ -	\$ -	\$ -	\$ -	\$ -	\$ 31.89	\$ 54.48
BCCP	52	\$ 46.37	\$ -	\$ -	\$ -	\$ -	\$ -	\$ 28.39	\$ 74.76
<b>Total</b>	<b>196,245</b>	\$ 13.24	\$ -	\$ -	\$ -	\$ -	\$ -	\$ 24.02	\$ 37.26

<sup>1</sup> Rate Add-Ons are inclusive of a 11.5% non-medical load

# Appendix VI. CCO-F Rate Development Summary (RDS) **Optumas**

## Appendix VI.C: Columbia-Pacific CCO, LLC.

COA	CY 2015 MMs	Regional	Risk Factor				Breakthrough	ACT/SE <sup>1</sup>	Children's
		Base PMPM	Risk Score	A/B Adjustment	CCO Adjustment	PMPM	Therapy		Wraparound <sup>1</sup>
TANF	17,437	\$ -	-	-	-	\$ -	\$ -	\$ -	\$ -
PLMA	5,221	\$ -	-	-	-	\$ -	\$ -	\$ -	\$ -
CHILD 00-01	8,497	\$ -	-	-	-	\$ -	\$ -	\$ -	\$ -
CHILD 01-05	33,251	\$ -	-	-	-	\$ -	\$ -	\$ -	\$ -
CHILD 06-18	74,203	\$ -	-	-	-	\$ -	\$ -	\$ -	\$ -
ABAD & OAA Duals	9,401	\$ -	-	-	-	\$ -	\$ -	\$ -	\$ -
ABAD & OAA Medicaid Only	14,886	\$ -	-	-	-	\$ -	\$ -	\$ -	\$ -
CAF	5,112	\$ -	-	-	-	\$ -	\$ -	\$ -	\$ -
ACA 19-44	76,337	\$ -	-	-	-	\$ -	\$ -	\$ -	\$ -
ACA 45-54	28,729	\$ -	-	-	-	\$ -	\$ -	\$ -	\$ -
ACA 55-64	26,667	\$ -	-	-	-	\$ -	\$ -	\$ -	\$ -
BCCP	195	\$ -	-	-	-	\$ -	\$ -	\$ -	\$ -
<b>Total</b>	<b>299,935</b>	\$ -				\$ -	\$ -	\$ -	\$ -

COA	CY 2015 MMs	NEMT <sup>1</sup>	CANS <sup>1</sup>	Tier 1 HRA	Tier 1 HRA Admin	Tier 2 HRA	Health Insurer Fee	Dental	CY17 Payment Rate
TANF	17,437	\$ 6.97	\$ -	\$ -	\$ -	\$ -	\$ -	\$ 23.99	\$ 30.96
PLMA	5,221	\$ 7.40	\$ -	\$ -	\$ -	\$ -	\$ -	\$ 18.70	\$ 26.10
CHILD 00-01	8,497	\$ 0.48	\$ -	\$ -	\$ -	\$ -	\$ -	\$ 1.42	\$ 1.89
CHILD 01-05	33,251	\$ 0.44	\$ -	\$ -	\$ -	\$ -	\$ -	\$ 22.38	\$ 22.82
CHILD 06-18	74,203	\$ 0.70	\$ -	\$ -	\$ -	\$ -	\$ -	\$ 22.34	\$ 23.03
ABAD & OAA Duals	9,401	\$ 56.83	\$ -	\$ -	\$ -	\$ -	\$ -	\$ 27.13	\$ 83.96
ABAD & OAA Medicaid Only	14,886	\$ 60.68	\$ -	\$ -	\$ -	\$ -	\$ -	\$ 28.39	\$ 89.08
CAF	5,112	\$ 2.52	\$ -	\$ -	\$ -	\$ -	\$ -	\$ 25.07	\$ 27.58
ACA 19-44	76,337	\$ 6.33	\$ -	\$ -	\$ -	\$ -	\$ -	\$ 22.90	\$ 29.23
ACA 45-54	28,729	\$ 12.65	\$ -	\$ -	\$ -	\$ -	\$ -	\$ 33.01	\$ 45.66
ACA 55-64	26,667	\$ 8.04	\$ -	\$ -	\$ -	\$ -	\$ -	\$ 31.89	\$ 39.93
BCCP	195	\$ 60.68	\$ -	\$ -	\$ -	\$ -	\$ -	\$ 28.39	\$ 89.08
<b>Total</b>	<b>299,935</b>	\$ 9.18	\$ -	\$ -	\$ -	\$ -	\$ -	\$ 24.30	\$ 33.48

<sup>1</sup> Rate Add-Ons are inclusive of a 9.7% non-medical load

## Appendix VI. CCO-F Rate Development Summary (RDS) **Optumas**

### Appendix VI.D: Eastern Oregon Coordinated Care Org., LLC.

COA	CY 2015 MMs	Regional	Risk Factor				Breakthrough	ACT/SE <sup>1</sup>	Children's
		Base PMPM	Risk Score	A/B Adjustment	CCO Adjustment	PMPM	Therapy		Wraparound <sup>1</sup>
TANF	35,140	\$ -	-	-	-	\$ -	\$ -	\$ -	\$ -
PLMA	10,728	\$ -	-	-	-	\$ -	\$ -	\$ -	\$ -
CHILD 00-01	19,960	\$ -	-	-	-	\$ -	\$ -	\$ -	\$ -
CHILD 01-05	79,747	\$ -	-	-	-	\$ -	\$ -	\$ -	\$ -
CHILD 06-18	166,877	\$ -	-	-	-	\$ -	\$ -	\$ -	\$ -
ABAD & OAA Duals	19,203	\$ -	-	-	-	\$ -	\$ -	\$ -	\$ -
ABAD & OAA Medicaid Only	27,719	\$ -	-	-	-	\$ -	\$ -	\$ -	\$ -
CAF	8,679	\$ -	-	-	-	\$ -	\$ -	\$ -	\$ -
ACA 19-44	120,655	\$ -	-	-	-	\$ -	\$ -	\$ -	\$ -
ACA 45-54	41,610	\$ -	-	-	-	\$ -	\$ -	\$ -	\$ -
ACA 55-64	37,243	\$ -	-	-	-	\$ -	\$ -	\$ -	\$ -
BCCP	227	\$ -	-	-	-	\$ -	\$ -	\$ -	\$ -
<b>Total</b>	<b>567,788</b>	\$ -				\$ -	\$ -	\$ -	\$ -

COA	CY 2015 MMs	NEMT <sup>1</sup>	CANS <sup>1</sup>	Tier 1 HRA	Tier 1 HRA Admin	Tier 2 HRA	Health Insurer Fee	Dental	CY17 Payment Rate
TANF	35,140	\$ 10.77	\$ -	\$ -	\$ -	\$ -	\$ -	\$ 23.99	\$ 34.76
PLMA	10,728	\$ 4.93	\$ -	\$ -	\$ -	\$ -	\$ -	\$ 18.70	\$ 23.63
CHILD 00-01	19,960	\$ 0.73	\$ -	\$ -	\$ -	\$ -	\$ -	\$ 1.42	\$ 2.15
CHILD 01-05	79,747	\$ 0.72	\$ -	\$ -	\$ -	\$ -	\$ -	\$ 22.38	\$ 23.10
CHILD 06-18	166,877	\$ 1.12	\$ -	\$ -	\$ -	\$ -	\$ -	\$ 22.34	\$ 23.45
ABAD & OAA Duals	19,203	\$ 69.41	\$ -	\$ -	\$ -	\$ -	\$ -	\$ 27.13	\$ 96.54
ABAD & OAA Medicaid Only	27,719	\$ 52.86	\$ -	\$ -	\$ -	\$ -	\$ -	\$ 28.39	\$ 81.25
CAF	8,679	\$ 3.61	\$ -	\$ -	\$ -	\$ -	\$ -	\$ 25.07	\$ 28.68
ACA 19-44	120,655	\$ 16.67	\$ -	\$ -	\$ -	\$ -	\$ -	\$ 22.90	\$ 39.57
ACA 45-54	41,610	\$ 20.89	\$ -	\$ -	\$ -	\$ -	\$ -	\$ 33.01	\$ 53.90
ACA 55-64	37,243	\$ 25.37	\$ -	\$ -	\$ -	\$ -	\$ -	\$ 31.89	\$ 57.26
BCCP	227	\$ 52.86	\$ -	\$ -	\$ -	\$ -	\$ -	\$ 28.39	\$ 81.25
<b>Total</b>	<b>567,788</b>	\$ 12.96	\$ -	\$ -	\$ -	\$ -	\$ -	\$ 23.67	\$ 36.63

<sup>1</sup> Rate Add-Ons are inclusive of a 11.5% non-medical load

# Appendix VI. CCO-F Rate Development Summary (RDS) **Optumas**

## Appendix VI.E: FamilyCare, Inc.

COA	CY 2015 MMs	Regional	Risk Factor				Breakthrough	ACT/SE <sup>1</sup>	Children's
		Base PMPM	Risk Score	A/B Adjustment	CCO Adjustment	PMPM	Therapy		Wraparound <sup>1</sup>
TANF	81,512	\$ -	-	-	-	\$ -	\$ -	\$ -	\$ -
PLMA	31,363	\$ -	-	-	-	\$ -	\$ -	\$ -	\$ -
CHILD 00-01	51,492	\$ -	-	-	-	\$ -	\$ -	\$ -	\$ -
CHILD 01-05	171,505	\$ -	-	-	-	\$ -	\$ -	\$ -	\$ -
CHILD 06-18	335,194	\$ -	-	-	-	\$ -	\$ -	\$ -	\$ -
ABAD & OAA Duals	27,114	\$ -	-	-	-	\$ -	\$ -	\$ -	\$ -
ABAD & OAA Medicaid Only	35,750	\$ -	-	-	-	\$ -	\$ -	\$ -	\$ -
CAF	18,916	\$ -	-	-	-	\$ -	\$ -	\$ -	\$ -
ACA 19-44	473,722	\$ -	-	-	-	\$ -	\$ -	\$ -	\$ -
ACA 45-54	127,549	\$ -	-	-	-	\$ -	\$ -	\$ -	\$ -
ACA 55-64	101,009	\$ -	-	-	-	\$ -	\$ -	\$ -	\$ -
BCCP	916	\$ -	-	-	-	\$ -	\$ -	\$ -	\$ -
<b>Total</b>	<b>1,456,042</b>	\$ -				\$ -	\$ -	\$ -	\$ -

COA	CY 2015 MMs	NEMT <sup>1</sup>	CANS <sup>1</sup>	Tier 1 HRA	Tier 1 HRA Admin	Tier 2 HRA	Health Insurer Fee	Dental	CY17 Payment Rate
TANF	81,512	\$ 7.53	\$ -	\$ -	\$ -	\$ -	\$ -	\$ 30.30	\$ 37.82
PLMA	31,363	\$ 7.36	\$ -	\$ -	\$ -	\$ -	\$ -	\$ 25.18	\$ 32.53
CHILD 00-01	51,492	\$ 0.40	\$ -	\$ -	\$ -	\$ -	\$ -	\$ 0.87	\$ 1.27
CHILD 01-05	171,505	\$ 0.19	\$ -	\$ -	\$ -	\$ -	\$ -	\$ 23.72	\$ 23.91
CHILD 06-18	335,194	\$ 0.41	\$ -	\$ -	\$ -	\$ -	\$ -	\$ 26.39	\$ 26.80
ABAD & OAA Duals	27,114	\$ 40.54	\$ -	\$ -	\$ -	\$ -	\$ -	\$ 35.19	\$ 75.73
ABAD & OAA Medicaid Only	35,750	\$ 44.95	\$ -	\$ -	\$ -	\$ -	\$ -	\$ 34.07	\$ 79.02
CAF	18,916	\$ 2.42	\$ -	\$ -	\$ -	\$ -	\$ -	\$ 26.90	\$ 29.32
ACA 19-44	473,722	\$ 8.04	\$ -	\$ -	\$ -	\$ -	\$ -	\$ 29.46	\$ 37.50
ACA 45-54	127,549	\$ 13.30	\$ -	\$ -	\$ -	\$ -	\$ -	\$ 44.30	\$ 57.60
ACA 55-64	101,009	\$ 10.09	\$ -	\$ -	\$ -	\$ -	\$ -	\$ 43.99	\$ 54.08
BCCP	916	\$ 44.95	\$ -	\$ -	\$ -	\$ -	\$ -	\$ 34.07	\$ 79.02
<b>Total</b>	<b>1,456,042</b>	<b>\$ 7.11</b>	<b>\$ -</b>	<b>\$ -</b>	<b>\$ -</b>	<b>\$ -</b>	<b>\$ -</b>	<b>\$ 29.52</b>	<b>\$ 36.63</b>

<sup>1</sup> Rate Add-Ons are inclusive of a 10.1% non-medical load

# Appendix VI. CCO-F Rate Development Summary (RDS) **Optumas**

## Appendix VI.F: Health Share of Oregon

COA	CY 2015 MMs	Regional	Risk Factor				Breakthrough	ACT/SE <sup>1</sup>	Children's
		Base PMPM	Risk Score	A/B Adjustment	CCO Adjustment	PMPM	Therapy		Wraparound <sup>1</sup>
TANF	138,371	\$ -	-	-	-	\$ -	\$ -	\$ -	\$ -
PLMA	43,468	\$ -	-	-	-	\$ -	\$ -	\$ -	\$ -
CHILD 00-01	71,377	\$ -	-	-	-	\$ -	\$ -	\$ -	\$ -
CHILD 01-05	311,494	\$ -	-	-	-	\$ -	\$ -	\$ -	\$ -
CHILD 06-18	740,685	\$ -	-	-	-	\$ -	\$ -	\$ -	\$ -
ABAD & OAA Duals	197,759	\$ -	-	-	-	\$ -	\$ -	\$ -	\$ -
ABAD & OAA Medicaid Only	167,576	\$ -	-	-	-	\$ -	\$ -	\$ -	\$ -
CAF	33,833	\$ -	-	-	-	\$ -	\$ -	\$ -	\$ -
ACA 19-44	704,231	\$ -	-	-	-	\$ -	\$ -	\$ -	\$ -
ACA 45-54	211,360	\$ -	-	-	-	\$ -	\$ -	\$ -	\$ -
ACA 55-64	171,210	\$ -	-	-	-	\$ -	\$ -	\$ -	\$ -
BCCP	747	\$ -	-	-	-	\$ -	\$ -	\$ -	\$ -
<b>Total</b>	<b>2,792,111</b>	\$ -				\$ -	\$ -	\$ -	\$ -

COA	CY 2015 MMs	NEMT <sup>1</sup>	CANS <sup>1</sup>	Tier 1 HRA	Tier 1 HRA Admin	Tier 2 HRA	Health Insurer Fee	Dental	CY17 Payment Rate
TANF	138,371	\$ 6.95	\$ -	\$ -	\$ -	\$ -	\$ -	\$ 30.30	\$ 37.25
PLMA	43,468	\$ 6.01	\$ -	\$ -	\$ -	\$ -	\$ -	\$ 25.18	\$ 31.19
CHILD 00-01	71,377	\$ 0.75	\$ -	\$ -	\$ -	\$ -	\$ -	\$ 0.87	\$ 1.62
CHILD 01-05	311,494	\$ 0.38	\$ -	\$ -	\$ -	\$ -	\$ -	\$ 23.72	\$ 24.10
CHILD 06-18	740,685	\$ 0.49	\$ -	\$ -	\$ -	\$ -	\$ -	\$ 26.39	\$ 26.89
ABAD & OAA Duals	197,759	\$ 62.13	\$ -	\$ -	\$ -	\$ -	\$ -	\$ 35.19	\$ 97.32
ABAD & OAA Medicaid Only	167,576	\$ 48.55	\$ -	\$ -	\$ -	\$ -	\$ -	\$ 34.07	\$ 82.63
CAF	33,833	\$ 4.54	\$ -	\$ -	\$ -	\$ -	\$ -	\$ 26.90	\$ 31.44
ACA 19-44	704,231	\$ 3.78	\$ -	\$ -	\$ -	\$ -	\$ -	\$ 29.46	\$ 33.24
ACA 45-54	211,360	\$ 8.38	\$ -	\$ -	\$ -	\$ -	\$ -	\$ 44.30	\$ 52.68
ACA 55-64	171,210	\$ 6.34	\$ -	\$ -	\$ -	\$ -	\$ -	\$ 43.99	\$ 50.33
BCCP	747	\$ 48.55	\$ -	\$ -	\$ -	\$ -	\$ -	\$ 34.07	\$ 82.63
<b>Total</b>	<b>2,792,111</b>	\$ 9.99	\$ -	\$ -	\$ -	\$ -	\$ -	\$ 29.92	\$ 39.91

<sup>1</sup> Rate Add-Ons are inclusive of a 10.1% non-medical load

# Appendix VI. CCO-F Rate Development Summary (RDS) **Optumas**

## Appendix VI.G: InterCommunity Health Network, Inc.

COA	CY 2015 MMs	Regional	Risk Factor				Breakthrough	ACT/SE <sup>1</sup>	Children's
		Base PMPM	Risk Score	A/B Adjustment	CCO Adjustment	PMPM	Therapy		Wraparound <sup>1</sup>
TANF	37,242	\$ -	-	-	-	\$ -	\$ -	\$ -	\$ -
PLMA	11,402	\$ -	-	-	-	\$ -	\$ -	\$ -	\$ -
CHILD 00-01	19,126	\$ -	-	-	-	\$ -	\$ -	\$ -	\$ -
CHILD 01-05	74,130	\$ -	-	-	-	\$ -	\$ -	\$ -	\$ -
CHILD 06-18	161,389	\$ -	-	-	-	\$ -	\$ -	\$ -	\$ -
ABAD & OAA Duals	31,670	\$ -	-	-	-	\$ -	\$ -	\$ -	\$ -
ABAD & OAA Medicaid Only	37,543	\$ -	-	-	-	\$ -	\$ -	\$ -	\$ -
CAF	9,998	\$ -	-	-	-	\$ -	\$ -	\$ -	\$ -
ACA 19-44	172,948	\$ -	-	-	-	\$ -	\$ -	\$ -	\$ -
ACA 45-54	54,224	\$ -	-	-	-	\$ -	\$ -	\$ -	\$ -
ACA 55-64	48,668	\$ -	-	-	-	\$ -	\$ -	\$ -	\$ -
BCCP	237	\$ -	-	-	-	\$ -	\$ -	\$ -	\$ -
<b>Total</b>	<b>658,578</b>	\$ -				\$ -	\$ -	\$ -	\$ -

COA	CY 2015 MMs	NEMT <sup>1</sup>	CANS <sup>1</sup>	Tier 1 HRA	Tier 1 HRA Admin	Tier 2 HRA	Health Insurer Fee	Dental	CY17 Payment Rate
TANF	37,242	\$ 10.54	\$ -	\$ -	\$ -	\$ -	\$ -	\$ 23.99	\$ 34.52
PLMA	11,402	\$ 11.19	\$ -	\$ -	\$ -	\$ -	\$ -	\$ 18.70	\$ 29.88
CHILD 00-01	19,126	\$ 0.72	\$ -	\$ -	\$ -	\$ -	\$ -	\$ 1.42	\$ 2.14
CHILD 01-05	74,130	\$ 0.67	\$ -	\$ -	\$ -	\$ -	\$ -	\$ 22.38	\$ 23.05
CHILD 06-18	161,389	\$ 1.06	\$ -	\$ -	\$ -	\$ -	\$ -	\$ 22.34	\$ 23.39
ABAD & OAA Duals	31,670	\$ 85.91	\$ -	\$ -	\$ -	\$ -	\$ -	\$ 27.13	\$ 113.04
ABAD & OAA Medicaid Only	37,543	\$ 91.74	\$ -	\$ -	\$ -	\$ -	\$ -	\$ 28.39	\$ 120.13
CAF	9,998	\$ 3.80	\$ -	\$ -	\$ -	\$ -	\$ -	\$ 25.07	\$ 28.87
ACA 19-44	172,948	\$ 9.57	\$ -	\$ -	\$ -	\$ -	\$ -	\$ 22.90	\$ 32.47
ACA 45-54	54,224	\$ 19.13	\$ -	\$ -	\$ -	\$ -	\$ -	\$ 33.01	\$ 52.14
ACA 55-64	48,668	\$ 12.15	\$ -	\$ -	\$ -	\$ -	\$ -	\$ 31.89	\$ 44.04
BCCP	237	\$ 91.74	\$ -	\$ -	\$ -	\$ -	\$ -	\$ 28.39	\$ 120.13
<b>Total</b>	<b>658,578</b>	<b>\$ 15.58</b>	<b>\$ -</b>	<b>\$ -</b>	<b>\$ -</b>	<b>\$ -</b>	<b>\$ -</b>	<b>\$ 24.12</b>	<b>\$ 39.70</b>

<sup>1</sup> Rate Add-Ons are inclusive of a 9.7% non-medical load

# Appendix VI. CCO-F Rate Development Summary (RDS) **Optumas**

## Appendix VI.H: Jackson County CCO, LLC.

COA	CY 2015 MMs	Regional	Risk Factor				Breakthrough	ACT/SE <sup>1</sup>	Children's
		Base PMPM	Risk Score	A/B Adjustment	CCO Adjustment	PMPM	Therapy		Wraparound <sup>1</sup>
TANF	19,577	\$ -	-	-	-	\$ -	\$ -	\$ -	\$ -
PLMA	5,637	\$ -	-	-	-	\$ -	\$ -	\$ -	\$ -
CHILD 00-01	9,401	\$ -	-	-	-	\$ -	\$ -	\$ -	\$ -
CHILD 01-05	40,414	\$ -	-	-	-	\$ -	\$ -	\$ -	\$ -
CHILD 06-18	97,699	\$ -	-	-	-	\$ -	\$ -	\$ -	\$ -
ABAD & OAA Duals	13,179	\$ -	-	-	-	\$ -	\$ -	\$ -	\$ -
ABAD & OAA Medicaid Only	16,823	\$ -	-	-	-	\$ -	\$ -	\$ -	\$ -
CAF	6,353	\$ -	-	-	-	\$ -	\$ -	\$ -	\$ -
ACA 19-44	87,059	\$ -	-	-	-	\$ -	\$ -	\$ -	\$ -
ACA 45-54	28,687	\$ -	-	-	-	\$ -	\$ -	\$ -	\$ -
ACA 55-64	25,043	\$ -	-	-	-	\$ -	\$ -	\$ -	\$ -
BCCP	290	\$ -	-	-	-	\$ -	\$ -	\$ -	\$ -
<b>Total</b>	<b>350,162</b>	\$ -				\$ -	\$ -	\$ -	\$ -

COA	CY 2015 MMs	NEMT <sup>1</sup>	CANS <sup>1</sup>	Tier 1 HRA	Tier 1 HRA Admin	Tier 2 HRA	Health Insurer Fee	Dental	CY17 Payment Rate
TANF	19,577	\$ 3.66	\$ -	\$ -	\$ -	\$ -	\$ -	\$ 23.99	\$ 27.65
PLMA	5,637	\$ 3.89	\$ -	\$ -	\$ -	\$ -	\$ -	\$ 18.70	\$ 22.59
CHILD 00-01	9,401	\$ 0.25	\$ -	\$ -	\$ -	\$ -	\$ -	\$ 1.42	\$ 1.67
CHILD 01-05	40,414	\$ 0.23	\$ -	\$ -	\$ -	\$ -	\$ -	\$ 22.38	\$ 22.61
CHILD 06-18	97,699	\$ 0.37	\$ -	\$ -	\$ -	\$ -	\$ -	\$ 22.34	\$ 22.70
ABAD & OAA Duals	13,179	\$ 29.87	\$ -	\$ -	\$ -	\$ -	\$ -	\$ 27.13	\$ 57.00
ABAD & OAA Medicaid Only	16,823	\$ 31.90	\$ -	\$ -	\$ -	\$ -	\$ -	\$ 28.39	\$ 60.29
CAF	6,353	\$ 1.32	\$ -	\$ -	\$ -	\$ -	\$ -	\$ 25.07	\$ 26.39
ACA 19-44	87,059	\$ 3.33	\$ -	\$ -	\$ -	\$ -	\$ -	\$ 22.90	\$ 26.22
ACA 45-54	28,687	\$ 6.65	\$ -	\$ -	\$ -	\$ -	\$ -	\$ 33.01	\$ 39.66
ACA 55-64	25,043	\$ 4.22	\$ -	\$ -	\$ -	\$ -	\$ -	\$ 31.89	\$ 36.12
BCCP	290	\$ 31.90	\$ -	\$ -	\$ -	\$ -	\$ -	\$ 28.39	\$ 60.29
<b>Total</b>	<b>350,162</b>	\$ 4.78	\$ -	\$ -	\$ -	\$ -	\$ -	\$ 24.04	\$ 28.82

<sup>1</sup> Rate Add-Ons are inclusive of a 11.8% non-medical load

# Appendix VI. CCO-F Rate Development Summary (RDS) **Optumas**

## Appendix VI.I: PacificSource Community Solutions, Inc. (Central)

COA	CY 2015 MMs	Regional	Risk Factor				Breakthrough	ACT/SE <sup>1</sup>	Children's
		Base PMPM	Risk Score	A/B Adjustment	CCO Adjustment	PMPM	Therapy		Wraparound <sup>1</sup>
TANF	37,593	\$ -	-	-	-	\$ -	\$ -	\$ -	\$ -
PLMA	10,676	\$ -	-	-	-	\$ -	\$ -	\$ -	\$ -
CHILD 00-01	19,035	\$ -	-	-	-	\$ -	\$ -	\$ -	\$ -
CHILD 01-05	70,368	\$ -	-	-	-	\$ -	\$ -	\$ -	\$ -
CHILD 06-18	172,046	\$ -	-	-	-	\$ -	\$ -	\$ -	\$ -
ABAD & OAA Duals	25,538	\$ -	-	-	-	\$ -	\$ -	\$ -	\$ -
ABAD & OAA Medicaid Only	22,804	\$ -	-	-	-	\$ -	\$ -	\$ -	\$ -
CAF	6,955	\$ -	-	-	-	\$ -	\$ -	\$ -	\$ -
ACA 19-44	164,445	\$ -	-	-	-	\$ -	\$ -	\$ -	\$ -
ACA 45-54	54,291	\$ -	-	-	-	\$ -	\$ -	\$ -	\$ -
ACA 55-64	48,275	\$ -	-	-	-	\$ -	\$ -	\$ -	\$ -
BCCP	550	\$ -	-	-	-	\$ -	\$ -	\$ -	\$ -
<b>Total</b>	<b>632,577</b>	\$ -				\$ -	\$ -	\$ -	\$ -

COA	CY 2015 MMs	NEMT <sup>1</sup>	CANS <sup>1</sup>	Tier 1 HRA	Tier 1 HRA Admin	Tier 2 HRA	Health Insurer Fee	Dental	CY17 Payment Rate
TANF	37,593	\$ 6.06	\$ -	\$ -	\$ -	\$ -	\$ -	\$ 23.99	\$ 30.05
PLMA	10,676	\$ 6.43	\$ -	\$ -	\$ -	\$ -	\$ -	\$ 18.70	\$ 25.13
CHILD 00-01	19,035	\$ 0.42	\$ -	\$ -	\$ -	\$ -	\$ -	\$ 1.42	\$ 1.83
CHILD 01-05	70,368	\$ 0.39	\$ -	\$ -	\$ -	\$ -	\$ -	\$ 22.38	\$ 22.77
CHILD 06-18	172,046	\$ 0.61	\$ -	\$ -	\$ -	\$ -	\$ -	\$ 22.34	\$ 22.94
ABAD & OAA Duals	25,538	\$ 49.40	\$ -	\$ -	\$ -	\$ -	\$ -	\$ 27.13	\$ 76.53
ABAD & OAA Medicaid Only	22,804	\$ 52.76	\$ -	\$ -	\$ -	\$ -	\$ -	\$ 28.39	\$ 81.15
CAF	6,955	\$ 2.19	\$ -	\$ -	\$ -	\$ -	\$ -	\$ 25.07	\$ 27.25
ACA 19-44	164,445	\$ 5.50	\$ -	\$ -	\$ -	\$ -	\$ -	\$ 22.90	\$ 28.40
ACA 45-54	54,291	\$ 11.00	\$ -	\$ -	\$ -	\$ -	\$ -	\$ 33.01	\$ 44.01
ACA 55-64	48,275	\$ 6.99	\$ -	\$ -	\$ -	\$ -	\$ -	\$ 31.89	\$ 38.88
BCCP	550	\$ 52.76	\$ -	\$ -	\$ -	\$ -	\$ -	\$ 28.39	\$ 81.15
<b>Total</b>	<b>632,577</b>	\$ 7.56	\$ -	\$ -	\$ -	\$ -	\$ -	\$ 23.99	\$ 31.55

<sup>1</sup> Rate Add-Ons are inclusive of a 11.5% non-medical load



## Appendix VI. CCO-F Rate Development Summary (RDS) **Optumas**

### Appendix VI.J: PacificSource Community Solutions, Inc. (Gorge)

COA	CY 2015 MMs	Regional	Risk Factor				Breakthrough	ACT/SE <sup>1</sup>	Children's
		Base PMPM	Risk Score	A/B Adjustment	CCO Adjustment	PMPM	Therapy		Wraparound <sup>1</sup>
TANF	6,934	\$ -	-	-	-	\$ -	\$ -	\$ -	\$ -
PLMA	2,995	\$ -	-	-	-	\$ -	\$ -	\$ -	\$ -
CHILD 00-01	5,073	\$ -	-	-	-	\$ -	\$ -	\$ -	\$ -
CHILD 01-05	20,443	\$ -	-	-	-	\$ -	\$ -	\$ -	\$ -
CHILD 06-18	47,576	\$ -	-	-	-	\$ -	\$ -	\$ -	\$ -
ABAD & OAA Duals	4,049	\$ -	-	-	-	\$ -	\$ -	\$ -	\$ -
ABAD & OAA Medicaid Only	5,753	\$ -	-	-	-	\$ -	\$ -	\$ -	\$ -
CAF	2,571	\$ -	-	-	-	\$ -	\$ -	\$ -	\$ -
ACA 19-44	34,571	\$ -	-	-	-	\$ -	\$ -	\$ -	\$ -
ACA 45-54	12,849	\$ -	-	-	-	\$ -	\$ -	\$ -	\$ -
ACA 55-64	11,136	\$ -	-	-	-	\$ -	\$ -	\$ -	\$ -
BCCP	95	\$ -	-	-	-	\$ -	\$ -	\$ -	\$ -
<b>Total</b>	<b>154,046</b>	\$ -				\$ -	\$ -	\$ -	\$ -

COA	CY 2015 MMs	NEMT <sup>1</sup>	CANS <sup>1</sup>	Tier 1 HRA	Tier 1 HRA Admin	Tier 2 HRA	Health Insurer Fee	Dental	CY17 Payment Rate
TANF	6,934	\$ 3.27	\$ -	\$ -	\$ -	\$ -	\$ -	\$ 23.99	\$ 27.26
PLMA	2,995	\$ 3.47	\$ -	\$ -	\$ -	\$ -	\$ -	\$ 18.70	\$ 22.17
CHILD 00-01	5,073	\$ 0.22	\$ -	\$ -	\$ -	\$ -	\$ -	\$ 1.42	\$ 1.64
CHILD 01-05	20,443	\$ 0.21	\$ -	\$ -	\$ -	\$ -	\$ -	\$ 22.38	\$ 22.59
CHILD 06-18	47,576	\$ 0.33	\$ -	\$ -	\$ -	\$ -	\$ -	\$ 22.34	\$ 22.66
ABAD & OAA Duals	4,049	\$ 26.66	\$ -	\$ -	\$ -	\$ -	\$ -	\$ 27.13	\$ 53.79
ABAD & OAA Medicaid Only	5,753	\$ 28.47	\$ -	\$ -	\$ -	\$ -	\$ -	\$ 28.39	\$ 56.86
CAF	2,571	\$ 1.18	\$ -	\$ -	\$ -	\$ -	\$ -	\$ 25.07	\$ 26.25
ACA 19-44	34,571	\$ 2.97	\$ -	\$ -	\$ -	\$ -	\$ -	\$ 22.90	\$ 25.87
ACA 45-54	12,849	\$ 5.94	\$ -	\$ -	\$ -	\$ -	\$ -	\$ 33.01	\$ 38.95
ACA 55-64	11,136	\$ 3.77	\$ -	\$ -	\$ -	\$ -	\$ -	\$ 31.89	\$ 35.66
BCCP	95	\$ 28.47	\$ -	\$ -	\$ -	\$ -	\$ -	\$ 28.39	\$ 56.86
<b>Total</b>	<b>154,046</b>	\$ 3.59	\$ -	\$ -	\$ -	\$ -	\$ -	\$ 23.77	\$ 27.35

<sup>1</sup> Rate Add-Ons are inclusive of a 11.5% non-medical load

# Appendix VI. CCO-F Rate Development Summary (RDS) **Optumas**

## Appendix VI.K: Primary Health of Josephine County, LLC

COA	CY 2015 MMs	Regional	Risk Factor				Breakthrough	ACT/SE <sup>1</sup>	Children's
		Base PMPM	Risk Score	A/B Adjustment	CCO Adjustment	PMPM	Therapy		Wraparound <sup>1</sup>
TANF	7,942	\$ -	-	-	-	\$ -	\$ -	\$ -	\$ -
PLMA	2,556	\$ -	-	-	-	\$ -	\$ -	\$ -	\$ -
CHILD 00-01	3,267	\$ -	-	-	-	\$ -	\$ -	\$ -	\$ -
CHILD 01-05	11,458	\$ -	-	-	-	\$ -	\$ -	\$ -	\$ -
CHILD 06-18	29,617	\$ -	-	-	-	\$ -	\$ -	\$ -	\$ -
ABAD & OAA Duals	6,081	\$ -	-	-	-	\$ -	\$ -	\$ -	\$ -
ABAD & OAA Medicaid Only	6,999	\$ -	-	-	-	\$ -	\$ -	\$ -	\$ -
CAF	2,176	\$ -	-	-	-	\$ -	\$ -	\$ -	\$ -
ACA 19-44	36,261	\$ -	-	-	-	\$ -	\$ -	\$ -	\$ -
ACA 45-54	14,252	\$ -	-	-	-	\$ -	\$ -	\$ -	\$ -
ACA 55-64	14,043	\$ -	-	-	-	\$ -	\$ -	\$ -	\$ -
BCCP	122	\$ -	-	-	-	\$ -	\$ -	\$ -	\$ -
<b>Total</b>	<b>134,771</b>	\$ -				\$ -	\$ -	\$ -	\$ -

COA	CY 2015 MMs	NEMT <sup>1</sup>	CANS <sup>1</sup>	Tier 1 HRA	Tier 1 HRA Admin	Tier 2 HRA	Health Insurer Fee	Dental	CY17 Payment Rate
TANF	7,942	\$ 3.77	\$ -	\$ -	\$ -	\$ -	\$ -	\$ 23.99	\$ 27.76
PLMA	2,556	\$ 4.01	\$ -	\$ -	\$ -	\$ -	\$ -	\$ 18.70	\$ 22.70
CHILD 00-01	3,267	\$ 0.26	\$ -	\$ -	\$ -	\$ -	\$ -	\$ 1.42	\$ 1.67
CHILD 01-05	11,458	\$ 0.24	\$ -	\$ -	\$ -	\$ -	\$ -	\$ 22.38	\$ 22.62
CHILD 06-18	29,617	\$ 0.38	\$ -	\$ -	\$ -	\$ -	\$ -	\$ 22.34	\$ 22.71
ABAD & OAA Duals	6,081	\$ 30.77	\$ -	\$ -	\$ -	\$ -	\$ -	\$ 27.13	\$ 57.90
ABAD & OAA Medicaid Only	6,999	\$ 32.85	\$ -	\$ -	\$ -	\$ -	\$ -	\$ 28.39	\$ 61.25
CAF	2,176	\$ 1.36	\$ -	\$ -	\$ -	\$ -	\$ -	\$ 25.07	\$ 26.43
ACA 19-44	36,261	\$ 3.43	\$ -	\$ -	\$ -	\$ -	\$ -	\$ 22.90	\$ 26.32
ACA 45-54	14,252	\$ 6.85	\$ -	\$ -	\$ -	\$ -	\$ -	\$ 33.01	\$ 39.86
ACA 55-64	14,043	\$ 4.35	\$ -	\$ -	\$ -	\$ -	\$ -	\$ 31.89	\$ 36.24
BCCP	122	\$ 32.85	\$ -	\$ -	\$ -	\$ -	\$ -	\$ 28.39	\$ 61.25
<b>Total</b>	<b>134,771</b>	\$ 5.65	\$ -	\$ -	\$ -	\$ -	\$ -	\$ 24.72	\$ 30.37

<sup>1</sup> Rate Add-Ons are inclusive of a 11.8% non-medical load

## Appendix VI. CCO-F Rate Development Summary (RDS) **Optumas**

### Appendix VI.L: Trillium Community Health Plan, Inc.

COA	CY 2015 MMs	Regional	Risk Factor				Breakthrough	ACT/SE <sup>1</sup>	Children's
		Base PMPM	Risk Score	A/B Adjustment	CCO Adjustment	PMPM	Therapy		Wraparound <sup>1</sup>
TANF	57,779	\$ -	-	-	-	\$ -	\$ -	\$ -	\$ -
PLMA	20,080	\$ -	-	-	-	\$ -	\$ -	\$ -	\$ -
CHILD 00-01	29,600	\$ -	-	-	-	\$ -	\$ -	\$ -	\$ -
CHILD 01-05	107,817	\$ -	-	-	-	\$ -	\$ -	\$ -	\$ -
CHILD 06-18	245,824	\$ -	-	-	-	\$ -	\$ -	\$ -	\$ -
ABAD & OAA Duals	49,880	\$ -	-	-	-	\$ -	\$ -	\$ -	\$ -
ABAD & OAA Medicaid Only	65,231	\$ -	-	-	-	\$ -	\$ -	\$ -	\$ -
CAF	24,757	\$ -	-	-	-	\$ -	\$ -	\$ -	\$ -
ACA 19-44	301,144	\$ -	-	-	-	\$ -	\$ -	\$ -	\$ -
ACA 45-54	89,008	\$ -	-	-	-	\$ -	\$ -	\$ -	\$ -
ACA 55-64	79,765	\$ -	-	-	-	\$ -	\$ -	\$ -	\$ -
BCCP	514	\$ -	-	-	-	\$ -	\$ -	\$ -	\$ -
<b>Total</b>	<b>1,071,399</b>	\$ -				\$ -	\$ -	\$ -	\$ -

COA	CY 2015 MMs	NEMT <sup>1</sup>	CANS <sup>1</sup>	Tier 1 HRA	Tier 1 HRA Admin	Tier 2 HRA	Health Insurer Fee	Dental	CY17 Payment Rate
TANF	57,779	\$ 5.50	\$ -	\$ -	\$ -	\$ -	\$ -	\$ 23.99	\$ 29.49
PLMA	20,080	\$ 5.84	\$ -	\$ -	\$ -	\$ -	\$ -	\$ 18.70	\$ 24.54
CHILD 00-01	29,600	\$ 0.38	\$ -	\$ -	\$ -	\$ -	\$ -	\$ 1.42	\$ 1.79
CHILD 01-05	107,817	\$ 0.35	\$ -	\$ -	\$ -	\$ -	\$ -	\$ 22.38	\$ 22.73
CHILD 06-18	245,824	\$ 0.55	\$ -	\$ -	\$ -	\$ -	\$ -	\$ 22.34	\$ 22.89
ABAD & OAA Duals	49,880	\$ 44.87	\$ -	\$ -	\$ -	\$ -	\$ -	\$ 27.13	\$ 72.00
ABAD & OAA Medicaid Only	65,231	\$ 47.92	\$ -	\$ -	\$ -	\$ -	\$ -	\$ 28.39	\$ 76.31
CAF	24,757	\$ 1.99	\$ -	\$ -	\$ -	\$ -	\$ -	\$ 25.07	\$ 27.05
ACA 19-44	301,144	\$ 5.00	\$ -	\$ -	\$ -	\$ -	\$ -	\$ 22.90	\$ 27.90
ACA 45-54	89,008	\$ 9.99	\$ -	\$ -	\$ -	\$ -	\$ -	\$ 33.01	\$ 43.00
ACA 55-64	79,765	\$ 6.35	\$ -	\$ -	\$ -	\$ -	\$ -	\$ 31.89	\$ 38.24
BCCP	514	\$ 47.92	\$ -	\$ -	\$ -	\$ -	\$ -	\$ 28.39	\$ 76.31
<b>Total</b>	<b>1,071,399</b>	\$ 8.36	\$ -	\$ -	\$ -	\$ -	\$ -	\$ 24.20	\$ 32.56

<sup>1</sup> Rate Add-Ons are inclusive of a 11.8% non-medical load

# Appendix VI. CCO-F Rate Development Summary (RDS) **Optumas**

## Appendix VI.M: DCIPA, LLC. Abn Umpqua Health Alliance

COA	CY 2015 MMs	Regional	Risk Factor				Breakthrough	ACT/SE <sup>1</sup>	Children's
		Base PMPM	Risk Score	A/B Adjustment	CCO Adjustment	PMPM	Therapy		Wraparound <sup>1</sup>
TANF	20,416	\$ -	-	-	-	\$ -	\$ -	\$ -	\$ -
PLMA	5,376	\$ -	-	-	-	\$ -	\$ -	\$ -	\$ -
CHILD 00-01	8,818	\$ -	-	-	-	\$ -	\$ -	\$ -	\$ -
CHILD 01-05	32,205	\$ -	-	-	-	\$ -	\$ -	\$ -	\$ -
CHILD 06-18	70,266	\$ -	-	-	-	\$ -	\$ -	\$ -	\$ -
ABAD & OAA Duals	18,343	\$ -	-	-	-	\$ -	\$ -	\$ -	\$ -
ABAD & OAA Medicaid Only	18,401	\$ -	-	-	-	\$ -	\$ -	\$ -	\$ -
CAF	6,740	\$ -	-	-	-	\$ -	\$ -	\$ -	\$ -
ACA 19-44	80,000	\$ -	-	-	-	\$ -	\$ -	\$ -	\$ -
ACA 45-54	27,667	\$ -	-	-	-	\$ -	\$ -	\$ -	\$ -
ACA 55-64	25,376	\$ -	-	-	-	\$ -	\$ -	\$ -	\$ -
BCCP	197	\$ -	-	-	-	\$ -	\$ -	\$ -	\$ -
<b>Total</b>	<b>313,807</b>	\$ -				\$ -	\$ -	\$ -	\$ -

COA	CY 2015 MMs	NEMT <sup>1</sup>	CANS <sup>1</sup>	Tier 1 HRA	Tier 1 HRA Admin	Tier 2 HRA	Health Insurer Fee	Dental	CY17 Payment Rate
TANF	20,416	\$ 4.93	\$ -	\$ -	\$ -	\$ -	\$ -	\$ 23.99	\$ 28.92
PLMA	5,376	\$ 5.24	\$ -	\$ -	\$ -	\$ -	\$ -	\$ 18.70	\$ 23.93
CHILD 00-01	8,818	\$ 0.34	\$ -	\$ -	\$ -	\$ -	\$ -	\$ 1.42	\$ 1.75
CHILD 01-05	32,205	\$ 0.31	\$ -	\$ -	\$ -	\$ -	\$ -	\$ 22.38	\$ 22.69
CHILD 06-18	70,266	\$ 0.49	\$ -	\$ -	\$ -	\$ -	\$ -	\$ 22.34	\$ 22.83
ABAD & OAA Duals	18,343	\$ 40.22	\$ -	\$ -	\$ -	\$ -	\$ -	\$ 27.13	\$ 67.35
ABAD & OAA Medicaid Only	18,401	\$ 42.95	\$ -	\$ -	\$ -	\$ -	\$ -	\$ 28.39	\$ 71.34
CAF	6,740	\$ 1.78	\$ -	\$ -	\$ -	\$ -	\$ -	\$ 25.07	\$ 26.85
ACA 19-44	80,000	\$ 4.48	\$ -	\$ -	\$ -	\$ -	\$ -	\$ 22.90	\$ 27.38
ACA 45-54	27,667	\$ 8.96	\$ -	\$ -	\$ -	\$ -	\$ -	\$ 33.01	\$ 41.96
ACA 55-64	25,376	\$ 5.69	\$ -	\$ -	\$ -	\$ -	\$ -	\$ 31.89	\$ 37.58
BCCP	197	\$ 42.95	\$ -	\$ -	\$ -	\$ -	\$ -	\$ 28.39	\$ 71.34
<b>Total</b>	<b>313,807</b>	\$ 7.89	\$ -	\$ -	\$ -	\$ -	\$ -	\$ 24.35	\$ 32.24

<sup>1</sup> Rate Add-Ons are inclusive of a 11.8% non-medical load

# Appendix VI. CCO-F Rate Development Summary (RDS) **Optumas**

## Appendix VI.N: Western Oregon Advanced Health, LLC

COA	CY 2015 MMs	Regional	Risk Factor				Breakthrough	ACT/SE <sup>1</sup>	Children's
		Base PMPM	Risk Score	A/B Adjustment	CCO Adjustment	PMPM	Therapy		Wraparound <sup>1</sup>
TANF	13,221	\$ -	-	-	-	\$ -	\$ -	\$ -	\$ -
PLMA	3,695	\$ -	-	-	-	\$ -	\$ -	\$ -	\$ -
CHILD 00-01	6,044	\$ -	-	-	-	\$ -	\$ -	\$ -	\$ -
CHILD 01-05	23,304	\$ -	-	-	-	\$ -	\$ -	\$ -	\$ -
CHILD 06-18	50,214	\$ -	-	-	-	\$ -	\$ -	\$ -	\$ -
ABAD & OAA Duals	15,543	\$ -	-	-	-	\$ -	\$ -	\$ -	\$ -
ABAD & OAA Medicaid Only	17,229	\$ -	-	-	-	\$ -	\$ -	\$ -	\$ -
CAF	5,814	\$ -	-	-	-	\$ -	\$ -	\$ -	\$ -
ACA 19-44	58,519	\$ -	-	-	-	\$ -	\$ -	\$ -	\$ -
ACA 45-54	23,417	\$ -	-	-	-	\$ -	\$ -	\$ -	\$ -
ACA 55-64	22,905	\$ -	-	-	-	\$ -	\$ -	\$ -	\$ -
BCCP	172	\$ -	-	-	-	\$ -	\$ -	\$ -	\$ -
<b>Total</b>	<b>240,077</b>	\$ -				\$ -	\$ -	\$ -	\$ -

COA	CY 2015 MMs	NEMT <sup>1</sup>	CANS <sup>1</sup>	Tier 1 HRA	Tier 1 HRA Admin	Tier 2 HRA	Health Insurer Fee	Dental	CY17 Payment Rate
TANF	13,221	\$ 6.13	\$ -	\$ -	\$ -	\$ -	\$ -	\$ 23.99	\$ 30.12
PLMA	3,695	\$ 6.51	\$ -	\$ -	\$ -	\$ -	\$ -	\$ 18.70	\$ 25.20
CHILD 00-01	6,044	\$ 0.42	\$ -	\$ -	\$ -	\$ -	\$ -	\$ 1.42	\$ 1.84
CHILD 01-05	23,304	\$ 0.39	\$ -	\$ -	\$ -	\$ -	\$ -	\$ 22.38	\$ 22.77
CHILD 06-18	50,214	\$ 0.61	\$ -	\$ -	\$ -	\$ -	\$ -	\$ 22.34	\$ 22.95
ABAD & OAA Duals	15,543	\$ 49.97	\$ -	\$ -	\$ -	\$ -	\$ -	\$ 27.13	\$ 77.10
ABAD & OAA Medicaid Only	17,229	\$ 53.36	\$ -	\$ -	\$ -	\$ -	\$ -	\$ 28.39	\$ 81.76
CAF	5,814	\$ 2.21	\$ -	\$ -	\$ -	\$ -	\$ -	\$ 25.07	\$ 27.28
ACA 19-44	58,519	\$ 5.57	\$ -	\$ -	\$ -	\$ -	\$ -	\$ 22.90	\$ 28.46
ACA 45-54	23,417	\$ 11.13	\$ -	\$ -	\$ -	\$ -	\$ -	\$ 33.01	\$ 44.14
ACA 55-64	22,905	\$ 7.07	\$ -	\$ -	\$ -	\$ -	\$ -	\$ 31.89	\$ 38.96
BCCP	172	\$ 53.36	\$ -	\$ -	\$ -	\$ -	\$ -	\$ 28.39	\$ 81.76
<b>Total</b>	<b>240,077</b>	\$ 10.89	\$ -	\$ -	\$ -	\$ -	\$ -	\$ 24.75	\$ 35.64

<sup>1</sup> Rate Add-Ons are inclusive of a 11.8% non-medical load

# Appendix VI. CCO-F Rate Development Summary (RDS) **Optumas**

## Appendix VI.O: Willamette Valley Community Health, LLC

COA	CY 2015 MMs	Regional	Risk Factor				Breakthrough	ACT/SE <sup>1</sup>	Children's
		Base PMPM	Risk Score	A/B Adjustment	CCO Adjustment	PMPM	Therapy		Wraparound <sup>1</sup>
TANF	62,434	\$ -	-	-	-	\$ -	\$ -	\$ -	\$ -
PLMA	20,065	\$ -	-	-	-	\$ -	\$ -	\$ -	\$ -
CHILD 00-01	39,643	\$ -	-	-	-	\$ -	\$ -	\$ -	\$ -
CHILD 01-05	160,642	\$ -	-	-	-	\$ -	\$ -	\$ -	\$ -
CHILD 06-18	361,728	\$ -	-	-	-	\$ -	\$ -	\$ -	\$ -
ABAD & OAA Duals	53,859	\$ -	-	-	-	\$ -	\$ -	\$ -	\$ -
ABAD & OAA Medicaid Only	55,258	\$ -	-	-	-	\$ -	\$ -	\$ -	\$ -
CAF	15,686	\$ -	-	-	-	\$ -	\$ -	\$ -	\$ -
ACA 19-44	260,640	\$ -	-	-	-	\$ -	\$ -	\$ -	\$ -
ACA 45-54	80,639	\$ -	-	-	-	\$ -	\$ -	\$ -	\$ -
ACA 55-64	61,642	\$ -	-	-	-	\$ -	\$ -	\$ -	\$ -
BCCP	346	\$ -	-	-	-	\$ -	\$ -	\$ -	\$ -
<b>Total</b>	<b>1,172,579</b>	\$ -				\$ -	\$ -	\$ -	\$ -

COA	CY 2015 MMs	NEMT <sup>1</sup>	CANS <sup>1</sup>	Tier 1 HRA	Tier 1 HRA Admin	Tier 2 HRA	Health Insurer Fee	Dental	CY17 Payment Rate
TANF	62,434	\$ 5.70	\$ -	\$ -	\$ -	\$ -	\$ -	\$ 23.99	\$ 29.69
PLMA	20,065	\$ 6.06	\$ -	\$ -	\$ -	\$ -	\$ -	\$ 18.70	\$ 24.75
CHILD 00-01	39,643	\$ 0.39	\$ -	\$ -	\$ -	\$ -	\$ -	\$ 1.42	\$ 1.81
CHILD 01-05	160,642	\$ 0.36	\$ -	\$ -	\$ -	\$ -	\$ -	\$ 22.38	\$ 22.74
CHILD 06-18	361,728	\$ 0.57	\$ -	\$ -	\$ -	\$ -	\$ -	\$ 22.34	\$ 22.91
ABAD & OAA Duals	53,859	\$ 46.51	\$ -	\$ -	\$ -	\$ -	\$ -	\$ 27.13	\$ 73.64
ABAD & OAA Medicaid Only	55,258	\$ 49.67	\$ -	\$ -	\$ -	\$ -	\$ -	\$ 28.39	\$ 78.06
CAF	15,686	\$ 2.06	\$ -	\$ -	\$ -	\$ -	\$ -	\$ 25.07	\$ 27.13
ACA 19-44	260,640	\$ 5.18	\$ -	\$ -	\$ -	\$ -	\$ -	\$ 22.90	\$ 28.08
ACA 45-54	80,639	\$ 10.36	\$ -	\$ -	\$ -	\$ -	\$ -	\$ 33.01	\$ 43.37
ACA 55-64	61,642	\$ 6.58	\$ -	\$ -	\$ -	\$ -	\$ -	\$ 31.89	\$ 38.47
BCCP	346	\$ 49.67	\$ -	\$ -	\$ -	\$ -	\$ -	\$ 28.39	\$ 78.06
<b>Total</b>	<b>1,172,579</b>	<b>\$ 7.38</b>	<b>\$ -</b>	<b>\$ -</b>	<b>\$ -</b>	<b>\$ -</b>	<b>\$ -</b>	<b>\$ 23.57</b>	<b>\$ 30.94</b>

<sup>1</sup> Rate Add-Ons are inclusive of a 9.7% non-medical load

## Appendix VI. CCO-F Rate Development Summary (RDS) **Optumas**

### Appendix VI.P: Yamhill County Care Organization, Inc.

COA	CY 2015 MM\$	Regional	Risk Factor				Breakthrough	ACT/SE <sup>1</sup>	Children's
		Base PMPM	Risk Score	A/B Adjustment	CCO Adjustment	PMPM	Therapy		Wraparound <sup>1</sup>
TANF	15,506	\$ -	-	-	-	\$ -	\$ -	\$ -	\$ -
PLMA	4,907	\$ -	-	-	-	\$ -	\$ -	\$ -	\$ -
CHILD 00-01	8,354	\$ -	-	-	-	\$ -	\$ -	\$ -	\$ -
CHILD 01-05	34,842	\$ -	-	-	-	\$ -	\$ -	\$ -	\$ -
CHILD 06-18	82,112	\$ -	-	-	-	\$ -	\$ -	\$ -	\$ -
ABAD & OAA Duals	6,505	\$ -	-	-	-	\$ -	\$ -	\$ -	\$ -
ABAD & OAA Medicaid Only	8,809	\$ -	-	-	-	\$ -	\$ -	\$ -	\$ -
CAF	3,389	\$ -	-	-	-	\$ -	\$ -	\$ -	\$ -
ACA 19-44	64,738	\$ -	-	-	-	\$ -	\$ -	\$ -	\$ -
ACA 45-54	21,328	\$ -	-	-	-	\$ -	\$ -	\$ -	\$ -
ACA 55-64	17,196	\$ -	-	-	-	\$ -	\$ -	\$ -	\$ -
BCCP	122	\$ -	-	-	-	\$ -	\$ -	\$ -	\$ -
<b>Total</b>	<b>267,808</b>	\$ -	-	-	-	\$ -	\$ -	\$ -	\$ -

COA	CY 2015 MM\$	NEMT <sup>1</sup>	CANS <sup>1</sup>	Tier 1 HRA	Tier 1 HRA Admin	Tier 2 HRA	Health Insurer Fee	Dental	CY17 Payment Rate
TANF	15,506	\$ 8.06	\$ -	\$ -	\$ -	\$ -	\$ -	\$ 23.99	\$ 32.05
PLMA	4,907	\$ 8.56	\$ -	\$ -	\$ -	\$ -	\$ -	\$ 18.70	\$ 27.26
CHILD 00-01	8,354	\$ 0.55	\$ -	\$ -	\$ -	\$ -	\$ -	\$ 1.42	\$ 1.97
CHILD 01-05	34,842	\$ 0.51	\$ -	\$ -	\$ -	\$ -	\$ -	\$ 22.38	\$ 22.89
CHILD 06-18	82,112	\$ 0.81	\$ -	\$ -	\$ -	\$ -	\$ -	\$ 22.34	\$ 23.14
ABAD & OAA Duals	6,505	\$ 65.72	\$ -	\$ -	\$ -	\$ -	\$ -	\$ 27.13	\$ 92.85
ABAD & OAA Medicaid Only	8,809	\$ 70.19	\$ -	\$ -	\$ -	\$ -	\$ -	\$ 28.39	\$ 98.58
CAF	3,389	\$ 2.91	\$ -	\$ -	\$ -	\$ -	\$ -	\$ 25.07	\$ 27.98
ACA 19-44	64,738	\$ 7.32	\$ -	\$ -	\$ -	\$ -	\$ -	\$ 22.90	\$ 30.22
ACA 45-54	21,328	\$ 14.64	\$ -	\$ -	\$ -	\$ -	\$ -	\$ 33.01	\$ 47.64
ACA 55-64	17,196	\$ 9.29	\$ -	\$ -	\$ -	\$ -	\$ -	\$ 31.89	\$ 41.19
BCCP	122	\$ 70.19	\$ -	\$ -	\$ -	\$ -	\$ -	\$ 28.39	\$ 98.58
<b>Total</b>	<b>267,808</b>	\$ 8.46	\$ -	\$ -	\$ -	\$ -	\$ -	\$ 23.67	\$ 32.13

<sup>1</sup> Rate Add-Ons are inclusive of a 9.7% non-medical load

**Appendix VII. CCO-G Rate Development Summary (RDS)**



## Appendix VII. CCO-G Rate Development Summary (RDS) **Optumas**

### Appendix VII.A: Allcare CCO, Inc.

COA	CY 2015 MMs	Regional	Risk Factor				Breakthrough	ACT/SE <sup>1</sup>	Children's
		Base PMPM	Risk Score	A/B Adjustment	CCO Adjustment	PMPM	Therapy		Wraparound <sup>1</sup>
TANF	36,134	\$ 40.95	1.00	1.00	1.00	\$ 40.95	\$ -	\$ 1.42	\$ -
PLMA	11,984	\$ 27.20	1.00	1.00	1.00	\$ 27.20	\$ -	\$ -	\$ -
CHILD 00-01	17,505	\$ 7.64	1.00	1.00	1.00	\$ 7.64	\$ -	\$ -	\$ -
CHILD 01-05	68,111	\$ 20.24	1.00	1.00	1.00	\$ 20.24	\$ -	\$ -	\$ -
CHILD 06-18	133,596	\$ 34.63	1.00	1.00	1.00	\$ 34.63	\$ -	\$ -	\$ -
ABAD & OAA Duals	26,572	\$ 41.96	1.00	1.00	1.00	\$ 41.96	\$ -	\$ 6.00	\$ -
ABAD & OAA Medicaid Only	28,522	\$ 148.18	1.00	1.00	1.00	\$ 148.18	\$ -	\$ 12.04	\$ -
CAF	8,496	\$ 215.09	1.00	1.00	1.00	\$ 215.09	\$ -	\$ -	\$ 34.46
ACA 19-44	150,902	\$ 42.36	1.00	1.00	1.00	\$ 42.36	\$ -	\$ 1.42	\$ -
ACA 45-54	53,628	\$ 48.12	1.00	1.00	1.00	\$ 48.12	\$ -	\$ 1.43	\$ -
ACA 55-64	51,012	\$ 43.81	1.00	1.00	1.00	\$ 43.81	\$ -	\$ 1.43	\$ -
BCCP	354	\$ 54.26	1.00	1.00	1.00	\$ 54.26	\$ -	\$ 12.04	\$ -
<b>Total</b>	<b>586,817</b>	<b>\$ 44.89</b>				<b>\$ 44.89</b>	<b>\$ -</b>	<b>\$ 1.57</b>	<b>\$ 0.50</b>

COA	CY 2015 MMs	NEMT <sup>1</sup>	CANS <sup>1</sup>	Tier 1 HRA	Tier 1 HRA Admin	Tier 2 HRA	Health Insurer Fee	Dental	CY17 Payment Rate
TANF	36,134	\$ 4.40	\$ -	\$ 1.16	\$ 0.02	\$ -	\$ -	\$ 23.99	\$ 71.94
PLMA	11,984	\$ 4.67	\$ -	\$ 0.71	\$ 0.01	\$ -	\$ -	\$ 18.70	\$ 51.30
CHILD 00-01	17,505	\$ 0.30	\$ -	\$ 0.02	\$ 0.00	\$ -	\$ -	\$ 1.42	\$ 9.38
CHILD 01-05	68,111	\$ 0.28	\$ -	\$ 0.35	\$ 0.01	\$ -	\$ -	\$ 22.38	\$ 43.25
CHILD 06-18	133,596	\$ 0.44	\$ -	\$ 1.31	\$ 0.03	\$ -	\$ -	\$ 22.34	\$ 58.74
ABAD & OAA Duals	26,572	\$ 35.88	\$ -	\$ 0.78	\$ 0.02	\$ -	\$ -	\$ 27.13	\$ 111.75
ABAD & OAA Medicaid Only	28,522	\$ 38.31	\$ -	\$ 18.03	\$ 0.37	\$ -	\$ -	\$ 28.39	\$ 245.32
CAF	8,496	\$ 1.59	\$ 3.35	\$ 8.71	\$ 0.18	\$ -	\$ -	\$ 25.07	\$ 288.45
ACA 19-44	150,902	\$ 4.00	\$ -	\$ 3.91	\$ 0.08	\$ -	\$ -	\$ 22.90	\$ 74.66
ACA 45-54	53,628	\$ 7.99	\$ -	\$ 3.59	\$ 0.07	\$ -	\$ -	\$ 33.01	\$ 94.21
ACA 55-64	51,012	\$ 5.07	\$ -	\$ 2.47	\$ 0.05	\$ -	\$ -	\$ 31.89	\$ 84.73
BCCP	354	\$ 38.31	\$ -	\$ 2.74	\$ 0.06	\$ -	\$ -	\$ 28.39	\$ 135.80
<b>Total</b>	<b>586,817</b>	<b>\$ 6.24</b>	<b>\$ 0.05</b>	<b>\$ 3.01</b>	<b>\$ 0.06</b>	<b>\$ -</b>	<b>\$ -</b>	<b>\$ 24.25</b>	<b>\$ 80.57</b>

<sup>1</sup> Rate Add-Ons are inclusive of a 11.8% non-medical load

## Appendix VII. CCO-G Rate Development Summary (RDS) **Optumas**

### Appendix VII.B: Cascade Health Alliance, LLC.

COA	CY 2015 MMs	Regional	Risk Factor				Breakthrough	ACT/SE <sup>1</sup>	Children's
		Base PMPM	Risk Score	A/B Adjustment	CCO Adjustment	PMPM	Therapy		Wraparound <sup>1</sup>
TANF	12,116	\$ 33.06	1.00	1.00	1.00	\$ 33.06	\$ -	\$ 0.57	\$ -
PLMA	3,828	\$ 14.63	1.00	1.00	1.00	\$ 14.63	\$ -	\$ -	\$ -
CHILD 00-01	6,653	\$ 0.33	1.00	1.00	1.00	\$ 0.33	\$ -	\$ -	\$ -
CHILD 01-05	23,954	\$ 13.37	1.00	1.00	1.00	\$ 13.37	\$ -	\$ -	\$ -
CHILD 06-18	47,670	\$ 34.97	1.00	1.00	1.00	\$ 34.97	\$ -	\$ -	\$ -
ABAD & OAA Duals	8,896	\$ 35.25	1.00	1.00	1.00	\$ 35.25	\$ -	\$ 0.81	\$ -
ABAD & OAA Medicaid Only	11,271	\$ 121.00	1.00	1.00	1.00	\$ 121.00	\$ -	\$ 0.45	\$ -
CAF	3,836	\$ 256.64	1.00	1.00	1.00	\$ 256.64	\$ -	\$ -	\$ 97.87
ACA 19-44	46,975	\$ 31.90	1.00	1.00	1.00	\$ 31.90	\$ -	\$ 0.60	\$ -
ACA 45-54	16,896	\$ 39.08	1.00	1.00	1.00	\$ 39.08	\$ -	\$ 2.87	\$ -
ACA 55-64	14,098	\$ 40.01	1.00	1.00	1.00	\$ 40.01	\$ -	\$ -	\$ -
BCCP	52	\$ 56.41	1.00	1.00	1.00	\$ 56.41	\$ -	\$ 0.45	\$ -
<b>Total</b>	<b>196,245</b>	<b>\$ 39.92</b>				<b>\$ 39.92</b>	<b>\$ -</b>	<b>\$ 0.49</b>	<b>\$ 1.91</b>

COA	CY 2015 MMs	NEMT <sup>1</sup>	CANS <sup>1</sup>	Tier 1 HRA	Tier 1 HRA Admin	Tier 2 HRA	Health Insurer Fee	Dental	CY17 Payment Rate
TANF	12,116	\$ 10.43	\$ -	\$ 0.98	\$ 0.02	\$ -	\$ -	\$ 23.99	\$ 69.04
PLMA	3,828	\$ 4.88	\$ -	\$ 0.34	\$ 0.01	\$ -	\$ -	\$ 18.70	\$ 38.56
CHILD 00-01	6,653	\$ 0.95	\$ -	\$ -	\$ -	\$ -	\$ -	\$ 1.42	\$ 2.69
CHILD 01-05	23,954	\$ 0.63	\$ -	\$ 0.07	\$ 0.00	\$ -	\$ -	\$ 22.38	\$ 36.45
CHILD 06-18	47,670	\$ 1.11	\$ -	\$ 0.27	\$ 0.01	\$ -	\$ -	\$ 22.34	\$ 58.69
ABAD & OAA Duals	8,896	\$ 59.78	\$ -	\$ 0.29	\$ 0.01	\$ -	\$ -	\$ 27.13	\$ 123.26
ABAD & OAA Medicaid Only	11,271	\$ 46.37	\$ -	\$ 5.38	\$ 0.11	\$ -	\$ -	\$ 28.39	\$ 201.70
CAF	3,836	\$ 3.04	\$ 2.96	\$ 0.60	\$ 0.01	\$ -	\$ -	\$ 25.07	\$ 386.18
ACA 19-44	46,975	\$ 14.29	\$ -	\$ 0.77	\$ 0.02	\$ -	\$ -	\$ 22.90	\$ 70.49
ACA 45-54	16,896	\$ 18.98	\$ -	\$ 0.84	\$ 0.02	\$ -	\$ -	\$ 33.01	\$ 94.79
ACA 55-64	14,098	\$ 22.59	\$ -	\$ 0.81	\$ 0.02	\$ -	\$ -	\$ 31.89	\$ 95.32
BCCP	52	\$ 46.37	\$ -	\$ 0.26	\$ 0.01	\$ -	\$ -	\$ 28.39	\$ 131.89
<b>Total</b>	<b>196,245</b>	<b>\$ 13.24</b>	<b>\$ 0.06</b>	<b>\$ 0.79</b>	<b>\$ 0.02</b>	<b>\$ -</b>	<b>\$ -</b>	<b>\$ 24.02</b>	<b>\$ 80.45</b>

<sup>1</sup> Rate Add-Ons are inclusive of a 11.5% non-medical load

# Appendix VII. CCO-G Rate Development Summary (RDS) **Optumas**

## Appendix VII.C: Columbia-Pacific CCO, LLC.

COA	CY 2015 MM\$	Regional	Risk Factor				Breakthrough	ACT/SE <sup>1</sup>	Children's
		Base PMPM	Risk Score	A/B Adjustment	CCO Adjustment	PMPM	Therapy		Wraparound <sup>1</sup>
TANF	17,437	\$ 34.42	1.00	1.00	1.00	\$ 34.42	\$ -	\$ 0.62	\$ -
PLMA	5,221	\$ 24.41	1.00	1.00	1.00	\$ 24.41	\$ -	\$ 0.16	\$ -
CHILD 00-01	8,497	\$ 14.03	1.00	1.00	1.00	\$ 14.03	\$ -	\$ -	\$ -
CHILD 01-05	33,251	\$ 25.46	1.00	1.00	1.00	\$ 25.46	\$ -	\$ -	\$ -
CHILD 06-18	74,203	\$ 34.74	1.00	1.00	1.00	\$ 34.74	\$ -	\$ 0.00	\$ -
ABAD & OAA Duals	9,401	\$ 36.68	1.00	1.00	1.00	\$ 36.68	\$ -	\$ 18.44	\$ -
ABAD & OAA Medicaid Only	14,886	\$ 82.70	1.00	1.00	1.00	\$ 82.70	\$ -	\$ 30.49	\$ -
CAF	5,112	\$ 157.00	1.00	1.00	1.00	\$ 157.00	\$ -	\$ 0.33	\$ 35.75
ACA 19-44	76,337	\$ 38.17	1.00	1.00	1.00	\$ 38.17	\$ -	\$ 1.10	\$ -
ACA 45-54	28,729	\$ 38.90	1.00	1.00	1.00	\$ 38.90	\$ -	\$ 1.70	\$ -
ACA 55-64	26,667	\$ 32.71	1.00	1.00	1.00	\$ 32.71	\$ -	\$ 0.78	\$ -
BCCP	195	\$ 14.70	1.00	1.00	1.00	\$ 14.70	\$ -	\$ 30.49	\$ -
<b>Total</b>	<b>299,935</b>	<b>\$ 38.53</b>				<b>\$ 38.53</b>	<b>\$ -</b>	<b>\$ 2.67</b>	<b>\$ 0.61</b>

COA	CY 2015 MM\$	NEMT <sup>1</sup>	CANS <sup>1</sup>	Tier 1 HRA	Tier 1 HRA Admin	Tier 2 HRA	Health Insurer Fee	Dental	CY17 Payment Rate
TANF	17,437	\$ 6.97	\$ -	\$ 0.85	\$ 0.02	\$ -	\$ -	\$ 23.99	\$ 66.86
PLMA	5,221	\$ 7.40	\$ -	\$ 0.09	\$ 0.00	\$ -	\$ -	\$ 18.70	\$ 50.75
CHILD 00-01	8,497	\$ 0.48	\$ -	\$ -	\$ -	\$ -	\$ -	\$ 1.42	\$ 15.92
CHILD 01-05	33,251	\$ 0.44	\$ -	\$ -	\$ -	\$ -	\$ -	\$ 22.38	\$ 48.28
CHILD 06-18	74,203	\$ 0.70	\$ -	\$ 0.32	\$ 0.01	\$ -	\$ -	\$ 22.34	\$ 58.10
ABAD & OAA Duals	9,401	\$ 56.83	\$ -	\$ 0.32	\$ 0.01	\$ -	\$ -	\$ 27.13	\$ 139.41
ABAD & OAA Medicaid Only	14,886	\$ 60.68	\$ -	\$ 5.74	\$ 0.12	\$ -	\$ -	\$ 28.39	\$ 208.13
CAF	5,112	\$ 2.52	\$ -	\$ 1.53	\$ 0.03	\$ -	\$ -	\$ 25.07	\$ 222.22
ACA 19-44	76,337	\$ 6.33	\$ -	\$ 1.91	\$ 0.04	\$ -	\$ -	\$ 22.90	\$ 70.44
ACA 45-54	28,729	\$ 12.65	\$ -	\$ 1.46	\$ 0.03	\$ -	\$ -	\$ 33.01	\$ 87.75
ACA 55-64	26,667	\$ 8.04	\$ -	\$ 0.55	\$ 0.01	\$ -	\$ -	\$ 31.89	\$ 73.98
BCCP	195	\$ 60.68	\$ -	\$ -	\$ -	\$ -	\$ -	\$ 28.39	\$ 134.28
<b>Total</b>	<b>299,935</b>	<b>\$ 9.18</b>	<b>\$ -</b>	<b>\$ 1.12</b>	<b>\$ 0.02</b>	<b>\$ -</b>	<b>\$ -</b>	<b>\$ 24.30</b>	<b>\$ 76.43</b>

<sup>1</sup> Rate Add-Ons are inclusive of a 9.7% non-medical load

## Appendix VII. CCO-G Rate Development Summary (RDS) **Optumas**

### Appendix VII.D: Eastern Oregon Coordinated Care Org., LLC.

COA	CY 2015 MMs	Regional	Risk Factor				Breakthrough	ACT/SE <sup>1</sup>	Children's
		Base PMPM	Risk Score	A/B Adjustment	CCO Adjustment	PMPM	Therapy		Wraparound <sup>1</sup>
TANF	35,140	\$ 33.06	1.00	1.00	1.00	\$ 33.06	\$ -	\$ 0.89	\$ -
PLMA	10,728	\$ 14.63	1.00	1.00	1.00	\$ 14.63	\$ -	\$ -	\$ -
CHILD 00-01	19,960	\$ 0.33	1.00	1.00	1.00	\$ 0.33	\$ -	\$ -	\$ -
CHILD 01-05	79,747	\$ 13.37	1.00	1.00	1.00	\$ 13.37	\$ -	\$ -	\$ -
CHILD 06-18	166,877	\$ 34.97	1.00	1.00	1.00	\$ 34.97	\$ -	\$ -	\$ -
ABAD & OAA Duals	19,203	\$ 35.25	1.00	1.00	1.00	\$ 35.25	\$ -	\$ 9.49	\$ -
ABAD & OAA Medicaid Only	27,719	\$ 121.00	1.00	1.00	1.00	\$ 121.00	\$ -	\$ 15.50	\$ -
CAF	8,679	\$ 256.64	1.00	1.00	1.00	\$ 256.64	\$ -	\$ -	\$ 119.12
ACA 19-44	120,655	\$ 31.90	1.00	1.00	1.00	\$ 31.90	\$ -	\$ 0.89	\$ -
ACA 45-54	41,610	\$ 39.08	1.00	1.00	1.00	\$ 39.08	\$ -	\$ 0.89	\$ -
ACA 55-64	37,243	\$ 40.01	1.00	1.00	1.00	\$ 40.01	\$ -	\$ 0.89	\$ -
BCCP	227	\$ 56.41	1.00	1.00	1.00	\$ 56.41	\$ -	\$ 15.50	\$ -
<b>Total</b>	<b>567,788</b>	<b>\$ 37.80</b>				<b>\$ 37.80</b>	<b>\$ -</b>	<b>\$ 1.45</b>	<b>\$ 1.82</b>

COA	CY 2015 MMs	NEMT <sup>1</sup>	CANS <sup>1</sup>	Tier 1 HRA	Tier 1 HRA Admin	Tier 2 HRA	Health Insurer Fee	Dental	CY17 Payment Rate
TANF	35,140	\$ 10.77	\$ -	\$ 1.27	\$ 0.03	\$ -	\$ -	\$ 23.99	\$ 70.01
PLMA	10,728	\$ 4.93	\$ -	\$ 0.37	\$ 0.01	\$ -	\$ -	\$ 18.70	\$ 38.63
CHILD 00-01	19,960	\$ 0.73	\$ -	\$ -	\$ -	\$ -	\$ -	\$ 1.42	\$ 2.47
CHILD 01-05	79,747	\$ 0.72	\$ -	\$ 0.08	\$ 0.00	\$ -	\$ -	\$ 22.38	\$ 36.55
CHILD 06-18	166,877	\$ 1.12	\$ -	\$ 0.65	\$ 0.01	\$ -	\$ -	\$ 22.34	\$ 59.09
ABAD & OAA Duals	19,203	\$ 69.41	\$ -	\$ 0.19	\$ 0.00	\$ -	\$ -	\$ 27.13	\$ 141.48
ABAD & OAA Medicaid Only	27,719	\$ 52.86	\$ -	\$ 5.44	\$ 0.11	\$ -	\$ -	\$ 28.39	\$ 223.30
CAF	8,679	\$ 3.61	\$ -	\$ 2.51	\$ 0.05	\$ -	\$ -	\$ 25.07	\$ 406.99
ACA 19-44	120,655	\$ 16.67	\$ -	\$ 1.25	\$ 0.03	\$ -	\$ -	\$ 22.90	\$ 73.64
ACA 45-54	41,610	\$ 20.89	\$ -	\$ 1.37	\$ 0.03	\$ -	\$ -	\$ 33.01	\$ 95.27
ACA 55-64	37,243	\$ 25.37	\$ -	\$ 0.83	\$ 0.02	\$ -	\$ -	\$ 31.89	\$ 99.01
BCCP	227	\$ 52.86	\$ -	\$ 0.07	\$ 0.00	\$ -	\$ -	\$ 28.39	\$ 153.23
<b>Total</b>	<b>567,788</b>	<b>\$ 12.96</b>	<b>\$ -</b>	<b>\$ 1.02</b>	<b>\$ 0.02</b>	<b>\$ -</b>	<b>\$ -</b>	<b>\$ 23.67</b>	<b>\$ 78.74</b>

<sup>1</sup> Rate Add-Ons are inclusive of a 11.5% non-medical load

# Appendix VII. CCO-G Rate Development Summary (RDS) **Optumas**

## Appendix VII.E: FamilyCare, Inc.

COA	CY 2015 MMs	Regional	Risk Factor				Breakthrough	ACT/SE <sup>1</sup>	Children's
		Base PMPM	Risk Score	A/B Adjustment	CCO Adjustment	PMPM	Therapy		Wraparound <sup>1</sup>
TANF	81,512	\$ 27.05	1.00	1.00	1.00	\$ 27.05	\$ -	\$ 0.64	\$ -
PLMA	31,363	\$ 15.03	1.00	1.00	1.00	\$ 15.03	\$ -	\$ 0.07	\$ -
CHILD 00-01	51,492	\$ 1.02	1.00	1.00	1.00	\$ 1.02	\$ -	\$ -	\$ -
CHILD 01-05	171,505	\$ 13.97	1.00	1.00	1.00	\$ 13.97	\$ -	\$ -	\$ -
CHILD 06-18	335,194	\$ 26.69	1.00	1.00	1.00	\$ 26.69	\$ -	\$ 0.01	\$ -
ABAD & OAA Duals	27,114	\$ 45.52	1.00	1.00	1.00	\$ 45.52	\$ -	\$ 0.74	\$ -
ABAD & OAA Medicaid Only	35,750	\$ 120.82	1.00	1.00	1.00	\$ 120.82	\$ -	\$ 1.43	\$ -
CAF	18,916	\$ 157.09	1.00	1.00	1.00	\$ 157.09	\$ -	\$ 0.04	\$ 68.88
ACA 19-44	473,722	\$ 29.08	1.00	1.00	1.00	\$ 29.08	\$ -	\$ 0.24	\$ -
ACA 45-54	127,549	\$ 28.94	1.00	1.00	1.00	\$ 28.94	\$ -	\$ 0.22	\$ -
ACA 55-64	101,009	\$ 18.75	1.00	1.00	1.00	\$ 18.75	\$ -	\$ 0.18	\$ -
BCCP	916	\$ 35.45	1.00	1.00	1.00	\$ 35.45	\$ -	\$ 1.43	\$ -
<b>Total</b>	<b>1,456,042</b>	<b>\$ 28.84</b>				<b>\$ 28.84</b>	<b>\$ -</b>	<b>\$ 0.20</b>	<b>\$ 0.89</b>

COA	CY 2015 MMs	NEMT <sup>1</sup>	CANS <sup>1</sup>	Tier 1 HRA	Tier 1 HRA Admin	Tier 2 HRA	Health Insurer Fee	Dental	CY17 Payment Rate
TANF	81,512	\$ 7.53	\$ -	\$ 1.72	\$ 0.04	\$ -	\$ -	\$ 30.30	\$ 67.27
PLMA	31,363	\$ 7.36	\$ -	\$ 0.49	\$ 0.01	\$ -	\$ -	\$ 25.18	\$ 48.14
CHILD 00-01	51,492	\$ 0.40	\$ -	\$ -	\$ -	\$ -	\$ -	\$ 0.87	\$ 2.29
CHILD 01-05	171,505	\$ 0.19	\$ -	\$ 0.35	\$ 0.01	\$ -	\$ -	\$ 23.72	\$ 38.25
CHILD 06-18	335,194	\$ 0.41	\$ -	\$ 2.28	\$ 0.05	\$ -	\$ -	\$ 26.39	\$ 55.83
ABAD & OAA Duals	27,114	\$ 40.54	\$ -	\$ 1.75	\$ 0.04	\$ -	\$ -	\$ 35.19	\$ 123.77
ABAD & OAA Medicaid Only	35,750	\$ 44.95	\$ -	\$ 9.75	\$ 0.20	\$ -	\$ -	\$ 34.07	\$ 211.23
CAF	18,916	\$ 2.42	\$ 2.07	\$ 11.71	\$ 0.24	\$ -	\$ -	\$ 26.90	\$ 269.35
ACA 19-44	473,722	\$ 8.04	\$ -	\$ 2.60	\$ 0.05	\$ -	\$ -	\$ 29.46	\$ 69.47
ACA 45-54	127,549	\$ 13.30	\$ -	\$ 2.25	\$ 0.05	\$ -	\$ -	\$ 44.30	\$ 89.06
ACA 55-64	101,009	\$ 10.09	\$ -	\$ 1.34	\$ 0.03	\$ -	\$ -	\$ 43.99	\$ 74.37
BCCP	916	\$ 44.95	\$ -	\$ 3.79	\$ 0.08	\$ -	\$ -	\$ 34.07	\$ 119.77
<b>Total</b>	<b>1,456,042</b>	<b>\$ 7.11</b>	<b>\$ 0.03</b>	<b>\$ 2.24</b>	<b>\$ 0.05</b>	<b>\$ -</b>	<b>\$ -</b>	<b>\$ 29.52</b>	<b>\$ 68.87</b>

<sup>1</sup> Rate Add-Ons are inclusive of a 10.1% non-medical load

# Appendix VII. CCO-G Rate Development Summary (RDS) **Optumas**

## Appendix VII.F: Health Share of Oregon

COA	CY 2015 MM\$s	Regional	Risk Factor				Breakthrough	ACT/SE <sup>1</sup>	Children's
		Base PMPM	Risk Score	A/B Adjustment	CCO Adjustment	PMPM	Therapy		Wraparound <sup>1</sup>
TANF	138,371	\$ 27.05	1.00	1.00	1.00	\$ 27.05	\$ -	\$ 2.36	\$ -
PLMA	43,468	\$ 15.03	1.00	1.00	1.00	\$ 15.03	\$ -	\$ 0.64	\$ -
CHILD 00-01	71,377	\$ 1.02	1.00	1.00	1.00	\$ 1.02	\$ -	\$ -	\$ -
CHILD 01-05	311,494	\$ 13.97	1.00	1.00	1.00	\$ 13.97	\$ -	\$ 0.18	\$ -
CHILD 06-18	740,685	\$ 26.69	1.00	1.00	1.00	\$ 26.69	\$ -	\$ 1.01	\$ -
ABAD & OAA Duals	197,759	\$ 45.52	1.00	1.00	1.00	\$ 45.52	\$ -	\$ 19.71	\$ -
ABAD & OAA Medicaid Only	167,576	\$ 120.82	1.00	1.00	1.00	\$ 120.82	\$ -	\$ 26.99	\$ -
CAF	33,833	\$ 157.09	1.00	1.00	1.00	\$ 157.09	\$ -	\$ 6.51	\$ 99.60
ACA 19-44	704,231	\$ 29.08	1.00	1.00	1.00	\$ 29.08	\$ -	\$ 3.20	\$ -
ACA 45-54	211,360	\$ 28.94	1.00	1.00	1.00	\$ 28.94	\$ -	\$ 1.47	\$ -
ACA 55-64	171,210	\$ 18.75	1.00	1.00	1.00	\$ 18.75	\$ -	\$ 0.93	\$ -
BCCP	747	\$ 35.45	1.00	1.00	1.00	\$ 35.45	\$ -	\$ 26.99	\$ -
<b>Total</b>	<b>2,792,111</b>	<b>\$ 33.30</b>				<b>\$ 33.30</b>	<b>\$ -</b>	<b>\$ 4.49</b>	<b>\$ 1.21</b>

COA	CY 2015 MM\$s	NEMT <sup>1</sup>	CANS <sup>1</sup>	Tier 1 HRA	Tier 1 HRA Admin	Tier 2 HRA	Health Insurer Fee	Dental	CY17 Payment Rate
TANF	138,371	\$ 6.95	\$ -	\$ 2.37	\$ 0.05	\$ -	\$ -	\$ 30.30	\$ 69.08
PLMA	43,468	\$ 6.01	\$ -	\$ 1.06	\$ 0.02	\$ -	\$ -	\$ 25.18	\$ 47.95
CHILD 00-01	71,377	\$ 0.75	\$ -	\$ -	\$ -	\$ -	\$ -	\$ 0.87	\$ 2.64
CHILD 01-05	311,494	\$ 0.38	\$ -	\$ 0.37	\$ 0.01	\$ -	\$ -	\$ 23.72	\$ 38.64
CHILD 06-18	740,685	\$ 0.49	\$ -	\$ 2.92	\$ 0.06	\$ -	\$ -	\$ 26.39	\$ 57.57
ABAD & OAA Duals	197,759	\$ 62.13	\$ -	\$ 3.39	\$ 0.07	\$ -	\$ -	\$ 35.19	\$ 166.01
ABAD & OAA Medicaid Only	167,576	\$ 48.55	\$ -	\$ 14.99	\$ 0.31	\$ -	\$ -	\$ 34.07	\$ 245.73
CAF	33,833	\$ 4.54	\$ -	\$ 13.66	\$ 0.28	\$ -	\$ -	\$ 26.90	\$ 308.58
ACA 19-44	704,231	\$ 3.78	\$ -	\$ 3.33	\$ 0.07	\$ -	\$ -	\$ 29.46	\$ 68.92
ACA 45-54	211,360	\$ 8.38	\$ -	\$ 3.19	\$ 0.07	\$ -	\$ -	\$ 44.30	\$ 86.33
ACA 55-64	171,210	\$ 6.34	\$ -	\$ 1.98	\$ 0.04	\$ -	\$ -	\$ 43.99	\$ 72.03
BCCP	747	\$ 48.55	\$ -	\$ 6.77	\$ 0.14	\$ -	\$ -	\$ 34.07	\$ 151.98
<b>Total</b>	<b>2,792,111</b>	<b>\$ 9.99</b>	<b>\$ -</b>	<b>\$ 3.46</b>	<b>\$ 0.07</b>	<b>\$ -</b>	<b>\$ -</b>	<b>\$ 29.92</b>	<b>\$ 82.44</b>

<sup>1</sup> Rate Add-Ons are inclusive of a 10.1% non-medical load



## Appendix VII. CCO-G Rate Development Summary (RDS) **Optumas**

### Appendix VII.G: InterCommunity Health Network, Inc.

COA	CY 2015 MMs	Regional	Risk Factor				Breakthrough	ACT/SE <sup>1</sup>	Children's
		Base PMPM	Risk Score	A/B Adjustment	CCO Adjustment	PMPM	Therapy		Wraparound <sup>1</sup>
TANF	37,242	\$ 34.42	1.00	1.00	1.00	\$ 34.42	\$ -	\$ -	\$ -
PLMA	11,402	\$ 24.41	1.00	1.00	1.00	\$ 24.41	\$ -	\$ -	\$ -
CHILD 00-01	19,126	\$ 14.03	1.00	1.00	1.00	\$ 14.03	\$ -	\$ -	\$ -
CHILD 01-05	74,130	\$ 25.46	1.00	1.00	1.00	\$ 25.46	\$ -	\$ -	\$ -
CHILD 06-18	161,389	\$ 34.74	1.00	1.00	1.00	\$ 34.74	\$ -	\$ -	\$ -
ABAD & OAA Duals	31,670	\$ 36.68	1.00	1.00	1.00	\$ 36.68	\$ -	\$ -	\$ -
ABAD & OAA Medicaid Only	37,543	\$ 82.70	1.00	1.00	1.00	\$ 82.70	\$ -	\$ 0.24	\$ -
CAF	9,998	\$ 157.00	1.00	1.00	1.00	\$ 157.00	\$ -	\$ -	\$ 1.00
ACA 19-44	172,948	\$ 38.17	1.00	1.00	1.00	\$ 38.17	\$ -	\$ 0.03	\$ -
ACA 45-54	54,224	\$ 38.90	1.00	1.00	1.00	\$ 38.90	\$ -	\$ -	\$ -
ACA 55-64	48,668	\$ 32.71	1.00	1.00	1.00	\$ 32.71	\$ -	\$ -	\$ -
BCCP	237	\$ 14.70	1.00	1.00	1.00	\$ 14.70	\$ -	\$ 0.24	\$ -
<b>Total</b>	<b>658,578</b>	<b>\$ 38.67</b>				<b>\$ 38.67</b>	<b>\$ -</b>	<b>\$ 0.02</b>	<b>\$ 0.02</b>

COA	CY 2015 MMs	NEMT <sup>1</sup>	CANS <sup>1</sup>	Tier 1 HRA	Tier 1 HRA Admin	Tier 2 HRA	Health Insurer Fee	Dental	CY17 Payment Rate
TANF	37,242	\$ 10.54	\$ -	\$ 0.95	\$ 0.02	\$ -	\$ -	\$ 23.99	\$ 69.91
PLMA	11,402	\$ 11.19	\$ -	\$ 0.05	\$ 0.00	\$ -	\$ -	\$ 18.70	\$ 54.34
CHILD 00-01	19,126	\$ 0.72	\$ -	\$ -	\$ -	\$ -	\$ -	\$ 1.42	\$ 16.16
CHILD 01-05	74,130	\$ 0.67	\$ -	\$ -	\$ -	\$ -	\$ -	\$ 22.38	\$ 48.51
CHILD 06-18	161,389	\$ 1.06	\$ -	\$ 0.57	\$ 0.01	\$ -	\$ -	\$ 22.34	\$ 58.72
ABAD & OAA Duals	31,670	\$ 85.91	\$ -	\$ 0.40	\$ 0.01	\$ -	\$ -	\$ 27.13	\$ 150.13
ABAD & OAA Medicaid Only	37,543	\$ 91.74	\$ -	\$ 6.14	\$ 0.13	\$ -	\$ -	\$ 28.39	\$ 209.34
CAF	9,998	\$ 3.80	\$ 0.25	\$ 1.28	\$ 0.03	\$ -	\$ -	\$ 25.07	\$ 188.43
ACA 19-44	172,948	\$ 9.57	\$ -	\$ 2.52	\$ 0.05	\$ -	\$ -	\$ 22.90	\$ 73.24
ACA 45-54	54,224	\$ 19.13	\$ -	\$ 1.62	\$ 0.03	\$ -	\$ -	\$ 33.01	\$ 92.69
ACA 55-64	48,668	\$ 12.15	\$ -	\$ 0.68	\$ 0.01	\$ -	\$ -	\$ 31.89	\$ 77.44
BCCP	237	\$ 91.74	\$ -	\$ -	\$ -	\$ -	\$ -	\$ 28.39	\$ 135.08
<b>Total</b>	<b>658,578</b>	<b>\$ 15.58</b>	<b>\$ 0.00</b>	<b>\$ 1.43</b>	<b>\$ 0.03</b>	<b>\$ -</b>	<b>\$ -</b>	<b>\$ 24.12</b>	<b>\$ 79.86</b>

<sup>1</sup> Rate Add-Ons are inclusive of a 9.7% non-medical load

## Appendix VII. CCO-G Rate Development Summary (RDS) **Optumas**

### Appendix VII.H: Jackson County CCO, LLC.

COA	CY 2015 MMs	Regional	Risk Factor				Breakthrough	ACT/SE <sup>1</sup>	Children's
		Base PMPM	Risk Score	A/B Adjustment	CCO Adjustment	PMPM	Therapy		Wraparound <sup>1</sup>
TANF	19,577	\$ 40.95	1.00	1.00	1.00	\$ 40.95	\$ -	\$ -	\$ -
PLMA	5,637	\$ 27.20	1.00	1.00	1.00	\$ 27.20	\$ -	\$ -	\$ -
CHILD 00-01	9,401	\$ 7.64	1.00	1.00	1.00	\$ 7.64	\$ -	\$ -	\$ -
CHILD 01-05	40,414	\$ 20.24	1.00	1.00	1.00	\$ 20.24	\$ -	\$ -	\$ -
CHILD 06-18	97,699	\$ 34.63	1.00	1.00	1.00	\$ 34.63	\$ -	\$ -	\$ -
ABAD & OAA Duals	13,179	\$ 41.96	1.00	1.00	1.00	\$ 41.96	\$ -	\$ -	\$ -
ABAD & OAA Medicaid Only	16,823	\$ 148.18	1.00	1.00	1.00	\$ 148.18	\$ -	\$ 8.26	\$ -
CAF	6,353	\$ 215.09	1.00	1.00	1.00	\$ 215.09	\$ -	\$ -	\$ -
ACA 19-44	87,059	\$ 42.36	1.00	1.00	1.00	\$ 42.36	\$ -	\$ -	\$ -
ACA 45-54	28,687	\$ 48.12	1.00	1.00	1.00	\$ 48.12	\$ -	\$ -	\$ -
ACA 55-64	25,043	\$ 43.81	1.00	1.00	1.00	\$ 43.81	\$ -	\$ -	\$ -
BCCP	290	\$ 54.26	1.00	1.00	1.00	\$ 54.26	\$ -	\$ 8.26	\$ -
<b>Total</b>	<b>350,162</b>	<b>\$ 45.18</b>				<b>\$ 45.18</b>	<b>\$ -</b>	<b>\$ 0.40</b>	<b>\$ -</b>

COA	CY 2015 MMs	NEMT <sup>1</sup>	CANS <sup>1</sup>	Tier 1 HRA	Tier 1 HRA Admin	Tier 2 HRA	Health Insurer Fee	Dental	CY17 Payment Rate
TANF	19,577	\$ 3.66	\$ -	\$ 1.96	\$ 0.04	\$ -	\$ -	\$ 23.99	\$ 70.60
PLMA	5,637	\$ 3.89	\$ -	\$ 1.91	\$ 0.04	\$ -	\$ -	\$ 18.70	\$ 51.73
CHILD 00-01	9,401	\$ 0.25	\$ -	\$ 0.03	\$ 0.00	\$ -	\$ -	\$ 1.42	\$ 9.34
CHILD 01-05	40,414	\$ 0.23	\$ -	\$ 0.21	\$ 0.00	\$ -	\$ -	\$ 22.38	\$ 43.07
CHILD 06-18	97,699	\$ 0.37	\$ -	\$ 1.44	\$ 0.03	\$ -	\$ -	\$ 22.34	\$ 58.80
ABAD & OAA Duals	13,179	\$ 29.87	\$ -	\$ 0.91	\$ 0.02	\$ -	\$ -	\$ 27.13	\$ 99.88
ABAD & OAA Medicaid Only	16,823	\$ 31.90	\$ -	\$ 19.79	\$ 0.40	\$ -	\$ -	\$ 28.39	\$ 236.92
CAF	6,353	\$ 1.32	\$ -	\$ 7.30	\$ 0.15	\$ -	\$ -	\$ 25.07	\$ 248.93
ACA 19-44	87,059	\$ 3.33	\$ -	\$ 3.95	\$ 0.08	\$ -	\$ -	\$ 22.90	\$ 72.61
ACA 45-54	28,687	\$ 6.65	\$ -	\$ 3.79	\$ 0.08	\$ -	\$ -	\$ 33.01	\$ 91.64
ACA 55-64	25,043	\$ 4.22	\$ -	\$ 3.61	\$ 0.07	\$ -	\$ -	\$ 31.89	\$ 83.61
BCCP	290	\$ 31.90	\$ -	\$ 0.94	\$ 0.02	\$ -	\$ -	\$ 28.39	\$ 123.77
<b>Total</b>	<b>350,162</b>	<b>\$ 4.78</b>	<b>\$ -</b>	<b>\$ 3.24</b>	<b>\$ 0.07</b>	<b>\$ -</b>	<b>\$ -</b>	<b>\$ 24.04</b>	<b>\$ 77.71</b>

<sup>1</sup> Rate Add-Ons are inclusive of a 11.8% non-medical load



## Appendix VII. CCO-G Rate Development Summary (RDS) **Optumas**

### Appendix VII.I: PacificSource Community Solutions, Inc. (Central)

COA	CY 2015 MMs	Regional	Risk Factor				Breakthrough	ACT/SE <sup>1</sup>	Children's
		Base PMPM	Risk Score	A/B Adjustment	CCO Adjustment	PMPM	Therapy		Wraparound <sup>1</sup>
TANF	37,593	\$ 33.06	1.00	1.00	1.00	\$ 33.06	\$ -	\$ -	\$ -
PLMA	10,676	\$ 14.63	1.00	1.00	1.00	\$ 14.63	\$ -	\$ -	\$ -
CHILD 00-01	19,035	\$ 0.33	1.00	1.00	1.00	\$ 0.33	\$ -	\$ -	\$ -
CHILD 01-05	70,368	\$ 13.37	1.00	1.00	1.00	\$ 13.37	\$ -	\$ -	\$ -
CHILD 06-18	172,046	\$ 34.97	1.00	1.00	1.00	\$ 34.97	\$ -	\$ -	\$ -
ABAD & OAA Duals	25,538	\$ 35.25	1.00	1.00	1.00	\$ 35.25	\$ -	\$ -	\$ -
ABAD & OAA Medicaid Only	22,804	\$ 121.00	1.00	1.00	1.00	\$ 121.00	\$ -	\$ -	\$ -
CAF	6,955	\$ 256.64	1.00	1.00	1.00	\$ 256.64	\$ -	\$ -	\$ 97.87
ACA 19-44	164,445	\$ 31.90	1.00	1.00	1.00	\$ 31.90	\$ -	\$ -	\$ -
ACA 45-54	54,291	\$ 39.08	1.00	1.00	1.00	\$ 39.08	\$ -	\$ -	\$ -
ACA 55-64	48,275	\$ 40.01	1.00	1.00	1.00	\$ 40.01	\$ -	\$ -	\$ -
BCCP	550	\$ 56.41	1.00	1.00	1.00	\$ 56.41	\$ -	\$ -	\$ -
<b>Total</b>	<b>632,577</b>	<b>\$ 36.58</b>				<b>\$ 36.58</b>	<b>\$ -</b>	<b>\$ -</b>	<b>\$ 1.08</b>

COA	CY 2015 MMs	NEMT <sup>1</sup>	CANS <sup>1</sup>	Tier 1 HRA	Tier 1 HRA Admin	Tier 2 HRA	Health Insurer Fee	Dental	CY17 Payment Rate
TANF	37,593	\$ 6.06	\$ -	\$ 0.69	\$ 0.01	\$ -	\$ -	\$ 23.99	\$ 63.81
PLMA	10,676	\$ 6.43	\$ -	\$ 0.14	\$ 0.00	\$ -	\$ -	\$ 18.70	\$ 39.91
CHILD 00-01	19,035	\$ 0.42	\$ -	\$ -	\$ -	\$ -	\$ -	\$ 1.42	\$ 2.16
CHILD 01-05	70,368	\$ 0.39	\$ -	\$ 0.08	\$ 0.00	\$ -	\$ -	\$ 22.38	\$ 36.22
CHILD 06-18	172,046	\$ 0.61	\$ -	\$ 0.32	\$ 0.01	\$ -	\$ -	\$ 22.34	\$ 58.24
ABAD & OAA Duals	25,538	\$ 49.40	\$ -	\$ 0.05	\$ 0.00	\$ -	\$ -	\$ 27.13	\$ 111.84
ABAD & OAA Medicaid Only	22,804	\$ 52.76	\$ -	\$ 4.44	\$ 0.09	\$ -	\$ -	\$ 28.39	\$ 206.68
CAF	6,955	\$ 2.19	\$ -	\$ 0.40	\$ 0.01	\$ -	\$ -	\$ 25.07	\$ 382.17
ACA 19-44	164,445	\$ 5.50	\$ -	\$ 0.97	\$ 0.02	\$ -	\$ -	\$ 22.90	\$ 61.30
ACA 45-54	54,291	\$ 11.00	\$ -	\$ 0.80	\$ 0.02	\$ -	\$ -	\$ 33.01	\$ 83.90
ACA 55-64	48,275	\$ 6.99	\$ -	\$ 0.47	\$ 0.01	\$ -	\$ -	\$ 31.89	\$ 79.36
BCCP	550	\$ 52.76	\$ -	\$ 0.15	\$ 0.00	\$ -	\$ -	\$ 28.39	\$ 137.72
<b>Total</b>	<b>632,577</b>	<b>\$ 7.56</b>	<b>\$ -</b>	<b>\$ 0.66</b>	<b>\$ 0.01</b>	<b>\$ -</b>	<b>\$ -</b>	<b>\$ 23.99</b>	<b>\$ 69.88</b>

<sup>1</sup> Rate Add-Ons are inclusive of a 11.5% non-medical load

## Appendix VII. CCO-G Rate Development Summary (RDS) **Optumas**

### Appendix VII.J: PacificSource Community Solutions, Inc. (Gorge)

COA	CY 2015 MMs	Regional	Risk Factor				Breakthrough	ACT/SE <sup>1</sup>	Children's
		Base PMPM	Risk Score	A/B Adjustment	CCO Adjustment	PMPM	Therapy		Wraparound <sup>1</sup>
TANF	6,934	\$ 33.06	1.00	1.00	1.00	\$ 33.06	\$ -	\$ -	\$ -
PLMA	2,995	\$ 14.63	1.00	1.00	1.00	\$ 14.63	\$ -	\$ -	\$ -
CHILD 00-01	5,073	\$ 0.33	1.00	1.00	1.00	\$ 0.33	\$ -	\$ -	\$ -
CHILD 01-05	20,443	\$ 13.37	1.00	1.00	1.00	\$ 13.37	\$ -	\$ -	\$ -
CHILD 06-18	47,576	\$ 34.97	1.00	1.00	1.00	\$ 34.97	\$ -	\$ -	\$ -
ABAD & OAA Duals	4,049	\$ 35.25	1.00	1.00	1.00	\$ 35.25	\$ -	\$ -	\$ -
ABAD & OAA Medicaid Only	5,753	\$ 121.00	1.00	1.00	1.00	\$ 121.00	\$ -	\$ -	\$ -
CAF	2,571	\$ 256.64	1.00	1.00	1.00	\$ 256.64	\$ -	\$ -	\$ 97.87
ACA 19-44	34,571	\$ 31.90	1.00	1.00	1.00	\$ 31.90	\$ -	\$ -	\$ -
ACA 45-54	12,849	\$ 39.08	1.00	1.00	1.00	\$ 39.08	\$ -	\$ -	\$ -
ACA 55-64	11,136	\$ 40.01	1.00	1.00	1.00	\$ 40.01	\$ -	\$ -	\$ -
BCCP	95	\$ 56.41	1.00	1.00	1.00	\$ 56.41	\$ -	\$ -	\$ -
<b>Total</b>	<b>154,046</b>	<b>\$ 37.43</b>				<b>\$ 37.43</b>	<b>\$ -</b>	<b>\$ -</b>	<b>\$ 1.63</b>

COA	CY 2015 MMs	NEMT <sup>1</sup>	CANS <sup>1</sup>	Tier 1 HRA	Tier 1 HRA Admin	Tier 2 HRA	Health Insurer Fee	Dental	CY17 Payment Rate
TANF	6,934	\$ 3.27	\$ -	\$ 0.42	\$ 0.01	\$ -	\$ -	\$ 23.99	\$ 60.74
PLMA	2,995	\$ 3.47	\$ -	\$ 0.04	\$ 0.00	\$ -	\$ -	\$ 18.70	\$ 36.84
CHILD 00-01	5,073	\$ 0.22	\$ -	\$ -	\$ -	\$ -	\$ -	\$ 1.42	\$ 1.97
CHILD 01-05	20,443	\$ 0.21	\$ -	\$ 0.05	\$ 0.00	\$ -	\$ -	\$ 22.38	\$ 36.01
CHILD 06-18	47,576	\$ 0.33	\$ -	\$ 0.28	\$ 0.01	\$ -	\$ -	\$ 22.34	\$ 57.92
ABAD & OAA Duals	4,049	\$ 26.66	\$ -	\$ 0.03	\$ 0.00	\$ -	\$ -	\$ 27.13	\$ 89.07
ABAD & OAA Medicaid Only	5,753	\$ 28.47	\$ -	\$ 2.49	\$ 0.05	\$ -	\$ -	\$ 28.39	\$ 180.41
CAF	2,571	\$ 1.18	\$ -	\$ 0.17	\$ 0.00	\$ -	\$ -	\$ 25.07	\$ 380.93
ACA 19-44	34,571	\$ 2.97	\$ -	\$ 0.24	\$ 0.00	\$ -	\$ -	\$ 22.90	\$ 58.02
ACA 45-54	12,849	\$ 5.94	\$ -	\$ 0.42	\$ 0.01	\$ -	\$ -	\$ 33.01	\$ 78.45
ACA 55-64	11,136	\$ 3.77	\$ -	\$ 0.28	\$ 0.01	\$ -	\$ -	\$ 31.89	\$ 75.96
BCCP	95	\$ 28.47	\$ -	\$ 0.01	\$ 0.00	\$ -	\$ -	\$ 28.39	\$ 113.28
<b>Total</b>	<b>154,046</b>	<b>\$ 3.59</b>	<b>\$ -</b>	<b>\$ 0.32</b>	<b>\$ 0.01</b>	<b>\$ -</b>	<b>\$ -</b>	<b>\$ 23.77</b>	<b>\$ 66.74</b>

<sup>1</sup> Rate Add-Ons are inclusive of a 11.5% non-medical load

## Appendix VII. CCO-G Rate Development Summary (RDS) **Optumas**

### Appendix VII.K: Primary Health of Josephine County, LLC

COA	CY 2015 MMs	Regional	Risk Factor				Breakthrough	ACT/SE <sup>1</sup>	Children's
		Base PMPM	Risk Score	A/B Adjustment	CCO Adjustment	PMPM	Therapy		Wraparound <sup>1</sup>
TANF	7,942	\$ 40.95	1.00	1.00	1.00	\$ 40.95	\$ -	\$ 1.24	\$ -
PLMA	2,556	\$ 27.20	1.00	1.00	1.00	\$ 27.20	\$ -	\$ -	\$ -
CHILD 00-01	3,267	\$ 7.64	1.00	1.00	1.00	\$ 7.64	\$ -	\$ -	\$ -
CHILD 01-05	11,458	\$ 20.24	1.00	1.00	1.00	\$ 20.24	\$ -	\$ -	\$ -
CHILD 06-18	29,617	\$ 34.63	1.00	1.00	1.00	\$ 34.63	\$ -	\$ -	\$ -
ABAD & OAA Duals	6,081	\$ 41.96	1.00	1.00	1.00	\$ 41.96	\$ -	\$ 3.36	\$ -
ABAD & OAA Medicaid Only	6,999	\$ 148.18	1.00	1.00	1.00	\$ 148.18	\$ -	\$ 24.62	\$ -
CAF	2,176	\$ 215.09	1.00	1.00	1.00	\$ 215.09	\$ -	\$ -	\$ 46.00
ACA 19-44	36,261	\$ 42.36	1.00	1.00	1.00	\$ 42.36	\$ -	\$ -	\$ -
ACA 45-54	14,252	\$ 48.12	1.00	1.00	1.00	\$ 48.12	\$ -	\$ -	\$ -
ACA 55-64	14,043	\$ 43.81	1.00	1.00	1.00	\$ 43.81	\$ -	\$ -	\$ -
BCCP	122	\$ 54.26	1.00	1.00	1.00	\$ 54.26	\$ -	\$ 24.62	\$ -
<b>Total</b>	<b>134,771</b>	<b>\$ 46.60</b>				<b>\$ 46.60</b>	<b>\$ -</b>	<b>\$ 1.53</b>	<b>\$ 0.74</b>

COA	CY 2015 MMs	NEMT <sup>1</sup>	CANS <sup>1</sup>	Tier 1 HRA	Tier 1 HRA Admin	Tier 2 HRA	Health Insurer Fee	Dental	CY17 Payment Rate
TANF	7,942	\$ 3.77	\$ -	\$ 1.41	\$ 0.03	\$ -	\$ -	\$ 23.99	\$ 71.39
PLMA	2,556	\$ 4.01	\$ -	\$ 1.55	\$ 0.03	\$ -	\$ -	\$ 18.70	\$ 51.48
CHILD 00-01	3,267	\$ 0.26	\$ -	\$ 0.03	\$ 0.00	\$ -	\$ -	\$ 1.42	\$ 9.35
CHILD 01-05	11,458	\$ 0.24	\$ -	\$ 0.16	\$ 0.00	\$ -	\$ -	\$ 22.38	\$ 43.03
CHILD 06-18	29,617	\$ 0.38	\$ -	\$ 0.86	\$ 0.02	\$ -	\$ -	\$ 22.34	\$ 58.22
ABAD & OAA Duals	6,081	\$ 30.77	\$ -	\$ 0.29	\$ 0.01	\$ -	\$ -	\$ 27.13	\$ 103.51
ABAD & OAA Medicaid Only	6,999	\$ 32.85	\$ -	\$ 12.75	\$ 0.26	\$ -	\$ -	\$ 28.39	\$ 247.06
CAF	2,176	\$ 1.36	\$ 3.39	\$ 7.33	\$ 0.15	\$ -	\$ -	\$ 25.07	\$ 298.39
ACA 19-44	36,261	\$ 3.43	\$ -	\$ 3.03	\$ 0.06	\$ -	\$ -	\$ 22.90	\$ 71.78
ACA 45-54	14,252	\$ 6.85	\$ -	\$ 3.16	\$ 0.06	\$ -	\$ -	\$ 33.01	\$ 91.20
ACA 55-64	14,043	\$ 4.35	\$ -	\$ 2.68	\$ 0.05	\$ -	\$ -	\$ 31.89	\$ 82.79
BCCP	122	\$ 32.85	\$ -	\$ 2.31	\$ 0.05	\$ -	\$ -	\$ 28.39	\$ 142.49
<b>Total</b>	<b>134,771</b>	<b>\$ 5.65</b>	<b>\$ 0.05</b>	<b>\$ 2.54</b>	<b>\$ 0.05</b>	<b>\$ -</b>	<b>\$ -</b>	<b>\$ 24.72</b>	<b>\$ 81.89</b>

<sup>1</sup> Rate Add-Ons are inclusive of a 11.8% non-medical load

## Appendix VII. CCO-G Rate Development Summary (RDS) **Optumas**

### Appendix VII.L: Trillium Community Health Plan, Inc.

COA	CY 2015 MMs	Regional	Risk Factor				Breakthrough	ACT/SE <sup>1</sup>	Children's
		Base PMPM	Risk Score	A/B Adjustment	CCO Adjustment	PMPM	Therapy		Wraparound <sup>1</sup>
TANF	57,779	\$ 40.95	1.00	1.00	1.00	\$ 40.95	\$ -	\$ 1.78	\$ -
PLMA	20,080	\$ 27.20	1.00	1.00	1.00	\$ 27.20	\$ -	\$ 1.86	\$ -
CHILD 00-01	29,600	\$ 7.64	1.00	1.00	1.00	\$ 7.64	\$ -	\$ 3.80	\$ -
CHILD 01-05	107,817	\$ 20.24	1.00	1.00	1.00	\$ 20.24	\$ -	\$ 0.51	\$ -
CHILD 06-18	245,824	\$ 34.63	1.00	1.00	1.00	\$ 34.63	\$ -	\$ 0.67	\$ -
ABAD & OAA Duals	49,880	\$ 41.96	1.00	1.00	1.00	\$ 41.96	\$ -	\$ 0.73	\$ -
ABAD & OAA Medicaid Only	65,231	\$ 148.18	1.00	1.00	1.00	\$ 148.18	\$ -	\$ 5.78	\$ -
CAF	24,757	\$ 215.09	1.00	1.00	1.00	\$ 215.09	\$ -	\$ 1.95	\$ 31.01
ACA 19-44	301,144	\$ 42.36	1.00	1.00	1.00	\$ 42.36	\$ -	\$ 1.38	\$ -
ACA 45-54	89,008	\$ 48.12	1.00	1.00	1.00	\$ 48.12	\$ -	\$ 2.69	\$ -
ACA 55-64	79,765	\$ 43.81	1.00	1.00	1.00	\$ 43.81	\$ -	\$ 2.95	\$ -
BCCP	514	\$ 54.26	1.00	1.00	1.00	\$ 54.26	\$ -	\$ 5.78	\$ -
<b>Total</b>	<b>1,071,399</b>	<b>\$ 48.05</b>				<b>\$ 48.05</b>	<b>\$ -</b>	<b>\$ 1.71</b>	<b>\$ 0.72</b>

COA	CY 2015 MMs	NEMT <sup>1</sup>	CANS <sup>1</sup>	Tier 1 HRA	Tier 1 HRA Admin	Tier 2 HRA	Health Insurer Fee	Dental	CY17 Payment Rate
TANF	57,779	\$ 5.50	\$ -	\$ 2.09	\$ 0.04	\$ -	\$ -	\$ 23.99	\$ 74.35
PLMA	20,080	\$ 5.84	\$ -	\$ 1.79	\$ 0.04	\$ -	\$ -	\$ 18.70	\$ 55.42
CHILD 00-01	29,600	\$ 0.38	\$ -	\$ 0.03	\$ 0.00	\$ -	\$ -	\$ 1.42	\$ 13.27
CHILD 01-05	107,817	\$ 0.35	\$ -	\$ 0.37	\$ 0.01	\$ -	\$ -	\$ 22.38	\$ 43.87
CHILD 06-18	245,824	\$ 0.55	\$ -	\$ 1.86	\$ 0.04	\$ -	\$ -	\$ 22.34	\$ 60.09
ABAD & OAA Duals	49,880	\$ 44.87	\$ -	\$ 3.14	\$ 0.06	\$ -	\$ -	\$ 27.13	\$ 117.89
ABAD & OAA Medicaid Only	65,231	\$ 47.92	\$ -	\$ 17.26	\$ 0.35	\$ -	\$ -	\$ 28.39	\$ 247.88
CAF	24,757	\$ 1.99	\$ 0.27	\$ 7.81	\$ 0.16	\$ -	\$ -	\$ 25.07	\$ 283.35
ACA 19-44	301,144	\$ 5.00	\$ -	\$ 3.66	\$ 0.07	\$ -	\$ -	\$ 22.90	\$ 75.37
ACA 45-54	89,008	\$ 9.99	\$ -	\$ 4.28	\$ 0.09	\$ -	\$ -	\$ 33.01	\$ 98.18
ACA 55-64	79,765	\$ 6.35	\$ -	\$ 2.78	\$ 0.06	\$ -	\$ -	\$ 31.89	\$ 87.83
BCCP	514	\$ 47.92	\$ -	\$ 2.13	\$ 0.04	\$ -	\$ -	\$ 28.39	\$ 138.54
<b>Total</b>	<b>1,071,399</b>	<b>\$ 8.36</b>	<b>\$ 0.01</b>	<b>\$ 3.58</b>	<b>\$ 0.07</b>	<b>\$ -</b>	<b>\$ -</b>	<b>\$ 24.20</b>	<b>\$ 86.69</b>

<sup>1</sup> Rate Add-Ons are inclusive of a 11.8% non-medical load

## Appendix VII. CCO-G Rate Development Summary (RDS) **Optumas**

### Appendix VII.M: DCIPA, LLC. Abn Umpqua Health Alliance

COA	CY 2015 MMs	Regional	Risk Factor				Breakthrough	ACT/SE <sup>1</sup>	Children's
		Base PMPM	Risk Score	A/B Adjustment	CCO Adjustment	PMPM	Therapy		Wraparound <sup>1</sup>
TANF	20,416	\$ 40.95	1.00	1.00	1.00	\$ 40.95	\$ -	\$ 1.24	\$ -
PLMA	5,376	\$ 27.20	1.00	1.00	1.00	\$ 27.20	\$ -	\$ -	\$ -
CHILD 00-01	8,818	\$ 7.64	1.00	1.00	1.00	\$ 7.64	\$ -	\$ -	\$ -
CHILD 01-05	32,205	\$ 20.24	1.00	1.00	1.00	\$ 20.24	\$ -	\$ -	\$ -
CHILD 06-18	70,266	\$ 34.63	1.00	1.00	1.00	\$ 34.63	\$ -	\$ -	\$ -
ABAD & OAA Duals	18,343	\$ 41.96	1.00	1.00	1.00	\$ 41.96	\$ -	\$ 7.92	\$ -
ABAD & OAA Medicaid Only	18,401	\$ 148.18	1.00	1.00	1.00	\$ 148.18	\$ -	\$ 14.03	\$ -
CAF	6,740	\$ 215.09	1.00	1.00	1.00	\$ 215.09	\$ -	\$ -	\$ 76.89
ACA 19-44	80,000	\$ 42.36	1.00	1.00	1.00	\$ 42.36	\$ -	\$ 1.22	\$ -
ACA 45-54	27,667	\$ 48.12	1.00	1.00	1.00	\$ 48.12	\$ -	\$ 1.26	\$ -
ACA 55-64	25,376	\$ 43.81	1.00	1.00	1.00	\$ 43.81	\$ -	\$ 1.26	\$ -
BCCP	197	\$ 54.26	1.00	1.00	1.00	\$ 54.26	\$ -	\$ 14.03	\$ -
<b>Total</b>	<b>313,807</b>	<b>\$ 47.56</b>				<b>\$ 47.56</b>	<b>\$ -</b>	<b>\$ 1.90</b>	<b>\$ 1.65</b>

COA	CY 2015 MMs	NEMT <sup>1</sup>	CANS <sup>1</sup>	Tier 1 HRA	Tier 1 HRA Admin	Tier 2 HRA	Health Insurer Fee	Dental	CY17 Payment Rate
TANF	20,416	\$ 4.93	\$ -	\$ 2.06	\$ 0.04	\$ -	\$ -	\$ 23.99	\$ 73.21
PLMA	5,376	\$ 5.24	\$ -	\$ 1.46	\$ 0.03	\$ -	\$ -	\$ 18.70	\$ 52.62
CHILD 00-01	8,818	\$ 0.34	\$ -	\$ 0.03	\$ 0.00	\$ -	\$ -	\$ 1.42	\$ 9.43
CHILD 01-05	32,205	\$ 0.31	\$ -	\$ 0.27	\$ 0.01	\$ -	\$ -	\$ 22.38	\$ 43.21
CHILD 06-18	70,266	\$ 0.49	\$ -	\$ 1.48	\$ 0.03	\$ -	\$ -	\$ 22.34	\$ 58.97
ABAD & OAA Duals	18,343	\$ 40.22	\$ -	\$ 0.19	\$ 0.00	\$ -	\$ -	\$ 27.13	\$ 117.42
ABAD & OAA Medicaid Only	18,401	\$ 42.95	\$ -	\$ 19.59	\$ 0.40	\$ -	\$ -	\$ 28.39	\$ 253.54
CAF	6,740	\$ 1.78	\$ 3.39	\$ 7.48	\$ 0.15	\$ -	\$ -	\$ 25.07	\$ 329.85
ACA 19-44	80,000	\$ 4.48	\$ -	\$ 3.92	\$ 0.08	\$ -	\$ -	\$ 22.90	\$ 74.95
ACA 45-54	27,667	\$ 8.96	\$ -	\$ 3.74	\$ 0.08	\$ -	\$ -	\$ 33.01	\$ 95.15
ACA 55-64	25,376	\$ 5.69	\$ -	\$ 3.13	\$ 0.06	\$ -	\$ -	\$ 31.89	\$ 85.84
BCCP	197	\$ 42.95	\$ -	\$ 2.57	\$ 0.05	\$ -	\$ -	\$ 28.39	\$ 142.26
<b>Total</b>	<b>313,807</b>	<b>\$ 7.89</b>	<b>\$ 0.07</b>	<b>\$ 3.42</b>	<b>\$ 0.07</b>	<b>\$ -</b>	<b>\$ -</b>	<b>\$ 24.35</b>	<b>\$ 86.91</b>

<sup>1</sup> Rate Add-Ons are inclusive of a 11.8% non-medical load

# Appendix VII. CCO-G Rate Development Summary (RDS) **Optumas**

## Appendix VII.N: Western Oregon Advanced Health, LLC

COA	CY 2015 MMs	Regional	Risk Factor				Breakthrough	ACT/SE <sup>1</sup>	Children's
		Base PMPM	Risk Score	A/B Adjustment	CCO Adjustment	PMPM	Therapy		Wraparound <sup>1</sup>
TANF	13,221	\$ 40.95	1.00	1.00	1.00	\$ 40.95	\$ -	\$ 2.28	\$ -
PLMA	3,695	\$ 27.20	1.00	1.00	1.00	\$ 27.20	\$ -	\$ 0.08	\$ -
CHILD 00-01	6,044	\$ 7.64	1.00	1.00	1.00	\$ 7.64	\$ -	\$ 0.07	\$ -
CHILD 01-05	23,304	\$ 20.24	1.00	1.00	1.00	\$ 20.24	\$ -	\$ 0.06	\$ -
CHILD 06-18	50,214	\$ 34.63	1.00	1.00	1.00	\$ 34.63	\$ -	\$ 0.19	\$ -
ABAD & OAA Duals	15,543	\$ 41.96	1.00	1.00	1.00	\$ 41.96	\$ -	\$ 0.27	\$ -
ABAD & OAA Medicaid Only	17,229	\$ 148.18	1.00	1.00	1.00	\$ 148.18	\$ -	\$ 0.78	\$ -
CAF	5,814	\$ 215.09	1.00	1.00	1.00	\$ 215.09	\$ -	\$ 1.59	\$ 18.57
ACA 19-44	58,519	\$ 42.36	1.00	1.00	1.00	\$ 42.36	\$ -	\$ 0.20	\$ -
ACA 45-54	23,417	\$ 48.12	1.00	1.00	1.00	\$ 48.12	\$ -	\$ 0.26	\$ -
ACA 55-64	22,905	\$ 43.81	1.00	1.00	1.00	\$ 43.81	\$ -	\$ 4.46	\$ -
BCCP	172	\$ 54.26	1.00	1.00	1.00	\$ 54.26	\$ -	\$ 0.78	\$ -
<b>Total</b>	<b>240,077</b>	<b>\$ 49.87</b>				<b>\$ 49.87</b>	<b>\$ -</b>	<b>\$ 0.79</b>	<b>\$ 0.45</b>

COA	CY 2015 MMs	NEMT <sup>1</sup>	CANS <sup>1</sup>	Tier 1 HRA	Tier 1 HRA Admin	Tier 2 HRA	Health Insurer Fee	Dental	CY17 Payment Rate
TANF	13,221	\$ 6.13	\$ -	\$ 3.61	\$ 0.07	\$ -	\$ -	\$ 23.99	\$ 77.03
PLMA	3,695	\$ 6.51	\$ -	\$ 3.60	\$ 0.07	\$ -	\$ -	\$ 18.70	\$ 56.15
CHILD 00-01	6,044	\$ 0.42	\$ -	\$ 0.02	\$ 0.00	\$ -	\$ -	\$ 1.42	\$ 9.57
CHILD 01-05	23,304	\$ 0.39	\$ -	\$ 0.36	\$ 0.01	\$ -	\$ -	\$ 22.38	\$ 43.44
CHILD 06-18	50,214	\$ 0.61	\$ -	\$ 1.86	\$ 0.04	\$ -	\$ -	\$ 22.34	\$ 59.67
ABAD & OAA Duals	15,543	\$ 49.97	\$ -	\$ 3.18	\$ 0.06	\$ -	\$ -	\$ 27.13	\$ 122.57
ABAD & OAA Medicaid Only	17,229	\$ 53.36	\$ -	\$ 21.84	\$ 0.45	\$ -	\$ -	\$ 28.39	\$ 253.00
CAF	5,814	\$ 2.21	\$ -	\$ 13.51	\$ 0.28	\$ -	\$ -	\$ 25.07	\$ 276.32
ACA 19-44	58,519	\$ 5.57	\$ -	\$ 6.73	\$ 0.14	\$ -	\$ -	\$ 22.90	\$ 77.89
ACA 45-54	23,417	\$ 11.13	\$ -	\$ 6.36	\$ 0.13	\$ -	\$ -	\$ 33.01	\$ 99.00
ACA 55-64	22,905	\$ 7.07	\$ -	\$ 5.57	\$ 0.11	\$ -	\$ -	\$ 31.89	\$ 92.90
BCCP	172	\$ 53.36	\$ -	\$ 6.08	\$ 0.12	\$ -	\$ -	\$ 28.39	\$ 143.00
<b>Total</b>	<b>240,077</b>	<b>\$ 10.89</b>	<b>\$ -</b>	<b>\$ 5.58</b>	<b>\$ 0.11</b>	<b>\$ -</b>	<b>\$ -</b>	<b>\$ 24.75</b>	<b>\$ 92.44</b>

<sup>1</sup> Rate Add-Ons are inclusive of a 11.8% non-medical load

## Appendix VII. CCO-G Rate Development Summary (RDS) **Optumas**

### Appendix VII.O: Willamette Valley Community Health, LLC

COA	CY 2015 MMs	Regional	Risk Factor				Breakthrough	ACT/SE <sup>1</sup>	Children's
		Base PMPM	Risk Score	A/B Adjustment	CCO Adjustment	PMPM	Therapy		Wraparound <sup>1</sup>
TANF	62,434	\$ 34.42	1.00	1.00	1.00	\$ 34.42	\$ -	\$ 0.68	\$ -
PLMA	20,065	\$ 24.41	1.00	1.00	1.00	\$ 24.41	\$ -	\$ -	\$ -
CHILD 00-01	39,643	\$ 14.03	1.00	1.00	1.00	\$ 14.03	\$ -	\$ -	\$ -
CHILD 01-05	160,642	\$ 25.46	1.00	1.00	1.00	\$ 25.46	\$ -	\$ -	\$ -
CHILD 06-18	361,728	\$ 34.74	1.00	1.00	1.00	\$ 34.74	\$ -	\$ -	\$ -
ABAD & OAA Duals	53,859	\$ 36.68	1.00	1.00	1.00	\$ 36.68	\$ -	\$ 7.53	\$ -
ABAD & OAA Medicaid Only	55,258	\$ 82.70	1.00	1.00	1.00	\$ 82.70	\$ -	\$ 14.14	\$ -
CAF	15,686	\$ 157.00	1.00	1.00	1.00	\$ 157.00	\$ -	\$ -	\$ 90.49
ACA 19-44	260,640	\$ 38.17	1.00	1.00	1.00	\$ 38.17	\$ -	\$ 0.69	\$ -
ACA 45-54	80,639	\$ 38.90	1.00	1.00	1.00	\$ 38.90	\$ -	\$ 0.69	\$ -
ACA 55-64	61,642	\$ 32.71	1.00	1.00	1.00	\$ 32.71	\$ -	\$ 0.70	\$ -
BCCP	346	\$ 14.70	1.00	1.00	1.00	\$ 14.70	\$ -	\$ 14.14	\$ -
<b>Total</b>	<b>1,172,579</b>	<b>\$ 37.50</b>				<b>\$ 37.50</b>	<b>\$ -</b>	<b>\$ 1.29</b>	<b>\$ 1.21</b>

COA	CY 2015 MMs	NEMT <sup>1</sup>	CANS <sup>1</sup>	Tier 1 HRA	Tier 1 HRA Admin	Tier 2 HRA	Health Insurer Fee	Dental	CY17 Payment Rate
TANF	62,434	\$ 5.70	\$ -	\$ 0.92	\$ 0.02	\$ -	\$ -	\$ 23.99	\$ 65.73
PLMA	20,065	\$ 6.06	\$ -	\$ 0.09	\$ 0.00	\$ -	\$ -	\$ 18.70	\$ 49.25
CHILD 00-01	39,643	\$ 0.39	\$ -	\$ -	\$ -	\$ -	\$ -	\$ 1.42	\$ 15.83
CHILD 01-05	160,642	\$ 0.36	\$ -	\$ -	\$ -	\$ -	\$ -	\$ 22.38	\$ 48.20
CHILD 06-18	361,728	\$ 0.57	\$ -	\$ 0.35	\$ 0.01	\$ -	\$ -	\$ 22.34	\$ 58.00
ABAD & OAA Duals	53,859	\$ 46.51	\$ -	\$ 0.22	\$ 0.00	\$ -	\$ -	\$ 27.13	\$ 118.07
ABAD & OAA Medicaid Only	55,258	\$ 49.67	\$ -	\$ 6.51	\$ 0.13	\$ -	\$ -	\$ 28.39	\$ 181.54
CAF	15,686	\$ 2.06	\$ 3.05	\$ 0.75	\$ 0.02	\$ -	\$ -	\$ 25.07	\$ 278.43
ACA 19-44	260,640	\$ 5.18	\$ -	\$ 1.99	\$ 0.04	\$ -	\$ -	\$ 22.90	\$ 68.97
ACA 45-54	80,639	\$ 10.36	\$ -	\$ 1.35	\$ 0.03	\$ -	\$ -	\$ 33.01	\$ 84.34
ACA 55-64	61,642	\$ 6.58	\$ -	\$ 0.63	\$ 0.01	\$ -	\$ -	\$ 31.89	\$ 72.53
BCCP	346	\$ 49.67	\$ -	\$ -	\$ -	\$ -	\$ -	\$ 28.39	\$ 106.90
<b>Total</b>	<b>1,172,579</b>	<b>\$ 7.38</b>	<b>\$ 0.04</b>	<b>\$ 1.05</b>	<b>\$ 0.02</b>	<b>\$ -</b>	<b>\$ -</b>	<b>\$ 23.57</b>	<b>\$ 72.05</b>

<sup>1</sup> Rate Add-Ons are inclusive of a 9.7% non-medical load

# Appendix VII. CCO-G Rate Development Summary (RDS) **Optumas**

## Appendix VII.P: Yamhill County Care Organization, Inc.

COA	CY 2015 MMs	Regional	Risk Factor				Breakthrough	ACT/SE <sup>1</sup>	Children's
		Base PMPM	Risk Score	A/B Adjustment	CCO Adjustment	PMPM	Therapy		Wraparound <sup>1</sup>
TANF	15,506	\$ 34.42	1.00	1.00	1.00	\$ 34.42	\$ -	\$ 5.00	\$ -
PLMA	4,907	\$ 24.41	1.00	1.00	1.00	\$ 24.41	\$ -	\$ 0.87	\$ -
CHILD 00-01	8,354	\$ 14.03	1.00	1.00	1.00	\$ 14.03	\$ -	\$ -	\$ -
CHILD 01-05	34,842	\$ 25.46	1.00	1.00	1.00	\$ 25.46	\$ -	\$ -	\$ -
CHILD 06-18	82,112	\$ 34.74	1.00	1.00	1.00	\$ 34.74	\$ -	\$ 0.02	\$ -
ABAD & OAA Duals	6,505	\$ 36.68	1.00	1.00	1.00	\$ 36.68	\$ -	\$ 8.63	\$ -
ABAD & OAA Medicaid Only	8,809	\$ 82.70	1.00	1.00	1.00	\$ 82.70	\$ -	\$ 14.07	\$ -
CAF	3,389	\$ 157.00	1.00	1.00	1.00	\$ 157.00	\$ -	\$ -	\$ 126.14
ACA 19-44	64,738	\$ 38.17	1.00	1.00	1.00	\$ 38.17	\$ -	\$ 3.42	\$ -
ACA 45-54	21,328	\$ 38.90	1.00	1.00	1.00	\$ 38.90	\$ -	\$ 7.31	\$ -
ACA 55-64	17,196	\$ 32.71	1.00	1.00	1.00	\$ 32.71	\$ -	\$ 3.70	\$ -
BCCP	122	\$ 14.70	1.00	1.00	1.00	\$ 14.70	\$ -	\$ 14.07	\$ -
<b>Total</b>	<b>267,808</b>	<b>\$ 36.87</b>				<b>\$ 36.87</b>	<b>\$ -</b>	<b>\$ 2.64</b>	<b>\$ 1.60</b>

COA	CY 2015 MMs	NEMT <sup>1</sup>	CANS <sup>1</sup>	Tier 1 HRA	Tier 1 HRA Admin	Tier 2 HRA	Health Insurer Fee	Dental	CY17 Payment Rate
TANF	15,506	\$ 8.06	\$ -	\$ 1.26	\$ 0.03	\$ -	\$ -	\$ 23.99	\$ 72.75
PLMA	4,907	\$ 8.56	\$ -	\$ 0.11	\$ 0.00	\$ -	\$ -	\$ 18.70	\$ 52.65
CHILD 00-01	8,354	\$ 0.55	\$ -	\$ -	\$ -	\$ -	\$ -	\$ 1.42	\$ 15.99
CHILD 01-05	34,842	\$ 0.51	\$ -	\$ -	\$ -	\$ -	\$ -	\$ 22.38	\$ 48.35
CHILD 06-18	82,112	\$ 0.81	\$ -	\$ 0.69	\$ 0.01	\$ -	\$ -	\$ 22.34	\$ 58.61
ABAD & OAA Duals	6,505	\$ 65.72	\$ -	\$ 0.31	\$ 0.01	\$ -	\$ -	\$ 27.13	\$ 138.49
ABAD & OAA Medicaid Only	8,809	\$ 70.19	\$ -	\$ 11.04	\$ 0.23	\$ -	\$ -	\$ 28.39	\$ 206.61
CAF	3,389	\$ 2.91	\$ 2.07	\$ 1.26	\$ 0.03	\$ -	\$ -	\$ 25.07	\$ 314.47
ACA 19-44	64,738	\$ 7.32	\$ -	\$ 2.55	\$ 0.05	\$ -	\$ -	\$ 22.90	\$ 74.41
ACA 45-54	21,328	\$ 14.64	\$ -	\$ 1.25	\$ 0.03	\$ -	\$ -	\$ 33.01	\$ 95.13
ACA 55-64	17,196	\$ 9.29	\$ -	\$ 0.69	\$ 0.01	\$ -	\$ -	\$ 31.89	\$ 78.30
BCCP	122	\$ 70.19	\$ -	\$ -	\$ -	\$ -	\$ -	\$ 28.39	\$ 127.36
<b>Total</b>	<b>267,808</b>	<b>\$ 8.46</b>	<b>\$ 0.03</b>	<b>\$ 1.44</b>	<b>\$ 0.03</b>	<b>\$ -</b>	<b>\$ -</b>	<b>\$ 23.67</b>	<b>\$ 74.73</b>

<sup>1</sup> Rate Add-Ons are inclusive of a 9.7% non-medical load



### Appendix VIII Reimbursement Policy

Please see accompanying PDF document titled: “OR CY17 Rates - Appendix VIII Reimbursement Policy.pdf”

### Appendix IX ABA & Hep-C Risk Corridor

Please see accompanying PDF document titled: "OR CY17 Rates - Appendix IX ABA & Hep-C Risk Corridor.pdf"

### Appendix X CDPS+Rx Risk Score Methodology

Please see accompanying PDF document titled: "OR CY17 Rates - Appendix X CDPS+Rx Risk Score Methodology.pdf"

### Appendix XI CCO Q&As

Please see accompanying PDF documents titled:

“OR CY17 Rates - Appendix XI CCO Q&As NorthWest.pdf”

“OR CY17 Rates - Appendix XI CCO Q&As SouthWest.pdf”

“OR CY17 Rates - Appendix XI CCO Q&As Tri-County.pdf”

### Appendix XII Dental Adjustment

Please see accompanying PDF document titled: "OR CY17 Rates - Appendix XII Dental Adjustment.pdf"



## 2017 Reimbursement Review

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### Rate Process Overview

As of September 30, 2016, the Oregon Health Authority presented the 2017 rates to CCOs and is finalizing the submission of rates and the actuarial certification to CMS. OHA has continued to contract with Optumas, our Medicaid Actuarial consultant, to develop and certify the 2017 rates. The rate development leverages the regional and risk score methodology used for 2015 and 2016 CCO rates. As part of this development process, Optumas and OHA reviewed the CCO 2015 financial information submitted by CCOs and created the regional base data, which is the basis for the 2017 rates. The following outlines how those adjustments were determined.

### 2015 Financial Picture and Rate Setting

During the 2015 financial review process, Optumas found that some CCOs were reporting a significant increase in per member spending from 2014 to 2015, while others were reporting sustainable or low rates of growth. However, **on aggregate, the per member costs from 2014 to 2015 still grew at a rate of 8.6% as reported by CCOs (see next page for graphs).** This growth rate far out-paced the sustainable rate of growth of 3.4%.

OHA asked Optumas to explore the drivers for CCOs that experienced significant increases, and found a major driver was due to business decisions made by the CCOs, including the business decision to increase reimbursement and/or payout surpluses to providers as incentives. Other significant drivers that affected CCO increases in per member cost include increased pharmacy and A/B hospital costs.

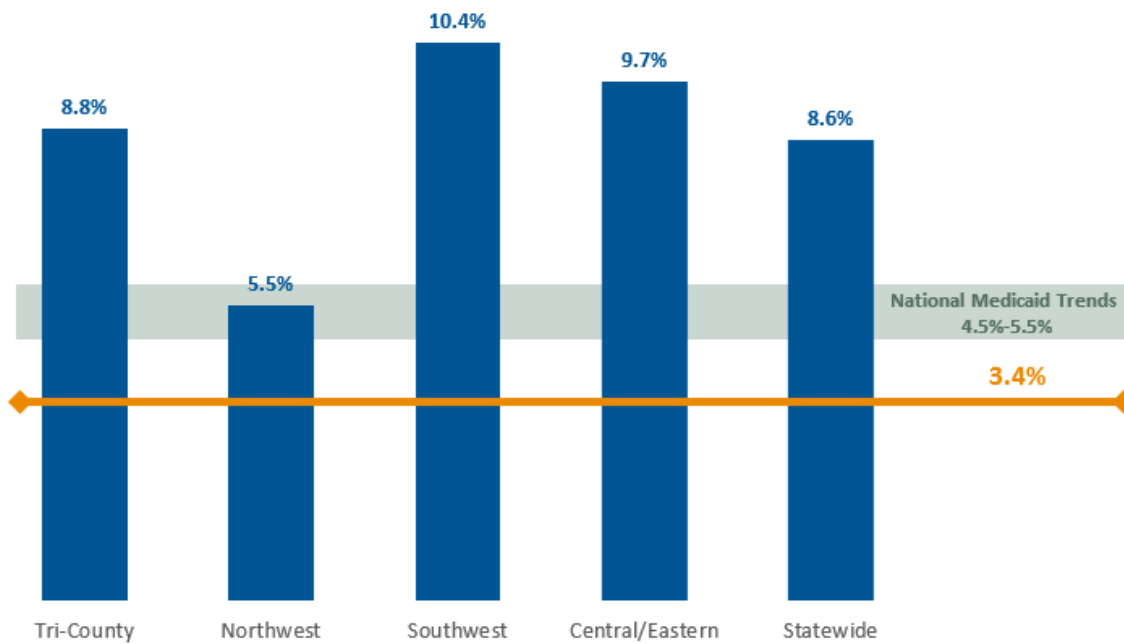
### Drivers of increased costs per member from 2014 to 2015

- Increased reimbursement to providers between 2014 to 2015 for specific CCOs
- Surplus payouts to providers (incentive payments) for specific CCOs
- Increased pharmacy costs (both generic and brand) affecting all CCOs
- Increased A/B hospital costs for specific CCOs

Given the noted reimbursement increases and increased incentives, OHA asked Optumas to conduct a reimbursement analysis across the program to further understand the changes over time. The following graphs provide more insight to the landscape of the growth reported by CCOs at a regional level from 2014 to 2015.

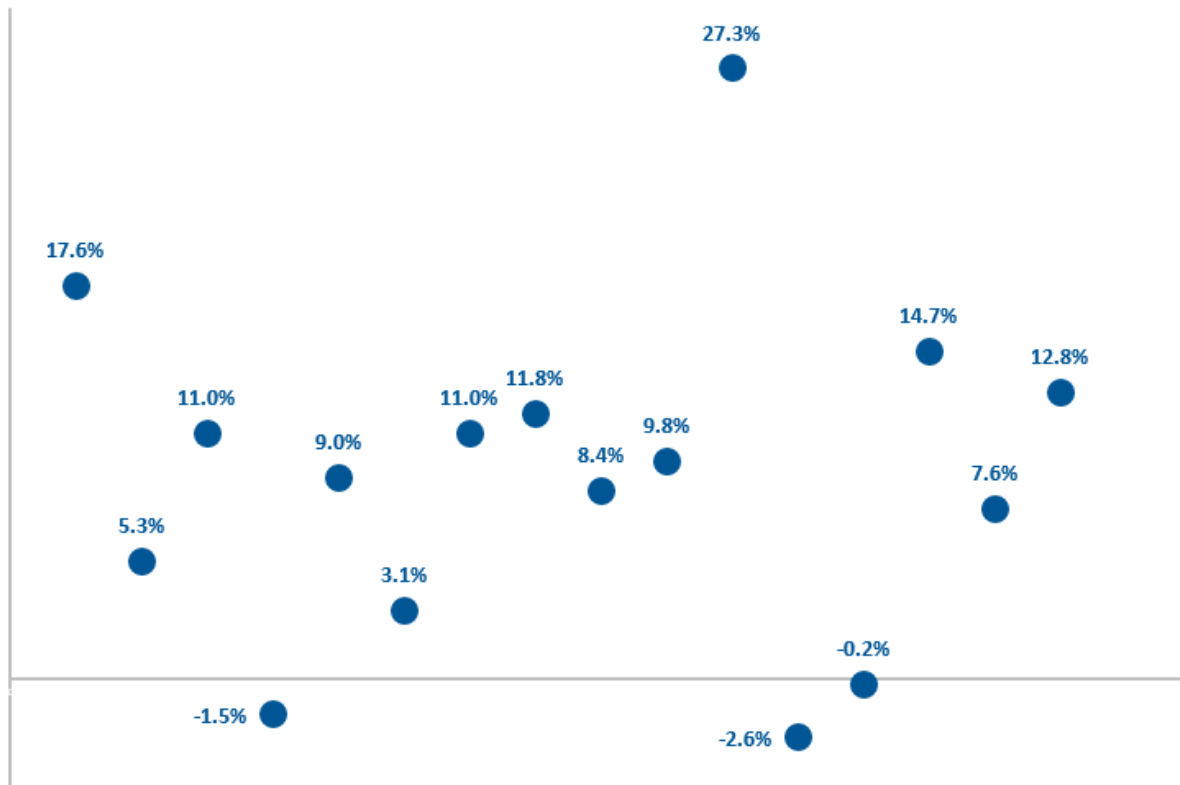
## 2014 to 2015 Implied Growth Rate

*CCO reported financial comparison by region and statewide, adjusted for population mix*



## 2014 to 2015 Implied Growth Rate by CCO

*CCO reported financial comparison, adjusted for population mix*



## Base Data Policy and Reimbursement Review

Based on the information laid out above, OHA adopted a rate development policy to mitigate the high rate of growth from 2014 to 2015. The policy still promotes efficiency and the success we've seen with lower growth for some CCOs. Without action, the State of Oregon would be in jeopardy of not achieving the 3.4% sustainable rate of growth agreed upon with CMS. **Please note, these rate adjustments do not result in a CCO-specific rate increase or decrease, due to the regional rate methodology.**

### Policy Principles:

- Develop a policy that promotes containing costs across a CCO's budget, no matter the reimbursement method or reimbursement level.
- Do not perpetuate CCO business decisions of increased spending from 2014 to 2015 into 2017, unless they are sustainable.
- Do not carry forward into 2017 increased incentives or reimbursement payments that were the result of payout surpluses gained in 2014 and 2015.

### 2017 Base Data Policy:

- For CCOs that met a sustainable growth rate, no reimbursement adjustment was made. However, surplus and one-time costs were removed.
- For CCOs that were outliers and above a sustainable growth, and also had increased reimbursement from 2014 to 2015 – adjustments were made in claims level reimbursement and/or incentive payments.

After the above policy was applied, the base data resulted in a 4.7% increase from 2014 to 2015. While the sustainable rate of growth was used to evaluate drivers, if CCOs experienced increased costs based on such things as pharmacy or A/B hospital expenditures, adjustments were not made to those categories. **In summary, the base data was not adjusted to attain a sustainable rate of growth, but was evaluated to reveal drivers of growth that are both unsustainable and significantly above national trends and Oregon's sustainable rate of growth of 3.4%**

Region	CY14 to CY15 PMPM Rate of Growth - Mix Adjusted		CY15 Financial Dollars		
	<i>Reported Financials</i> <sup>1</sup>	<i>Adjusted Financials</i> <sup>2</sup>	<i>Reported Financials</i> <sup>1</sup>	<i>Adjusted Financials</i> <sup>2</sup>	<i>Difference</i>
Tri-County	8.8%	5.6%	\$ 1,151,175,403	\$ 1,116,762,916	\$ (34,412,487)
Northwest	5.5%	3.1%	\$ 719,413,330	\$ 703,265,950	\$ (16,147,380)
Southwest	10.4%	3.9%	\$ 814,775,774	\$ 766,804,592	\$ (47,971,181)
Central/Eastern	9.7%	6.4%	\$ 502,302,716	\$ 487,321,980	\$ (14,980,736)
Statewide	8.6%	4.7%	\$ 3,187,667,223	\$ 3,074,155,437	\$ (113,511,785)

## CMS Final Rule

In addition, the new [Centers for Medicare and Medicaid Services \(CMS\) Managed Care Rule](#), gives states the discretion to set minimum and maximum reimbursement levels that are reasonable to attain access to services, and gives states additional flexibility to determine which services and models are appropriate for value-based purchasing. (§438.4(b)(3)) This new guidance supports OHA's ability to conduct reimbursement analyses and develop policy related to business models that affect reimbursement and incentives.



## CCO Risk Corridor

### a. Definitions

The following definitions apply solely within this Exhibit C, Section 6.

- (1) “ABA” means applied behavioral analysis, as further described in the Prioritized List of Health Services.
- (2) “ABA Expense” means priced encounters for eligible ABA services during the ABA Risk Corridor Period.
- (3) “ABA Risk Corridor Period” means July 1, 2016 through December 31, 2017.
- (4) “ABA Revenue” means an amount included in the ABA adjustment specified in the Contractor Rates as set forth in Attachment 1 to this Exhibit C multiplied by Contractor’s Member enrollment for the ABA Risk Corridor Period, and 50% of the administrative allowance attributed to the ABA adjustment described below.
- (5) **“Hepatitis C DAA drugs” means the class of direct acting antiviral (DAA) drugs to treat Hepatitis C.**
- (6) **“Hepatitis C DAA Expense” means encounters with a paid amount recorded for Hepatitis C DAA drugs during the Hepatitis C Risk Corridor Period.**
- (7) **“Hepatitis C Risk Corridor Period” means January 1, 2017 through December 31, 2017.**
- (8) **“Hepatitis C DAA Revenue” means an amount included in the Hepatitis C DAA adjustment specified in the Contractor Rates as set forth in Attachment 1 to this Exhibit C multiplied by Contractor’s Member enrollment for the Hepatitis C Risk Corridor Period.**
- (9) **“Hepatitis C DAA Admin Revenue” means the administrative allowance attributed to the Hepatitis C DAA adjustment in Attachment 1 to this Exhibit C multiplied by Contractor’s Member enrollment for the Hepatitis C Risk Corridor Period.**

- (10) **“Statewide Supplemental Rebate Agreement” means an agreement entered into by OHA with a prescription drug manufacturer for a pricing agreement /or rebate agreement, or combination thereof, with requirements regarding dispensing criteria, preferred drug list placement, or prior authorization criteria. OHA will provide Contractor a list of the provisions applicable to Contractor as contained within the Statewide Supplemental Rebate Agreement to ensure consistent application of the provisions contained therein by all CCOs. OHA will provide Contractor 60 days’ prior written notice of the applicable Statewide Supplemental Rebate Agreement provisions.**
- (11) **“CCO Risk Corridor”** means a risk sharing mechanism in which OHA and Contractor share in both higher and lower than adjusted expenses under the Contract outside of the predetermined target amount, so that if Contractor’s adjusted expenses are outside the corridor in which the Contractor is responsible for all its adjusted expenses, the OHA contributes a portion toward additional adjusted expenses, or receives a portion of lower adjusted expenses.
- (12) **“Charge”** means the flow of funds from the Contractor to the OHA.
- (13) **“Offsets”** means amounts that are not included in the CCO Payment from OHA but that are received from other sources in relation to allowable expenses covered by this Risk Corridor. Offsets include but are not limited to third party resources, Medicare, reinsurance (if any), or other funds or services that resulted in reduction of expenses. Offsets are calculated on an accrual basis.
- (14) **“Payment”** means the flow of funds from OHA to Contractor.

**b. Operation of the CCO Risk Corridor**

Contractor shall comply with the requirements for administration of the risk corridor established in this Section. The CCO Risk Corridor utilizes specific percentages above and below a target amount, establishing “bands” of risk, which define how the

Contractor and OHA will review the adjusted costs of **the ABA Expenses of Members receiving eligible ABA services during the ABA Risk Corridor Period and the Hepatitis C DAA Expenses of Members during the Hepatitis C Risk Corridor Period.** both as subject to settlement.

- (1) ABA Settlements.
  - (a) Completion of data submissions. Encounter data for the period from July 1, 2016 through December 31, 2017 (18 months), must be submitted to OHA no later than April 30, 2018. Contractor shall submit the following information to OHA for Members receiving ABA for dates of service during the ABA Risk Corridor Period.
    - (i) Timely and accurate encounter data for all ABA services for Members, with claims including ABA procedure codes and a diagnosis of autism or self-injurious behavior, as set forth in the Prioritized List of Health Services.
    - (ii) A form specified by OHA, accompanied by an attestation that all Members who received eligible ABA services followed the required prior authorization protocol as specified in OAR 410-172-0650(4)(h).
  - (b) OHA will compare the ABA Expenses using the encounter data. OHA may request additional information if needed for clarification. A settlement report in a form prepared by OHA with information about the methodology will be sent to CCOs for encounter data validation purposes. The settlement process is further described in OHA's Applied Behavioral Analysis (ABA) Implementation Policy and Procedures available on the CCO Contract Reports Web Site.
  - (c) ABA Expenses will be compared with ABA Revenue.
  - (d) The outcome of this process will be used to determine whether OHA owes a payment to the

Contractor or the Contractor owes a payment to OHA.

(2) ABA Risk Corridor Payments

- (a) Contractor will receive a payment from OHA in the following amounts under the following circumstances:
  - (i) When Contractor's ABA Expenses for the ABA Risk Corridor Period are between 110 percent and 120 percent of the ABA Revenue, OHA will pay Contractor an amount equal to 50 percent of the ABA Expenses between 110 percent and 120 percent of the ABA Revenue; or
  - (ii) When Contractor's ABA Expenses for the ABA Risk Corridor Period are equal to or greater than 120 percent of the ABA Revenue, OHA will pay Contractor an amount equal to 100 percent of ABA Expenses in excess of 120 percent of the ABA Revenue, and 50 percent of ABA Expenses between 110 percent and 120 percent of ABA Revenue.
- (b) Contractor will owe payments to OHA in the following amounts under the following circumstances:
  - (i) When Contractor's ABA Expenses for the ABA Risk Corridor Period are between 80 percent and 90 percent of the ABA Revenue, the Contractor will owe OHA an amount equal to 50 percent of the excess between 90 percent of the ABA Revenue and the ABA Expenses; or
  - (ii) When Contractor's ABA Expenses for the ABA Risk Corridor Period are less than, or equal to, 80 percent of the ABA Revenue, the Contractor shall owe OHA an amount equal to 100 percent of the difference between the Contractor's ABA Expenses and 80 percent of the ABA Revenue; and the Contractor shall owe OHA 50 percent of ABA Revenue between the 80 percent and 90 percent corridor.
- (c) OHA will, after conferring with the Contractor about the method and timing of the payment or charge, make the

payment to Contractor or require a payment from Contractor by adjusting future payments to Contractor.

**(3) Hepatitis C DAA Settlements.**

- (a) Completion of Data Submissions. Encounter Data for the period from January 1, 2017 through December 31, 2017 (12 months), must be submitted to OHA no later than April 30, 2018. Contractor shall submit the following information to OHA for Members receiving Hepatitis C DAA drugs for dates of service during the Hepatitis C Risk Corridor Period:**
- (i) Timely and accurate Encounter Data for all Hepatitis C DAA drugs.**
  - (ii) A form specified by OHA, accompanied by an attestation that any restrictive drug list (as defined in OAR 410-141-3070) will, at a minimum, include the Hepatitis C DAA drugs included on the OHA-approved fee for service (“FFS”) Preferred Drug List (also known as the practitioner managed prescription drug plan or “PMPDP”). Contractor may continue to prefer additional Hepatitis C DAA drugs, so long as doing so does not conflict with any Statewide Supplemental Rebate Agreement entered into by OHA. Any drugs found to be in conflict with a Statewide Supplemental Rebate Agreement included in the Contractor’s Hepatitis C DAA data will be repriced as if the FFS preferred drug were used (net of rebates), if reported cost is higher.**
  - (iii) A form specified by OHA, accompanied by an attestation that all Members eligible for, and who received, Hepatitis C DAA drugs followed the same criteria and prior authorization protocol as specified in the OHA-approved coverage criteria for FFS members. The FFS criteria do not apply when Medicaid is the secondary payer. CCOs may specify alternative criteria for non-preferred PMPDP Hepatitis C DAA drugs, as long as doing so does not conflict with any Statewide Supplemental Rebate Agreements entered into by OHA.**

- (iv) A form specified by OHA, containing an attestation completed by Contractor that Contractor has not received and will not seek conflicting supplemental rebates for Hepatitis C DAA drugs dispensed during the Hepatitis C Risk Corridor Period. In the same form, Contractor shall also report any offsets as it relates to Hepatitis C DAA Expenses. CCOs can continue to collect supplemental rebates for Hepatitis C DAA drugs, as long as doing so does not conflict with any Statewide Supplemental Rebate Agreements entered into by OHA.
- (v) A form specified by OHA, containing an attestation completed by Contractor detailing the care management protocol for each Member receiving DAA drugs for treatment of Hepatitis C. Prior to commencement of the Hepatitis C Risk Corridor Period, OHA will consult with the Coordinated Care Organizations to develop a definition for “adequate care management”. The definition will be posted to the Contract Reports Web Site, prior to January 1, 2017.
- (b) OHA will compare the Hepatitis C Expenses using the paid amounts reported on the Encounter Data. OHA may request additional information if needed for clarification, or if any encounters have a zero paid amounts. A settlement report in a form prepared by OHA with information about the methodology will be sent to CCOs for Encounter Data validation purposes.
- (c) Hepatitis C DAA Expenses will be compared with Hepatitis C DAA Revenue.
- (d) Hepatitis C DAA Admin Revenue will be evaluated against Contractor’s care management protocol contained in the form referenced above. Contractor will be required to return a portion of the Hepatitis C DAA Admin Revenue to OHA if OHA determines, in its sole discretion, that Contractor failed to perform adequate care management for Hepatitis C DAA Drugs.
- (e) The outcome of this settlement process will be used to determine whether OHA owes a payment to the Contractor or the Contractor owes a payment to OHA.

**(4) Hepatitis C Risk Corridor Payments**

**(a) Contractor will receive a payment from OHA in the following amounts under the following circumstances:**

**(i) When Contractor's Hepatitis C DAA Expenses for the Hepatitis C Risk Corridor Period are equal to or greater than 105 percent of the Hepatitis C DAA Revenue, OHA will pay Contractor an amount equal to 100 percent of Hepatitis C DAA Expenses in excess of 105 percent of the Hepatitis C Revenue.**

**(b) Contractor will owe payments to OHA in the following amounts under the following circumstances:**

**(i) When Contractor's Hepatitis C DAA Expenses for the Hepatitis C Risk Corridor Period are less than, or equal to, 95 percent of the Hepatitis C DAA Revenue, the Contractor shall owe OHA an amount equal to 100 percent of the difference between the Contractor's Hepatitis C Expenses and 95 percent of the Hepatitis C DAA Revenue.**

**(c) OHA will, after conferring with the Contractor about the method and timing of the payment or charge, make the payment to Contractor or require a payment from Contractor by adjusting future payments to Contractor.**



## Oregon - 2017 CDPS+Rx Risk Score Methodology

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### Overview

The following narrative describes the steps and assumptions used in the application of risk scores for the Oregon CY17 rate development.

### Data

Consistent with the CY15 and CY16 rate setting, **Optumas** used the Combined Chronic Illness and Pharmacy Payment System (CDPS+Rx) to assess the risk of the Medicaid-eligible population currently enrolled with the Coordinated Care Organizations (CCOs). The newest CDPS+Rx risk model (Version 6.1) was used to develop the risk factors applied in the CY17 rate development. CY15 eligibility was used for both rate development and CDPS+Rx risk score development, however, an updated CY15 eligibility file was pulled on 8/29/2016 for the CDPS+Rx analysis in order to get the most recent information related to CY15 membership. The same CY15 claims data used in the base data development was used for the CDPS+Rx analysis. The CY15 claims data was pulled in April 2016 and included runout data paid through March 2016. CCOs received a copy of the claims data on 6/27/2016

### Data Validation

**Optumas** conducted several validation checks to ensure the CPDS+RX results were both accurate and appropriate to apply in the CY17 rate development. It was concluded that 99.99% of all members included in the original CY15 eligibility file were captured and assigned a risk factor during the CDPS+Rx analysis. In addition, **Optumas** performed several scenario tests to evaluate the change in risk scores based on the following snapshot periods:

- Members enrolled in CY15
- Members enrolled in the last quarter of CY15 (October-December 2015)
- Members enrolled in the second quarter of CY16 (April-June 2016)

It was determined that the normalized risk scores had no significant variation between the three snapshot periods which resulted in the decision to use the full CY15 enrollment.



Additional scenario tests were performed to determine the impact of member duration on the risk score calculation. **Optumas** evaluated the change in risk scores based on the following member duration scenarios:

- Members with any duration in CY15
- Members with 3+ months of duration in CY15
- Members with 6+ months of duration in CY15

In assessing the appropriate threshold of member duration, **Optumas** wanted to evaluate the change in risk scores as well as the number of scored members versus non-scored members during the various scenarios. In conclusion, **Optumas** determined that the most appropriate durational threshold was 6+ months, which aligns with the widely accepted industry standard.

## Methodology Overview

### *What weights were used?*

**Optumas** is using the prospective national weights as opposed to state specific weights. In addition, there are separate weights used for disabled adults and children (DADC), TANF adults (AA), and TANF children (AC). OHA will continue to collaborate with the CCOs to develop state specific weights for future rate cycles.

### *How are members attributed to specific rating cohorts and CCOs?*

Members are attributed to the rating cohort and CCO reflective in their last month of eligibility within CY15. For example, a member enrolled with CCO A through June 2015 and then CCO B through December 2015 would be assigned to CCO B. This will assign members to their most recent CCO and rating cohort allowing the aggregate risk scores to best reflect the risk of known enrollment.

### *How are scored vs unscored members addressed?*

Members that have less than 6 months of duration within CY15 are considered to be non-scored members. Non-scored members are assumed to be similar to the scored members with respect to total risk score, therefore all non-scored members are assigned the average risk score for the CCO and rating cohort in which they are attributed. A summary of scored members' vs non-scored members by rating cohort and CCO are shown in Appendix II.B.

### *Which specific rating cohorts are not risk adjusted using CDPS+Rx?*

**PLMA** – Since the PLMA cohort consists of pregnant women, challenges exist when using a tool such as CDPS+Rx to measure risk of the population. This population typically has shorter enrollment duration than other cohorts, and the largest cost driver is typically the delivery event incurred by these members, which is accounted for through the maternity case rate payment.

**Child 00-01** – This cohort consists of children under the age of 1. Since the driver of cost differences within this cohort are typically indicative of costs associated with the birth of a newborn, rather than a chronic condition. Additionally, durational concerns play a role in this decision, since the majority of these members will reside in a different cohort the following year, which conflicts with the prospective nature of the risk score tool.

**Dual-Meds** – Since not all claims for Medicare eligibles are available in Medicaid data, the full spectrum of diagnosis codes that relate to this population cannot be used in the calculation of each members' risk

score. Furthermore, the majority of costs are the responsibility of Medicare, and not necessarily reflective of costs that CCOs are responsible for. Therefore, the CDPS+Rx tool has not been used for this cohort.

**CAF** – Due to the transient nature of foster care children, as well as the unique utilization profile that these members have with regard to behavioral health services, the CDPS+Rx tool may not necessarily capture the true risk of this population.

*How is credibility addressed within the analysis?*

Specific rating cohorts within each CCO that have less than 2,000 unique members are adjusted for credibility by using classical credibility formula:

$(\text{Member Months} / 24,000) ^ (.5) = \text{weight given to the CCO specific rating cohort}$

The complement percentage is given to the regional average for that rating cohort. The result is a credibility adjusted risk score that mitigates bias due to cell size.

*How are CCO specific risk scores calculated?*

Once members have been attributed, risk scores are summarized by rating cohort and CCO. Credibility is applied as needed to the summarized values resulting in CCO specific scores for each rating cohort. These CCO specific risk scores by rating cohort are then aggregated into regional risk scores by rating cohort. This allows each CCO specific risk score by rating cohort to be normalized by dividing by the regional risk score for that same rating cohort.

*How are normalized risk scores applied?*

Normalized risk scores are applied in a budget neutral manner, ensuring that no cost are removed or added by applying the risk score factors to the regional benchmark for a given rating cohort.

## Northwest Questions and Concerns – 10/7/2016

#	CCO	CCO Question	OHA/Optumas Response
1	Yamhill	<p><b>Summary of the Concern:</b></p> <p>Concerned about the regional non-medical load methodology used for 2017 and believes that Yamhill's continued investment in alternatives to traditional services is key to bringing about a holistic system of care with lower costs and better health outcomes. We respectfully request that OHA review the impact of this decision on Yamhill CCO and propose an alternative that is more aligned with the system investments the company is making. It is imperative that CCOs supported in these efforts and the best to do that is by using a CCO specific methodology that acknowledges the transformational work that a CCO is doing and encourages continued system investments.</p>	<p>OHA and Optumas agree that a CCO specific approach to administrative expense, flex services, and care management is a better mechanism in matching payment to risk due to varying levels of outreach with respect to flex services and care management. OHA and Optumas also adhere to the idea of having a transparent process in developing rates as well as promoting a collaborative process in designing the methodology. As such, based on feedback from the broader CCO group, CCO specific administrative expense was not pursued this cycle due to concerns surrounding consistency in reporting and defining these services. OHA will encourage discussions with and between participating CCOs over the next few months to promote more consistency with respect to the reporting of these services. OHA and Optumas will continue to champion the idea of CCO specific adjustments in the area for the next rating cycle.</p>

## Southwest Questions and Concerns – 10/7/2016

#	CCO	CCO Question	OHA/Optumas Response
1	Trillium	The State has made a significant reduction to our base data and we understand that other reductions were made to the base data of other CCOs.	<p>In the current 1115 waiver, OHA encourages CCOs spend money to improve outcomes and lower costs, including paying providers for value or through alternative arrangements. OHA has also committed to a sustainable rate of growth to both CMS in the 1115 waiver and to the Oregon legislature. In the reimbursement document attached, OHA lays out that CCOs can reimburse providers at any level deemed necessary, as long as the total growth rate is not unsustainable and does not negatively impact our commitment to our federal and state partners.</p> <p>The underlying cost/reimbursement was reviewed across the Southwest region for Inpatient, Outpatient, and Professional Services. Any reimbursement, inclusive of FFS, subcapitation and incentive dollars, that was an outlier was adjusted to reflect a more reasonable reimbursement level. Inclusive of this adjustment, the Southwest region received an overall increase of 0.6%. OHA assumes that current CY2016 rates are allowing for timely access to services, adequate networks, and coordination of continuity of care, given the recent performance on quality metrics and current financial solvency. Therefore, an overall regional increase of 0.6%, and 4.4% specific increase for this particular CCO is expected to allow the CCOs within the Southwest region to continue the current level of outreach and member access. The assertion that the analysis and documentation surrounding the reimbursement adjustment was not shared is false, as each CCO impacted by the reimbursement adjustment had a call with OHA/Optumas to walk through the analysis and results. In addition, each CCOs data used within the analysis was shared with that CCO.</p> <p>The assertion that this adjustment jeopardizes member access is implying that a 4.4% increase in revenue from CY2016 levels in some way interrupts access. OHA would be interested in exploring how this may materialize with this CCO given this rate of growth is higher than the statewide sustainable rate of growth commitment to CMS and state partners.</p>

## Southwest Questions and Concerns – 10/7/2016

#	CCO	CCO Question	OHA/Optumas Response
2	Trillium	The State is reducing what is built into the rates for the non-medical load by cutting the risk & contingency margin by half without justification.	<p>The risk contingency component of the non-medical load has been reduced from 1.0% to 0.5% due to several factors</p> <ol style="list-style-type: none"> <li>1) The implementation of risk corridor around HEP-C</li> <li>2) The implementation of risk corridor around ABA</li> <li>3) More information being available for the ACA population and their related risk/acuity</li> </ol> <p>These factors lower the level of unexpected risk within the contract period and therefore support the lower risk contingency factor which was introduced due to the uncertainty surrounding these services and population. OHA encourages each CCO to benchmark the non-medical load used within the rate development to their internal administrative expenditures and determine reasonableness for their CCO.</p>
3	Trillium	Finally, we would appreciate a methodology description of several rate development components such as trend and the “add-on” payments.	<p>Trends have been shared with the CCOs at a category of aid and category of service level. OHA encourages the CCOs to compare these trends with their internal trend projections to assist in determining the risk associated with the projected capitation rates.</p> <p>The add-on adjustments have been shared with the CCOs and OHA/Optumas have walked each CCO through the developed adjustments. The adjustments were based on the CCO reported expenditures for these add-on services within the financial template.</p>

## Southwest Questions and Concerns – 10/7/2016

#	CCO	CCO Question	OHA/Optumas Response
4	Trillium	<p>As previously requested, please provide a file that will allow us to crosswalk between the financial template we submitted and the regional base data. At a minimum, this file should include:</p> <ul style="list-style-type: none"> <li>• PMPMs taken from the financial templates by category of aid for CCO-A members in each CCO in the region</li> <li>• PMPM adjustments by the same groupings or in total that: <ul style="list-style-type: none"> <li>○ Reconcile between encounter and financial template data,</li> <li>○ Remove Hepatitis C from the base data,</li> <li>○ Remove case management and flexible services to be included in the NML calculation,</li> <li>○ Remove “outlier” payments, and</li> <li>○ Reflect any other data adjustments that were made.</li> </ul> </li> </ul>	<p>CCOs were sent a summary showing their contribution to the regional average by rating cohort. In addition, CCOs have been provided specific validation summaries to ensure that all appropriate costs have been included in the base data for that CCO.</p>
5	Trillium	<p>Specifically for the “outlier” payment adjustments above, please provide:</p> <ul style="list-style-type: none"> <li>• A written explanation as to how these reductions are actuarially sound.</li> </ul>	<p>Rates need to be robust enough to allow for appropriate access to care for all members. After the adjustment in question, Trillium received a 4.4% overall increase in their 2017 payment rates. Since there has not been any major changes in population risk for Trillium, OHA believes this adjustment is reasonable and consistent with both actuarially sound principles. As mentioned above, if the increase does somehow interrupt member access, OHA leadership would be interested in having follow up discussions with Trillium to discuss. Please reference the attached reimbursement document for additional background.</p>

## Southwest Questions and Concerns – 10/7/2016

#	CCO	CCO Question	OHA/Optumas Response
6	Trillium	A comparison of relative unit costs or utilization reviewed to determine expenses were “outliers”.	Each CCOs information has been shared during the presentation where Optumas/OHA presented the reimbursement analysis showing costs compared longitudinally. There is not further information that will be shared.
7	Trillium	A confirmation that the state is not making this reduction to hit the 3.4% sustainable growth rate.	Confirmed.
8	Trillium	A listing and values of additional adjustments of this type that were made to the base data for other CCOs in the Southwest region.	<p>As specified in the reimbursement review document attached, the aggregate impact of the adjustment resulted in a statewide base data increase of 4.7%. This confirms that there was no budgetary targeting of a 3.4% sustainable rate of growth within the rate development.</p> <p>Furthermore, while the 3.4% sustainable rate of growth target has not been considered within the risk assessment of the program it is a fundamental focal point of the overall program and is a keystone to sustainable transformation within the system. All adjustments will be described within the rate certification sent to CMS.</p>

## Southwest Questions and Concerns – 10/7/2016

#	CCO	CCO Question	OHA/Optumas Response
9	Trillium	<p>Additionally, in order to verify that the base data and adjustments used in the rate development are reasonable and appropriate for the purposes for which they have been used, we also request each of the following:</p> <ul style="list-style-type: none"> <li>Confirmation that the total PMPMs after all of the adjustments described above would match to the regional PMPM shown in the exhibit shared Tuesday September 27<sup>th</sup> before adjustment for the 7/1/2016 amendments.</li> </ul>	<p>While OHA/Optumas welcome constructive input during the rate development from each of the CCOs, it is important to note that the CCOs need to assess whether the proposed rates are reasonable/appropriate for their business model. OHA will submit the rate certification to CMS/OACT, whom will perform an independent review of the rate methodology in working toward final approval of rates and determination of actuarial soundness.</p> <p>OHA/Optumas confirm that the sum of the CCOs specific adjusted base data within a given region equal the regional base data.</p>
10	Trillium	<ul style="list-style-type: none"> <li>Confirmation that the total PMPMs after these adjustments would match to the regional rate model (after summing across categories of service) that we expect to receive on 10/7/2016.</li> </ul>	<p>OHA/Optumas confirm that the sum of the CCOs specific adjusted base data within a given region equal the regional base data.</p>



## Southwest Questions and Concerns – 10/7/2016

#	CCO	CCO Question	OHA/Optumas Response
11	Trillium	<p>A description of any high level limitations of the base data and data quality concerns for purposes of the development of these rates, including</p> <ul style="list-style-type: none"> <li>• Comparisons between the data used for the base data and the data used to develop the trends</li> <li>• Whether or not the categories of service are defined in a consistent manner for all services, including encounter based, sub-capitated and other provider payment streams</li> </ul>	Relevant information surrounding base data will be included as part of the rate certification.
		Please provide a description of the historical periods that were used in the trend analysis, including information about which data sources were used for each category of service and category of aid for which trend was developed.	Optumas utilized CY14 and CY15 reported encounter/financial data to inform trend development. OHA has also provided each CCO their detailed encounter data extracts that were used within the rate development. OHA encourages the CCO to evaluate their internal trends and compare them to those used within the rate development in order to evaluate the appropriateness of the rates for the CCO in question.
		Please describe any concerns you may have about the quality of the data underlying these analyses.	Any concerns on data quality will be discussed in rate certification.
		Please provide a description of any adjustments that were made to these historical trends to reflect expected changes in the future or to account for issues with data quality.	OHA/Optumas has had individual meetings with each CCO surrounding data validation and data quality. OHA is expecting that data quality will continue to be a focal point for the participating CCOs. Any concerns on data quality will be discussed in rate certification

## Southwest Questions and Concerns – 10/7/2016

#	CCO	CCO Question	OHA/Optumas Response
		Please provide the utilization and unit cost components of each of the trends by category of service.	Regional rate models will be provided on 10/7/16.
		<p>In particular, please discuss how each of the following data sources other than OHA encounter data were incorporated in the analysis if at all:</p> <ul style="list-style-type: none"> <li>Plan-provided financial templates from 2014 and 2015 and underreporting adjustments to reconcile between the claims based expenditures in those templates and OHA encounter data.</li> </ul>	This has been provided to the CCOs via the triangulation summary discussion when OHA/Optumas were validating the base data.
		<ul style="list-style-type: none"> <li>Non claims-based expenditures reported in financial templates in 2014 and 2015 (e.g. provider incentives, alternative payment methods, and sub-capitation).</li> </ul>	This has been provided to the CCOs during the base data discussions during which OHA/Optumas itemized each CCOs total expenditures inclusive of FFS, Incentives, and subcapitation.
		<ul style="list-style-type: none"> <li>2016 emerging experience templates for plans to report pharmacy costs.</li> </ul>	This was shared with the CCOs during the CCO specific rate presentation. This information was used to inform the HEP-C adjustment, benchmark Rx trends, and further validate CY15 Rx base data. In addition, the regional pharmacy trend information shared during those meetings will be sent out the final rate package to each CCO on 10/7/16.
		<ul style="list-style-type: none"> <li>Other 2016 emerging experience information for non-pharmacy costs</li> </ul>	Emerging MLRs were reviewed by OHA/Optumas for Q1 and Q2 of CY16 to understand the current financial profiles of each CCO.

## Southwest Questions and Concerns – 10/7/2016

#	CCO	CCO Question	OHA/Optumas Response
		<p>Please provide a detailed development of each of the add-ons including a qualitative description and summary values for the base data, adjustments, projection factors, and all other assumptions and smoothing methods. We particularly need to understand the following, and while we do recognize that some of these were trended forward from previous periods, we never received the detail requested in those previous periods:</p> <ul style="list-style-type: none"> <li>• Hep C</li> <li>• NEMT</li> <li>• ACT/SE</li> <li>• ABA</li> <li>• Back Pain</li> </ul>	<p><b>Hep C</b> Reported experience via pharmacy supplemental template was used to inform this add-on, if available.</p> <p><b>NEMT</b> CCOs reported expenditures on financial template was used to inform adjustment.</p> <p><b>ACT/SE</b> CCOs reported expenditures on financial template was used to inform adjustment.</p> <p><b>ABA</b> OHA would refer the CCO to prior presentation given at all CCO meetings as well as the mid-year CY16 rate certification for details surrounding the adjustment.</p> <p><b>Back Pain</b> OHA would refer the CCO to prior presentation given at all CCO meetings as well as the mid-year CY16 rate certification for details surrounding the adjustment.</p>
		Please provide the detailed development of the case management and flexible services portion of this non-medical load build based on the submissions in the Southwest region.	The amount built into the administrative load is based on the amount reported by each CCO on their financial templates.
		Please provide the basis for the development of the Admin portion of the rate.	Review of recent and prior financial reports.

## Southwest Questions and Concerns – 10/7/2016

#	CCO	CCO Question	OHA/Optumas Response
		<p>We are extremely concerned about the reductions over time and specifically the reduction of the Risk &amp; Contingency portion of the rates by half from 2016 to 2017 (see table above for historical values).</p> <ul style="list-style-type: none"> <li>○ Based on our conversations, we understand that no contractual changes were made that would have significantly decreased CCO risk between 2016 and 2017. In fact, the CCOs' risk has increased.</li> <li>○ In addition, the CCOs' financial requirements (e.g., risk based capital) have not changed.</li> <li>○ The State could not provide a clear reason for the reduction, and we are concerned that it was made to hit a budget or sustainable rate of growth target. The state was very clear in their explanation, however,</li> <li>○ Please provide an explanation for this change, along with supporting documentation of any analyses done to demonstrate that this reduction is actuarially sound.</li> </ul>	<p>The risk contingency component of the non-medical load has been reduced from 1.0% to 0.5% due to several factors</p> <ol style="list-style-type: none"> <li>1) The implementation of risk corridor around HEP-C</li> <li>2) The implementation of risk corridor around ABA</li> <li>3) More information being available for the ACA population and their related risk/acuity</li> </ol> <p>These factors lower the level of unexpected risk within the contract period and therefore support the lower risk contingency factor which was introduced due to the uncertainty surrounding these services and population. OHA encourages each CCO to benchmark the non-medical load used within the rate development to their internal administrative expenditures and determine reasonableness for their CCO.</p>

## Tri-County Questions and Concerns – 10/7/2016

#	CCO	CCO Question	OHA/Optumas Response
1	FamilyCare	Explain OHA's philosophy with regard to payment levels for primary care physician (PCP) services, and what was the basis (OAR or OHA policy) for reducing certain CCO's PCP spend to a level predetermined by OHA?	In the current 1115 waiver, OHA encourages CCOs to improve outcomes and lower costs, including paying providers for value or through alternative arrangements. OHA has also committed to a sustainable rate of growth to both CMS in the 1115 waiver and to the Oregon legislature. In the reimbursement document attached, OHA lays out that CCOs can reimburse providers at any level deemed necessary, as long as the total growth rate is sustainable and does not negatively impact our commitment to our federal and state partners. The underlying cost/reimbursement was reviewed across the Tri-County region for Inpatient, Outpatient, and Professional Services. Any reimbursement, inclusive of FFS, subcapitation and incentive dollars, that was an outlier was adjusted to reflect a more reasonable reimbursement level. Inclusive of this adjustment, the Tri-County region received an overall increase of 2.6%. OHA assumes that current CY2016 rates are allowing for timely access to services, adequate networks, and coordination of continuity of care, given the recent performance on Quality metrics and current financial solvency. Therefore, an overall increase of 2.6% is expected to allow the CCOs within the Tri-County region to continue the current level of outreach and member access.
2	FamilyCare	How did OHA determine which rate setting components were to be based on Regional versus CCO specific data?	OHA and Optumas requested additional detail from CCOs this year in the financial template to allow us to better match payment to risk and use individual CCO financial experience to develop each rate add-on. Rate add-ons that had limited or no experience (i.e. back pain, ABA), were developed at a regional level. In addition, CMS included a comment in both our 2015 and 2016 rate approval level encouraging OHA to use financial experience for rate add-ons, specifically Children's WrapAround since there are varying levels of outreach related to each of these services across the CCOs.

## Tri-County Questions and Concerns – 10/7/2016

#	CCO	CCO Question	OHA/Optumas Response
3	FamilyCare	How did OHA account for CCOs that have extensive related party transactions which may inflate the underlying encounter costs?	As discussed in prior meetings, OHA used reported encounter data along with the reported financial template as base data for rate development. All reported expenditures are validated through encounters or additional conversation/substantiation from CCOs including all reported subcapitation and incentive payments. Through this process any anomalies related to reported expenditures and encounters are identified and reconciled through further discussion with CCO. In addition, OHA reviewed the underlying reimbursement for each CCO as it relates to their reported expenditures and identified any outliers. Through these processes, OHA continues to ensure that excessive reported costs do not inflate the base data. Also, it should be noted that the regional approach to rate development along with risk adjustment mitigates the outcome of any one specific CCO benefiting from reporting excessive cost, as this would only increase the regional PMPM and not directly impact the CCO specific PMPM. The CCO specific PMPM would be developed using the risk factor that allocates the regional PMPM based on measured risk of the CCO specific population.
4	FamilyCare	How did OHA determine the administrative expense reimbursement levels, and why were they applied at the Regional level versus the State level or CCO specific?	OHA and Optumas agree that a CCO specific approach to administrative expense, flex services, and care management is a better mechanism in matching payment to risk due to varying levels of outreach with respect to flex services and care management. Based on feedback from CCOs, CCO specific administrative expense was not pursued this cycle due to concerns surrounding consistency in reporting and defining these services and was kept at a regional level, similar to 2015 and 2016 rate development. OHA will encourage discussions with and between participating CCOs over the next few months to promote more consistency with respect to the reporting of these services. OHA and Optumas will continue to champion the idea of CCO specific adjustments in the area for the next rating cycle.

## Tri-County Questions and Concerns – 10/7/2016

#	CCO	CCO Question	OHA/Optumas Response
5	FamilyCare	What OAR or OHA policy was relied upon to reduce the administrative expense component of the rate, and allowed for the movement of case management and flexible expenses from medical to administrative expense?	<p>In OHA's current 1115 waiver with CMS, flexible services must be counted as an administrative expense in rate development. As discussed during the September rates workgroup, OHA is working on adjusting this policy going forward in the 1115 renewal submitted to CMS. In regards to case management, OHA decided to move it to the non-benefit load this year to create a consistency between financial reporting and rate development. In addition, the movement of case management to administrative expense highlights the difference in outreach and interventions between CCOs and promotes the idea of CCO specific adjustment for future rate cycles. The risk contingency component of the non-medical load has been reduced from 1.0% to 0.5% due to several factors</p> <ol style="list-style-type: none"> <li>1) The implementation of risk corridor around HEP-C</li> <li>2) The implementation of risk corridor around ABA</li> <li>3) More information being available for the ACA population and their related risk/acuity</li> </ol> <p>These factors lower the level of unexpected risk within the contract period and, therefore, support the lower risk contingency factor which was introduced due to the uncertainty surrounding these services and population in prior rate cycles. OHA encourages each CCO to benchmark the non-medical load used within the rate development to their internal administrative expenditures and determine reasonableness for their CCO.</p>

## Tri-County Questions and Concerns – 10/7/2016

#	CCO	CCO Question	OHA/Optumas Response
6	FamilyCare	Why did OHA chose to pay at the 5% of the low/high regional band, even though the resultant increase is less than the 3.4% target?	OHA chose the 5% percentile of the regional rate range for every rate group and every CCO for 2017. The decision was reached by analyzing the budget impact. Selecting the 5% across the program allows for consistency and fairness across cohorts and between regions. The aggregate impact of 3.2% allows OHA to also add additional funding into the incentive pool in 2017 and keeps away from the absolute lower bound of the rate range. Ideally, the target percent increase for 2017 would have been 2.65% to allow for 0.75% of room to be added to the incentive pool. The final incentive pool figure will be decided mid-2017 after budget actuals can be evaluated.
7	FamilyCare	How does the rate setting process adjust rates for high cost, low quality CCOs as compared to low cost, high quality CCOs?	OHA and Optumas chose a methodology that rewards for efficiency as it relates to containing costs of chronic populations. In the regional model, CCOs are not incentivized to spend more money on clients as base data is regionalized, and the dollars are distributed based on disease risk. If a CCO contains costs due to high quality and their population is more chronic than the regional average, then that CCO will be rewarded with a higher payment. This is one way CCOs are encouraged to perform high quality care for lower costs. OHA is also in discussions to develop new tools in rate development that further encourage high quality and low cost, some of which were discussed at the September rates workgroup.
8	FamilyCare	How does OHA utilize a CCO's past or current profitability in the rate setting process, and how does a CCO's revenue recognition and related party accounting impact such utilization?	Currently, actuarially sound rates do not directly consider past or current profitability in the rate setting process. Optumas reviews financial statements as part of the triangulation process to ensure total reported dollars tie out to the base data inclusive of FFS cost, incentives, and subcapitation. The rate development is based on reported expenditures that can be substantiated and health based risk assessment scores.
9	FamilyCare	When will the CCOs receive a comprehensive set of end-to-end rate setting models which start with the CCO rate template through the CCO specific rate determination?	OHA will release the final rate setting package on 10/7/16 with all the materials provided to date and the regional base data models.



## *Tri-County Questions and Concerns – 10/7/2016*

#	CCO	CCO Question	OHA/Optumas Response
10	FamilyCare	Please confirm that an expected medical loss ratio of 89.9% (100% less 10.1% - administration expense, case management, profit, and contingency) was utilized in the development of the Tri-County regional rate model.	Not confirmed. The MLR calculation is more nuanced than taking the complement of the non-medical load, as the non-medical load contains expenditures that can be considered “expenditures that improve quality/efficiency” and therefore can be included in the numerator of the MLR calculation. This definition of MLR is consistent with CMS Final Rule.
11	FamilyCare	What was the final determination regarding the Hepatitis C risk corridor carve-out and related policies?	OHA submitted updated Hepatitis C DAA drug risk corridor contract language to CMS for review and to incorporate it into the 2017 contract. Once CMS completes their review, the final contract will include that that updated language specifying the Hepatitis C DAA drug risk corridor. The updated contract language is attached for your reference.



## **Oregon Dental July 1, 2016 Benefit Change Adjustment Methodology**

### ***Overview***

The following narrative describes the steps and assumptions utilized to develop the impact of the “Dental Buy-Back” policy change, under Oregon’s CCO and DCO programs.

Note that the base data used in the development of the current dental rates is CY13; therefore, all adjustments described below are relative to 2013 utilization.

Additionally, consistent with the rate development, the impact has been developed for both the Tri-County and non Tri-County (Other) regions separately. While the approach to developing the adjustment is consistent between both regions, the underlying data varies, and therefore the impact for each region will vary accordingly.

### ***Impacted Populations***

Benefit package changes are intended to mirror those offered to children under 21 and pregnant women; therefore:

- Impacts have been developed for TANF, ABAD/OAA, and ACA adult populations.
  - Since the base data reflects CY13, prior to the ACA expansion, the base data used to develop the ACA adult population adjustments reflect CY13 TANF data, stratified by the ACA cohort age bands (i.e., 19-44, 45-54, and 55-64).
- No Impact developed for Pregnant Women (PLMA) and Children (CAF and Child 00-01, 01-05, 06-18).

### ***Impacted Services***

#### ***Full Dentures***

Full dentures will be covered once every 10 years if dentally appropriate; the policy change removes the requirement that tooth extraction must have occurred within the last 6 months.

In the development of this adjustment, the first step was to identify the difference in utilization after 2009. As the policy change is intended to reflect the policy that was in place in 2009, but modified the next year, it would be anticipated that utilization differences would occur between 2009 and 2010. A significant decrease was observed, nearly a 50% decrease from 2009 to 2011/2012. Note that utilization as a whole was reviewed, which includes utilization for both lower and upper dentures.

The adjustment for this policy change considers the following:

1. An increase in total utilizers of this service – with the removal of the “extraction within the last 6 months” requirement, it is anticipated that an increase in total utilizers will ensue. This adjustment has been developed using a sensitivity analysis approach:

*On the lower bound, it is assumed that a 25% increase in current utilizers will occur.*

*On the upper bound, it is assumed that a 50% increase in utilizers will occur.*

2. An increase in frequency of services utilized – noting that both lower and upper dentures are available under the benefit package, it is possible that not only an increase in utilizers, but also in number of services per utilizer will ensue. This could be due to a combination of a differences in the risk/needs of the additional members that will receive dentures, pent-up demand for enrollees who were not previously able to receive dentures due to the 6 month requirement, or increased utilization due to provider practice patterns.

*At the lower bound, it is expected that 20% of the members who had received only a lower or upper denture will now receive both.*

*At the upper bound, it is assumed that 40% will now receive both.*

3. Cost of services – the final consideration is the cost of these services. Based on research of costs for these services in other markets:

*These services are assumed to cost between \$1,150 and \$1,250 per denture.*

### **Partial Dentures**

Partial dentures will be covered once every 5 years if dentally appropriate, increased from once every 10 years.

Similar to the adjustment for Full Dentures, in the development of this adjustment, the first step was to identify the difference in utilization after 2009. As the policy change is intended to reflect the policy that was in place in 2009, but modified the next year, it would be anticipated that utilization differences would occur between 2009 and 2010. A significant decrease was observed, nearly a 50% decrease from 2009 to 2011/2012, and nearly 70% decrease from 2009 to 2013. Note that utilization as a whole was reviewed, which includes utilization for both lower and upper dentures.

The adjustment for this policy change considers the following:

1. An increase in total utilizers of this service – with the change from being covered every 10 years to now being covered every 5 years, it is anticipated that an increase in total utilizers will ensue. This adjustment has been developed using a sensitivity analysis approach:

*On the lower bound, it is assumed that a 50% increase in current utilizers will occur*

*On the upper bound, it is assumed that a 100% increase in utilizers will occur.*

2. An increase in frequency of services utilized – noting that both lower and upper dentures are available under the benefit package, it is possible that not only an increase in utilizers, but also in number of services per utilizer will ensue. This could be due to a combination of a difference in the risk/needs of the additional members that will receive dentures, pent-up demand for enrollees who were not previously able to receive dentures due to the 6 month requirement, increased utilization due to provider practice patterns, or timing (to the extent that one partial denture had been replaced more than 5 years ago, but less than 10).

*At the lower bound, it is expected that 25% of the members who had received only a lower or upper denture will now receive both.*

*At the upper bound, it is assumed that 50% will now receive both.*

3. Cost of services – the final consideration is the cost of these services. Based on research of costs for these services in other markets:

*These services are assumed to cost between \$900 and \$1,200 per denture.*

### ***Stainless Steel Crowns***

Stainless steel crowns will be covered for posterior permanent teeth, and all primary teeth; a change from no coverage previously.

The first step in this adjustment was to identify the decline in utilization after 2009, to measure the decline after the original policy decision was made in 2010 to remove this benefit. After review, it was evident that the benefit coverage declined dramatically, with very minor utilization coming through for cohorts that are solely or primarily adult cohorts.

The adjustment for this policy change considers the following:

1. An assumed percent of utilizers of the total enrolled population – the total number of utilizers was identified in 2009, and then adjusted for the enrollment growth (based on member months) in 2013. Once this was identified, a percentage of this number was assumed to develop the projected utilization after this benefit is restored. Further, an assumption was made to reflect the number of services that could be received from these new utilizers. For example, if 1,000

people are expected to utilize the benefit, how many of these will receive 1 service, 2 services, or 3 services?

*At the lower bound, it is assumed that 50% of the utilizers based on the 2009 data will receive services in the future (after benefit restoration), in addition to the utilization that was actually identified in the 2013 data. Of those, 85% would receive 1 service, 10% would receive 2, and 5% would receive 3 services. Of those few that already received 2 services in 2013, 60% would receive 2, and 40% could receive 3 if the full benefit were restored.*

*At the upper bound, it is assumed that 100% of the utilizers based on the 2009 data will receive services in the future (after benefit restoration), in addition to the utilization that was actually identified in the 2013 data. Of those, 70% would receive 1 service, 20% would receive 2, and 10% would receive 3 services. Of those few that already received 2 services in 2013, 40% would receive 2, and 60% could receive 3 if the full benefit were restored.*

2. Impacts to services related to crowns – in addition to the utilization of the “Stainless Steel Crown” benefit itself, considerations need to be given to other related services that could experience additional utilization with the restoration of this service. For example, the “prefabricated post and core in addition to crown” (D2954) service, is somewhat dependent on the crown being an offered benefit. In 2009, the utilization for the D2954 service was ~25% of the utilization for the Stainless Steel Crowns, with some cohorts seeing close to 40%; as the Stainless Steel Crown benefit ceased to exist for non-pregnant adults, a significant decrease to the D2954 service also occurred. It should be noted that, for the Child 06-18 cohort which did not see a change in benefits offered after 2009; the utilization for both of these services has remained somewhat steady across time.

*At the lower bound it is assumed that, of the additional Stainless Steel Crowns offered, 20% will include a D2954 service. For example, if 100 Stainless Steel Crown services are assumed, then there will also be an additional 20 D2954 services.*

*At the upper bound it is assumed that, of the additional Stainless Steel Crowns offered, 40% will include a D2954 service. For example, if 100 Stainless Steel Crown services are assumed, then there will also be an additional 40 D2954 services.*

3. Impacts to other services – in addition to the increase in utilization of the D2954 service, it is assumed that there could be a decline in other services such as tooth extractions; this could result in an increase in already covered services such as root canals. While no explicit adjustment is being made to reduce the number of tooth extractions, a moderate increase is being assumed for an increase in root canals being provided.

*At the lower bound it is assumed that, of the additional crowns being added per the restoration of services, 10% of those could be related to an additional root canal.*

*At the upper bound it is assumed that, of the additional crowns being added per the restoration of services, 20% of those could be related to an additional root canal.*

4. Cost of services – the final consideration is the cost of these services. Based on research of costs for these services in other markets, these services are assumed to cost:

*Stainless Steel Crowns: Between \$175 and \$215 per crown*

*Prefabricated Post and Core: Between \$180 and \$220 per service*

*Root Canals: Between \$600 and \$800 per service*

### **Full Mouth Debridement**

Full mouth debridement will be covered once every 2 years, an increase from the current benefit of once every 3 years.

In the development of this adjustment, the first step was to identify the difference in utilization after 2009. As the policy change is intended to reflect the policy that was in place in 2009, but modified the next year, it would be anticipated that utilization differences would occur between 2009 and 2010. A significant decrease was observed.

The adjustment for this policy change considers the following:

1. An increase in total utilizers of this service – with the change from the benefit being offered once every 2 years, rather than every 3 years, it is anticipated that an increase in total utilizers will ensue:

*At the lower bound, it is assumed that there will be a 25% increase in utilizers of this service once the restoration of benefits occurs.*

*At the upper bound, it is assumed that there will be a 50% increase in utilizers of this service; this assumes the upper bound reflects an increase of (3 years/2 years)-1, based on a change in number of years between eligible services.*

2. Cost of services – the final consideration is the cost of these services. Based on research of costs for these services in other markets:

*These services are assumed to cost between \$95 and \$105 per service.*

### **Periodontal Scaling/Root Planing**

Periodontal scaling/root planing will be covered once every 2 years, an increase from the current benefit of once every 3 years.

In the development of this adjustment, the first step was to identify the difference in utilization after 2009. As the policy change is intended to reflect the policy that was in place in 2009, but modified the

next year, it would be anticipated that utilization differences would occur between 2009 and 2010. A significant decrease was observed.

Per discussion with OHA and its HERC representatives, this benefit is typically offered after a full mouth debridement service has occurred. This is a precursor for members to receive periodontal maintenance treatment, after the scaling/planing services have been completed.

The adjustment for this policy change considers the following:

1. An increase in total utilizers of this service – with the change from the benefit being offered once every 2 years, rather than every 3 years, it is anticipated that an increase in total utilizers will ensue.

*At the lower bound, the assumption is that total utilizers would increase by 20%.*

*At the upper bound, the assumption is that total utilizers would increase by 40%*

2. An increase in total services per utilizer – this service can be provided in any of four quadrants within the mouth; in addition to the number of people who will actually receive this service, an assumption should be made to consider that a change in the average number of services per member could occur, particularly as new recipients could have varied levels of need. While it is possible that the average number of services could decrease, no reduction has been assumed:

*At the lower bound, the assumption is that the total number of services per recipient, does not change, resulting in a 0% adjustment.*

*At the upper bound, the assumption is that the total number of services per recipient will increase by 5%.*

3. Cost of services – in addition to the combination of both adjustments noted above, the final consideration is the cost of these services. Based on research of costs for these services in other markets:

*These services are assumed to cost between \$175 and \$185 per service.*

### **Periodontal Maintenance**

Periodontal maintenance will be covered once every 6 months, increased from the current benefit of once every 12 months.

In the development of this adjustment, the first step was to identify the difference in utilization after 2009. As the policy change is intended to reflect the policy that was in place in 2009, but modified the next year, it would be anticipated that utilization differences would occur between 2009 and 2010. While a consistent decrease was not identified moving from 2009 to 2010, the utilization inherent in 2013 is notably lower than what was observed in 2009.

The adjustment for this policy change considers the following:

1. An increase in total utilizers of this service – with the change from the benefit being offered once every 6 months, rather than every 12 months, it is anticipated that an increase in total utilizers will ensue, as this benefit will be more widely offered:

*At the lower bound, the assumption is that total utilizers would increase by 25%.*

*At the upper bound, the assumption is that total utilizers would increase by 75%*

2. An increase in total services per utilizer – since this service is now offered every 6 months, it opens the opportunity for current utilizers to also utilize more frequently during any given year. An adjustment has been made to reflect that the populations impacted by this change could now utilize multiple times throughout the year, which was not the case in 2013:

*At the lower bound, the assumption is that:*

*95% of new utilizers will utilize one service, while 5% will utilize two services.*

*60% of people currently receiving one service, would continue use one service under the new benefit package, while 40% would now utilize two services.*

*At the upper bound, the assumption is that:*

*90% of new utilizers will utilize one service, while 10% will utilize two services.*

*40% of current utilizers would use one service under the new benefit package, while 60% would utilize two services.*

3. Cost of services – in addition to the combination of both adjustments noted above, the final consideration is the cost of these services. Based on research of costs for these services in other markets:

*These services are assumed to cost \$120 per service.*