

**Oregon Health Plan Medicaid Demonstration
 Coordinated Care Organization Capitation Rates
 January 2016 through December 2016**

Plan: Jackson County CCO, LLC,abn: Jackson Care Connect Region: Southwest
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	Base Case Rate	Base HRA Adjustment	Hospital Provider Tax Allowance	Administrative Allowance	HRA Administrative Allowance	Case Rate
Maternity Case Rate:						
Case Rate w/o Admin	\$ 8,576.31	\$ 1,970.77	\$ 350.51	\$ 745.77	\$ 40.22	\$ 11,683.57
Admin %						6.38%
HRA Admin %						0.34%
Non Benefit %*						9.38%

*Non Benefit % includes Hospital Provider Tax, HIF, and Administrative Allowances

Oregon Health Plan Medicaid Demonstration
Coordinated Care Organization Capitation Rates
CCO-A: Physical Health, Mental Health, and Dental Services
January 2016 through December 2016

Plan: Jackson County CCO, LLC,abn: Jackson Care Connect Region: Southwest Rate Group: Temporary Assistance to Needy Families - Adults
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Capitation Rate

Base Services Rate	\$332.21
Base HRA Adjustment	\$45.94
Hospital Provider Tax Allowance	\$10.88
Administrative Allowance	\$36.93
HRA Administrative Allowance	\$0.94
Health Insurers Fee	\$0.00
Total Services with Admin, HRA, and HIF	\$426.91

Services Admin %	8.7%
HRA Admin %	0.2%
Non Benefit %*	11.2%

*Non Benefit % includes Hospital Provider Tax, HIF, and Administrative Allowances

Oregon Health Plan Medicaid Demonstration
Coordinated Care Organization Capitation Rates
CCO-A: Physical Health, Mental Health, and Dental Services
January 2016 through December 2016

Plan: Jackson County CCO, LLC,abn: Jackson Care Connect
Region: Southwest
Rate Group: Poverty Level Medical - Adults

Capitation Rate

Base Services Rate	\$375.29
Base HRA Adjustment	\$42.62
Hospital Provider Tax Allowance	\$12.84
Administrative Allowance	\$43.14
HRA Administrative Allowance	\$0.87
Health Insurers Fee	\$0.00
Total Services with Admin, HRA, and HIF	\$474.75

Services Admin %	9.1%
HRA Admin %	0.2%
Non Benefit %*	11.8%

*Non Benefit % includes Hospital Provider Tax, HIF, and Administrative Allowances

Oregon Health Plan Medicaid Demonstration
Coordinated Care Organization Capitation Rates
CCO-A: Physical Health, Mental Health, and Dental Services
January 2016 through December 2016

Plan: Jackson County CCO, LLC,abn: Jackson Care Connect
Region: Southwest
Rate Group: Children 0-1 (CHIP, PLMC, TANF Children)

Capitation Rate

Base Services Rate	\$482.92
Base HRA Adjustment	\$151.10
Hospital Provider Tax Allowance	\$22.08
Administrative Allowance	\$56.77
HRA Administrative Allowance	\$3.08
Health Insurers Fee	\$0.00
Total Services with Admin, HRA, and HIF	\$715.96

Services Admin %	7.9%
HRA Admin %	0.4%
Non Benefit %*	11.0%

*Non Benefit % includes Hospital Provider Tax, HIF, and Administrative Allowances

Oregon Health Plan Medicaid Demonstration
Coordinated Care Organization Capitation Rates
CCO-A: Physical Health, Mental Health, and Dental Services
January 2016 through December 2016

Plan: Jackson County CCO, LLC,abn: Jackson Care Connect
Region: Southwest
Rate Group: Children 1-5 (CHIP, PLMC, TANF Children)

Capitation Rate

Base Services Rate	\$125.33
Base HRA Adjustment	\$9.20
Hospital Provider Tax Allowance	\$3.56
Administrative Allowance	\$13.77
HRA Administrative Allowance	\$0.19
Health Insurers Fee	\$0.00
Total Services with Admin, HRA, and HIF	\$152.05

Services Admin %	9.1%
HRA Admin %	0.1%
Non Benefit %*	11.4%

*Non Benefit % includes Hospital Provider Tax, HIF, and Administrative Allowances

Oregon Health Plan Medicaid Demonstration
Coordinated Care Organization Capitation Rates
CCO-A: Physical Health, Mental Health, and Dental Services
January 2016 through December 2016

Plan: Jackson County CCO, LLC,abn: Jackson Care Connect
Region: Southwest
Rate Group: Children 6-18 (CHIP, PLMC, TANF Children)

Capitation Rate

Base Services Rate	\$143.04
Base HRA Adjustment	\$10.68
Hospital Provider Tax Allowance	\$3.64
Administrative Allowance	\$15.64
HRA Administrative Allowance	\$0.22
Health Insurers Fee	\$0.00
Total Services with Admin, HRA, and HIF	\$173.22

Services Admin %	9.0%
HRA Admin %	0.1%
Non Benefit %*	11.1%

*Non Benefit % includes Hospital Provider Tax, HIF, and Administrative Allowances

Oregon Health Plan Medicaid Demonstration
Coordinated Care Organization Capitation Rates
CCO-A: Physical Health, Mental Health, and Dental Services
January 2016 through December 2016

Plan: Jackson County CCO, LLC,abn: Jackson Care Connect
Region: Southwest
Rate Group: ABAD with Medicare

Capitation Rate

Base Services Rate	\$219.08
Base HRA Adjustment	\$10.26
Hospital Provider Tax Allowance	\$4.78
Administrative Allowance	\$23.80
HRA Administrative Allowance	\$0.21
Health Insurers Fee	\$0.00
Total Services with Admin, HRA, and HIF	\$258.13

Services Admin %	9.2%
HRA Admin %	0.1%
Non Benefit %*	11.1%

*Non Benefit % includes Hospital Provider Tax, HIF, and Administrative Allowances

Oregon Health Plan Medicaid Demonstration
Coordinated Care Organization Capitation Rates
CCO-A: Physical Health, Mental Health, and Dental Services
January 2016 through December 2016

Plan: Jackson County CCO, LLC,abn: Jackson Care Connect
Region: Southwest
Rate Group: ABAD without Medicare

Capitation Rate

Base Services Rate	\$1,031.22
Base HRA Adjustment	\$157.57
Hospital Provider Tax Allowance	\$34.49
Administrative Allowance	\$115.73
HRA Administrative Allowance	\$3.22
Health Insurers Fee	\$0.00
Total Services with Admin, HRA, and HIF	\$1,342.23

Services Admin %	8.6%
HRA Admin %	0.2%
Non Benefit %*	11.2%

*Non Benefit % includes Hospital Provider Tax, HIF, and Administrative Allowances

Oregon Health Plan Medicaid Demonstration
Coordinated Care Organization Capitation Rates
CCO-A: Physical Health, Mental Health, and Dental Services
January 2016 through December 2016

Plan: Jackson County CCO, LLC,abn: Jackson Care Connect
Region: Southwest
Rate Group: OAA with Medicare

Capitation Rate

Base Services Rate	\$219.08
Base HRA Adjustment	\$10.26
Hospital Provider Tax Allowance	\$4.78
Administrative Allowance	\$23.80
HRA Administrative Allowance	\$0.21
Health Insurers Fee	\$0.00
Total Services with Admin, HRA, and HIF	\$258.13

Services Admin %	9.2%
HRA Admin %	0.1%
Non Benefit %*	11.1%

*Non Benefit % includes Hospital Provider Tax, HIF, and Administrative Allowances

Oregon Health Plan Medicaid Demonstration
Coordinated Care Organization Capitation Rates
CCO-A: Physical Health, Mental Health, and Dental Services
January 2016 through December 2016

Plan: Jackson County CCO, LLC,abn: Jackson Care Connect Region: Southwest Rate Group: OAA without Medicare

Capitation Rate

Base Services Rate	\$1,031.22
Base HRA Adjustment	\$157.57
Hospital Provider Tax Allowance	\$34.49
Administrative Allowance	\$115.73
HRA Administrative Allowance	\$3.22
Health Insurers Fee	\$0.00
Total Services with Admin, HRA, and HIF	\$1,342.23

Services Admin %	8.6%
HRA Admin %	0.2%
Non Benefit %*	11.2%

*Non Benefit % includes Hospital Provider Tax, HIF, and Administrative Allowances

Oregon Health Plan Medicaid Demonstration
Coordinated Care Organization Capitation Rates
CCO-A: Physical Health, Mental Health, and Dental Services
January 2016 through December 2016

Plan: Jackson County CCO, LLC,abn: Jackson Care Connect
Region: Southwest
Rate Group: Foster Children (CAF)

Capitation Rate

Base Services Rate	\$448.52
Base HRA Adjustment	\$17.93
Hospital Provider Tax Allowance	\$6.69
Administrative Allowance	\$51.99
HRA Administrative Allowance	\$0.37
Health Insurers Fee	\$0.00
Total Services with Admin, HRA, and HIF	\$525.50

Services Admin %	9.9%
HRA Admin %	0.1%
Non Benefit %*	11.2%

*Non Benefit % includes Hospital Provider Tax, HIF, and Administrative Allowances

Oregon Health Plan Medicaid Demonstration
Coordinated Care Organization Capitation Rates
CCO-A: Physical Health, Mental Health, and Dental Services
January 2016 through December 2016

Plan: Jackson County CCO, LLC,abn: Jackson Care Connect
Region: Southwest
Rate Group: ACA Ages 19-44

Capitation Rate

Base Services Rate	\$314.24
Base HRA Adjustment	\$39.62
Hospital Provider Tax Allowance	\$10.16
Administrative Allowance	\$35.56
HRA Administrative Allowance	\$0.81
Health Insurers Fee	\$0.00
Total Services with Admin, HRA, and HIF	\$400.38

Services Admin %	8.9%
HRA Admin %	0.2%
Non Benefit %*	11.4%

*Non Benefit % includes Hospital Provider Tax, HIF, and Administrative Allowances

Oregon Health Plan Medicaid Demonstration
Coordinated Care Organization Capitation Rates
CCO-A: Physical Health, Mental Health, and Dental Services
January 2016 through December 2016

Plan: Jackson County CCO, LLC,abn: Jackson Care Connect Region: Southwest Rate Group: ACA Ages 45-54

Capitation Rate

Base Services Rate	\$501.56
Base HRA Adjustment	\$70.19
Hospital Provider Tax Allowance	\$17.61
Administrative Allowance	\$57.26
HRA Administrative Allowance	\$1.43
Health Insurers Fee	\$0.00
Total Services with Admin, HRA, and HIF	\$648.05

Services Admin %	8.8%
HRA Admin %	0.2%
Non Benefit %*	11.6%

*Non Benefit % includes Hospital Provider Tax, HIF, and Administrative Allowances

Oregon Health Plan Medicaid Demonstration
Coordinated Care Organization Capitation Rates
CCO-A: Physical Health, Mental Health, and Dental Services
January 2016 through December 2016

Plan: Jackson County CCO, LLC,abn: Jackson Care Connect
Region: Southwest
Rate Group: ACA Ages 55-64

Capitation Rate

Base Services Rate	\$600.12
Base HRA Adjustment	\$102.08
Hospital Provider Tax Allowance	\$20.25
Administrative Allowance	\$68.63
HRA Administrative Allowance	\$2.08
Health Insurers Fee	\$0.00
Total Services with Admin, HRA, and HIF	\$793.16

Services Admin %	8.7%
HRA Admin %	0.3%
Non Benefit %*	11.2%

*Non Benefit % includes Hospital Provider Tax, HIF, and Administrative Allowances

Oregon Health Plan Medicaid Demonstration
Coordinated Care Organization Capitation Rates
CCO-A: Physical Health, Mental Health, and Dental Services
January 2016 through December 2016

Plan: Jackson County CCO, LLC,abn: Jackson Care Connect
Region: Southwest
Rate Group: Breast and Cervical Cancer Program

Capitation Rate

Base Services Rate	\$1,390.59
Base HRA Adjustment	\$83.59
Hospital Provider Tax Allowance	\$50.14
Administrative Allowance	\$161.80
HRA Administrative Allowance	\$1.71
Health Insurers Fee	\$0.00
Total Services with Admin, HRA, and HIF	\$1,687.83

Services Admin %	9.6%
HRA Admin %	0.1%
Non Benefit %*	12.6%

*Non Benefit % includes Hospital Provider Tax, HIF, and Administrative Allowances

Oregon Health Plan Medicaid Demonstration
Coordinated Care Organization Capitation Rates
CCO-B: Physical Health and Mental Health Services
January 2016 through December 2016

Plan: Jackson County CCO, LLC,abn: Jackson Care Connect Region: Southwest Rate Group: Temporary Assistance to Needy Families - Adults
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Capitation Rate

Base Services Rate	\$307.41
Base HRA Adjustment	\$45.94
Hospital Provider Tax Allowance	\$10.88
Administrative Allowance	\$34.77
HRA Administrative Allowance	\$0.94
Health Insurers Fee	\$0.00
Total Services with Admin, HRA, and HIF	\$399.95

Services Admin %	8.7%
HRA Admin %	0.2%
Non Benefit %*	11.4%

*Non Benefit % includes Hospital Provider Tax, HIF, and Administrative Allowances

Oregon Health Plan Medicaid Demonstration
Coordinated Care Organization Capitation Rates
CCO-B: Physical Health and Mental Health Services
January 2016 through December 2016

Plan: Jackson County CCO, LLC,abn: Jackson Care Connect Region: Southwest Rate Group: Poverty Level Medical - Adults

Capitation Rate

Base Services Rate	\$345.56
Base HRA Adjustment	\$42.62
Hospital Provider Tax Allowance	\$12.84
Administrative Allowance	\$40.55
HRA Administrative Allowance	\$0.87
Health Insurers Fee	\$0.00
Total Services with Admin, HRA, and HIF	\$442.44

Services Admin %	9.2%
HRA Admin %	0.2%
Non Benefit %*	12.1%

*Non Benefit % includes Hospital Provider Tax, HIF, and Administrative Allowances

Oregon Health Plan Medicaid Demonstration
Coordinated Care Organization Capitation Rates
CCO-B: Physical Health and Mental Health Services
January 2016 through December 2016

Plan: Jackson County CCO, LLC,abn: Jackson Care Connect
Region: Southwest
Rate Group: Children 0-1 (CHIP, PLMC, TANF Children)

Capitation Rate

Base Services Rate	\$482.58
Base HRA Adjustment	\$151.10
Hospital Provider Tax Allowance	\$22.08
Administrative Allowance	\$56.74
HRA Administrative Allowance	\$3.08
Health Insurers Fee	\$0.00
Total Services with Admin, HRA, and HIF	\$715.58

Services Admin %	7.9%
HRA Admin %	0.4%
Non Benefit %*	11.0%

*Non Benefit % includes Hospital Provider Tax, HIF, and Administrative Allowances

Oregon Health Plan Medicaid Demonstration
Coordinated Care Organization Capitation Rates
CCO-B: Physical Health and Mental Health Services
January 2016 through December 2016

Plan: Jackson County CCO, LLC,abn: Jackson Care Connect
Region: Southwest
Rate Group: Children 1-5 (CHIP, PLMC, TANF Children)

Capitation Rate

Base Services Rate	\$107.79
Base HRA Adjustment	\$9.20
Hospital Provider Tax Allowance	\$3.56
Administrative Allowance	\$12.25
HRA Administrative Allowance	\$0.19
Health Insurers Fee	\$0.00
Total Services with Admin, HRA, and HIF	\$132.99

Services Admin %	9.2%
HRA Admin %	0.1%
Non Benefit %*	11.9%

*Non Benefit % includes Hospital Provider Tax, HIF, and Administrative Allowances

Oregon Health Plan Medicaid Demonstration
Coordinated Care Organization Capitation Rates
CCO-B: Physical Health and Mental Health Services
January 2016 through December 2016

Plan: Jackson County CCO, LLC,abn: Jackson Care Connect
Region: Southwest
Rate Group: Children 6-18 (CHIP, PLMC, TANF Children)

Capitation Rate

Base Services Rate	\$120.35
Base HRA Adjustment	\$10.68
Hospital Provider Tax Allowance	\$3.64
Administrative Allowance	\$13.67
HRA Administrative Allowance	\$0.22
Health Insurers Fee	\$0.00
Total Services with Admin, HRA, and HIF	\$148.56

Services Admin %	9.2%
HRA Admin %	0.1%
Non Benefit %*	11.7%

*Non Benefit % includes Hospital Provider Tax, HIF, and Administrative Allowances

Oregon Health Plan Medicaid Demonstration
Coordinated Care Organization Capitation Rates
CCO-B: Physical Health and Mental Health Services
January 2016 through December 2016

Plan: Jackson County CCO, LLC,abn: Jackson Care Connect Region: Southwest Rate Group: ABAD with Medicare

Capitation Rate

Base Services Rate	\$200.68
Base HRA Adjustment	\$10.26
Hospital Provider Tax Allowance	\$4.78
Administrative Allowance	\$22.20
HRA Administrative Allowance	\$0.21
Health Insurers Fee	\$0.00
Total Services with Admin, HRA, and HIF	\$238.14

Services Admin %	9.3%
HRA Admin %	0.1%
Non Benefit %*	11.3%

*Non Benefit % includes Hospital Provider Tax, HIF, and Administrative Allowances

Oregon Health Plan Medicaid Demonstration
Coordinated Care Organization Capitation Rates
CCO-B: Physical Health and Mental Health Services
January 2016 through December 2016

Plan: Jackson County CCO, LLC,abn: Jackson Care Connect
Region: Southwest
Rate Group: ABAD without Medicare

Capitation Rate

Base Services Rate	\$1,007.98
Base HRA Adjustment	\$157.57
Hospital Provider Tax Allowance	\$34.49
Administrative Allowance	\$113.71
HRA Administrative Allowance	\$3.22
Health Insurers Fee	\$0.00
Total Services with Admin, HRA, and HIF	\$1,316.97

Services Admin %	8.6%
HRA Admin %	0.2%
Non Benefit %*	11.3%

*Non Benefit % includes Hospital Provider Tax, HIF, and Administrative Allowances

Oregon Health Plan Medicaid Demonstration
Coordinated Care Organization Capitation Rates
CCO-B: Physical Health and Mental Health Services
January 2016 through December 2016

Plan: Jackson County CCO, LLC,abn: Jackson Care Connect Region: Southwest Rate Group: OAA with Medicare
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Capitation Rate

Base Services Rate	\$200.68
Base HRA Adjustment	\$10.26
Hospital Provider Tax Allowance	\$4.78
Administrative Allowance	\$22.20
HRA Administrative Allowance	\$0.21
Health Insurers Fee	\$0.00
Total Services with Admin, HRA, and HIF	\$238.14

Services Admin %	9.3%
HRA Admin %	0.1%
Non Benefit %*	11.3%

*Non Benefit % includes Hospital Provider Tax, HIF, and Administrative Allowances

Oregon Health Plan Medicaid Demonstration
Coordinated Care Organization Capitation Rates
CCO-B: Physical Health and Mental Health Services
January 2016 through December 2016

Plan: Jackson County CCO, LLC,abn: Jackson Care Connect Region: Southwest Rate Group: OAA without Medicare

Capitation Rate

Base Services Rate	\$1,007.98
Base HRA Adjustment	\$157.57
Hospital Provider Tax Allowance	\$34.49
Administrative Allowance	\$113.71
HRA Administrative Allowance	\$3.22
Health Insurers Fee	\$0.00
Total Services with Admin, HRA, and HIF	\$1,316.97

Services Admin %	8.6%
HRA Admin %	0.2%
Non Benefit %*	11.3%

*Non Benefit % includes Hospital Provider Tax, HIF, and Administrative Allowances

Oregon Health Plan Medicaid Demonstration
Coordinated Care Organization Capitation Rates
CCO-B: Physical Health and Mental Health Services
January 2016 through December 2016

Plan: Jackson County CCO, LLC,abn: Jackson Care Connect
Region: Southwest
Rate Group: Foster Children (CAF)

Capitation Rate

Base Services Rate	\$425.80
Base HRA Adjustment	\$17.93
Hospital Provider Tax Allowance	\$6.69
Administrative Allowance	\$50.01
HRA Administrative Allowance	\$0.37
Health Insurers Fee	\$0.00
Total Services with Admin, HRA, and HIF	\$500.80

Services Admin %	10.0%
HRA Admin %	0.1%
Non Benefit %*	11.3%

*Non Benefit % includes Hospital Provider Tax, HIF, and Administrative Allowances

Oregon Health Plan Medicaid Demonstration
Coordinated Care Organization Capitation Rates
CCO-B: Physical Health and Mental Health Services
January 2016 through December 2016

Plan: Jackson County CCO, LLC,abn: Jackson Care Connect Region: Southwest Rate Group: ACA Ages 19-44

Capitation Rate

Base Services Rate	\$289.35
Base HRA Adjustment	\$39.62
Hospital Provider Tax Allowance	\$10.16
Administrative Allowance	\$33.40
HRA Administrative Allowance	\$0.81
Health Insurers Fee	\$0.00
Total Services with Admin, HRA, and HIF	\$373.33

Services Admin %	8.9%
HRA Admin %	0.2%
Non Benefit %*	11.7%

*Non Benefit % includes Hospital Provider Tax, HIF, and Administrative Allowances

Oregon Health Plan Medicaid Demonstration
Coordinated Care Organization Capitation Rates
CCO-B: Physical Health and Mental Health Services
January 2016 through December 2016

Plan: Jackson County CCO, LLC,abn: Jackson Care Connect
Region: Southwest
Rate Group: ACA Ages 45-54

Capitation Rate

Base Services Rate	\$475.24
Base HRA Adjustment	\$70.19
Hospital Provider Tax Allowance	\$17.61
Administrative Allowance	\$54.97
HRA Administrative Allowance	\$1.43
Health Insurers Fee	\$0.00
Total Services with Admin, HRA, and HIF	\$619.45

Services Admin %	8.9%
HRA Admin %	0.2%
Non Benefit %*	11.7%

*Non Benefit % includes Hospital Provider Tax, HIF, and Administrative Allowances

Oregon Health Plan Medicaid Demonstration
Coordinated Care Organization Capitation Rates
CCO-B: Physical Health and Mental Health Services
January 2016 through December 2016

Plan: Jackson County CCO, LLC,abn: Jackson Care Connect
Region: Southwest
Rate Group: ACA Ages 55-64

Capitation Rate

Base Services Rate	\$572.66
Base HRA Adjustment	\$102.08
Hospital Provider Tax Allowance	\$20.25
Administrative Allowance	\$66.24
HRA Administrative Allowance	\$2.08
Health Insurers Fee	\$0.00
Total Services with Admin, HRA, and HIF	\$763.31

Services Admin %	8.7%
HRA Admin %	0.3%
Non Benefit %*	11.3%

*Non Benefit % includes Hospital Provider Tax, HIF, and Administrative Allowances

Oregon Health Plan Medicaid Demonstration
Coordinated Care Organization Capitation Rates
CCO-B: Physical Health and Mental Health Services
January 2016 through December 2016

Plan: Jackson County CCO, LLC,abn: Jackson Care Connect
Region: Southwest
Rate Group: Breast and Cervical Cancer Program

Capitation Rate

Base Services Rate	\$1,367.01
Base HRA Adjustment	\$83.59
Hospital Provider Tax Allowance	\$50.14
Administrative Allowance	\$159.75
HRA Administrative Allowance	\$1.71
Health Insurers Fee	\$0.00
Total Services with Admin, HRA, and HIF	\$1,662.20

Services Admin %	9.6%
HRA Admin %	0.1%
Non Benefit %*	12.6%

*Non Benefit % includes Hospital Provider Tax, HIF, and Administrative Allowances

Oregon Health Plan Medicaid Demonstration
Coordinated Care Organization Capitation Rates
CCO-E: Mental Health Services Only
January 2016 through December 2016

Plan: Jackson County CCO, LLC,abn: Jackson Care Connect Region: Southwest Rate Group: Temporary Assistance to Needy Families - Adults
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Capitation Rate

Base Services Rate	\$36.02
Base HRA Adjustment	\$1.18
Hospital Provider Tax Allowance	\$0.00
Administrative Allowance	\$3.91
HRA Administrative Allowance	\$0.02
Health Insurers Fee	\$0.00
Total Services with Admin, HRA, and HIF	\$41.14

Services Admin %	9.5%
HRA Admin %	0.1%
Non Benefit %*	9.5%

*Non Benefit % includes Hospital Provider Tax, HIF, and Administrative Allowances

Oregon Health Plan Medicaid Demonstration
Coordinated Care Organization Capitation Rates
CCO-E: Mental Health Services Only
January 2016 through December 2016

Plan: Jackson County CCO, LLC,abn: Jackson Care Connect
Region: Southwest
Rate Group: Poverty Level Medical - Adults

Capitation Rate

Base Services Rate	\$19.70
Base HRA Adjustment	\$0.35
Hospital Provider Tax Allowance	\$0.00
Administrative Allowance	\$2.22
HRA Administrative Allowance	\$0.01
Health Insurers Fee	\$0.00
Total Services with Admin, HRA, and HIF	\$22.28

Services Admin %	10.0%
HRA Admin %	0.0%
Non Benefit %*	10.0%

*Non Benefit % includes Hospital Provider Tax, HIF, and Administrative Allowances

Oregon Health Plan Medicaid Demonstration
Coordinated Care Organization Capitation Rates
CCO-E: Mental Health Services Only
January 2016 through December 2016

Plan: Jackson County CCO, LLC,abn: Jackson Care Connect
Region: Southwest
Rate Group: Children 0-1 (CHIP, PLMC, TANF Children)

Capitation Rate

Base Services Rate	\$3.81
Base HRA Adjustment	\$0.06
Hospital Provider Tax Allowance	\$0.00
Administrative Allowance	\$0.43
HRA Administrative Allowance	\$0.00
Health Insurers Fee	\$0.00
Total Services with Admin, HRA, and HIF	\$4.29

Services Admin %	9.9%
HRA Admin %	0.0%
Non Benefit %*	9.9%

*Non Benefit % includes Hospital Provider Tax, HIF, and Administrative Allowances

Oregon Health Plan Medicaid Demonstration
Coordinated Care Organization Capitation Rates
CCO-E: Mental Health Services Only
January 2016 through December 2016

Plan: Jackson County CCO, LLC,abn: Jackson Care Connect
Region: Southwest
Rate Group: Children 1-5 (CHIP, PLMC, TANF Children)

Capitation Rate

Base Services Rate	\$9.84
Base HRA Adjustment	\$0.05
Hospital Provider Tax Allowance	\$0.00
Administrative Allowance	\$1.11
HRA Administrative Allowance	\$0.00
Health Insurers Fee	\$0.00
Total Services with Admin, HRA, and HIF	\$10.99

Services Admin %	10.1%
HRA Admin %	0.0%
Non Benefit %*	10.1%

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Oregon Health Plan Medicaid Demonstration
Coordinated Care Organization Capitation Rates
CCO-E: Mental Health Services Only
January 2016 through December 2016

Plan: Jackson County CCO, LLC,abn: Jackson Care Connect
Region: Southwest
Rate Group: Children 6-18 (CHIP, PLMC, TANF Children)

Capitation Rate

Base Services Rate	\$29.16
Base HRA Adjustment	\$0.41
Hospital Provider Tax Allowance	\$0.00
Administrative Allowance	\$3.30
HRA Administrative Allowance	\$0.01
Health Insurers Fee	\$0.00
Total Services with Admin, HRA, and HIF	\$32.88

Services Admin %	10.0%
HRA Admin %	0.0%
Non Benefit %*	10.0%

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Oregon Health Plan Medicaid Demonstration
Coordinated Care Organization Capitation Rates
CCO-E: Mental Health Services Only
January 2016 through December 2016

Plan: Jackson County CCO, LLC,abn: Jackson Care Connect
Region: Southwest
Rate Group: ABAD with Medicare

Capitation Rate

Base Services Rate	\$83.48
Base HRA Adjustment	\$0.46
Hospital Provider Tax Allowance	\$0.00
Administrative Allowance	\$8.41
HRA Administrative Allowance	\$0.01
Health Insurers Fee	\$0.00
Total Services with Admin, HRA, and HIF	\$92.36

Services Admin %	9.1%
HRA Admin %	0.0%
Non Benefit %*	9.1%

*Non Benefit % includes Hospital Provider Tax, HIF, and Administrative Allowances

Oregon Health Plan Medicaid Demonstration
Coordinated Care Organization Capitation Rates
CCO-E: Mental Health Services Only
January 2016 through December 2016

Plan: Jackson County CCO, LLC,abn: Jackson Care Connect
Region: Southwest
Rate Group: ABAD without Medicare

Capitation Rate

Base Services Rate	\$157.14
Base HRA Adjustment	\$8.21
Hospital Provider Tax Allowance	\$0.00
Administrative Allowance	\$16.94
HRA Administrative Allowance	\$0.17
Health Insurers Fee	\$0.00
Total Services with Admin, HRA, and HIF	\$182.45

Services Admin %	9.3%
HRA Admin %	0.1%
Non Benefit %*	9.3%

*Non Benefit % includes Hospital Provider Tax, HIF, and Administrative Allowances

Oregon Health Plan Medicaid Demonstration
Coordinated Care Organization Capitation Rates
CCO-E: Mental Health Services Only
January 2016 through December 2016

Plan: Jackson County CCO, LLC,abn: Jackson Care Connect Region: Southwest Rate Group: OAA with Medicare
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Capitation Rate

Base Services Rate	\$83.48
Base HRA Adjustment	\$0.46
Hospital Provider Tax Allowance	\$0.00
Administrative Allowance	\$8.41
HRA Administrative Allowance	\$0.01
Health Insurers Fee	\$0.00
Total Services with Admin, HRA, and HIF	\$92.36

Services Admin %	9.1%
HRA Admin %	0.0%
Non Benefit %*	9.1%

*Non Benefit % includes Hospital Provider Tax, HIF, and Administrative Allowances

Oregon Health Plan Medicaid Demonstration
Coordinated Care Organization Capitation Rates
CCO-E: Mental Health Services Only
January 2016 through December 2016

Plan: Jackson County CCO, LLC,abn: Jackson Care Connect
Region: Southwest
Rate Group: OAA without Medicare

Capitation Rate

Base Services Rate	\$157.14
Base HRA Adjustment	\$8.21
Hospital Provider Tax Allowance	\$0.00
Administrative Allowance	\$16.94
HRA Administrative Allowance	\$0.17
Health Insurers Fee	\$0.00
Total Services with Admin, HRA, and HIF	\$182.45

Services Admin %	9.3%
HRA Admin %	0.1%
Non Benefit %*	9.3%

*Non Benefit % includes Hospital Provider Tax, HIF, and Administrative Allowances

Oregon Health Plan Medicaid Demonstration
Coordinated Care Organization Capitation Rates
CCO-E: Mental Health Services Only
January 2016 through December 2016

Plan: Jackson County CCO, LLC,abn: Jackson Care Connect
Region: Southwest
Rate Group: Foster Children (CAF)

Capitation Rate

Base Services Rate	\$256.56
Base HRA Adjustment	\$1.96
Hospital Provider Tax Allowance	\$0.00
Administrative Allowance	\$30.10
HRA Administrative Allowance	\$0.04
Health Insurers Fee	\$0.00
Total Services with Admin, HRA, and HIF	\$288.66

Services Admin %	10.4%
HRA Admin %	0.0%
Non Benefit %*	10.4%

*Non Benefit % includes Hospital Provider Tax, HIF, and Administrative Allowances

Oregon Health Plan Medicaid Demonstration
Coordinated Care Organization Capitation Rates
CCO-E: Mental Health Services Only
January 2016 through December 2016

Plan: Jackson County CCO, LLC,abn: Jackson Care Connect
Region: Southwest
Rate Group: ACA Ages 19-44

Capitation Rate

Base Services Rate	\$43.11
Base HRA Adjustment	\$1.65
Hospital Provider Tax Allowance	\$0.00
Administrative Allowance	\$4.70
HRA Administrative Allowance	\$0.03
Health Insurers Fee	\$0.00
Total Services with Admin, HRA, and HIF	\$49.49

Services Admin %	9.5%
HRA Admin %	0.1%
Non Benefit %*	9.5%

*Non Benefit % includes Hospital Provider Tax, HIF, and Administrative Allowances

Oregon Health Plan Medicaid Demonstration
Coordinated Care Organization Capitation Rates
CCO-E: Mental Health Services Only
January 2016 through December 2016

Plan: Jackson County CCO, LLC,abn: Jackson Care Connect
Region: Southwest
Rate Group: ACA Ages 45-54

Capitation Rate

Base Services Rate	\$48.77
Base HRA Adjustment	\$1.73
Hospital Provider Tax Allowance	\$0.00
Administrative Allowance	\$5.28
HRA Administrative Allowance	\$0.04
Health Insurers Fee	\$0.00
Total Services with Admin, HRA, and HIF	\$55.81

Services Admin %	9.5%
HRA Admin %	0.1%
Non Benefit %*	9.5%

*Non Benefit % includes Hospital Provider Tax, HIF, and Administrative Allowances

Oregon Health Plan Medicaid Demonstration
Coordinated Care Organization Capitation Rates
CCO-E: Mental Health Services Only
January 2016 through December 2016

Plan: Jackson County CCO, LLC,abn: Jackson Care Connect
Region: Southwest
Rate Group: ACA Ages 55-64

Capitation Rate

Base Services Rate	\$52.07
Base HRA Adjustment	\$1.96
Hospital Provider Tax Allowance	\$0.00
Administrative Allowance	\$5.57
HRA Administrative Allowance	\$0.04
Health Insurers Fee	\$0.00
Total Services with Admin, HRA, and HIF	\$59.64

Services Admin %	9.3%
HRA Admin %	0.1%
Non Benefit %*	9.3%

*Non Benefit % includes Hospital Provider Tax, HIF, and Administrative Allowances

Oregon Health Plan Medicaid Demonstration
Coordinated Care Organization Capitation Rates
CCO-E: Mental Health Services Only
January 2016 through December 2016

Plan: Jackson County CCO, LLC,abn: Jackson Care Connect
Region: Southwest
Rate Group: Breast and Cervical Cancer Program

Capitation Rate

Base Services Rate	\$105.48
Base HRA Adjustment	\$0.53
Hospital Provider Tax Allowance	\$0.00
Administrative Allowance	\$11.33
HRA Administrative Allowance	\$0.01
Health Insurers Fee	\$0.00
Total Services with Admin, HRA, and HIF	\$117.35

Services Admin %	9.7%
HRA Admin %	0.0%
Non Benefit %*	9.7%

*Non Benefit % includes Hospital Provider Tax, HIF, and Administrative Allowances

Oregon Health Plan Medicaid Demonstration
Coordinated Care Organization Capitation Rates
CCO-F: Dental Services Only
January 2016 through December 2016

Plan: Jackson County CCO, LLC,abn: Jackson Care Connect
Region: Southwest
Rate Group: Temporary Assistance to Needy Families - Adults

Capitation Rate

Base Services Rate	\$31.94
Base HRA Adjustment	\$0.00
Hospital Provider Tax Allowance	\$0.00
Administrative Allowance	\$2.78
HRA Administrative Allowance	\$0.00
Health Insurers Fee	\$0.00
Total Services with Admin, HRA, and HIF	\$34.71

Services Admin %	8.0%
HRA Admin %	0.0%
Non Benefit %*	8.0%

*Non Benefit % includes Hospital Provider Tax, HIF, and Administrative Allowances

Oregon Health Plan Medicaid Demonstration
Coordinated Care Organization Capitation Rates
CCO-F: Dental Services Only
January 2016 through December 2016

Plan: Jackson County CCO, LLC,abn: Jackson Care Connect
Region: Southwest
Rate Group: Poverty Level Medical - Adults

Capitation Rate

Base Services Rate	\$33.00
Base HRA Adjustment	\$0.00
Hospital Provider Tax Allowance	\$0.00
Administrative Allowance	\$2.87
HRA Administrative Allowance	\$0.00
Health Insurers Fee	\$0.00
Total Services with Admin, HRA, and HIF	\$35.86

Services Admin %	8.0%
HRA Admin %	0.0%
Non Benefit %*	8.0%

*Non Benefit % includes Hospital Provider Tax, HIF, and Administrative Allowances

Oregon Health Plan Medicaid Demonstration
Coordinated Care Organization Capitation Rates
CCO-F: Dental Services Only
January 2016 through December 2016

Plan: Jackson County CCO, LLC,abn: Jackson Care Connect Region: Southwest Rate Group: Children 0-1 (CHIP, PLMC, TANF Children)

Capitation Rate

Base Services Rate	\$1.04
Base HRA Adjustment	\$0.00
Hospital Provider Tax Allowance	\$0.00
Administrative Allowance	\$0.09
HRA Administrative Allowance	\$0.00
Health Insurers Fee	\$0.00
Total Services with Admin, HRA, and HIF	\$1.13

Services Admin %	8.0%
HRA Admin %	0.0%
Non Benefit %*	8.0%

*Non Benefit % includes Hospital Provider Tax, HIF, and Administrative Allowances

Oregon Health Plan Medicaid Demonstration
Coordinated Care Organization Capitation Rates
CCO-F: Dental Services Only
January 2016 through December 2016

Plan: Jackson County CCO, LLC,abn: Jackson Care Connect
Region: Southwest
Rate Group: Children 1-5 (CHIP, PLMC, TANF Children)

Capitation Rate

Base Services Rate	\$18.01
Base HRA Adjustment	\$0.00
Hospital Provider Tax Allowance	\$0.00
Administrative Allowance	\$1.57
HRA Administrative Allowance	\$0.00
Health Insurers Fee	\$0.00
Total Services with Admin, HRA, and HIF	\$19.58

Services Admin %	8.0%
HRA Admin %	0.0%
Non Benefit %*	8.0%

*Non Benefit % includes Hospital Provider Tax, HIF, and Administrative Allowances

Oregon Health Plan Medicaid Demonstration
Coordinated Care Organization Capitation Rates
CCO-F: Dental Services Only
January 2016 through December 2016

Plan: Jackson County CCO, LLC,abn: Jackson Care Connect
Region: Southwest
Rate Group: Children 6-18 (CHIP, PLMC, TANF Children)

Capitation Rate

Base Services Rate	\$23.43
Base HRA Adjustment	\$0.00
Hospital Provider Tax Allowance	\$0.00
Administrative Allowance	\$2.04
HRA Administrative Allowance	\$0.00
Health Insurers Fee	\$0.00
Total Services with Admin, HRA, and HIF	\$25.47

Services Admin %	8.0%
HRA Admin %	0.0%
Non Benefit %*	8.0%

*Non Benefit % includes Hospital Provider Tax, HIF, and Administrative Allowances

Oregon Health Plan Medicaid Demonstration
Coordinated Care Organization Capitation Rates
CCO-F: Dental Services Only
January 2016 through December 2016

Plan: Jackson County CCO, LLC,abn: Jackson Care Connect Region: Southwest Rate Group: ABAD with Medicare

Capitation Rate

Base Services Rate	\$64.39
Base HRA Adjustment	\$0.00
Hospital Provider Tax Allowance	\$0.00
Administrative Allowance	\$5.60
HRA Administrative Allowance	\$0.00
Health Insurers Fee	\$0.00
Total Services with Admin, HRA, and HIF	\$69.99

Services Admin %	8.0%
HRA Admin %	0.0%
Non Benefit %*	8.0%

*Non Benefit % includes Hospital Provider Tax, HIF, and Administrative Allowances

Oregon Health Plan Medicaid Demonstration
Coordinated Care Organization Capitation Rates
CCO-F: Dental Services Only
January 2016 through December 2016

Plan: Jackson County CCO, LLC,abn: Jackson Care Connect
Region: Southwest
Rate Group: ABAD without Medicare

Capitation Rate

Base Services Rate	\$58.26
Base HRA Adjustment	\$0.00
Hospital Provider Tax Allowance	\$0.00
Administrative Allowance	\$5.07
HRA Administrative Allowance	\$0.00
Health Insurers Fee	\$0.00
Total Services with Admin, HRA, and HIF	\$63.32

Services Admin %	8.0%
HRA Admin %	0.0%
Non Benefit %*	8.0%

*Non Benefit % includes Hospital Provider Tax, HIF, and Administrative Allowances

Oregon Health Plan Medicaid Demonstration
Coordinated Care Organization Capitation Rates
CCO-F: Dental Services Only
January 2016 through December 2016

Plan: Jackson County CCO, LLC,abn: Jackson Care Connect
Region: Southwest
Rate Group: OAA with Medicare

Capitation Rate

Base Services Rate	\$64.39
Base HRA Adjustment	\$0.00
Hospital Provider Tax Allowance	\$0.00
Administrative Allowance	\$5.60
HRA Administrative Allowance	\$0.00
Health Insurers Fee	\$0.00
Total Services with Admin, HRA, and HIF	\$69.99

Services Admin %	8.0%
HRA Admin %	0.0%
Non Benefit %*	8.0%

*Non Benefit % includes Hospital Provider Tax, HIF, and Administrative Allowances

Oregon Health Plan Medicaid Demonstration
Coordinated Care Organization Capitation Rates
CCO-F: Dental Services Only
January 2016 through December 2016

Plan: Jackson County CCO, LLC,abn: Jackson Care Connect
Region: Southwest
Rate Group: OAA without Medicare

Capitation Rate

Base Services Rate	\$58.26
Base HRA Adjustment	\$0.00
Hospital Provider Tax Allowance	\$0.00
Administrative Allowance	\$5.07
HRA Administrative Allowance	\$0.00
Health Insurers Fee	\$0.00
Total Services with Admin, HRA, and HIF	\$63.32

Services Admin %	8.0%
HRA Admin %	0.0%
Non Benefit %*	8.0%

*Non Benefit % includes Hospital Provider Tax, HIF, and Administrative Allowances

Oregon Health Plan Medicaid Demonstration
Coordinated Care Organization Capitation Rates
CCO-F: Dental Services Only
January 2016 through December 2016

Plan: Jackson County CCO, LLC,abn: Jackson Care Connect
Region: Southwest
Rate Group: Foster Children (CAF)

Capitation Rate

Base Services Rate	\$25.12
Base HRA Adjustment	\$0.00
Hospital Provider Tax Allowance	\$0.00
Administrative Allowance	\$2.18
HRA Administrative Allowance	\$0.00
Health Insurers Fee	\$0.00
Total Services with Admin, HRA, and HIF	\$27.31

Services Admin %	8.0%
HRA Admin %	0.0%
Non Benefit %*	8.0%

*Non Benefit % includes Hospital Provider Tax, HIF, and Administrative Allowances

Oregon Health Plan Medicaid Demonstration
Coordinated Care Organization Capitation Rates
CCO-F: Dental Services Only
January 2016 through December 2016

Plan: Jackson County CCO, LLC,abn: Jackson Care Connect
Region: Southwest
Rate Group: ACA Ages 19-44

Capitation Rate

Base Services Rate	\$35.94
Base HRA Adjustment	\$0.00
Hospital Provider Tax Allowance	\$0.00
Administrative Allowance	\$3.12
HRA Administrative Allowance	\$0.00
Health Insurers Fee	\$0.00
Total Services with Admin, HRA, and HIF	\$39.06

Services Admin %	8.0%
HRA Admin %	0.0%
Non Benefit %*	8.0%

*Non Benefit % includes Hospital Provider Tax, HIF, and Administrative Allowances

Oregon Health Plan Medicaid Demonstration
Coordinated Care Organization Capitation Rates
CCO-F: Dental Services Only
January 2016 through December 2016

Plan: Jackson County CCO, LLC,abn: Jackson Care Connect Region: Southwest Rate Group: ACA Ages 45-54

Capitation Rate

Base Services Rate	\$40.16
Base HRA Adjustment	\$0.00
Hospital Provider Tax Allowance	\$0.00
Administrative Allowance	\$3.49
HRA Administrative Allowance	\$0.00
Health Insurers Fee	\$0.00
Total Services with Admin, HRA, and HIF	\$43.66

Services Admin %	8.0%
HRA Admin %	0.0%
Non Benefit %*	8.0%

*Non Benefit % includes Hospital Provider Tax, HIF, and Administrative Allowances

Oregon Health Plan Medicaid Demonstration
Coordinated Care Organization Capitation Rates
CCO-F: Dental Services Only
January 2016 through December 2016

Plan: Jackson County CCO, LLC,abn: Jackson Care Connect Region: Southwest Rate Group: ACA Ages 55-64

Capitation Rate

Base Services Rate	\$44.27
Base HRA Adjustment	\$0.00
Hospital Provider Tax Allowance	\$0.00
Administrative Allowance	\$3.85
HRA Administrative Allowance	\$0.00
Health Insurers Fee	\$0.00
Total Services with Admin, HRA, and HIF	\$48.12

Services Admin %	8.0%
HRA Admin %	0.0%
Non Benefit %*	8.0%

*Non Benefit % includes Hospital Provider Tax, HIF, and Administrative Allowances

Oregon Health Plan Medicaid Demonstration
Coordinated Care Organization Capitation Rates
CCO-F: Dental Services Only
January 2016 through December 2016

Plan: Jackson County CCO, LLC,abn: Jackson Care Connect
Region: Southwest
Rate Group: Breast and Cervical Cancer Program

Capitation Rate

Base Services Rate	\$58.60
Base HRA Adjustment	\$0.00
Hospital Provider Tax Allowance	\$0.00
Administrative Allowance	\$5.10
HRA Administrative Allowance	\$0.00
Health Insurers Fee	\$0.00
Total Services with Admin, HRA, and HIF	\$63.70

Services Admin %	8.0%
HRA Admin %	0.0%
Non Benefit %*	8.0%

*Non Benefit % includes Hospital Provider Tax, HIF, and Administrative Allowances

Oregon Health Plan Medicaid Demonstration
Coordinated Care Organization Capitation Rates
CCO-G: Mental Health and Dental Services Only
January 2016 through December 2016

Plan: Jackson County CCO, LLC,abn: Jackson Care Connect
Region: Southwest
Rate Group: Temporary Assistance to Needy Families - Adults

Capitation Rate

Base Services Rate	\$60.83
Base HRA Adjustment	\$1.18
Hospital Provider Tax Allowance	\$0.00
Administrative Allowance	\$6.06
HRA Administrative Allowance	\$0.02
Health Insurers Fee	\$0.00
Total Services with Admin, HRA, and HIF	\$68.10

Services Admin %	8.9%
HRA Admin %	0.0%
Non Benefit %*	8.9%

*Non Benefit % includes Hospital Provider Tax, HIF, and Administrative Allowances

Oregon Health Plan Medicaid Demonstration
Coordinated Care Organization Capitation Rates
CCO-G: Mental Health and Dental Services Only
January 2016 through December 2016

Plan: Jackson County CCO, LLC,abn: Jackson Care Connect Region: Southwest Rate Group: Poverty Level Medical - Adults

Capitation Rate

Base Services Rate	\$49.43
Base HRA Adjustment	\$0.35
Hospital Provider Tax Allowance	\$0.00
Administrative Allowance	\$4.80
HRA Administrative Allowance	\$0.01
Health Insurers Fee	\$0.00
Total Services with Admin, HRA, and HIF	\$54.59

Services Admin %	8.8%
HRA Admin %	0.0%
Non Benefit %*	8.8%

*Non Benefit % includes Hospital Provider Tax, HIF, and Administrative Allowances

Oregon Health Plan Medicaid Demonstration
Coordinated Care Organization Capitation Rates
CCO-G: Mental Health and Dental Services Only
January 2016 through December 2016

Plan: Jackson County CCO, LLC,abn: Jackson Care Connect
Region: Southwest
Rate Group: Children 0-1 (CHIP, PLMC, TANF Children)

Capitation Rate

Base Services Rate	\$4.15
Base HRA Adjustment	\$0.06
Hospital Provider Tax Allowance	\$0.00
Administrative Allowance	\$0.46
HRA Administrative Allowance	\$0.00
Health Insurers Fee	\$0.00
Total Services with Admin, HRA, and HIF	\$4.67

Services Admin %	9.8%
HRA Admin %	0.0%
Non Benefit %*	9.8%

*Non Benefit % includes Hospital Provider Tax, HIF, and Administrative Allowances

Oregon Health Plan Medicaid Demonstration
Coordinated Care Organization Capitation Rates
CCO-G: Mental Health and Dental Services Only
January 2016 through December 2016

Plan: Jackson County CCO, LLC,abn: Jackson Care Connect
Region: Southwest
Rate Group: Children 1-5 (CHIP, PLMC, TANF Children)

Capitation Rate

Base Services Rate	\$27.37
Base HRA Adjustment	\$0.05
Hospital Provider Tax Allowance	\$0.00
Administrative Allowance	\$2.63
HRA Administrative Allowance	\$0.00
Health Insurers Fee	\$0.00
Total Services with Admin, HRA, and HIF	\$30.05

Services Admin %	8.8%
HRA Admin %	0.0%
Non Benefit %*	8.8%

*Non Benefit % includes Hospital Provider Tax, HIF, and Administrative Allowances

Oregon Health Plan Medicaid Demonstration
Coordinated Care Organization Capitation Rates
CCO-G: Mental Health and Dental Services Only
January 2016 through December 2016

Plan: Jackson County CCO, LLC,abn: Jackson Care Connect
Region: Southwest
Rate Group: Children 6-18 (CHIP, PLMC, TANF Children)

Capitation Rate

Base Services Rate	\$51.85
Base HRA Adjustment	\$0.41
Hospital Provider Tax Allowance	\$0.00
Administrative Allowance	\$5.27
HRA Administrative Allowance	\$0.01
Health Insurers Fee	\$0.00
Total Services with Admin, HRA, and HIF	\$57.54

Services Admin %	9.2%
HRA Admin %	0.0%
Non Benefit %*	9.2%

*Non Benefit % includes Hospital Provider Tax, HIF, and Administrative Allowances

Oregon Health Plan Medicaid Demonstration
Coordinated Care Organization Capitation Rates
CCO-G: Mental Health and Dental Services Only
January 2016 through December 2016

Plan: Jackson County CCO, LLC,abn: Jackson Care Connect
Region: Southwest
Rate Group: ABAD with Medicare

Capitation Rate

Base Services Rate	\$101.88
Base HRA Adjustment	\$0.46
Hospital Provider Tax Allowance	\$0.00
Administrative Allowance	\$10.01
HRA Administrative Allowance	\$0.01
Health Insurers Fee	\$0.00
Total Services with Admin, HRA, and HIF	\$112.35

Services Admin %	8.9%
HRA Admin %	0.0%
Non Benefit %*	8.9%

*Non Benefit % includes Hospital Provider Tax, HIF, and Administrative Allowances

Oregon Health Plan Medicaid Demonstration
Coordinated Care Organization Capitation Rates
CCO-G: Mental Health and Dental Services Only
January 2016 through December 2016

Plan: Jackson County CCO, LLC,abn: Jackson Care Connect
Region: Southwest
Rate Group: ABAD without Medicare

Capitation Rate

Base Services Rate	\$180.37
Base HRA Adjustment	\$8.21
Hospital Provider Tax Allowance	\$0.00
Administrative Allowance	\$18.96
HRA Administrative Allowance	\$0.17
Health Insurers Fee	\$0.00
Total Services with Admin, HRA, and HIF	\$207.71

Services Admin %	9.1%
HRA Admin %	0.1%
Non Benefit %*	9.1%

*Non Benefit % includes Hospital Provider Tax, HIF, and Administrative Allowances

Oregon Health Plan Medicaid Demonstration
Coordinated Care Organization Capitation Rates
CCO-G: Mental Health and Dental Services Only
January 2016 through December 2016

Plan: Jackson County CCO, LLC,abn: Jackson Care Connect
Region: Southwest
Rate Group: OAA with Medicare

Capitation Rate

Base Services Rate	\$101.88
Base HRA Adjustment	\$0.46
Hospital Provider Tax Allowance	\$0.00
Administrative Allowance	\$10.01
HRA Administrative Allowance	\$0.01
Health Insurers Fee	\$0.00
Total Services with Admin, HRA, and HIF	\$112.35

Services Admin %	8.9%
HRA Admin %	0.0%
Non Benefit %*	8.9%

*Non Benefit % includes Hospital Provider Tax, HIF, and Administrative Allowances

Oregon Health Plan Medicaid Demonstration
Coordinated Care Organization Capitation Rates
CCO-G: Mental Health and Dental Services Only
January 2016 through December 2016

Plan: Jackson County CCO, LLC,abn: Jackson Care Connect Region: Southwest Rate Group: OAA without Medicare

Capitation Rate

Base Services Rate	\$180.37
Base HRA Adjustment	\$8.21
Hospital Provider Tax Allowance	\$0.00
Administrative Allowance	\$18.96
HRA Administrative Allowance	\$0.17
Health Insurers Fee	\$0.00
Total Services with Admin, HRA, and HIF	\$207.71

Services Admin %	9.1%
HRA Admin %	0.1%
Non Benefit %*	9.1%

*Non Benefit % includes Hospital Provider Tax, HIF, and Administrative Allowances

Oregon Health Plan Medicaid Demonstration
Coordinated Care Organization Capitation Rates
CCO-G: Mental Health and Dental Services Only
January 2016 through December 2016

Plan: Jackson County CCO, LLC,abn: Jackson Care Connect
Region: Southwest
Rate Group: Foster Children (CAF)

Capitation Rate

Base Services Rate	\$279.29
Base HRA Adjustment	\$1.96
Hospital Provider Tax Allowance	\$0.00
Administrative Allowance	\$32.08
HRA Administrative Allowance	\$0.04
Health Insurers Fee	\$0.00
Total Services with Admin, HRA, and HIF	\$313.36

Services Admin %	10.2%
HRA Admin %	0.0%
Non Benefit %*	10.2%

*Non Benefit % includes Hospital Provider Tax, HIF, and Administrative Allowances

Oregon Health Plan Medicaid Demonstration
Coordinated Care Organization Capitation Rates
CCO-G: Mental Health and Dental Services Only
January 2016 through December 2016

Plan: Jackson County CCO, LLC,abn: Jackson Care Connect Region: Southwest Rate Group: ACA Ages 19-44

Capitation Rate

Base Services Rate	\$68.00
Base HRA Adjustment	\$1.65
Hospital Provider Tax Allowance	\$0.00
Administrative Allowance	\$6.86
HRA Administrative Allowance	\$0.03
Health Insurers Fee	\$0.00
Total Services with Admin, HRA, and HIF	\$76.55

Services Admin %	9.0%
HRA Admin %	0.0%
Non Benefit %*	9.0%

*Non Benefit % includes Hospital Provider Tax, HIF, and Administrative Allowances

Oregon Health Plan Medicaid Demonstration
Coordinated Care Organization Capitation Rates
CCO-G: Mental Health and Dental Services Only
January 2016 through December 2016

Plan: Jackson County CCO, LLC,abn: Jackson Care Connect Region: Southwest Rate Group: ACA Ages 45-54

Capitation Rate

Base Services Rate	\$75.09
Base HRA Adjustment	\$1.73
Hospital Provider Tax Allowance	\$0.00
Administrative Allowance	\$7.56
HRA Administrative Allowance	\$0.04
Health Insurers Fee	\$0.00
Total Services with Admin, HRA, and HIF	\$84.42

Services Admin %	9.0%
HRA Admin %	0.0%
Non Benefit %*	9.0%

*Non Benefit % includes Hospital Provider Tax, HIF, and Administrative Allowances

Oregon Health Plan Medicaid Demonstration
Coordinated Care Organization Capitation Rates
CCO-G: Mental Health and Dental Services Only
January 2016 through December 2016

Plan: Jackson County CCO, LLC,abn: Jackson Care Connect Region: Southwest Rate Group: ACA Ages 55-64

Capitation Rate

Base Services Rate	\$79.53
Base HRA Adjustment	\$1.96
Hospital Provider Tax Allowance	\$0.00
Administrative Allowance	\$7.96
HRA Administrative Allowance	\$0.04
Health Insurers Fee	\$0.00
Total Services with Admin, HRA, and HIF	\$89.49

Services Admin %	8.9%
HRA Admin %	0.0%
Non Benefit %*	8.9%

*Non Benefit % includes Hospital Provider Tax, HIF, and Administrative Allowances

Oregon Health Plan Medicaid Demonstration
Coordinated Care Organization Capitation Rates
CCO-G: Mental Health and Dental Services Only
January 2016 through December 2016

Plan: Jackson County CCO, LLC,abn: Jackson Care Connect
Region: Southwest
Rate Group: Breast and Cervical Cancer Program

Capitation Rate

Base Services Rate	\$129.06
Base HRA Adjustment	\$0.53
Hospital Provider Tax Allowance	\$0.00
Administrative Allowance	\$13.38
HRA Administrative Allowance	\$0.01
Health Insurers Fee	\$0.00
Total Services with Admin, HRA, and HIF	\$142.98

Services Admin %	9.4%
HRA Admin %	0.0%
Non Benefit %*	9.4%

*Non Benefit % includes Hospital Provider Tax, HIF, and Administrative Allowances