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Calendar Year 2027 Coordinated Care Organization Program

Capitation Rate Development and Certification



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1. Executive Summary

Capitation rates developed by Marsh Government Health Consulting (Marsh), part of Marsh Health & Benefits LLC, formerly Mercer Government Human Services Consulting, are actuarial projections of future contingent events. All estimates are based upon the information and data available at a point in time and are subject to unforeseen and random events. Therefore, any projection must be interpreted as having a likely, and potentially wide, range of variability from the estimate. Any estimate or projection may not be used or relied upon by any other party or for any other purpose than for which it was issued by Marsh. Marsh is not responsible for the consequences of any unauthorized use. Actual Coordinated Care Organization (CCO) costs will differ from these projections. Marsh has developed these rates on behalf of the State of Oregon (State or Oregon) to demonstrate compliance with Centers for Medicare & Medicaid Services (CMS) requirements under 42 CFR § 438.4 and in accordance with applicable laws and regulations. Use of these rates for any purpose beyond that stated may not be appropriate.

Marsh disclaims any responsibility for the use of these rates by CCOs for any purpose. Marsh recommends that any CCO considering contracting with the State should analyze its own projected medical expense, administrative expense, and any other revenue needs for comparison to these rates before deciding whether to contract with the State.

In preparing the results presented in this report, Marsh relied on certain models with assumptions and inputs selected under the direction of the responsible actuaries. Results are subject to inherent uncertainties and limitations, and actual outcomes will vary from projections.

Background and Methodology Overview

The Oregon Health Authority (OHA) operates the CCO managed care program within the Oregon Health Plan (OHP) under the State's 1115 Medicaid waiver authority. The program administers Medicaid covered services to beneficiaries through 15 geographically dispersed CCO contracts. This certification pertains to capitation rates paid to CCOs for all Medicaid and Children's Health Insurance Program (CHIP) members, excluding members enrolled in the Healthier Oregon Program (HOP) and the OHP Bridge — Basic Health Program (BHP).

For calendar year 2027 (CY27), the capitation rates for the CCO Program were developed using a pricing construct consistent with CY26. The pricing approach consists of developing global statewide budget per member per month (PMPM) rates for each covered category of aid (COA) paired with budget-neutral regional and CCO adjustment factors to reflect regional cost differences, risk adjustment factors to reflect regional and CCO-specific risk profiles, and hospital factors reflecting hospital contracting differences across CCOs.

The CY27 capitation rates reflect several new programmatic and policy changes, notably for the federal changes implemented under Public Law 119-21 (PL 119-21). Additional details regarding rate development can be found in Section 4, Section 5, and Section 6 below.

CY27 Statewide Capitation Rate Changes

The statewide average CY27 capitation rate change by COA relative to CY26 is summarized in Table 1.

Table 1: CY27 Capitation Rate Changes and Statewide Averages Across All CCOs*

COA	CY26	CY27	Percentage Change
PCR	\$663.35	\$700.27	5.6%
PWO	\$582.23	\$598.94	2.9%
CHILD 00–01	\$1,083.03	\$1,143.35	5.6%
CHILD 01–05	\$248.75	\$266.45	7.1%
CHILD 06–18	\$302.21	\$316.67	4.8%
DUAL-MEDS	\$327.59	\$351.44	7.3%
ABAD & OAA	\$1,789.05	\$1,841.60	2.9%
FOSTER	\$976.57	\$981.80	0.5%
ACA 19–34	\$456.36	\$499.98	9.6%
ACA 35–44	\$679.14	\$725.50	6.8%
ACA 45–54	\$874.55	\$925.03	5.8%
ACA 55–64	\$1,001.06	\$1,078.96	7.8%
BBM 19–34	\$465.44	\$584.38	25.6%
BBM 35–44	\$700.69	\$879.77	25.6%
BBM 45–54	\$891.49	\$1,151.58	29.2%
BBM 55–64	\$1,015.34	\$1,269.03	25.0%
YSHCN	\$566.66	\$543.21	-4.1%
BCCP	\$1,787.09	\$1,842.05	3.1%
Maternity	\$16,353.38	\$14,259.21	-12.8%
Total	\$594.57	\$627.68	5.6%

* Excludes managed care organization (MCO) tax, quality pool incentives (QPIs), and separate payment term directed payments. The composite values shown are calculated based on CY27 forecasted CCOA enrollment.

Noteworthy COA-specific considerations are listed below:

1. **Affordable Care Act (ACA) Adults:** Moderate increases were driven by increased average costs in mental health, pharmacy, and physician services. Additionally, a moderate prospective acuity adjustment was applied to estimate the impact of federal legislative changes, such as implementation of community engagement requirements.
2. **Bridge Basic Medical (BBM) Adults:** Material increases were driven by a shift to relying primarily on BBM experience with classical credibility adjustments applied using ACA Adult rate cells as the manual rate. In prior years, BBM rate cells were pooled with ACA rate cells resulting in primary reliance on ACA Adult experience.
3. **Maternity:** A material decrease in the average maternity case rate is driven largely by a reinstatement of diagnosis-related group (DRG) hospital repricing at 80% of Medicare following a one-year legislatively funded provider reimbursement assumption of 104% of Medicare for maternity events in a DRG hospital during CY26.
4. **YSHCN:** Methodology is updated to rely on available CY25 YSHCN population experience. In prior years, the YSHCN base data relied on existing Medicaid members with claim history indicating health conditions that qualify for the expanded coverage.

Additional detail comparing CY27 rates to CY26 by CCO and COA is shown in Appendix A.

2. General Information

In partnership with OHA, Marsh has developed actuarially sound¹ capitation rates for the CCO Medicaid program for CY27 beginning January 1, 2027 and ending December 31, 2027. This certification report provides an overview of the analyses and methodology used in Marsh's capitation rate development for the purpose of satisfying the requirements of the CMS rate review process.

Per 42 CFR § 438.4, the CMS requires that actuarially sound rates meet several criteria for approval, including the following:

- Have been developed in accordance with generally accepted actuarial principles and practices.
- Are appropriate for the populations to be covered and the services to be furnished under the contract.
- Have been certified by actuaries who meet qualification standards established by the American Academy of Actuaries and the Actuarial Standards Board.

This report follows the general outline of the February 2026 CMS Medicaid Managed Care Rate Development Guide (RDG), which is applicable to contract periods starting between July 1, 2026, and June 30, 2027. A copy of the RDG with documentation references is also attached with this report.

Summary of Rate Development Methodology

The CCO program uses a pricing structure that encourages plans to operate under a global budget construct, in which plans manage care to their overall budget. The rating structure starts with a statewide rate buildup for each COA, to which budget neutral regional and CCO-specific rating adjustments are then applied.

The approach used to achieve these objectives consists of the following:

¹ Actuarially sound/actuarial soundness — Medicaid capitation rates are “actuarially sound” if, for business in the state for which the certification is being prepared and for the period covered by the certification, projected capitation rates and other revenue sources provide for all reasonable, appropriate, and attainable costs. For the purposes of this definition, other revenue sources include, but are not limited to, governmental stop-loss cash flows, governmental risk adjustment cash flows, and investment income. For purposes of this definition, costs include, but are not limited to, expected health benefits, health benefit settlement expenses, administrative expenses, the cost of capital, and government-mandated assessments, fees, and taxes. https://www.actuarialstandardsboard.org/wp-content/uploads/2015/03/asop049_179.pdf.

1. Statewide rates were developed to represent expected costs across all managed care eligible members for each COA for CY27.
2. Statewide rates were developed using a consolidated base data set inclusive of historical CCO encounter data (see the “Base Data” and “Base Data Adjustments” subsections of Section 3).
3. Unit costs across the base data set have been repriced for specific services to reflect reasonable provider reimbursement policy objectives determined in conjunction with OHA. These include DRG hospital reimbursement, corrections to professional encounter reimbursement, and dental reimbursement (see the “Repricing Adjustments” subsection of Section 3).
4. Statewide rates were adjusted for clinical efficiencies to reflect the expectation that Medicaid managed care be operated in an efficient, high-quality manner (see the “Clinical Efficiency Adjustments” subsections of Section 3).
5. Statewide rates were adjusted for anticipated utilization, unit cost trends, acuity changes, and to reflect program changes applicable to the managed care eligible population (see the “Trend,” and “Program Changes” subsections of Section 4).
6. Statewide rates were adjusted for regional and CCO-specific cost factors, reflecting regional and CCO-specific risk profiles, regional cost differences, hospital cost and utilization differences, and a Tri-County acuity adjustment to address outlier expense differentials (see the “Risk Adjustment,” “Regional Factors,” “Hospital Factors,” and “Tri-County Acuity Adjustment” subsections of Section 5).
7. Rate components excluded from the statewide rate were added on a CCO-specific (directed payments, certain program changes) or regional (Dental) basis (see for example the “Program Changes” subsection of Section 5 and “Dental” subsection of Section 6).
8. Non-benefit expenses were added to the rates (see Section 7).

Covered Populations

The CCO program serves eligible enrollees throughout the State, categorized into the following 18 distinct COAs. Additionally, the CCO program services the following four regions: Eastern, Northwest, Southwest, Tri-County.

Table 2: COA Rate Cell Definitions

COA	Description
PCR	Parents and Other Caretaker Relative (PCR) Adults (formerly referred to as Temporary Assistance to Needy Families)
PWO	Pregnant women only (PWO) (formerly referred to as Poverty Level Medical Adults)
CHILD 00–01	Medicaid-enrolled children (including CHIP) — Age under 1 year
CHILD 01–05	Medicaid enrolled children (including CHIP) — Ages 1 year–5 years
CHILD 06–18	Medicaid enrolled children (including CHIP) — Ages 6 years–18 years
DUAL-MEDS	Full Benefit Medicare-Medicaid Dual Eligibles enrolled in Blind, Disabled, and General Assistance Client (ABAD) and OAA
ABAD & OAA	Aid to the Blind/Disabled (ABAD) and Older Americans Act (OAA) — Non-Medicare Eligible
FOSTER	Children in Adoptive, Substitute, or Foster Care
ACA 19–34	Affordable Care Act (ACA) Expansion Adults Ages 19 years–34 years
ACA 35–44	ACA Expansion Adults Ages 35 years–44 years
ACA 45–54	ACA Expansion Adults Ages 45 years–54 years
ACA 55–64	ACA Expansion Adults Ages 55 years–64 years
BBM 19–34	Heritage Native American (HNA) members with federal poverty level (FPL) between 138% and 200% who participate in BBM, ages 19 years–34 years old
BBM 35–44	HNA members with FPL between 138% and 200% who participate in BBM, ages 35 years–44 years old
BBM 45–54	HNA members with FPL between 138% and 200% who participate in BBM, ages 45 years–54 years old
BBM 55–64	HNA members with FPL between 138% and 200% who participate in BBM, ages 55 years–64 years old
YSHCN	Youth with Special Healthcare Needs (YSHCN) effective January 1, 2025. Up to 305% of FPL. Ages 19 or 20 years old.
BCCP	Breast and Cervical Cancer Program (BCCP)

Covered Services

A full description of covered services is included in Exhibit B, Part 2, of the CCO contract. The CCO Program covers most acute physical health, BH, and dental

services with benefit packages unique to each of several plan types. This includes secondary coverage of Medicare crossover services for dual eligible members enrolled in plan types that include Medicare-covered services.

OHA assigns standardized categories of service (COS) to the detailed encounter data provided to Marsh, which are grouped into the COS listed in Table 3. OHA's COS assignment also identifies a limited volume of encounters for services not covered under the managed care contract, and these encounters are excluded from the capitation rate development.

Table 3 identifies which COS are covered under each plan type; a value of "X" indicates that these services are covered by the particular CCO type.

Table 3: Covered Services by CCO Type

COS	CCOA	CCOB	CCOE	CCOF	CCOG
Inpatient	X	X			
Outpatient	X	X			
Emergency Department	X	X			
Physician Services	X	X			
Substance Use Treatment	X	X	X		X
Prescription Drugs	X	X			
Durable Medical Equipment (DME) and Miscellaneous	X	X			
Mental Health Services Inpatient	X	X	X		X
Applied Behavior Analysis (ABA)	X	X	X		X
Mental Health Children's Wraparound	X	X	X		X
Mental Health Other Non-Inpatient	X	X	X		X
Substance Use Disorder (SUD) Residential	X	X	X		X
Non-Emergency Medical Transportation (NEMT)	X	X	X	X	X
Dental	X			X	X

In-Lieu-of Services

OHA has authorized CCOs to cover the following services as in lieu of services (ILOS), pursuant to 42 CFR § 438.3(e)(2):

- Outreach and engagement services provided by certified Peer Support Specialists, Peer Wellness Specialists, or Qualified Mental Health Associates to members with BH conditions or health-related social needs (HRSN) that exacerbate or prevent effective treatment of BH conditions.
- Evaluation and management in community settings for children and adults with chronic conditions, BH conditions, or HRSN.
- Online training, support, and guidance provided by health coaches in individual or group sessions aimed at assisting members 18 years and older with diabetes in controlling their daily blood glucose levels, empowering members to manage their diabetes, and engaging members in preventive health habits.
- Provision of the National Diabetes Prevention Program by a Centers for Disease Control and Prevention-recognized program delivery organization for members 18 years or older who have a body mass index of 26 or higher (23 or higher if Asian American), not previously diagnosed with type 1 or type 2 diabetes and not pregnant.
- Self-management programs to help members diagnosed with chronic diseases gain the knowledge and skills needed to modify their behavior and successfully self-manage their disease and its related conditions.
- Tests, inventories, questionnaires, structured interviews, structured observations, and systematic assessments administered to help assess the caregiver-child relationship to aid in the development of the treatment plan for children ages 0 years–5 years old experiencing developmental delays or having difficulty bonding with caregivers.
- Preventive medicine and risk reduction counseling provided by a registered nurse or a traditional health worker with training in lactation in a community setting.
- High-intensity behavioral counseling to prevent sexually transmitted infections (STIs) with services provided by a registered nurse, physician's assistant, nurse practitioner, or physician in community settings.
- Evaluation and management taking place in community settings for members at risk for or diagnosed with HIV or other STIs, with services including providing preventive medicine and high-intensity behavioral counseling or risk factor reduction (or both), skills training and development, and comprehensive community support services.
- Chronic care management services by an alternate provider, which may occur in a community setting or the residence of a member.
- Climate devices and installation of climate devices for an alternate population, including air conditioners, portable heaters, air filtration devices, etc.

- Indicated preventive BH services that may occur in community settings, such as skills training, group or individual psychoeducation, peer services, or individual/group psychotherapy.
- Mobile integrated health services such as preventive supports, chronic condition support, care coordination, wraparound support, vaccine administration, post-discharge services, and so on for members with HRSN that take place in a community setting or member residence.
- STI treatment and management services.

Marsh reviewed CCO encounter data for ILOS and found minimal encounters in CY25, with current CY25 billings through September 2026 less than \$2,000. Utilization continues to remain flat; as a result, Marsh developed an estimate for CY27 ILOS spend assuming no material increases in claims. The final projected ILOS claims as a proportion of the total rates is approximately 0.0005%.

Graduate Medical Education

Graduate medical education costs are not part of the capitation rate development process.

Non-Risk Services under the Contract

The CCO contract includes HRSN housing-related supports and nutrition-related supports as non-risk services. These services are excluded from the capitation rate development process.

State Regulatory Considerations

OHA is limited in its ability to adjust CCO capitation rates downward during the contract year. Specifically, Oregon Revised Statute (ORS) 414.590 prohibits OHA from a retroactive downward revision to CCO capitation rates unless, "The Centers for Medicare and Medicaid Services notifies the authority, in writing, that the amendment is a condition for approval of the contract by the Centers for Medicare and Medicaid Services." ORS 414.590 also prohibits OHA from amending the CCO contract more than once per year, with limited exceptions.

Populations and Services Eligible for Different Federal Medical Assistance Percentage

The following tables outline all services and populations covered by the CCO programs eligible for enhanced Federal Medical Assistance Percentage (FMAP). Marsh did not vary any rate development methodologies or assumptions based on federal financial participation (FFP).

Table 4: Populations Eligible for Enhanced FMAP

Populations Eligible for Enhanced FMAP	Impacted COAs
CHIP	Affects CHIP members within CHILD 00–01, CHILD 01–05, and CHILD 06–18
ACA Medicaid Expansion	ACA 19–34 ACA 35–44 ACA 45–54 ACA 55–64
BCCP	Affects BCCP-eligible members within the blended BCCP/ABAD & OAA rate cell

Table 5: Services Eligible for Enhanced FMAP

Services Eligible for Enhanced FMAP	Impacted COAs
Family Planning Services	Affects all COAs except CHILD 0–1, CHILD 1–5, and ACA adults
Preventive Services	Affects all COAs
Indian Health Care Provider (IHCP) Services for HNA Certified Tribal Members	Affects HNA Certified Tribal members from all COAs

Marsh worked with OHA to identify the costs for all of the areas noted above, in addition to the calculations described in this rate certification. The rate components were derived from CY25 base data, adjusted for trend, program changes, CCO-specific factors, and non-benefit expense loads described in this report.

Known Amendments

1115 Demonstration Waiver Renewal

Capitation rates documented in this certification are based on State waiver authority as of January 1, 2027. Marsh is aware of a potential non-renewal for certain provisions of the State’s 1115 waiver authority around HRSN and YSHCN benefits. Upon receipt of final CMS guidance, Marsh will evaluate the estimated impact of any changes and, if warranted, amend the CY27 capitation rates.

Retrospective Acuity Adjustment

While Marsh has included prospective statewide adjustments for the estimated impact of implementing community engagement requirements and increased frequency of redeterminations for the ACA population, the regional composition of participating CCOs is expected to result in material variation from the statewide

projections. Additionally, pending CMS rulemaking regarding these provisions may result in further variation at the statewide or CCO level. As such, OHA and Marsh will perform a retrospective acuity adjustment based on acuity results from actual to replace the original rate assumptions. The retrospective adjustment will be calculated and applied at the CCO and rate cell level.

See Section 9 for additional details.

3. Data

Base Period Considerations

Marsh selected CY25 as the most appropriate base period to use for the CY27 rate development. Additionally, Marsh evaluated emerging encounter data submitted by CCOs to OHA's Medicaid Management Information System (MMIS) through May 2026 and historical time series data including CY24 when evaluating emerging trends and program experience.

Base Data

The primary data used to develop the CY27 rates were CCO encounter data, CCO-reported financial information, and eligibility data provided by OHA. This information was used to develop base period unit cost, utilization, and PMPM cost metrics to analyze various rating variables such as program changes and trend. Using the process described below, Marsh determined the encounter data to be valid and reasonably complete.

To develop the CY27 base data, Marsh relied on the following eligibility and encounter data provided by OHA:

- Member-level eligibility data from the OHA MMIS, including managed care enrollment spans between January 1, 2025, through December 31, 2025.
- Managed care encounters submitted to OHA's MMIS by CCOs through February 27, 2026, for dates of service from January 1, 2025, through December 31, 2025.
- CCO Contract Exhibit L Financial Report templates that were populated and submitted by CCOs for CY25 service dates, including benefit cost payments under alternative payment arrangements (APMs).

Marsh completed certain reviews and analyses, such as those found on the [OHA CCO Financial Information Website](#), when determining the reasonableness and appropriateness of the data used for rate development purposes. These included data validation for overall monthly encounter volume, consistency in reported enrollment over time, consistency in reported encounters by eligible population and service category, and referential integrity between the eligibility and encounter data, and reviewed the eligibility and encounter data for valid values. In general, Marsh determined the encounter and eligibility data to be reasonable and appropriate to use for rate development purposes, with CY25 selected as the base data time period for the CY27 rate development process. In accordance with 42 CFR § 438.5(c)(2), the base data time period is no older than the three most recent and complete years prior to the rating period.

In addition to encounter data, Marsh relied on CCO-reported financial statements for non-claims medical payment information, such as payments for subcapitated

services, incentives, other non-claim provider payments, and pharmacy rebates. The incorporation of these components into the medical base data is described further below.

Base data PMPMs are calculated by aligning member months (MMs) and expenditures according to the member plan type assignment for each COS consistent with the applicable CCO types as shown in Table 3.

Base Experience Adjustments

Subcapitation Exclusion

Marsh identified limited circumstances where shadow encounters for subcapitated arrangements are partially represented with paid amounts in OHA's MMIS encounter data. Because subcapitation expenses are incorporated into the base data through CCO financial reports, Marsh adjusted the encounter experience to remove these shadow encounters and avoid duplication in the base data. This adjustment does not apply to all CCOs.

Incurred But Not Reported Medical Expenditures

Marsh developed and applied completion factors to base encounter data to account for medical expenditures that have been incurred but not reported (IBNR) as of the base encounter submission cutoff. Monthly completion factors were developed using historical claim lags by CCO, category of service groups, and COA groups, with additional refinements to reflect emerging experience and improve credibility. Prior to the CY27 capitation rate cycle, IBNR adjustments were based on CCO-reported completion estimates by category of service.

The aggregate impact of IBNR adjustments increased the overall base data by approximately 2.3%.

Removal of Members with Long-Term Stays at an Institution for Mental Diseases

Marsh removed base data experience for members during months where an identified long-term mental health services under the Institution for Mental Diseases (IMD) Exclusion to comply with 42 CFR § 438.6(e), which says the following,

"...the State may make a monthly capitation payment to an MCO or prepaid inpatient health plans (PIHP) for adults receiving inpatient treatment in an IMD, so long as the facility is a hospital providing psychiatric or substance use disorder inpatient care or a sub-acute facility providing psychiatric or substance use disorder crisis residential services, and length of stay in the IMD is for a short-term stay of no more than 15 days during the period of the monthly capitation payment."

Under the SUD program included in the State's comprehensive 1115 waiver, SUD services provided in an IMD are not subject to 42 CFR § 438.6(e) requirements. As such, these services were included in the base data without adjustment.

Marsh identified members ages 21 years to 64 years receiving inpatient mental health services in an IMD for more than 15 days in a calendar month in the base data and excluded both member months and all associated costs for identified members in months containing a long-term mental health IMD stay. The impact of this exclusion removed \$1.8 million from the CY25 base data.

Financial Statement Data and Adjustments

Subcapitation Expenditures

Base data is developed as a combination of encounter data for provider claims paid on a fee-for-service (FFS) basis by CCOs with subcapitation and other non-claim payments made to CCO-subcontracted entities as reported in Oregon's Exhibit L Financial Reports. Approximately 14% of the statewide base is attributed to subcapitated payments.

Marsh included subcapitation expenditures in the base as reported by the CCOs in Report L13 of the Exhibit L Financials for the Medicaid population.

Incentives and Other Non-Claim Medical Payments

Marsh included non-claim provider payments in the base data, such as provider incentives and other provider payments made outside the claims system, as reported by the CCOs in Reports L17 and L18 of the Exhibit L Financials for the Medicaid population. Marsh adjusted non-claims payments to reflect only those expenses that could be supported as Medicaid covered service cost and were expected to be representative of future provider payments. In aggregate, 84% of the total reported incentives and other payments were included in the CY25 base data.

Incentive payments related to the quality incentive program were excluded from this adjustment, as the quality incentive program is financed outside capitation rates.

Net Reinsurance

Marsh allocated each CCO's reported net reinsurance (i.e., reinsurance premium cost less reinsurance claim recoveries) across acute inpatient hospital categories of service to reflect the net impact of reinsurance activity as reported in each CCO's Exhibit L Financial Report. The net reinsurance amount was incorporated into the base data to align adjusted claims experience with the CCO's financial exposure. This adjustment resulted in an overall \$18.6 million reduction to the base data.

Prescription Drug Rebates

Pharmacy claims costs are reported in the encounter data gross of all rebates. Marsh adjusted these gross paid amounts to reflect the impact of pharmacy supplemental rebates collected and retained by CCOs, as reported by the CCOs in Report L6 of the Exhibit L Financials. This adjustment resulted in an overall 2.7% reduction to prescription drug spending in the base data.

Repricing Adjustments

DRG Hospital Repricing

OHA categorizes hospitals based on their size, distance from another hospital, and reimbursement level into the following types:

- DRG hospitals are hospitals with 50 or more beds that received standard Medicare DRG-based reimbursement.
- “Type A” hospitals are hospitals with 50 or fewer beds that are located more than 30 miles from another hospital.
- “Type B” hospitals are hospitals with 50 or fewer beds that are located within 30 miles of another hospital.
- “Other” hospitals are all other hospitals, including out-of-State facilities.

CY27 capitation rates are developed under the expectation that CCOs will reimburse DRG hospitals at rates equivalent to 80% of base Medicare reimbursement (excluding Disproportionate Share Hospital and uncompensated care), with State-defined outlier payments calculated for inpatient stays as defined in Oregon Administrative Rule 410-125-0141. Therefore, Marsh adjusted the CY25 base to reflect a payment rate of 80% of Medicare.

The impact of this adjustment resulted in an overall 0.8% reduction to the base data.

Inpatient BH Repricing

Effective January 1, 2025, DRG hospitals that provide inpatient hospital BH services for specific Mental Diseases and Disorders and Alcohol/Drug Use and Alcohol/Drug-Induced Organic Mental Disorders Medicare Severity (MS)-DRGs are paid under a State Plan fee schedule developed independent of Medicare DRG pricing. Base data experience was adjusted to align with the OHA fee schedule effective during CY25. The impact of this adjustment resulted in an overall 0.1% increase to the base data.

Marsh applied no repricing adjustments to the Type A/B and Other hospital types in the base data.

Peer-Through Pricing Adjustment

Marsh repriced professional encounters for a specific subcapitated provider using average CCO reimbursement for similar services billed by other network providers. This adjustment was made where it was known that the provider network's reported paid amounts reflected a level of reimbursement materially higher than payments to other Medicaid providers. The repricing adjustment ensures the encounter data used for rate development aligns with reasonable Medicaid provider contracting levels. This adjustment resulted in an overall 1.0% reduction to the base data.

Psychotherapy and ABA Repricing

With the narrowing of the BH directed payment requirements effective in 2026, declines in psychotherapy and ABA unit cost levels were observed for certain CCOs between CY25 and early CY26. Marsh adjusted the base data to reflect emerging unit cost levels, which remain at or above the state's FFS fee schedule. This adjustment resulted in an overall 0.4% reduction to the base data.

Indian Health Care Provider Encounters

Marsh removed the IHCP expenditures from the CY25 base that were above the usual and customary amount. CCO-specific adjustments for the IHCP encounter rate differential are added in a later step of the capitation rate development. This resulted in a \$23.2 million reduction to the base data. More details are described in Section 5.

Dental

Marsh excluded certain dental procedure codes from the base data, e.g., because they are not covered or should not receive separate reimbursement. The procedure codes used to exclude these services are presented in Appendix G. Orthodontia claims that are part of the handicapping malocclusion (HM) program change were also removed from the dental base data, as a CCO-specific add-on for this benefit is included in a final step of the capitation rate calculations.

To ensure consistent dental reimbursement assumptions, Marsh repriced the CY25 base data to a standardized fee schedule across all CCOs. Fees used for repricing are included in Appendix H. Unless a procedure code was explicitly excluded, it was repriced, either to the dental fee schedule shown in Appendix H, or an average all-CCO rate that was calculated at the region level (Tri-County and Other). The average regional rate is also shown in Appendix H. Procedure codes associated with covered claims with a dental category of service received the average all-payer rate.

Short-Term Stays at an IMD

Pursuant to 42 CFR § 438.6(e), expenses for members ages 21 years to 64 years receiving inpatient mental health services at an IMD with 15 days or fewer in a

calendar month for members ages 21 years to 64 years were repriced to the average CY25 per diem paid amounts for mental health stays at acute DRG hospitals.

The impact of this IMD repricing added \$5.9 million to the base data.

Base Program Change Adjustments

HOP Transition Population

Public Law (PL) 119-21 (commonly referred to as HR 1 or the Working Families Tax Cut Act) Section 71109 amended the Social Security Act to discontinue FFP for lawfully present immigrants, such as refugees, asylees, and victims of human trafficking or domestic violence. OHA provided Marsh with recipient ID numbers for members who will no longer meet Medicaid eligibility requirements in CY27, and the member months and related expenses for these members were removed from the Medicaid capitation base. This adjustment resulted in an overall \$31.1 million reduction to the base data.

WFTC Prohibited Entities

PL 119-21 Section 71113, also referred to as the WFTC legislation by CMS, prohibited federal Medicaid funding for items and services furnished by a “prohibited entity” effective for one year beginning July 4, 2025. Prohibited entity was defined in the legislation and resulted primarily in reduced access to providers specializing in reproductive health and family planning services. This reduced access led to an understatement of service costs in the historical base compared to covered services and access expected after July 2026. Marsh applied a base adjustment to increase average annual costs to estimate service utilization in absence of the temporary prohibition. This adjustment resulted in an overall 0.1% increase in the base data.

High-Cost Drug Carve-Out

Effective in CY26, certain high-cost drugs are carved out of managed care and reimbursed for CCO enrollees by the state on a FFS basis. Marsh identified historical experience related to these specific drugs and removed it from the CY25 base. This adjustment resulted in an overall 0.7% decrease in the base data.

Credibility Adjustment

Marsh applied base data credibility blending adjustments for two of the smallest aid category groups in the CCO program: YSHCN and the BBM expansion for HNA.

The YSHCN waiver population gained coverage effective January 2025. Because the enrolled population is limited, Marsh incorporated credibility blending of CCO-specific YSHCN experience with the total statewide YSHCN experience at the COS level.

The BBM expansion population is relatively small, with high volatility in PMPMs from year to year resulting from low statistical credibility. Marsh incorporated credibility

blending of CCO-specific BBM experience with CCO-specific ACA experience at the age group level.

Clinical Efficiency Adjustments

As described in Section 1, capitation rates reflect the expectation that Medicaid managed care in the State be operated in an efficient, high-quality manner. Consistent with this expectation, Marsh applied the low-acuity non-emergency (LANE) emergency department clinical efficiency adjustment and the potentially preventable admissions (PPA) inpatient clinical efficiency adjustment to the CY25 base data for CY27 capitation rate development.

Not all identified potential clinical efficiency adjustments were removed from the rates, leaving possible the opportunity for CCOs to realize additional efficiencies beyond those accounted for in the rate development.

The rate impact of clinical efficiency adjustments is shown in Appendix B.

Emergency Department Efficiency Adjustment — LANE Visits

OHA's expectation is for CCOs to maintain clinical initiatives that aim to reduce unnecessary emergency department utilization. Marsh performed a retrospective analysis of the CY25 base data to identify emergency department visits that were considered avoidable due to the low acuity nature of the visit. This analysis does not imply that beneficiaries should be denied access to emergency departments, or that payment for emergency department discharges should be denied. Instead, the analysis was designed to reflect that more effective and innovative managed care could have preempted the need for members to seek care in the emergency department.

Using Marsh-identified LANE diagnosis codes compiled through clinical literature review, Marsh identified claim and encounter records for emergency department visits where LANE diagnoses appeared as the primary diagnosis on the facility encounter and any associated physician encounter.

For each LANE diagnosis, Marsh developed a percent preventable assumption for the volume of emergency department visits that could have been avoided through best practice primary care. The percent preventable assumption varies by diagnosis and takes into consideration the circumstances under which Medicaid populations seek care at the emergency department. Marsh determined the dollar amount of the adjustment by applying the diagnosis-specific percentages to the LANE visits in the base data. Visits with an evaluation and management (E&M) code of 99285 are not considered for this adjustment.

Marsh reduced the adjustment with an appropriate offset based on the value of an average E&M office visit for up to four LANE visits per member to provide for the office visit that should have occurred in place of the emergency room visit. Marsh further reduced the adjustment with an offset based on the average value of

outpatient laboratory or radiology services for visits with a diagnosis in which a laboratory or radiology service was deemed appropriate.

Finally, OHA has elected to allow a Targeted Efficiency Level (TEL) of 50% for this adjustment, which indicates that only 50% of the identified potentially preventable LANE dollars were removed from the rates. This is consistent with the 50% TEL in the CY26 rate development process and is based on expected CCO efficiencies from initiatives focused on identifying and reducing unnecessary emergency department utilization. Given that the LANE clinical efficiency has been incorporated into the rate setting process for a couple of years, Marsh considers the 50% TEL as appropriate and attainable; the 50% adjustment recognizes the ramp-up time that may be needed for CCOs to implement applicable initiatives, should they choose to do so.

Based on the methodology described above, 48.4% of total emergency department spend in 2025 was associated with a LANE diagnosis before any exclusions. After applying exclusions and adjusting for physician offsets, 8.4% of total emergency department spend was determined to be avoidable. The final LANE adjustment amount after applying the TEL is \$15.3 million, equivalent to 4.2% of total emergency department spend.

Inpatient Hospital Efficiency Adjustment — PPA

Marsh developed and applied a clinical efficiency adjustment to the inpatient encounters base data to reflect opportunities for improved care coordination.

Marsh applied the Agency for Healthcare Research and Quality prevention quality indicators (PQIs) and pediatric quality indicators (PDIs) to the inpatient encounter data. These indicators are designed to identify hospital admissions that could potentially be prevented with appropriate care in the outpatient setting.

By utilizing enrollment duration assumptions developed by Marsh, the adjustments were limited to admissions where the CCOs had a reasonable opportunity to engage the recipient and initiate assignment of a primary care physician, any appropriate treatment and education, or enrollment into care management programs.

Clinical Global Exclusions (CGEs) identify members with conditions that may complicate medical management. The CGE criteria include diagnoses for HIV and AIDS, trauma, burns, transplants, obstetrics, metastatic malignancies, members in hospice, ventricular shunt revision, and any member who was pregnant during the reporting period. Inpatient admissions for members meeting any of these criteria during CY25 were excluded from consideration for the adjustment.

Finally, OHA has elected to allow a TEL of 50% for this adjustment, which indicates that 50% of the identified PPA dollars were removed from the rates. This is consistent with the 50% TEL in the CY26 rate development process and is based on expected CCO efficiencies from initiatives, should they choose to pursue them, focused on identifying and reducing hospital admissions that could potentially be prevented through improved care coordination.

Based on the methodology described above, 6.4% of inpatient facility expenditures, excluding maternity delivery costs, are associated with admissions that meet PQI or PDI criteria. After reductions for enrollment duration, CGE, and the TEL, the PPA clinical efficiency adjustment removed \$22.6 million from the CY25 base data.

4. Projected Benefit Costs and Trends — Statewide Rates

Statewide Medical Base PMPMs

After applying the base adjustments described in Section 3, Marsh projected the statewide PMPM costs to the CY27 contract period. This section describes the medical trend drivers and key program changes used to project costs to CY27.

Statewide medical PMPMs reflect costs for all COS shown in Table 3, except Dental.

Statewide medical PMPMs are shown in Appendix B.

Trend

The historical experience that forms the rate base is trended to the contract period by service category for each rate cell. To develop the trend assumptions, Marsh reviewed the following:

- Historical program experience based on MCO-reported financial information and encounter data
- Professional experience in working with other state Medicaid programs, including other northwestern states
- Perspectives in the marketplace in which Medicaid CCOs must operate
- Regional and national economic indicators such as the Consumer Price Index (utilization adjusted)
- Federal reports and projections such as National Health Expenditures
- Other healthcare industry reports such as Health Care Cost Institute and pharmacy industry reports
- Historical Medicare cost-sharing and fee schedule changes
- Historical State FFS fee schedule changes
- Historical and prospective State and federal policy changes that may affect utilization or reimbursement patterns

To support the evaluation of trend, the historical data was normalized to remove the effects of separately applied program changes, acuity adjustments, or medical and pharmacy management efficiencies, that are addressed elsewhere in the rate development process. This process avoids inadvertently duplicating any rate impacts within the trend development process. Coronavirus disease 2019 (COVID-19) PHE unwinding efforts were completed prior to the start of the CY25 base period, so the

impacts of the unwinding did not need to be explicitly considered as part of trend development.

For the pharmacy trend development, Marsh analyzed historical drug utilization and cost patterns by population and therapeutic class. The pharmacy trend assumptions account for the impact of new pipeline medications, drugs losing patent protection, and other expected unit cost changes. Pharmaceutical industry expenditures for specialty drugs are growing rapidly, which results in more pronounced trends for populations with significant utilization of these drugs.

Overall, the annualized trend assumption is lower than trend applied in the CY26 rates, primarily driven by decreases to:

- Inpatient hospital. Post-unwinding, inpatient hospital costs appear to be stabilizing, particularly for the adult populations.
- Pharmacy. In particular, OHA's decision to carve out high-cost drugs from managed care has resulted in reduced unit cost for the drugs delivered to its Medicaid population.
- The above decreases are offset by increases to outpatient hospital and BH trends.

Annualized utilization and unit cost trends are shown in Appendix B and were applied for two years to trend the CY25 base data to CY27.

Prospective Program Changes

Marsh captures known changes in OHA's covered populations, covered services, and payment methodologies effective after the base data period through program change adjustments. OHA and Marsh reviewed known program changes that would have an impact on the cost, utilization, or demographics of the program for CY27 that were not fully accounted for in the base data. Several of these changes were determined to have an impact on the CY27 statewide rate development process, including the following:

- Update to Benefits Update Program (BUP), effective January 1, 2027.
- Benefit changes recommended by the Health Evidence Review Commission (HERC):
 - Coverage of treatments for hypersomnia, effective October 1, 2025
 - Removal of coverage of vitamin D testing (except when accompanied by specific diagnoses), effective October 1, 2025
 - Coverage of surgical treatments for obstructive sleep apnea, effective October 1, 2025

- Removal of coverage of multiplex gastrointestinal (GI) infectious disease, effective February 1, 2026
- Removal of coverage of certain laboratory tests, effective February 1, 2026
- Coverage of epithelium-on cross-linking (CXL) for keratoconus, effective October 1, 2026
- Coverage of positron emission tomography (PET) for Coronary Artery Disease, effective January 1, 2027
- Coverage of circumcision for phimosis, effective January 1, 2027
- Coverage of intracranial thrombectomy for stroke, effective January 1, 2027

To calculate the rating impact, OHA and Marsh reviewed CY24 and CY25, as well as supplemental information to identify impacted members and services. The experience was then trended to the CY27 time period, and uptake or cessation assumptions were incorporated to develop the final rating impacts.

For the BUP program change, Marsh conducted additional review of OHA-provided modeling at the request of OHA. Marsh conducted a sensitivity test of key cost drivers of the BUP program change to evaluate the impact of changes in key assumptions. Specifically, Marsh evaluated the range of potential utilizer treatment costs, diagnosis rates and uptake rates on the final projected BUP impact. Based on this sensitivity test, Marsh determined that the projections provided by OHA were reasonably attainable.

The PMPM impacts of each program change affecting monthly capitation rates described below are shown in Appendix B.

5. Projected Benefit Costs and Trends — Adjustments to Statewide Rates

In addition to adjusting the data for statewide medical trends, acuity impacts, and program changes, Marsh also adjusted the projected CY27 data for CCO-specific considerations. This section describes how risk adjustment, regional factors, hospital factors, and regional factors impact the final CY27 rates, as well as additional program changes with varied impacts based on CCO.

Prospective Risk Adjustment

Risk adjustment factors were applied in a single prospective adjustment in the CCO capitation rate development. Risk adjustment was applied in two budget neutral steps:

1. Regional risk adjustment accounts for differences in the risk score profile of enrollees across regions.
2. CCO risk adjustment accounts for differences in the risk score profile of enrollees across CCOs within each region.

Risk adjustment factors were developed using risk scores from Chronic Illness and Disability Plus Pharmacy Payment System (CDPS+Rx) version 7.3, calculated by OHA, who provided member-level scores to Marsh for use in the CCO rate development. For all adult COAs (PCR and all ACA age groups), final member-level risk scores were calculated using custom State-specific weights. For all other risk-adjusted COAs, final member-level risk scores were based on default acute CDPS weights from version 7.3.

For prospective adjustment factors, prospective risk score model weights were applied to an eligibility snapshot as of March 2026, using diagnosis and pharmacy data from CY25 encounter data.

Because OHA covers maternity-related costs through a maternity case rate as a separate risk adjustment mechanism, OHA removed maternity claims and their associated diagnoses in the assignment of condition categories for the calculation of risk scores.

In calculating risk adjustment factors, factors were only calculated for certain COAs: PCR, CHILD 01–05, CHILD 06–18, ABAD & OAA, FOSTER, and all ACA COAs. Risk adjustment factors were not developed for PWO and CHILD 00–01 COAs because of the transient nature of enrollment in these COAs. Furthermore, risk adjustment factors were not developed for DUAL-MEDS, and BCCP categories due

to the unique cost patterns of these populations, for which the CDPS+Rx risk scores are not tailored.

OHA provided Marsh with recipient IDs for members who are expected to transition to the HOP program under the Federal Budget Reconciliation Act of 2025 (commonly referred to as HR1, and which CMS refers to as WFTC) Section 71109. The enrollment and risk experience for these members were removed from the risk adjustment factor development.

Prospective risk adjustment factors are shown in Appendix C. These factors are only applied to CCOA and CCOB plan types; the factors are not applied to CCOE, CCOF, and CCOG due to the limited benefits included in those plan types, for which CDPS+Rx risk scores are not tailored.

Foster Care Risk Adjustment

Risk adjustment factors were newly implemented for the FOSTER COA for CY27. Member-level risk scores were calculated using CDPS+Rx version 7.3 weights consistent with other risk-adjusted COAs. However Marsh identified a significant gap between relative cost and relative risk that could be reasonably explained with the addition of a risk category and corresponding risk weight for members with behavioral health residential treatment.

The additional residential treatment weight was developed by comparing the annual PMPM cost raw CDPS+Rx risk score relativities between FOSTER COA members with residential treatment claims and all other scored members in the COA. The risk weight was calculated as the difference required to bring the risk score relativity into alignment with the cost relativity. This additive adjustment of 8.246 to risk scores for member with residential treatment results in an average risk score proportional to the cohort's elevated average cost. Residential treatment claims were identified using the following HCPCS codes: H0017, H0018, H0019, H0037, H0045, H2013 and H2017.

Regional Risk Adjustment

Regional risk adjustment factors account for differences in prospective risk scores across regions. In developing average risk scores for each region and COA, Marsh applied scoring criteria for each member. Members were included in the regional average risk score calculations if they had three or more complete months of eligibility in the risk score study period of CY25, from which diagnosis and pharmacy data are utilized from member encounter data. Final regional risk scores are a combination of scored and non-scored members' demographic weights plus scored members' condition weights.

In order to ensure budget neutrality, Marsh normalized regional risk factors based on the statewide average risk factor for each COA, using CY27 projected enrollment and statewide projected medical PMPM as the basis for calculating the statewide average. The resulting regional risk adjustment factors are budget neutral for each

COA, as demonstrated in Appendix C, which shows statewide average regional risk adjustment factors of 1.000 at the bottom of the exhibit.

CCO Risk Adjustment

Marsh used the same three-month scoring and member exclusion criteria for CCO risk scores, but with unscored members receiving the scored members' regional disease weight. These were combined to calculate a total average risk score for each CCO, which was then normalized to ensure budget neutrality within each COA and region. The resulting budget neutral CCO risk adjustment factors are shown in Appendix C, which shows statewide average CCO risk adjustment factors of 1.000 at the bottom of the exhibit.

The resulting risk adjustment factors were then normalized across the region for each applicable COA to ensure budget neutrality after application.

Regional Factors

Regional factors were developed to reflect geographic unit cost, utilization, and risk differences across the State. These factors were developed using trended adjusted base data for each region relative to the statewide average.

Adjusted base data was trended forward two years by COA and COS in accordance with the annualized utilization and unit cost trends as shown in Appendix B. Regionally varied hospital trend factors were applied to account for regional differences in hospital base rates between CY25 and CY27.

Regional cost differences were then normalized by concurrent risk score differences by region to remove the proportion of costs explained by and accounted for through risk adjustment.

Regional factor development is shown in Appendix D.

These factors were normalized to be budget neutral within each COA, as demonstrated at the bottom of Appendix C, which shows 1.000 factors for each COA at the statewide level.

Hospital Factors

Hospital reimbursement varies based on whether a facility is a larger DRG hospital, smaller/critical access Type A/Type B hospital (A/B), or other type of facility, including out-of-state hospitals. The average unit cost of hospital services can vary significantly among CCOs based on the geographic coverage areas of each CCO and the corresponding facilities available in the area. The CCO rate development methodology accounts for these differences in hospital reimbursement through the hospital factor. These factors were developed to be budget neutral within each region, as the regional factors described above already account for regional variation in hospital mix and unit pricing.

Marsh calculated separate hospital factors for inpatient, mental health inpatient, outpatient, and emergency department hospital services, then blended the factors to create an overall factor applied to all COS for each CCO.

Inpatient and Mental Health Inpatient Hospital Services

For inpatient acute and mental health hospital services, Marsh calculated unit cost differences between hospitals and CCOs using DRG-normalized hospital costs per admission. Marsh relied on MS-DRGs assigned by the MMIS to attach MS-DRG weights to encounter data based on the DRG version effective at the time of service during the CY25 base period. Average DRG weights were then normalized out of the average cost per admission calculation, leaving a remainder that can be attributed to unit cost differences.

The underlying encounters for DRG hospitals were repriced to 80% of base Medicare prior to calculating hospital factors, consistent with the base data adjustment applied in the statewide rate buildup.

These average per admission costs by hospital type for each CCO were then weighted across all inpatient admissions to create a total normalized cost per admission for each CCO. These CCO-specific amounts were then compared to the corresponding regional average DRG-normalized cost per admission to develop CCO-specific inpatient hospital factors.

Outpatient Hospital and Emergency Department Services

The outpatient and emergency department hospital factors were developed using a different methodology than inpatient hospital data. Because claims cannot be adjusted for severity using DRG case mixture, an average cost per service was developed for each hospital for both outpatient and emergency department categories separately.

The underlying encounters for Outpatient and Emergency Department services at DRG hospitals were repriced to approximately 80% of base Medicare for claims under APC pricing prior to developing the factors. This repricing methodology was applied in the hospital factor development to ensure consistent treatment of sub-capitated and FFS-paid encounters in calculating cost relativities across hospitals and CCOs, however the exercise did not improve fidelity of reported base claims cost overall and did not result in a base data adjustment.

To develop an average cost per service for each facility and COS, Marsh calculated facility-specific average costs for a set of services included in the fixed market basket of codes shown in Appendix I. Marsh then calculated facility average unit costs across the market basket of services using a standardized statewide distribution of utilization by code for all facilities. The resulting average outpatient and emergency department unit costs for each facility is shown in Appendix J.

Marsh next developed average unit costs for outpatient and emergency department hospital utilization for each CCO at in-State hospitals by calculating the weighted

average facility-specific unit costs using CCO-specific outpatient and emergency department hospital visits in CY25. For the Other Hospital category, Marsh relied simply on the average cost per visit.

Marsh then calculated the final outpatient and emergency department factors based on the average composite hospital cost per visit weighted by hospital type for each CCO compared to the regional average.

Finally, inpatient and outpatient hospital factors were combined for each CCO to develop total aggregate hospital factors. The final factors incorporate the proportion of total projected base spend attributable to inpatient and outpatient hospital services in each region, such that the composite factor can be applied to the regionally-adjusted total statewide rates, which includes non-hospital costs.

From the process above, Marsh calculated a single composite hospital factor for each COA group and CCO. This factor was normalized when applied in the capitation rate development such that the weighted average factor across all CCOs within each region for the COA was budget neutral. These factors are only applied to CCOA and CCOB plan types; these factors are not applicable to CCOE, CCOF, and CCOG, as these plan types do not include coverage for physical health hospital services.

Tri-County Acuity Adjustment

Through analysis of composite CCO relativity factors (risk adjustment and regional and hospital factors), Marsh observed a material cost disparity between CCOs operating within the Tri-County region. This disparity was evident across all services but driven by wide variances in BH utilization among Tri-County CCOs. Through ongoing discussions with the CCOs, Marsh acknowledges that BH utilization trends are continuing to evolve; however, additional adjustment was necessary for CY27 in order to align the rates with reasonable and attainable expense.

To develop the acuity adjustment, Marsh summarized historical BH PMPMs for the Tri-County CCOs and developed a raw relativity factor based on the total Tri-County BH average. Marsh applied a 50% blending factor to this raw relativity to accommodate ongoing BH trends beyond the base year. Finally, because this relativity factor is applied in the rate model across all service categories, Marsh applied a BH weighting factor to align the adjustment with the BH portion of the total CCO service expense.

Table 6: Tri-County BH Acuity Factor Development

CCO	Region BH PMPM	CCO BH PMPM	Raw Factor	BH Weight	Blending Factor	Adjusted Factor
Health Share of Oregon	\$130.02	\$137.94	1.061	30.5%	50%	1.0093
Trillium Community Health Plan, Inc.	\$130.02	\$66.94	0.515	21.6%	50%	0.9477

Prospective Acuity Adjustment

PL 119-21 Sections 71107 and 71119 amended the Social Security Act to require states to:

- Increase frequency of eligibility redeterminations to occur every six months, compared to the current 24 months under waiver authority, for certain Medicaid expansion individuals, effective upon the expiration of OHA's waiver, on October 1, 2027 and
- Establish Medicaid community engagement requirements for certain applicable individuals, generally meaning nonpregnant adults ages 19 years through 64 years who are eligible for or enrolled in Medicaid expansion coverage or a comparable waiver, effective January 1, 2027.

For Oregon's program, all other Medicaid populations must move to annual eligibility redeterminations, also reducing the current 24-month cycle permitted under waiver authority. Marsh reviewed projected enrollment and acuity changes for non-ACA populations and determined that the CY27 impact of this change is immaterial, as it would only take effect in the final quarter of the period. As such, no adjustment was made for non-ACA populations.

Community engagement requirements are anticipated only to apply to members enrolled in the ACA and YSHCN rate cells, altering the composition of the enrolled population between the base period and rating period. While members enrolled in the standalone YSHCN rate cell may be subject to community engagement requirements, their capitation rates were not adjusted for acuity effective in CY27 because the impact was modeled to be non-material. Adjustments were developed using statewide level assumptions for ACA rate cells.

Marsh developed acuity adjustments for the ACA population by comparing relative cost profiles across member cohorts that are defined to stratify the base experience data into categories based on member enrollment patterns during the base period. Historical and projected members, average duration, and average PMPM benefit cost were calculated for each cohort. Member cohorts identified in the base period include the following for members enrolled in CCOA or CCOB plan types:

- **Persisters:** members who were enrolled during the full 12 months of the base period within an ACA rate cell.
- **Churners:** Members who were enrolled in ACA rate cells at the beginning and end of the base period, but experienced enrollment gaps during the year.
- **New Entrants:** Members who were not enrolled in CCOA or CCOB plan types at the beginning of the base period but were enrolled in ACA rate cells by the end of the period.
- **Leavers:** Members enrolled in ACA rate cells at the beginning of the period but who were not enrolled in a CCOA or CCOB plan type at the end of the period.
- **Switchers:** Members who switched to or from ACA rate cells from other rate cells within a CCOA or CCOB plan type during the period.

The Persister cohort was stratified into a baseline population and residual population. The Baseline Persister group serves as the comparator for all other cohorts when calculating relative acuity, measured using average annual PMPMs. The Baseline Persisters represent members flagged as potentially medically frail or who were indicated to have HNA status.

The following assumptions were applied in estimating the projection year cohort enrollment and average PMPM cost:

- Shift of members from Baseline Persisters to Churners and Leavers
- Increased average Churner cohort PMPM cost for deferred care following gap months
- Reduced volume of New Entrants because of new barriers in enrollment
- Average duration in the projection period was estimated assuming uniform disenrollment and churn across the calendar year

The enrollment assumptions reflect the estimated collective impact of non-compliance with community engagement requirements starting with redeterminations initiating in January 2027, increased procedural disenrollments related to community engagement requirements, and increased redetermination frequency effective October 1, 2027.

Each cohort's average acuity was measured as a ratio of the cohort average PMPM compared to the Baseline Persister average PMPM in each of the base and projection periods. The difference in the composite average acuity between periods reflects the acuity adjustment applied to projected physical and BH benefit cost.

Additional sources of information used to inform detailed assumptions include:

- Enrollment projections from the state of Oregon's Office of Forecasting, Research, and Analysis²
- CMS' interim final rule published June 3, 2026³
- Kaiser Family Foundation's Medicaid work requirements state data⁴

The resulting statewide acuity adjustment varies by age category and is displayed in Table 7 below.

Table 7: Prospective Acuity Adjustment

COA	Adjustment
ACA 19–34	3.2%
ACA 35–44	3.1%
ACA 45–54	3.0%
ACA 55–64	2.8%

For information on the retrospective acuity adjustment, please see Section 9 of this report.

CCO-Specific Program Changes and Add-ons

OHA and Marsh also considered the impact of the below CCO-specific program changes. The PMPM impacts of the below items are included in Appendix C.

Indian Health Care Provider Reimbursement

OHA requires CCOs to offer contracts to IHCPs, including payment rates at or above applicable Indian Health Services and Prospective Payment System rates, or otherwise mutually agreed-upon rates. Because of material variation in IHCP service prevalence by region and CCO, Marsh removed amounts above usual and customary fees from the encounter base and added in projected IHCP amounts by CCO and COA.

Handicapping Malocclusion

OHA covers medically necessary orthodontia care considered appropriate for treatment of HM. The impact of these costs was developed separately by OHA and provided to Marsh by COA. Due to the variation in utilization by CCO, cost modeling was based on a blend of statewide average costs and CCO-specific costs. These costs are reflected as a separate cost impact outside of the dental component.

² [Oregon Department of Human Services : Caseload Forecasting : Data and Research : State of Oregon](#)

³ [Federal Register :: Medicaid Program: Community Engagement Requirement for Certain Individuals](#)

⁴ [Tracking Implementation of the 2025 Reconciliation Law: Medicaid Work Requirements Data and Policies | KFF](#)

YSHCN Supplemental Benefits

Effective January 1, 2025, OHA expanded coverage for certain YSHCNs to receive enhanced dental, vision, and Early and Periodic Screening, Diagnostic, and Treatment benefits beyond age 21 years. OHA provided the estimated supplemental PMPM for YSHCN members on a CY26 basis, which Marsh trended to the CY27 time period. The value varied from \$5.98 PMPM to \$8.28 PMPM.

Marsh estimated the YSHCN supplemental member prevalence for each COA using actual CY25 YSHCN enrollment as a percentage of total member months for each COA.

Using the YSHCN supplemental PMPM and estimated YSHCN prevalence by COA, Marsh calculated the blended YSHCN impact, ranging from \$0.01 to \$0.91, with a statewide \$0.17 PMPM impact. Additional details can be found in Appendix C.

Child Residential Reimbursement

Effective January 1, 2027, OHA increased state plan rates for three youth intensive treatment services: psychiatric residential treatment services, psychiatric day treatment services, and residential SUD facilities. To evaluate the subsequent impact of these increases on managed care reimbursement rates, the anticipated rate increases were compared with current managed care reimbursement rates, and the resulting expected increases were multiplied by trended utilization to estimate the total CY27 cost impact.

Gender-Affirming Care for Youth

In response to a CMS rule finalized on August 13, 2026 and effective October 13, 2026, OHA moved coverage for specific forms of gender-affirming care from CCOs to FFS. Claims that matched diagnostic or treatment criteria were identified and subsequently removed from the CY27 rates.

Other Non-Material Program Changes

Marsh reviewed several other program changes, including routine updates and changes to OHP-covered benefits through periodic reviews by the State HERC. Marsh determined these other program changes were immaterial and/or already accounted for through other rate development assumptions such as trend and underwriting margin. Trend assumptions are based on analyses of historical program experience, which reflects impacts due to small historical program changes over time, which Marsh did not explicitly parse out from underlying historical trends.

The program changes considered under this section include but are not limited to: extension of post-hospitalization nursing facility care to 100 days, family planning rate increases, coverage of hair transplants, improved access to routine vaccines, extension of hormone treatment maximum dosage to 12 months, and coverage of caring contacts following BH emergency visits.

Credibility Blending

The BCCP is a small program with low historical enrollment, which can lead to high volatility in PMPMs from year to year resulting from low statistical credibility. Therefore, the projected benefit cost for BCCP is blended with the ABAD & OAA COA, as the most similar population for credibility pooling.

These rate smoothing adjustments are budget neutral for each CCO, as well as on a statewide basis. The impact of the credibility blending adjustment can be seen in Appendix C.

6. Projected Benefit Costs and Trends — Supplemental Rates

Dental

Projected costs for dental services were developed similarly to the statewide medical process. The rate buildup is shown in Appendix E. Final projected dental PMPMs are also included in Appendix C for CCOA, CCOF, and CCOG. No adjustment was made for CCOB and CCOE plan types because they do not include coverage for dental services.

The items described in this section focus on the key differences in the dental rate development methodology compared to the statewide rate buildup.

Regional Rates

Separate rates were developed for Tri-County versus other regions due to the historical utilization differences observed between Tri-County and the rest of the State.

Base Data

Specific base data adjustments were applied to dental data as documented in Section 3. Certain dental procedure codes were excluded from the rate development, e.g., because they are not covered or should not receive separate reimbursement. These codes are listed in Appendix G. The list of excluded codes includes HM treatment services, as those costs were added as a program change. All base data used for dental cost projections was repriced using the fees shown in Appendix H. For procedure codes with a dental category of service that were not included in either the fee schedule or the excluded procedure code list, an average repriced rate was calculated by region (Tri-County and Other), and applied.

Utilization Trend

The utilization trends used in the dental rate development are shown in Appendix E. The trends varied by rate cell and region based on a review of emerging experience. In aggregate, the selected trends are a decrease compared to those assumed in CY26 rate setting.

Unit Cost Trend

The repricing schedule reflects expectations for CCO dental contracting levels in CY25. These levels are based on the CY25 FFS fee schedule, with consideration for differences in payment rates between FFS and managed care. Marsh reviewed several benchmark data points, such as Consumer Price Index, and developed

expectations for further unit cost increases between CY25 and CY27, as shown in Appendix E.

Program Changes

Program change adjustments applicable to dental benefits are documented in Section 5.

Supplemental Maternity Case Rate — Per Event Payment

The cost of most maternity-related care is carved out of the statewide capitation rate development and is instead reflected in the maternity case rate payment. This payment is paid to CCOs on a per event basis (i.e., for each applicable delivery) rather than on a PMPM basis. The case rate is triggered by maternity deliveries that occur in a hospital setting, and it includes costs related to the delivery event, as well as maternity-related prenatal care and two months of postpartum care. Non-maternity-related costs that occur during the case rate window were included in the statewide capitation rate base PMPM.

Considerations regarding the base data, trend, and program changes related to the maternity case rate payment are described below.

The maternity development is shown in Appendix F.

As described below, maternity case rates were developed for each region and then adjusted for each CCO based on each CCO's Cesarean section (C-section) and hospital mix.

Regional Case Rate Development

Base Data

Base data was constructed to include data related to the case payments made in CY25, summarized by region and adjusted as described in this section. This includes costs incurred in CY25 during the prenatal period, as well as some postpartum care incurred in early CY26. Marsh included prenatal costs associated with CY25 deliveries in the base and made upward IBNR adjustments to the base data to account for unpaid CY25 claims data as well as the small amount of postpartum care that occurred after the end of the CY25 base data period. Utilization for expanded doula benefits is fully reflected the CY25 base data.

Maternity costs were segregated into inpatient, outpatient, and professional COS, and further sub-categorized based on the type of hospital in which each delivery occurred and whether or not a C-section was administered at the delivery. For CY27 rates as with the CY26 rates, experience for DRGs related to sterilization during a maternity event were shifted to the case rate payment rather than the monthly capitation base.

For DRG hospitals, the cost per delivery for CY27 reflects the repricing of CCO payment to 80.0% of Medicare following a temporary rule change to increase DRG reimbursement for non-participating hospitals to 104.4% of Medicare during CY26.

To ensure the maternity case rate development did not include case rate counts for delivery events that were incomplete in the base data, Marsh excluded case counts and encounter data for events when incomplete encounter base data was observed (i.e., the delivery event was absent from encounter base data).

Resulting base data is shown in Appendix F.

Trend

Trends applied to the maternity case rate base data represent unit cost trends only. Utilization trends were not applied as the payment is on a per-event basis.

CCO-Specific Case Rates

After projecting regional average case rates by hospital type and C-section status, Marsh calculated a single aggregate case rate for each CCO using each CCO's mixture of C-sections and hospital types based on the CY25 case rate payment data. Marsh reviewed the mixture for each CCO and determined that the experience for each CCO was statistically credible for the purpose of case rate development.

Final CCO-specific maternity case rates are shown in Appendix C.

7. Special Contract Provisions Related to Payment

Incentive Payments: Quality Pool Incentive

Using the incentive arrangement authority granted under 42 CFR § 438.6(b), OHA administers the QPI outside of the capitation rates in which CCOs can earn additional incentive payment funding above and beyond the certified capitation rates by meeting certain quality and performance measures in CY27. OHA calculates these QPI payments so funding does not exceed 5% of the certified capitation payments under the contract. Additional details regarding the covered enrollees, services, and providers are covered in the CCO contract.

Marsh excluded all historical QPI payments and expenditures from the base data used for medical and non-medical capitation rate development to ensure these expenses are not double-counted through capitation payments and incentive payments to CCOs.

Risk-Sharing Mechanisms

IHCP Risk Corridor

For the CY27 contract period, OHA is continuing risk sharing between OHA and CCOs for IHCP expenditures. CCOs are required to offer to pay IHCPs at their encounter rate, and most IHCPs accept this offer. IHCP expenditures can vary widely between CCOs and across years due to the high encounter rate payments and fluctuations in utilization and clinic offerings.

Under the IHCP risk corridor, OHA will pay a CCO 80% of IHCP spend that is in excess of its revenue. Conversely, a CCO will remit 80% any revenue that is in excess of its IHCP spend. The risk corridor settlement will only apply if the difference between IHCP revenue and spend exceeds \$30,000.

HRSN Home Changes for Health Risk Corridors

Effective January 1, 2026, OHA's capitation payments are inclusive of services and devices provided to HRSN-authorized members through the HRSN Home Changes for Health benefit. Two risk corridors were created: one specific to the services and devices and another applicable to administrative funding associated with the Home Changes for Health category.

The risk corridor for the services and devices was previously one-sided. Effective for CY27, the risk corridor for the services and devices is two-sided, where OHA has 50% risk for claims between 97% and 103% of the amount included in the capitation

rate, and 100% risk for claims below 97% or above 103% of the amount included in the capitation rate.

For the administrative funding, the existing two-sided risk corridor is continuing to provide for risk sharing above or below a target administrative expense as a percentage of direct service cost. The parameters vary by CCO and are provided within the CCO contract.

Marsh notes that these rates, including risk sharing mechanisms, are based on the State's 1115 waiver authority as of January 1, 2027. Marsh is aware of a potential non-renewal for certain provisions of the State's 1115 waiver authority, including HRSN benefits. Upon receipt of final CMS guidance, Marsh will evaluate the estimated impact of any changes and, if warranted, amend the CY27 capitation rates.

Minimum Medical Loss Ratio

CCOs are required to report medical loss ratio (MLR) calculations to OHA subsequent to the end of the contract period, in accordance with 42 CFR § 438.8.

As further directed by OHA, the CCO shall maintain a minimum MLR of 86%, 86.5% or 87% in aggregate for the CCO's enrollee population. The minimum MLR varies by CCO size consistent with the non-benefit load Tiers. Tier 1 CCOs have a minimum of 87%, Tier 2 CCOs have a minimum of 86.5% and Tiers 3 and 4 have a minimum of 86%, subject to a credibility adjustment based on CCO size.

If the CCO does not maintain such a minimum in CY27 using the methodology in the CCO contract, the CCO is required to calculate a rebate that can be invested in the community or remit the rebate to OHA. The methodology for calculating the rebate amount is outlined in the CCO contract.

State Directed Payments Under 42 CFR § 438.6(c)

OHA directs CCOs to pay providers under various directed payments allowed under 42 CFR § 438.6(c). The following tables are provided in compliance with the requirements outlined in the RDG with regard to these State-directed payments. Marsh is not aware of any additional directed payment requirements in the CCO contract beyond those outlined below. All preprints will be submitted to CMS in compliance with federal regulation.

BH Directed Payments

The Oregon Legislature appropriated funds to increase BH rates in the 2021–2023 biennium, and this continued into the current biennium. These payments are being used to create significant and sustained increases in wages to help remedy disparities in reimbursement rates, as well as address the lack of BH providers across the State.

Increased Payments for Team-Based High Acuity Medicaid Providers

Certain Team-Based High Acuity (TBHA) providers shall receive at least 110% of the approved State Plan rates. For CY27, automatically qualified providers include Community Mental Health Plans delivering services such as Assertive Community Treatment (ACT) and Supported Employment (SE), Early Assessment and Support Alliance (EASA), and Intensive In-Home Behavioral Health Treatment (IIBHT). Other high-volume providers can apply and qualify by meeting all three of the following criteria: hold a Certificate of Approval, at least 50% of their revenues from Medicaid patients in the prior contract year, and offer team-based care with some combination of psychiatric services and/or addiction medicine services, peer delivered services, and case management services as clinically indicated. This definition of qualified providers is more restrictive than the definition reflected in the CY25 base data. For providers that continue to be covered under the directed payment, it is expected that the contract reimbursement rates reflected in the CY25 data will continue in CY27 due to provider negotiation pressures, so there is no cost impact compared to what was included in the base data. A separate base data adjustment was applied and discussed in Section 3 for ABA and psychotherapy reimbursement levels that were impacted by the narrowing of the directed payment based on observed emerging experience in early 2026.

Minimum Fee Schedule for Culturally and Linguistically Specific Services

For CY27, BH participating providers who meet Culturally and Linguistically Specific Services (CLSS) eligibility requirements may use specified modifiers to receive increased, approved State Plan BH payment rates. The payment increase for the “U9” modifier indicating a Non-Rural Participating Provider is 22% higher than the State Plan rate without the modifier, and the payment increase for the “TN” modifier indicating a Rural Provider is 27% higher than the State Plan rate without the modifier. The payment increases are estimated to be consistent with the directed payment rates reflected in the CY25 base data. As such, no additional cost increase or decrease is assumed beyond the payments as reflected in the base data.

Minimum Fee Schedule for Co-Occurring Disorder Services

For CY27, BH participating providers who are approved for integrated treatment of Co-Occurring Disorder (COD) may use specified modifiers to receive increased, approved State Plan BH payment rates. The modifiers vary by provider type and result in payment increases that are 10% to 20% higher than the State Plan rate without the modifier. The payment increases are estimated to be consistent with the directed payment rates reflected in the CY25 base data. As such, no additional cost increase or decrease is assumed beyond the payments as reflected in the base data.

Minimum Fee Schedule for Select Services

For CY27, BH providers are to receive no less than the applicable State Plan payment rate for the following services:

- Residential SUD

- Mobile Crisis Services
- Mobile Crisis Intervention Services
- Mental Health Children's Wraparound Services

These minimum fee schedule directed payments were in effect during the base data period and are expected to continue unchanged in CY27, therefore, no rate adjustment was needed.

Minimum Fee Schedule for Licensed Practitioner of the Healing Arts Vaccine Administration

For CY27, OHA will require CCOs to pay Licensed Practitioners of the Healing Arts (LPHAs) who are participating providers no less than the applicable State Plan payment rate for vaccine administration. As there are no known vaccine access issues, no additional cost increase or decrease is assumed beyond the payments as reflected in the base data.

Table 8: Description of State Directed Payments

Control Name of the State Directed Payment	Type of Payment	Brief Description	Is the Payment Included as a Rate Adjustment or Separate Payment Term?	Page Number(s) of Other References to the State Directed Payment
OR_Fee_IPH.OPH1_Renewal_20270101-20271231	Uniform dollar increase	Rural Type A and Type B hospitals will receive qualified directed payments for each inpatient discharge and outpatient visit of an OHP (Medicaid and CHIP) member enrolled in a CCO.	Separate payment term	Included in Table 13 below
OR_Fee_IPH.OPH2_Renewal_20270101-20271231	Uniform dollar increase	DRG hospitals will receive qualified directed payments for each inpatient discharge and outpatient visit of an OHP (Medicaid and CHIP) member enrolled in a CCO.	Separate payment term	Included in Table 13 below
OR_Fee_IPH.OPH3_Renewal_20270101-20271231	Uniform dollar increase	Public Academic Medical Center(s) will receive qualified directed payments for each inpatient discharge and outpatient visit of an OHP (Medicaid and CHIP) member enrolled in a CCO.	Separate payment term	Included in Table 13 below
TBD	Uniform dollar increase	Public Ground Emergency Medical Transportation (GEMT) providers will receive qualified directed payments for basic life support or advanced life support emergency services provided to an OHP (Medicaid and CHIP) member enrolled in a CCO.	Separate payment term	**Will be included in final cert**

Control Name of the State Directed Payment	Type of Payment	Brief Description	Is the Payment Included as a Rate Adjustment or Separate Payment Term?	Page Number(s) of Other References to the State Directed Payment
TBD	Uniform dollar increase	Private GEMT providers will receive qualified directed payments for basic life support or advanced life support emergency services provided to an OHP (Medicaid and CHIP) member enrolled in a CCO.	Separate payment term	**Will be included in final cert**
OR_Fee_BHO1_Renewal_20270101-20271231	Minimum fee schedule	TBHA Medicaid providers will receive qualified directed payments for select BH services provided to an OHP (Medicaid and CHIP) member enrolled in a CCO.	Rate adjustment	Description in Section 7
Minimum Fee Schedule for CLSS (No preprint)	Minimum fee schedule	Specific services from qualifying providers CLSS members will be reimbursed at least 100% of the State Plan FFS rate.	Rate adjustment	Description in Section 7
Minimum Fee Schedule for COD Services (No preprint)	Minimum fee schedule	Specific services from qualifying providers to members with CODs will be reimbursed at least 100% of the State Plan FFS rate.	Rate adjustment	Description in Section 7
Minimum Fee Schedule for Select Services (preprint not required)	Minimum fee schedule	Specific services will be reimbursed at least 100% of the approved State Plan FFS rate.	Rate adjustment	Description in Section 7
LPHA Vaccine Administration (preprint not required)	Minimum fee schedule	Vaccine administration performed by LPHAs will be reimbursed at least 100% of the State Plan FFS rate.	Rate adjustment	Description in Section 7

Table 9: State Directed Payments — Rate Adjustments

Control Name of the State Directed Payment	Rate Cells Affected	Magnitude of the Adjustment	Description of the Adjustment	Confirmation the Rates Are Consistent With the Preprint	For Maximum Fee Schedules
OR_Fee_BHO1_Renewal_202701-20271231	All rate cells	Within base data	See “Increased Payments for TBHA Medicaid Providers” under the “BH Directed Payments” subsection in Section 7.	The rates are consistent with the preprint.	N/A
Minimum Fee Schedule for CLSS (preprint not required)	All rate cells	Within base data	See “Minimum Fee Schedule for CLSS” under the “BH Directed Payments” subsection in Section 7.	No preprint required for these directed payments. The rates are consistent with the minimum fee schedule requirement.	N/A
Minimum Fee Schedule for COD Services (preprint not required)	All rate cells	Within base data	See “Minimum Fee Schedule for COD Services” under the “BH Directed Payments” subsection in Section 7.	No preprint required for these directed payments. The rates are consistent with the minimum fee schedule requirement.	N/A
Minimum Fee Schedule for Select Services (preprint not required)	All rate cells	Within base data	See “Minimum Fee Schedule for Select Services” under the “BH Directed Payments” subsection in Section 7.	No preprint required for these directed payments. The rates are consistent with the minimum fee schedule requirement.	N/A
LPHA Vaccine Administration (preprint not required)	All rate cells	Within base data	See “LPHA Vaccine Administration” in Section 7.	No preprint required for these directed payments. The rates are consistent with the minimum fee schedule requirement.	N/A

Table 10: State Directed Payments — Separate Payment Term

Control Name of the State Directed Payment	Aggregate Amount Included in the Certification	Statement that the Actuary is Certifying the Separate Payment Term	Magnitude to a PMPM Basis	Confirmation the Rate Development is Consistent With the Preprint	Confirmation that the State and Actuary will Submit Required Documentation at the End of the Rating Period (As Applicable)
TBD (Rural A/B Hospitals)	\$190,000,000	The actuary is certifying to the aggregate amount of the separate payment term.	Please see Appendix M.	The rate development is consistent with the preprint.	Confirmed.
TBD (DRG Hospitals)	\$1,011,000,000	The actuary is certifying to the aggregate amount of the separate payment term.	Please see Appendix M.	The rate development is consistent with the preprint.	Confirmed.
TBD (Public Academic Medical Center[s])	\$975,888,000	The actuary is certifying to the aggregate amount of the separate payment term.	Please see Appendix M.	The rate development is consistent with the preprint.	Confirmed.
TBD (Public GEMT)	**Will be included in final cert**	**Will be included in final cert**	**Will be included in final cert**	**Will be included in final cert**	**Will be included in final cert**
TBD (Private GEMT)	**Will be included in final cert**	**Will be included in final cert**	**Will be included in final cert**	**Will be included in final cert**	**Will be included in final cert**

Table 11: State Directed Payments — Portion of Rate

Rate Cell (RC)	Projected Enrollment (MM)	Certified Capitation Rate	Portion of the Rate Attributable to Increased Payments for OR_Fee_BHO1_Renewal_20270101-20271231	Portion of the Rate Attributable to Minimum Fee Schedule for CLSS	Portion of the Rate Attributable to Minimum Fee Schedule for COD Services
PCR	1,000,132	\$597.23	\$3.59	\$0.00	\$0.00
PWO	173,488	\$512.75	\$2.26	\$0.00	\$0.00
CHILD 00-01	270,676	\$1,010.81	\$0.01	\$0.00	\$0.00
CHILD 01-05	1,284,424	\$203.06	\$0.24	\$0.00	\$0.00
CHILD 06-18	3,305,236	\$247.60	\$1.89	\$0.00	\$0.00
DUAL-MEDS	929,174	\$287.30	\$2.05	\$0.00	\$0.00
ABAD & OAA	635,242	\$1,603.71	\$5.43	\$0.00	\$0.00
FOSTER	153,448	\$823.98	\$16.47	\$0.00	\$0.00
ACA 19–34	2,584,834	\$414.21	\$3.41	\$0.00	\$0.00
ACA 35–44	1,379,913	\$605.86	\$4.35	\$0.00	\$0.00
ACA 45–54	996,292	\$776.23	\$2.93	\$0.00	\$0.00
ACA 55–64	916,954	\$908.23	\$1.64	\$0.00	\$0.00
BBM 19–34	5,902	\$403.17	\$2.01	\$0.00	\$0.00
BBM 35–44	3,546	\$582.63	\$1.48	\$0.00	\$0.00
BBM 45–54	2,089	\$753.71	\$1.92	\$0.00	\$0.00

Rate Cell (RC)	Projected Enrollment (MM)	Certified Capitation Rate	Portion of the Rate Attributable to Increased Payments for OR_Fee_BHO1_Renewal_20270101-20271231	Portion of the Rate Attributable to Minimum Fee Schedule for CLSS	Portion of the Rate Attributable to Minimum Fee Schedule for COD Services
BBM 55–64	1,170	\$878.09	\$0.88	\$0.00	\$0.00
YSHCN	44,469	\$466.09	\$2.55	\$0.00	\$0.00
BCCP	686	\$3,950.75	\$1.02	\$0.00	\$0.00
Maternity	14,121	\$12,793.30	\$0.00	\$0.00	\$0.00

Table 12: State Directed Payments — Portion of Rate Cont.

Rate Cell (RC)	Projected Enrollment (MM)	Certified Capitation Rate	Portion of the Rate Attributable to Minimum Fee Schedule for Select Services	Portion of the Rate Attributable to LPHA Vaccine Administration	Aggregate Impact of All SDPs
PCR	1,000,132	\$597.23	\$0.00	\$0.00	\$3.59
PWO	173,488	\$512.75	\$0.00	\$0.00	\$2.26
CHILD 00-01	270,676	\$1,010.81	\$0.00	\$0.00	\$0.01
CHILD 01-05	1,284,424	\$203.06	\$0.00	\$0.00	\$0.24
CHILD 06-18	3,305,236	\$247.60	\$0.00	\$0.00	\$1.89
DUAL-MEDS	929,174	\$287.30	\$0.00	\$0.00	\$2.05
ABAD & OAA	635,242	\$1,603.71	\$0.00	\$0.00	\$5.43
FOSTER	153,448	\$823.98	\$0.00	\$0.00	\$16.47
ACA 19–34	2,584,834	\$414.21	\$0.00	\$0.00	\$3.41
ACA 35–44	1,379,913	\$605.86	\$0.00	\$0.00	\$4.35
ACA 45–54	996,292	\$776.23	\$0.00	\$0.00	\$2.93
ACA 55–64	916,954	\$908.23	\$0.00	\$0.00	\$1.64
BBM 19–34	5,902	\$403.17	\$0.00	\$0.00	\$2.01
BBM 35–44	3,546	\$582.63	\$0.00	\$0.00	\$1.48
BBM 45–54	2,089	\$753.71	\$0.00	\$0.00	\$1.92
BBM 55–64	1,170	\$878.09	\$0.00	\$0.00	\$0.88
YSHCN	44,469	\$466.09	\$0.00	\$0.00	\$2.55

Rate Cell (RC)	Projected Enrollment (MM)	Certified Capitation Rate	Portion of the Rate Attributable to Minimum Fee Schedule for Select Services	Portion of the Rate Attributable to LPHA Vaccine Administration	Aggregate Impact of All SDPs
BCCP	686	\$3,950.75	\$0.00	\$0.00	\$1.02
Maternity	14,121	\$12,793.30	\$0.00	\$0.00	\$0.00

For all minimum fee schedule directed payments set at 100% of the State Plan rates, it is believed that provider negotiation pressure will maintain payment rates at existing levels absent the state directed payment (SDP), so the impact of the SDP is \$0. For OR_Fee_BHO1_Renewal_20270101-20271231, the directed payment is set at 110% of the State Plan rates, so the 10% above the State Plan rates is attributed to the SDP. To develop the estimate for this SDP, CY25 claims from eligible providers were identified, repriced at 10% of the State Plan rates expected to be in effect in CY27, and BH utilization trend was applied consistent with trends used in capitation rate development for applicable services.

Table 13: State Directed Payments — Separate Payment Term Amounts

State Payment Term	Aggregate Amount in CY27
TBD (Rural A/B Hospitals)	\$190,000,000
TBD (DRG Hospitals)	\$1,011,000,000
TBD (Public Academic Medical Center[s])	\$975,888,000
TBD (Public GEMT)	**Will be included in final cert**
TBD (Private GEMT)	**Will be included in final cert**
Total	**Will be included in final cert**

8. Projected Non-Benefit Costs

Non-benefit costs, also referred to as non-medical costs and non-medical expense load in this certification, include administrative expenses, underwriting margin, Performance-Based Reward (PBR), and MCO tax. Each component was developed separately, as described below.

Administrative Expenses

Administrative expenses were developed on a percentage of revenue basis, excluding PBR, MCO tax, QPIs, and separate payment term directed payment revenue. Marsh leveraged multiple data sources to develop administrative expense projections, including CCO-reported financial reports and regional and national administrative expense benchmarks for similar Medicaid populations. Marsh reviewed historical CCO-reported financial reports with administrative expenses reported through December 31, 2025. Marsh adjusted historical administrative expense data to exclude non-allowable expenses. Historical administrative expense PMPMs were then projected forward to CY27, taking into consideration cost and wage trends relative to capitation rate growth, demographic and acuity changes of the underlying population, and changes in overall Medicaid enrollment levels. The final administrative load also considers CCO administrative expense for contractual provisions associated with Benefit Update Program and Re-entry Care Coordination.

The overall CY27 administrative expense percentage was then allocated to each CCO based on each CCO's non-medical load (NML) tier, which was determined based on the number of enrollees associated with each CCO. The largest CCOs in terms of enrollment are in Tier 1, and the smallest are in Tier 4. Based on a review of both CY25 and projected CY27 enrollment, Marsh categorized each CCO as follows:

Tier	CCO
Tier 1	— Health Share of Oregon
Tier 2	— PacificSource (all plans) — Trillium (all plans)
Tier 3	— AllCare CCO — Columbia Pacific CCO, LLC and Jackson County CCO, LLC (jointly administered) — Eastern Oregon Coordinated Care Org., LLC — InterCommunity Health Network, Inc
Tier 4	— Advanced Health, LLC — Cascade Health Alliance, LLC — Umpqua Health Alliance — Yamhill Community Care

The resulting administrative expense ratios for Tier 1, Tier 2, Tier 3 and Tier 4 are 7.8%, 8.4%, 9.0%, and 9.8%, respectively. These same percentages were allocated to all COAs and all CCO plan types within each tier, as well as to the maternity case rate.

Administrative expenses exclude flexible services, as these are accounted for separately through PBR.

Administrative expenses are included in the NML percentage shown in Appendix C.

Underwriting Margin

Marsh developed underwriting margin assumptions, which implicitly and broadly consider the cost of capital requirements and inherent risk of the CCO program. This analysis used publicly available financial statements, premium and expense information, and enrollment data to determine underwriting margin assumptions that are sufficient to cover at least the minimum cost of capital needs for the typical CCO. Marsh also reviewed results of the Society of Actuaries Underwriting Gain model with consideration for current cost of capital and other market conditions.

Underwriting margin percentages were determined as a percentage of the CCO capitation rate before PBR, MCO tax, QPIs, and separate payment term directed payment revenue.

An underwriting margin of 1.75% is included in the NML percentage shown in Appendix C.

Performance Based Reward

Funding for flexible services is included in the capitation rate development through the PBR PMPMs, as allowed by the State's 1115 waiver. The inclusion of these funds in the capitation rate is intended to incentivize CCOs to invest in flexible services with the goal of improving health outcomes and reducing medical costs. Additional detail on PBR and the development of CCO-specific amounts is included in Appendix K.

OHA developed the pool of PBR dollars applicable for each CCO for CY27, as described in Appendix K. Marsh allocated funding for each CCO as a uniform percentage of the projected CY27 benefit cost across all rate cells. PBR is not allocated to the maternity case rate. Final PBR PMPMs by rate cell are shown in Appendix C.

MCO Premium Tax

The State requires CCOs to pay a 2.0% MCO assessment on premiums/capitation revenue.

The MCO tax is included in the capitation rate development in Appendix C.

9. Retrospective Acuity Adjustment

While Marsh has included statewide adjustments for the estimated impact of implementing community engagement requirements and increased frequency of redeterminations for the ACA and YSHCN populations, the regional composition of participating CCOs is expected to result in material variation from the statewide projections. Additionally, pending CMS rulemaking regarding these provisions, and actual member experience for the unprecedented provisions, may result in further variation at the statewide or CCO level. As such, OHA and Marsh will perform a retrospective acuity evaluation based on actual disenrollment volume and average acuity level of cohorts.

After the conclusion of the CY27 contract period, OHA will compare the actual CY27 experience to the base year (CY25) at the CCO level. Member cohorts will be assigned using a consistent definition of Baseline Persisters in each period, applying OHA's final set of medical frailty criteria should it differ from the criteria used in the prospective calculation. Marsh will measure the actual change in average relative acuity for each CCO and rate cell between CY25 and CY27. The actual change will be compared with the statewide change assumed in the prospective rates, and the difference will be used to calculate a retroactive rate adjustment.

If the residual ACA expansion population has lower average acuity relative to the Baseline Persister cohort than was initially projected in the CY27 prospective rates, capitation rates will be adjusted downward, but not below the capitation rates that would apply in absence of any adjustment. Likewise, if the residual population has higher average acuity relative to the Baseline Persister cohort than originally projected in CY27 prospective rates, capitation rates will be adjusted upward.

The retroactive rate adjustments may not be budget neutral on a statewide basis, and the adjustments are expected only to reverse or amend the CY27 prospective acuity adjustment to reflect observed retrospective acuity. The calculation of the retroactive rate adjustment will occur in 2028, and the acuity-related rate adjustment will only apply to medical expense projections. Non-benefit load PMPMs will remain consistent with original capitation rate calculations, with the exception of the 2% MCO premium tax.

10. Final Certified Rates

This certification assumes items in Oregon's State Plan, including any proposed State Plan Amendments, as well as the CCO contracts, have been or will be approved by CMS.

In preparing the capitation rates for the Oregon Medicaid CCO Program found in Appendix C and the separate payment term directed payment total opportunity amounts described in Section 6, Marsh used and relied upon enrollment, eligibility, encounters, claims, financial reports, risk scores, budgetary and financial impact analyses, and other information supplied by the State and its contracted CCOs. The State and its contracted CCOs are responsible for the validity and completeness of this supplied data and information. Marsh has reviewed the summarized data and information for internal consistency and reasonableness, but did not audit it. In Marsh's opinion, the data used for the rate development process is appropriate for the intended purposes. If the data and information is incomplete or inaccurate, the values shown in this certification may need to be revised accordingly.

Because modeling all aspects of a situation or scenario is not possible or practical, Marsh may use summary information, estimates, or simplifications of calculations to facilitate the modeling of future events in an efficient and cost-effective manner. Marsh may also exclude factors or data that are immaterial in our judgment. Use of such simplifying techniques does not, in our judgment, affect the reasonableness, appropriateness, or attainability of the results for the Medicaid program. Actuarial assumptions may also be changed from one certification period to the next because of changes in mandated requirements, program experience, changes in expectations about the future, and other factors. A change in assumptions is not an indication that prior assumptions were unreasonable, inappropriate, or unattainable when they were made.

Marsh has prepared analyses and opinions documented in this report based on actuarial models and related data provided by OHA actuarial staff as well as results of data provided by CCOs. Our work relies on the accuracy, completeness, and appropriateness of these models as furnished. While in most cases Marsh was afforded the opportunity to review modeling, an independent audit of the underlying data and detailed formulas was beyond the scope of our engagement. Accordingly, Marsh disclaims responsibility for any errors, omissions, or limitations inherent in the models provided by OHA and data provided by the CCOs. Our actuarial opinions and conclusions are contingent upon this reliance. Should the models or data provided by OHA and the CCOs prove to be inaccurate or incomplete, our analyses may be affected. This reliance statement is made in accordance with the Actuarial Standards of Practice (ASOP) No. 56, which guides the disclosure of reliance on information provided by others in actuarial work.

Marsh certifies that the CCO program capitation rates and the separate payment term directed payment total payment opportunity were developed in accordance with

generally accepted actuarial practices and principles and in accordance with the financing and funding mechanism for the separate payment term directed payment and are appropriate for the Medicaid covered populations and services under the managed care contract. Any differences in the assumptions, methodologies, or factors between different covered populations/COAs used to develop capitation rates comply with 42 CFR § 438.4(b)(1) and are based on valid rate development standards that represent actual and projected cost and risk differences in providing covered services to each covered population/COA. Marsh did not vary assumptions among each covered population/COA based on the associated rate of FFP. The undersigned actuaries are members of the American Academy of Actuaries and meet its qualification standards to certify to the actuarial soundness of Medicaid managed care capitation rates.

Capitation rates developed by Marsh are actuarial projections of future contingent events. All estimates are based upon the information and data available at a point in time and are subject to unforeseen and random events. Therefore, any projection must be interpreted as having a likely, and potentially wide, range of variability from the estimate. Any estimate or projection may not be used or relied upon by any other party or for any other purpose than for which it was issued by Marsh. Marsh is not responsible for the consequences of any unauthorized use. Actual CCO costs will differ from these projections. Marsh has developed these rates on behalf of the State to demonstrate compliance with CMS requirements under 42 CFR § 438.4 and in accordance with applicable laws and regulations. Use of these rates for any purpose beyond that stated may not be appropriate.

CCOs are advised that the use of these rates may not be appropriate for their particular circumstance and Marsh disclaims any responsibility for the use of these rates by CCOs for any purpose. Marsh recommends that any CCO considering contracting with the State should analyze its own projected medical expense, administrative expense, and any other revenue needs for comparison to these rates before deciding whether to contract with the State.

The State understands that Marsh is not engaged in the practice of law, or in providing advice on taxation matters. This report, which may include commenting on legal or taxation issues or regulations, does not constitute and is not a substitute for legal or taxation advice. Accordingly, Marsh recommends that the State secure the advice of competent legal and taxation counsel with respect to any legal or taxation matters related to this report or otherwise.

This certification assumes the reader is familiar with the Oregon Medicaid program, Medicaid eligibility rules, and actuarial rating techniques. It has been prepared exclusively for the State and should not be relied upon by third parties. Other readers should seek the advice of actuaries or other qualified professionals competent in the area of actuarial rate projections to understand the technical nature of these results. This report should only be reviewed in its entirety and Marsh is not responsible for, and expressly disclaims liability for, any reliance on this report by third parties.

If you have any questions regarding this certification, please contact Brad Diaz, FSA, MAAA, at Brad.Diaz@mercer.com or Jennifer Gerstorff, FSA, MAAA, at Jennifer.Gerstorff@mercer.com.

Sincerely,

DRAFT

Brad Diaz, FSA, MAAA
Principal

DRAFT

Jennifer Gerstorff, FSA, MAAA
Partner

11. List of Appendices (Attached)

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Appendix A: Comparison to Prior Rates

CY27 CCO Rate Certification

Appendix A: Comparison to CY26 Rates

CCO	COA	Projected Caseload ¹	CY26 Rate: Excl. MCO Tax	CY27 Rate: Excl. MCO Tax	Percentage Difference
Advanced Health, LLC	PCR	22,863	\$ 681.79	\$ 704.93	3.4%
Advanced Health, LLC	PWO	2,937	\$ 600.96	\$ 604.81	0.6%
Advanced Health, LLC	CHILD 00-01	5,038	\$ 1,209.46	\$ 1,287.50	6.5%
Advanced Health, LLC	CHILD 01-05	23,413	\$ 254.66	\$ 265.13	4.1%
Advanced Health, LLC	CHILD 06-18	60,514	\$ 338.83	\$ 342.83	1.2%
Advanced Health, LLC	DUAL-MEDS	25,858	\$ 300.38	\$ 375.04	24.9%
Advanced Health, LLC	ABAD & OAA	17,119	\$ 1,729.63	\$ 1,766.36	2.1%
Advanced Health, LLC	FOSTER	4,418	\$ 936.65	\$ 970.51	3.6%
Advanced Health, LLC	ACA 19-34	43,635	\$ 476.71	\$ 526.82	10.5%
Advanced Health, LLC	ACA 35-44	29,184	\$ 688.64	\$ 700.70	1.8%
Advanced Health, LLC	ACA 45-54	24,244	\$ 826.09	\$ 908.53	10.0%
Advanced Health, LLC	ACA 55-64	25,978	\$ 1,018.53	\$ 1,096.75	7.7%
Advanced Health, LLC	BBM 19-34	264	\$ 476.17	\$ 1,189.65	149.8%
Advanced Health, LLC	BBM 35-44	91	\$ 688.10	\$ 1,224.45	77.9%
Advanced Health, LLC	BBM 45-54	86	\$ 825.55	\$ 1,756.29	112.7%
Advanced Health, LLC	BBM 55-64	64	\$ 1,017.99	\$ 2,285.08	124.5%
Advanced Health, LLC	YSHCN	957	\$ 590.88	\$ 546.05	-7.6%
Advanced Health, LLC	BCCP	48	\$ 1,729.63	\$ 1,766.36	2.1%
Advanced Health, LLC	Maternity	307	\$ 14,225.71	\$ 11,791.52	-17.1%
Advanced Health, LLC	Total	286,710	\$ 642.29	\$ 678.25	5.6%
Advanced Health, LLC	Total (Non-Maternity)	286,710	\$ 627.06	\$ 665.63	6.2%
AllCare CCO	PCR	56,426	\$ 607.37	\$ 642.31	5.8%
AllCare CCO	PWO	9,517	\$ 583.57	\$ 587.52	0.7%
AllCare CCO	CHILD 00-01	11,228	\$ 1,228.70	\$ 1,361.28	10.8%
AllCare CCO	CHILD 01-05	52,350	\$ 238.36	\$ 235.18	-1.3%
AllCare CCO	CHILD 06-18	140,798	\$ 289.84	\$ 301.77	4.1%
AllCare CCO	DUAL-MEDS	55,852	\$ 284.36	\$ 324.72	14.2%
AllCare CCO	ABAD & OAA	30,781	\$ 1,608.30	\$ 1,704.18	6.0%
AllCare CCO	FOSTER	7,693	\$ 906.61	\$ 905.76	-0.1%
AllCare CCO	ACA 19-34	117,463	\$ 414.67	\$ 454.83	9.7%
AllCare CCO	ACA 35-44	78,468	\$ 586.47	\$ 602.41	2.7%
AllCare CCO	ACA 45-54	58,132	\$ 797.38	\$ 801.81	0.6%
AllCare CCO	ACA 55-64	58,039	\$ 922.72	\$ 969.54	5.1%
AllCare CCO	BBM 19-34	270	\$ 414.25	\$ 461.46	11.4%
AllCare CCO	BBM 35-44	161	\$ 586.05	\$ 651.05	11.1%
AllCare CCO	BBM 45-54	102	\$ 796.96	\$ 825.34	3.6%
AllCare CCO	BBM 55-64	61	\$ 922.30	\$ 969.49	5.1%
AllCare CCO	YSHCN	1,723	\$ 577.16	\$ 525.11	-9.0%
AllCare CCO	BCCP	70	\$ 1,608.30	\$ 1,704.18	6.0%
AllCare CCO	Maternity	741	\$ 14,281.75	\$ 11,944.79	-16.4%
AllCare CCO	Total	679,134	\$ 568.28	\$ 593.85	4.5%
AllCare CCO	Total (Non-Maternity)	679,134	\$ 552.70	\$ 580.82	5.1%
Cascade Health Alliance, LLC	PCR	23,524	\$ 598.40	\$ 633.48	5.9%
Cascade Health Alliance, LLC	PWO	3,794	\$ 602.90	\$ 589.09	-2.3%
Cascade Health Alliance, LLC	CHILD 00-01	5,537	\$ 1,237.32	\$ 1,373.43	11.0%
Cascade Health Alliance, LLC	CHILD 01-05	27,671	\$ 254.74	\$ 248.92	-2.3%
Cascade Health Alliance, LLC	CHILD 06-18	68,297	\$ 299.89	\$ 312.92	4.3%
Cascade Health Alliance, LLC	DUAL-MEDS	17,719	\$ 287.46	\$ 314.71	9.5%
Cascade Health Alliance, LLC	ABAD & OAA	15,216	\$ 1,644.74	\$ 1,587.98	-3.5%
Cascade Health Alliance, LLC	FOSTER	4,206	\$ 927.25	\$ 1,287.86	38.9%
Cascade Health Alliance, LLC	ACA 19-34	46,642	\$ 445.06	\$ 483.48	8.6%
Cascade Health Alliance, LLC	ACA 35-44	25,314	\$ 649.86	\$ 730.30	12.4%
Cascade Health Alliance, LLC	ACA 45-54	20,020	\$ 829.28	\$ 862.08	4.0%
Cascade Health Alliance, LLC	ACA 55-64	19,753	\$ 944.32	\$ 1,057.81	12.0%
Cascade Health Alliance, LLC	BBM 19-34	72	\$ 444.52	\$ 734.62	65.3%
Cascade Health Alliance, LLC	BBM 35-44	85	\$ 649.32	\$ 1,903.69	193.2%
Cascade Health Alliance, LLC	BBM 45-54	106	\$ 828.74	\$ 1,623.29	95.9%
Cascade Health Alliance, LLC	BBM 55-64	39	\$ 943.78	\$ 1,397.04	48.0%
Cascade Health Alliance, LLC	YSHCN	436	\$ 586.78	\$ 529.73	-9.7%
Cascade Health Alliance, LLC	BCCP	2	\$ 1,644.74	\$ 1,587.98	-3.5%
Cascade Health Alliance, LLC	Maternity	279	\$ 14,195.14	\$ 11,935.36	-15.9%
Cascade Health Alliance, LLC	Total	278,433	\$ 580.61	\$ 615.42	6.0%
Cascade Health Alliance, LLC	Total (Non-Maternity)	278,433	\$ 566.39	\$ 603.46	6.5%

CY27 CCO Rate Certification

Appendix A: Comparison to CY26 Rates

CCO	COA	Projected Caseload ¹	CY26 Rate: Excl. MCO Tax	CY27 Rate: Excl. MCO Tax	Percentage Difference
Columbia Pacific CCO, LLC	PCR	30,610	\$ 756.51	\$ 779.40	3.0%
Columbia Pacific CCO, LLC	PWO	4,614	\$ 659.40	\$ 660.73	0.2%
Columbia Pacific CCO, LLC	CHILD 00-01	7,235	\$ 1,167.72	\$ 1,134.18	-2.9%
Columbia Pacific CCO, LLC	CHILD 01-05	35,310	\$ 274.53	\$ 270.95	-1.3%
Columbia Pacific CCO, LLC	CHILD 06-18	91,634	\$ 310.53	\$ 320.68	3.3%
Columbia Pacific CCO, LLC	DUAL-MEDS	25,231	\$ 345.38	\$ 400.60	16.0%
Columbia Pacific CCO, LLC	ABAD & OAA	17,592	\$ 2,003.17	\$ 1,904.29	-4.9%
Columbia Pacific CCO, LLC	FOSTER	5,175	\$ 844.47	\$ 925.10	9.5%
Columbia Pacific CCO, LLC	ACA 19-34	61,159	\$ 513.75	\$ 546.59	6.4%
Columbia Pacific CCO, LLC	ACA 35-44	40,152	\$ 763.07	\$ 802.41	5.2%
Columbia Pacific CCO, LLC	ACA 45-54	31,127	\$ 977.46	\$ 1,003.06	2.6%
Columbia Pacific CCO, LLC	ACA 55-64	31,130	\$ 1,151.94	\$ 1,261.39	9.5%
Columbia Pacific CCO, LLC	BBM 19-34	162	\$ 513.33	\$ 518.63	1.0%
Columbia Pacific CCO, LLC	BBM 35-44	95	\$ 762.65	\$ 771.45	1.2%
Columbia Pacific CCO, LLC	BBM 45-54	125	\$ 977.04	\$ 1,009.71	3.3%
Columbia Pacific CCO, LLC	BBM 55-64	26	\$ 1,151.52	\$ 1,248.21	8.4%
Columbia Pacific CCO, LLC	YSHCN	1,303	\$ 594.65	\$ 580.32	-2.4%
Columbia Pacific CCO, LLC	BCCP	-	\$ 2,003.17	\$ 1,897.66	-5.3%
Columbia Pacific CCO, LLC	Maternity	368	\$ 17,508.60	\$ 16,922.49	-3.3%
Columbia Pacific CCO, LLC	Total	382,678	\$ 671.55	\$ 694.82	3.5%
Columbia Pacific CCO, LLC	Total (Non-Maternity)	382,678	\$ 654.72	\$ 678.55	3.6%
Eastern Oregon Coordinated Care Org., LLC	PCR	59,415	\$ 772.31	\$ 828.73	7.3%
Eastern Oregon Coordinated Care Org., LLC	PWO	11,428	\$ 654.83	\$ 679.95	3.8%
Eastern Oregon Coordinated Care Org., LLC	CHILD 00-01	20,240	\$ 1,105.07	\$ 1,357.57	22.8%
Eastern Oregon Coordinated Care Org., LLC	CHILD 01-05	88,707	\$ 266.24	\$ 268.05	0.7%
Eastern Oregon Coordinated Care Org., LLC	CHILD 06-18	218,997	\$ 326.24	\$ 338.79	3.8%
Eastern Oregon Coordinated Care Org., LLC	DUAL-MEDS	49,480	\$ 363.69	\$ 443.87	22.0%
Eastern Oregon Coordinated Care Org., LLC	ABAD & OAA	33,570	\$ 1,781.56	\$ 2,120.09	19.0%
Eastern Oregon Coordinated Care Org., LLC	FOSTER	11,010	\$ 963.40	\$ 681.81	-29.2%
Eastern Oregon Coordinated Care Org., LLC	ACA 19-34	118,786	\$ 519.22	\$ 623.18	20.0%
Eastern Oregon Coordinated Care Org., LLC	ACA 35-44	62,783	\$ 826.67	\$ 854.63	3.4%
Eastern Oregon Coordinated Care Org., LLC	ACA 45-54	48,887	\$ 1,059.47	\$ 1,164.11	9.9%
Eastern Oregon Coordinated Care Org., LLC	ACA 55-64	47,362	\$ 1,168.23	\$ 1,329.19	13.8%
Eastern Oregon Coordinated Care Org., LLC	BBM 19-34	353	\$ 518.80	\$ 805.10	55.2%
Eastern Oregon Coordinated Care Org., LLC	BBM 35-44	225	\$ 826.25	\$ 1,089.87	31.9%
Eastern Oregon Coordinated Care Org., LLC	BBM 45-54	139	\$ 1,059.05	\$ 1,872.66	76.8%
Eastern Oregon Coordinated Care Org., LLC	BBM 55-64	39	\$ 1,167.81	\$ 1,877.74	60.8%
Eastern Oregon Coordinated Care Org., LLC	YSHCN	2,299	\$ 575.17	\$ 676.70	17.7%
Eastern Oregon Coordinated Care Org., LLC	BCCP	12	\$ 1,781.56	\$ 2,120.09	19.0%
Eastern Oregon Coordinated Care Org., LLC	Maternity	1,075	\$ 19,998.87	\$ 20,316.62	1.6%
Eastern Oregon Coordinated Care Org., LLC	Total	773,731	\$ 650.50	\$ 717.21	10.3%
Eastern Oregon Coordinated Care Org., LLC	Total (Non-Maternity)	773,731	\$ 622.72	\$ 688.98	10.6%
Health Share of Oregon	PCR	322,542	\$ 622.65	\$ 663.19	6.5%
Health Share of Oregon	PWO	54,353	\$ 530.43	\$ 572.03	7.8%
Health Share of Oregon	CHILD 00-01	89,499	\$ 977.20	\$ 1,045.40	7.0%
Health Share of Oregon	CHILD 01-05	414,037	\$ 232.57	\$ 269.66	15.9%
Health Share of Oregon	CHILD 06-18	1,088,455	\$ 284.30	\$ 299.48	5.3%
Health Share of Oregon	DUAL-MEDS	320,982	\$ 350.54	\$ 332.05	-5.3%
Health Share of Oregon	ABAD & OAA	217,906	\$ 1,879.38	\$ 1,876.05	-0.2%
Health Share of Oregon	FOSTER	44,692	\$ 1,191.91	\$ 1,073.18	-10.0%
Health Share of Oregon	ACA 19-34	894,712	\$ 450.80	\$ 493.23	9.4%
Health Share of Oregon	ACA 35-44	486,549	\$ 641.45	\$ 719.56	12.2%
Health Share of Oregon	ACA 45-54	332,423	\$ 830.66	\$ 899.04	8.2%
Health Share of Oregon	ACA 55-64	284,312	\$ 928.57	\$ 1,012.88	9.1%
Health Share of Oregon	BBM 19-34	1,585	\$ 450.40	\$ 494.81	9.9%
Health Share of Oregon	BBM 35-44	1,104	\$ 641.06	\$ 753.02	17.5%
Health Share of Oregon	BBM 45-54	473	\$ 830.27	\$ 932.06	12.3%
Health Share of Oregon	BBM 55-64	309	\$ 928.18	\$ 1,022.60	10.2%
Health Share of Oregon	YSHCN	14,137	\$ 559.74	\$ 514.89	-8.0%
Health Share of Oregon	BCCP	167	\$ 1,879.38	\$ 1,876.05	-0.2%
Health Share of Oregon	Maternity	4,539	\$ 16,221.11	\$ 13,099.38	-19.2%
Health Share of Oregon	Total	4,568,237	\$ 577.40	\$ 610.12	5.7%
Health Share of Oregon	Total (Non-Maternity)	4,568,237	\$ 561.28	\$ 597.11	6.4%

CY27 CCO Rate Certification

Appendix A: Comparison to CY26 Rates

CCO	COA	Projected Caseload ¹	CY26 Rate: Excl. MCO Tax	CY27 Rate: Excl. MCO Tax	Percentage Difference
InterCommunity Health Network, Inc.	PCR	61,251	\$ 760.12	\$ 777.78	2.3%
InterCommunity Health Network, Inc.	PWO	10,931	\$ 633.41	\$ 645.92	2.0%
InterCommunity Health Network, Inc.	CHILD 00-01	16,258	\$ 1,122.98	\$ 1,120.60	-0.2%
InterCommunity Health Network, Inc.	CHILD 01-05	77,216	\$ 293.37	\$ 284.28	-3.1%
InterCommunity Health Network, Inc.	CHILD 06-18	201,066	\$ 323.69	\$ 339.97	5.0%
InterCommunity Health Network, Inc.	DUAL-MEDS	58,366	\$ 336.87	\$ 361.65	7.4%
InterCommunity Health Network, Inc.	ABAD & OAA	44,812	\$ 1,767.99	\$ 1,859.72	5.2%
InterCommunity Health Network, Inc.	FOSTER	9,975	\$ 827.46	\$ 873.09	5.5%
InterCommunity Health Network, Inc.	ACA 19-34	175,106	\$ 475.61	\$ 506.08	6.4%
InterCommunity Health Network, Inc.	ACA 35-44	78,343	\$ 757.57	\$ 812.27	7.2%
InterCommunity Health Network, Inc.	ACA 45-54	61,513	\$ 945.88	\$ 1,017.87	7.6%
InterCommunity Health Network, Inc.	ACA 55-64	58,746	\$ 1,103.69	\$ 1,198.74	8.6%
InterCommunity Health Network, Inc.	BBM 19-34	405	\$ 475.19	\$ 647.29	36.2%
InterCommunity Health Network, Inc.	BBM 35-44	241	\$ 757.15	\$ 1,309.25	72.9%
InterCommunity Health Network, Inc.	BBM 45-54	144	\$ 945.46	\$ 1,292.97	36.8%
InterCommunity Health Network, Inc.	BBM 55-64	61	\$ 1,103.27	\$ 1,372.53	24.4%
InterCommunity Health Network, Inc.	YSHCN	3,139	\$ 575.86	\$ 564.00	-2.1%
InterCommunity Health Network, Inc.	BCCP	14	\$ 1,767.99	\$ 1,859.72	5.2%
InterCommunity Health Network, Inc.	Maternity	818	\$ 17,656.11	\$ 16,424.56	-7.0%
InterCommunity Health Network, Inc.	Total	857,588	\$ 640.32	\$ 673.69	5.2%
InterCommunity Health Network, Inc.	Total (Non-Maternity)	857,588	\$ 623.47	\$ 658.03	5.5%
Jackson County CCO, LLC	PCR	52,340	\$ 679.66	\$ 690.29	1.6%
Jackson County CCO, LLC	PWO	8,178	\$ 594.79	\$ 577.36	-2.9%
Jackson County CCO, LLC	CHILD 00-01	14,291	\$ 1,253.43	\$ 1,338.91	6.8%
Jackson County CCO, LLC	CHILD 01-05	71,898	\$ 232.19	\$ 224.37	-3.4%
Jackson County CCO, LLC	CHILD 06-18	180,830	\$ 303.17	\$ 297.43	-1.9%
Jackson County CCO, LLC	DUAL-MEDS	33,672	\$ 289.86	\$ 372.30	28.4%
Jackson County CCO, LLC	ABAD & OAA	26,865	\$ 1,836.48	\$ 1,836.74	0.0%
Jackson County CCO, LLC	FOSTER	9,440	\$ 921.12	\$ 826.19	-10.3%
Jackson County CCO, LLC	ACA 19-34	112,582	\$ 476.12	\$ 499.41	4.9%
Jackson County CCO, LLC	ACA 35-44	67,441	\$ 686.45	\$ 722.23	5.2%
Jackson County CCO, LLC	ACA 45-54	49,011	\$ 872.24	\$ 868.55	-0.4%
Jackson County CCO, LLC	ACA 55-64	46,941	\$ 1,028.67	\$ 1,050.52	2.1%
Jackson County CCO, LLC	BBM 19-34	230	\$ 475.70	\$ 459.13	-3.5%
Jackson County CCO, LLC	BBM 35-44	176	\$ 686.03	\$ 636.97	-7.2%
Jackson County CCO, LLC	BBM 45-54	90	\$ 871.82	\$ 811.84	-6.9%
Jackson County CCO, LLC	BBM 55-64	45	\$ 1,028.25	\$ 1,002.01	-2.6%
Jackson County CCO, LLC	YSHCN	2,839	\$ 590.00	\$ 520.45	-11.8%
Jackson County CCO, LLC	BCCP	44	\$ 1,836.48	\$ 1,836.74	0.0%
Jackson County CCO, LLC	Maternity	666	\$ 14,614.10	\$ 12,124.51	-17.0%
Jackson County CCO, LLC	Total	676,911	\$ 591.56	\$ 600.32	1.5%
Jackson County CCO, LLC	Total (Non-Maternity)	676,911	\$ 577.18	\$ 588.39	1.9%
PacificSource Community Solutions (Central)	PCR	58,832	\$ 784.96	\$ 782.13	-0.4%
PacificSource Community Solutions (Central)	PWO	11,179	\$ 643.73	\$ 614.51	-4.5%
PacificSource Community Solutions (Central)	CHILD 00-01	16,233	\$ 1,091.00	\$ 1,254.80	15.0%
PacificSource Community Solutions (Central)	CHILD 01-05	75,261	\$ 277.20	\$ 320.35	15.6%
PacificSource Community Solutions (Central)	CHILD 06-18	193,848	\$ 365.73	\$ 386.03	5.5%
PacificSource Community Solutions (Central)	DUAL-MEDS	41,152	\$ 361.11	\$ 419.42	16.1%
PacificSource Community Solutions (Central)	ABAD & OAA	25,629	\$ 2,098.08	\$ 2,060.19	-1.8%
PacificSource Community Solutions (Central)	FOSTER	9,926	\$ 947.34	\$ 1,125.85	18.8%
PacificSource Community Solutions (Central)	ACA 19-34	148,827	\$ 552.78	\$ 590.75	6.9%
PacificSource Community Solutions (Central)	ACA 35-44	82,192	\$ 822.05	\$ 771.70	-6.1%
PacificSource Community Solutions (Central)	ACA 45-54	61,756	\$ 1,037.50	\$ 1,051.45	1.3%
PacificSource Community Solutions (Central)	ACA 55-64	56,972	\$ 1,179.39	\$ 1,191.49	1.0%
PacificSource Community Solutions (Central)	BBM 19-34	519	\$ 552.39	\$ 541.83	-1.9%
PacificSource Community Solutions (Central)	BBM 35-44	318	\$ 821.66	\$ 744.26	-9.4%
PacificSource Community Solutions (Central)	BBM 45-54	137	\$ 1,037.11	\$ 1,000.60	-3.5%
PacificSource Community Solutions (Central)	BBM 55-64	79	\$ 1,179.00	\$ 1,274.03	8.1%
PacificSource Community Solutions (Central)	YSHCN	3,253	\$ 567.87	\$ 597.30	5.2%
PacificSource Community Solutions (Central)	BCCP	69	\$ 2,098.08	\$ 2,060.19	-1.8%
PacificSource Community Solutions (Central)	Maternity	880	\$ 15,028.20	\$ 12,543.94	-16.5%
PacificSource Community Solutions (Central)	Total	786,181	\$ 684.29	\$ 701.45	2.5%
PacificSource Community Solutions (Central)	Total (Non-Maternity)	786,181	\$ 667.47	\$ 687.41	3.0%

CY27 CCO Rate Certification

Appendix A: Comparison to CY26 Rates

CCO	COA	Projected Caseload ¹	CY26 Rate: Excl. MCO Tax	CY27 Rate: Excl. MCO Tax	Percentage Difference
PacificSource Community Solutions (Gorge)	PCR	12,167	\$ 765.51	\$ 810.65	5.9%
PacificSource Community Solutions (Gorge)	PWO	2,316	\$ 630.80	\$ 671.17	6.4%
PacificSource Community Solutions (Gorge)	CHILD 00-01	3,513	\$ 1,069.15	\$ 1,028.91	-3.8%
PacificSource Community Solutions (Gorge)	CHILD 01-05	18,472	\$ 292.45	\$ 299.87	2.5%
PacificSource Community Solutions (Gorge)	CHILD 06-18	51,846	\$ 340.31	\$ 363.38	6.8%
PacificSource Community Solutions (Gorge)	DUAL-MEDS	9,876	\$ 353.44	\$ 447.35	26.6%
PacificSource Community Solutions (Gorge)	ABAD & OAA	6,559	\$ 1,783.60	\$ 2,008.42	12.6%
PacificSource Community Solutions (Gorge)	FOSTER	2,154	\$ 923.09	\$ 1,573.43	70.5%
PacificSource Community Solutions (Gorge)	ACA 19-34	31,500	\$ 480.43	\$ 542.24	12.9%
PacificSource Community Solutions (Gorge)	ACA 35-44	16,369	\$ 786.11	\$ 826.04	5.1%
PacificSource Community Solutions (Gorge)	ACA 45-54	11,336	\$ 958.24	\$ 1,042.42	8.8%
PacificSource Community Solutions (Gorge)	ACA 55-64	12,844	\$ 1,100.27	\$ 1,140.28	3.6%
PacificSource Community Solutions (Gorge)	BBM 19-34	131	\$ 480.04	\$ 563.27	17.3%
PacificSource Community Solutions (Gorge)	BBM 35-44	44	\$ 776.11	\$ 757.59	-2.4%
PacificSource Community Solutions (Gorge)	BBM 45-54	19	\$ 957.85	\$ 1,013.22	5.8%
PacificSource Community Solutions (Gorge)	BBM 55-64	-	\$ 1,086.43	\$ 1,246.03	14.7%
PacificSource Community Solutions (Gorge)	YSHCN	835	\$ 555.46	\$ 635.85	14.5%
PacificSource Community Solutions (Gorge)	BCCP	12	\$ 1,783.60	\$ 2,008.42	12.6%
PacificSource Community Solutions (Gorge)	Maternity	183	\$ 20,906.32	\$ 21,756.29	4.1%
PacificSource Community Solutions (Gorge)	Total	179,993	\$ 623.23	\$ 678.47	8.9%
PacificSource Community Solutions (Gorge)	Total (Non-Maternity)	179,993	\$ 601.98	\$ 656.35	9.0%
PacificSource Community Solutions (Marion Polk)	PCR	110,991	\$ 685.29	\$ 710.86	3.7%
PacificSource Community Solutions (Marion Polk)	PWO	21,287	\$ 612.97	\$ 617.83	0.8%
PacificSource Community Solutions (Marion Polk)	CHILD 00-01	36,817	\$ 1,084.75	\$ 1,013.43	-6.6%
PacificSource Community Solutions (Marion Polk)	CHILD 01-05	173,396	\$ 269.78	\$ 273.52	1.4%
PacificSource Community Solutions (Marion Polk)	CHILD 06-18	442,229	\$ 287.56	\$ 310.79	8.1%
PacificSource Community Solutions (Marion Polk)	DUAL-MEDS	91,355	\$ 322.67	\$ 361.13	11.9%
PacificSource Community Solutions (Marion Polk)	ABAD & OAA	70,652	\$ 1,762.21	\$ 1,862.34	5.7%
PacificSource Community Solutions (Marion Polk)	FOSTER	12,624	\$ 786.32	\$ 858.32	9.2%
PacificSource Community Solutions (Marion Polk)	ACA 19-34	265,954	\$ 442.66	\$ 487.20	10.1%
PacificSource Community Solutions (Marion Polk)	ACA 35-44	116,242	\$ 752.68	\$ 790.95	5.1%
PacificSource Community Solutions (Marion Polk)	ACA 45-54	86,689	\$ 989.84	\$ 1,041.18	5.2%
PacificSource Community Solutions (Marion Polk)	ACA 55-64	81,885	\$ 1,122.26	\$ 1,209.74	7.8%
PacificSource Community Solutions (Marion Polk)	BBM 19-34	688	\$ 442.27	\$ 557.82	26.1%
PacificSource Community Solutions (Marion Polk)	BBM 35-44	428	\$ 752.29	\$ 927.16	23.2%
PacificSource Community Solutions (Marion Polk)	BBM 45-54	214	\$ 989.45	\$ 1,133.88	14.6%
PacificSource Community Solutions (Marion Polk)	BBM 55-64	142	\$ 1,121.87	\$ 1,364.92	21.7%
PacificSource Community Solutions (Marion Polk)	YSHCN	5,336	\$ 555.69	\$ 548.13	-1.4%
PacificSource Community Solutions (Marion Polk)	BCCP	103	\$ 1,762.21	\$ 1,862.34	5.7%
PacificSource Community Solutions (Marion Polk)	Maternity	1,829	\$ 17,311.55	\$ 16,047.56	-7.3%
PacificSource Community Solutions (Marion Polk)	Total	1,517,032	\$ 583.79	\$ 615.78	5.5%
PacificSource Community Solutions (Marion Polk)	Total (Non-Maternity)	1,517,032	\$ 562.92	\$ 596.43	6.0%
Trillium Community Health Plan, Inc. (Tri-County)	PCR	35,560	\$ 475.41	\$ 514.45	8.2%
Trillium Community Health Plan, Inc. (Tri-County)	PWO	6,325	\$ 515.90	\$ 543.34	5.3%
Trillium Community Health Plan, Inc. (Tri-County)	CHILD 00-01	7,875	\$ 951.00	\$ 1,054.83	10.9%
Trillium Community Health Plan, Inc. (Tri-County)	CHILD 01-05	40,217	\$ 196.69	\$ 229.97	16.9%
Trillium Community Health Plan, Inc. (Tri-County)	CHILD 06-18	88,357	\$ 249.23	\$ 245.34	-1.6%
Trillium Community Health Plan, Inc. (Tri-County)	DUAL-MEDS	37,541	\$ 341.10	\$ 311.63	-8.6%
Trillium Community Health Plan, Inc. (Tri-County)	ABAD & OAA	17,349	\$ 1,433.18	\$ 1,530.19	6.8%
Trillium Community Health Plan, Inc. (Tri-County)	FOSTER	1,470	\$ 1,159.27	\$ 1,050.12	-9.4%
Trillium Community Health Plan, Inc. (Tri-County)	ACA 19-34	168,471	\$ 362.29	\$ 412.41	13.8%
Trillium Community Health Plan, Inc. (Tri-County)	ACA 35-44	83,605	\$ 486.49	\$ 560.80	15.3%
Trillium Community Health Plan, Inc. (Tri-County)	ACA 45-54	52,387	\$ 627.82	\$ 686.73	9.4%
Trillium Community Health Plan, Inc. (Tri-County)	ACA 55-64	47,757	\$ 747.21	\$ 814.60	9.0%
Trillium Community Health Plan, Inc. (Tri-County)	BBM 19-34	99	\$ 361.87	\$ 478.94	32.4%
Trillium Community Health Plan, Inc. (Tri-County)	BBM 35-44	63	\$ 483.08	\$ 709.68	46.9%
Trillium Community Health Plan, Inc. (Tri-County)	BBM 45-54	32	\$ 623.53	\$ 867.00	39.0%
Trillium Community Health Plan, Inc. (Tri-County)	BBM 55-64	3	\$ 746.79	\$ 929.19	24.4%
Trillium Community Health Plan, Inc. (Tri-County)	YSHCN	1,032	\$ 564.39	\$ 524.64	-7.0%
Trillium Community Health Plan, Inc. (Tri-County)	BCCP	30	\$ 1,433.18	\$ 1,530.19	6.8%
Trillium Community Health Plan, Inc. (Tri-County)	Maternity	426	\$ 16,297.41	\$ 13,404.04	-17.8%
Trillium Community Health Plan, Inc. (Tri-County)	Total	588,172	\$ 467.38	\$ 507.36	8.6%
Trillium Community Health Plan, Inc. (Tri-County)	Total (Non-Maternity)	588,172	\$ 455.58	\$ 497.65	9.2%

CY27 CCO Rate Certification

Appendix A: Comparison to CY26 Rates

CCO	COA	Projected Caseload ¹	CY26 Rate: Excl. MCO Tax	CY27 Rate: Excl. MCO Tax	Percentage Difference
Trillium Community Health Plan, Inc. (Southwest)	PCR	93,365	\$ 626.15	\$ 684.06	9.2%
Trillium Community Health Plan, Inc. (Southwest)	PWO	16,530	\$ 564.50	\$ 569.05	0.8%
Trillium Community Health Plan, Inc. (Southwest)	CHILD 00-01	21,413	\$ 1,186.32	\$ 1,258.36	6.1%
Trillium Community Health Plan, Inc. (Southwest)	CHILD 01-05	109,977	\$ 232.37	\$ 245.42	5.6%
Trillium Community Health Plan, Inc. (Southwest)	CHILD 06-18	283,897	\$ 307.57	\$ 311.88	1.4%
Trillium Community Health Plan, Inc. (Southwest)	DUAL-MEDS	106,419	\$ 277.55	\$ 329.54	18.7%
Trillium Community Health Plan, Inc. (Southwest)	ABAD & OAA	73,080	\$ 1,615.86	\$ 1,667.63	3.2%
Trillium Community Health Plan, Inc. (Southwest)	FOSTER	20,257	\$ 878.06	\$ 1,069.05	21.8%
Trillium Community Health Plan, Inc. (Southwest)	ACA 19-34	268,408	\$ 443.81	\$ 480.27	8.2%
Trillium Community Health Plan, Inc. (Southwest)	ACA 35-44	141,763	\$ 653.09	\$ 674.46	3.3%
Trillium Community Health Plan, Inc. (Southwest)	ACA 45-54	103,449	\$ 820.69	\$ 836.16	1.9%
Trillium Community Health Plan, Inc. (Southwest)	ACA 55-64	90,471	\$ 938.58	\$ 989.98	5.5%
Trillium Community Health Plan, Inc. (Southwest)	BBM 19-34	776	\$ 443.39	\$ 527.94	19.1%
Trillium Community Health Plan, Inc. (Southwest)	BBM 35-44	298	\$ 652.67	\$ 787.10	20.6%
Trillium Community Health Plan, Inc. (Southwest)	BBM 45-54	230	\$ 820.27	\$ 954.86	16.4%
Trillium Community Health Plan, Inc. (Southwest)	BBM 55-64	215	\$ 938.16	\$ 1,063.09	13.3%
Trillium Community Health Plan, Inc. (Southwest)	YSHCN	4,445	\$ 559.92	\$ 500.23	-10.7%
Trillium Community Health Plan, Inc. (Southwest)	BCCP	53	\$ 1,615.86	\$ 1,667.63	3.2%
Trillium Community Health Plan, Inc. (Southwest)	Maternity	1,189	\$ 14,348.63	\$ 11,931.27	-16.8%
Trillium Community Health Plan, Inc.	Total	1,335,047	\$ 579.43	\$ 608.61	5.0%
Trillium Community Health Plan, Inc.	Total (Non-Maternity)	1,335,047	\$ 566.65	\$ 597.98	5.5%
Umpqua Health Alliance	PCR	33,217	\$ 661.22	\$ 725.04	9.7%
Umpqua Health Alliance	PWO	5,382	\$ 552.85	\$ 569.40	3.0%
Umpqua Health Alliance	CHILD 00-01	7,812	\$ 1,161.08	\$ 1,242.69	7.0%
Umpqua Health Alliance	CHILD 01-05	38,228	\$ 216.66	\$ 246.49	13.8%
Umpqua Health Alliance	CHILD 06-18	94,062	\$ 328.82	\$ 362.40	10.2%
Umpqua Health Alliance	DUAL-MEDS	30,162	\$ 276.42	\$ 312.67	13.1%
Umpqua Health Alliance	ABAD & OAA	24,196	\$ 1,574.09	\$ 1,613.68	2.5%
Umpqua Health Alliance	FOSTER	7,448	\$ 864.79	\$ 835.66	-3.4%
Umpqua Health Alliance	ACA 19-34	66,893	\$ 471.89	\$ 508.42	7.7%
Umpqua Health Alliance	ACA 35-44	40,650	\$ 720.39	\$ 726.37	0.8%
Umpqua Health Alliance	ACA 45-54	31,920	\$ 846.39	\$ 906.44	7.1%
Umpqua Health Alliance	ACA 55-64	30,933	\$ 961.44	\$ 1,030.21	7.2%
Umpqua Health Alliance	BBM 19-34	233	\$ 471.35	\$ 749.94	59.1%
Umpqua Health Alliance	BBM 35-44	129	\$ 719.85	\$ 1,008.58	40.1%
Umpqua Health Alliance	BBM 45-54	176	\$ 845.85	\$ 1,405.77	66.2%
Umpqua Health Alliance	BBM 55-64	13	\$ 960.90	\$ 1,400.90	45.8%
Umpqua Health Alliance	YSHCN	1,360	\$ 557.23	\$ 514.71	-7.6%
Umpqua Health Alliance	BCCP	35	\$ 1,574.09	\$ 1,613.68	2.5%
Umpqua Health Alliance	Maternity	455	\$ 14,069.19	\$ 11,902.95	-15.4%
Umpqua Health Alliance	Total	412,848	\$ 608.63	\$ 644.66	5.9%
Umpqua Health Alliance	Total (Non-Maternity)	412,848	\$ 593.12	\$ 631.54	6.5%
Yamhill Community Care	PCR	27,031	\$ 688.47	\$ 788.39	14.5%
Yamhill Community Care	PWO	4,718	\$ 632.43	\$ 663.43	4.9%
Yamhill Community Care	CHILD 00-01	7,687	\$ 1,118.72	\$ 942.96	-15.7%
Yamhill Community Care	CHILD 01-05	38,272	\$ 268.31	\$ 287.82	7.3%
Yamhill Community Care	CHILD 06-18	100,406	\$ 317.15	\$ 348.12	9.8%
Yamhill Community Care	DUAL-MEDS	25,509	\$ 332.71	\$ 390.86	17.5%
Yamhill Community Care	ABAD & OAA	13,916	\$ 2,025.60	\$ 2,287.36	12.9%
Yamhill Community Care	FOSTER	2,961	\$ 809.21	\$ 809.30	0.0%
Yamhill Community Care	ACA 19-34	64,698	\$ 451.18	\$ 507.78	12.5%
Yamhill Community Care	ACA 35-44	30,859	\$ 772.71	\$ 832.50	7.7%
Yamhill Community Care	ACA 45-54	23,399	\$ 1,004.13	\$ 1,073.00	6.9%
Yamhill Community Care	ACA 55-64	23,831	\$ 1,148.95	\$ 1,336.33	16.3%
Yamhill Community Care	BBM 19-34	115	\$ 450.64	\$ 578.28	28.3%
Yamhill Community Care	BBM 35-44	88	\$ 772.18	\$ 995.47	28.9%
Yamhill Community Care	BBM 45-54	16	\$ 1,003.59	\$ 1,134.98	13.1%
Yamhill Community Care	BBM 55-64	74	\$ 1,148.41	\$ 1,756.43	52.9%
Yamhill Community Care	YSHCN	1,376	\$ 570.71	\$ 578.36	1.3%
Yamhill Community Care	BCCP	27	\$ 2,025.60	\$ 2,287.36	12.9%
Yamhill Community Care	Maternity	366	\$ 19,541.30	\$ 18,671.56	-4.5%
Yamhill Community Care	Total	364,983	\$ 612.36	\$ 672.21	9.8%
Yamhill Community Care	Total (Non-Maternity)	364,983	\$ 592.76	\$ 653.48	10.2%

CY27 CCO Rate Certification

Appendix A: Comparison to CY26 Rates

CCO	COA	Projected Caseload ¹	CY26 Rate: Excl. MCO Tax	CY27 Rate: Excl. MCO Tax	Percentage Difference
Statewide	PCR	1,000,132	\$ 663.35	\$ 700.27	5.6%
Statewide	PWO	173,488	\$ 582.23	\$ 598.94	2.9%
Statewide	CHILD 00-01	270,676	\$ 1,083.03	\$ 1,143.35	5.6%
Statewide	CHILD 01-05	1,284,424	\$ 248.75	\$ 266.45	7.1%
Statewide	CHILD 06-18	3,305,236	\$ 302.21	\$ 316.67	4.8%
Statewide	DUAL-MEDS	929,174	\$ 327.59	\$ 351.44	7.3%
Statewide	ABAD & OAA	635,242	\$ 1,789.05	\$ 1,841.60	2.9%
Statewide	FOSTER	153,448	\$ 976.57	\$ 981.80	0.5%
Statewide	ACA 19-34	2,584,834	\$ 456.36	\$ 499.98	9.6%
Statewide	ACA 35-44	1,379,913	\$ 679.14	\$ 725.50	6.8%
Statewide	ACA 45-54	996,292	\$ 874.55	\$ 925.03	5.8%
Statewide	ACA 55-64	916,954	\$ 1,001.06	\$ 1,078.96	7.8%
Statewide	BBM 19-34	5,902	\$ 465.44	\$ 584.38	25.6%
Statewide	BBM 35-44	3,546	\$ 700.69	\$ 879.77	25.6%
Statewide	BBM 45-54	2,089	\$ 891.49	\$ 1,151.58	29.2%
Statewide	BBM 55-64	1,170	\$ 1,015.34	\$ 1,269.03	25.0%
Statewide	YSHCN	44,469	\$ 566.66	\$ 543.21	-4.1%
Statewide	BCCP	686	\$ 1,787.09	\$ 1,842.05	3.1%
Statewide	Maternity	14,121	\$ 16,353.38	\$ 14,259.21	-12.8%
Statewide	Total	13,687,677	\$ 594.57	\$ 627.68	5.6%
Statewide	Total (Non-Maternity)	13,687,677	\$ 577.70	\$ 612.96	6.1%

General Note:

- This appendix should be reviewed in conjunction with the accompanying rate certification narrative.

Footnote:

1. Reflects CCOA projected enrollment. Values for maternity represent CY 2025 delivery counts.

Appendix B: Statewide Rate Buildup

CY27 CCO Rate Certification

Appendix B: CCOA and CCOB Statewide Rate Buildup

COA	COS	2025 Base Data				Annual Trend			PMPM Subtotal	Program Changes - PMPM		
		Member Months ¹	Base PMPM: Clinical Efficiencies Removed ²	Clinical Efficiencies TEL Adjustment ³	Final Base PMPM	Util/1,000	Unit Cost	PMPM		Benefits Update Project	Health Evidence Research Committee	Statewide Rate PMPM
PCR	Inpatient-A/B Hospital	965,386	\$ 6.23	\$ 0.24	\$ 6.47	5.0%	1.3%	6.3%	\$ 7.31	\$ -	\$ -	\$ 7.31
PCR	Inpatient-DRG Hospital	965,386	\$ 39.99	\$ 1.43	\$ 41.43	1.0%	1.3%	2.3%	\$ 43.32	\$ -	\$ 0.43	\$ 43.75
PCR	Inpatient-Other Hospital	965,386	\$ 2.89	\$ 0.10	\$ 2.99	0.5%	1.3%	1.8%	\$ 3.10	\$ -	\$ 0.07	\$ 3.17
PCR	Outpatient-A/B Hospital	965,386	\$ 16.98	\$ -	\$ 16.98	3.0%	4.0%	7.1%	\$ 19.48	\$ 0.12	\$ (0.05)	\$ 19.55
PCR	Outpatient-DRG Hospital	965,386	\$ 38.30	\$ -	\$ 38.30	3.0%	4.0%	7.1%	\$ 43.95	\$ 0.31	\$ 0.61	\$ 44.87
PCR	Outpatient-Other Hospital	965,386	\$ 12.86	\$ -	\$ 12.86	3.0%	4.0%	7.1%	\$ 14.75	\$ 0.12	\$ 0.05	\$ 14.92
PCR	Emergency Department-A/B Hospital	965,386	\$ 18.52	\$ 1.06	\$ 19.58	2.5%	4.0%	6.6%	\$ 22.25	\$ -	\$ -	\$ 22.25
PCR	Emergency Department-DRG Hospital	965,386	\$ 19.67	\$ 1.25	\$ 20.93	2.5%	4.0%	6.6%	\$ 23.78	\$ -	\$ -	\$ 23.78
PCR	Emergency Department-Other Hospital	965,386	\$ 1.36	\$ 0.07	\$ 1.43	2.5%	4.0%	6.6%	\$ 1.63	\$ -	\$ -	\$ 1.63
PCR	Physician Services	965,386	\$ 115.20	\$ (0.71)	\$ 114.48	4.0%	1.0%	5.0%	\$ 126.31	\$ 0.64	\$ (0.08)	\$ 126.87
PCR	DME and Miscellaneous	965,386	\$ 25.29	\$ -	\$ 25.29	3.0%	1.0%	4.0%	\$ 27.37	\$ 0.74	\$ 0.01	\$ 28.12
PCR	Substance Use	965,386	\$ 21.37	\$ -	\$ 21.37	3.5%	4.0%	7.6%	\$ 24.76	\$ -	\$ -	\$ 24.76
PCR	Prescription Drugs	965,386	\$ 84.23	\$ -	\$ 84.23	1.9%	4.2%	6.2%	\$ 95.05	\$ 2.04	\$ 0.77	\$ 97.86
PCR	Mental Health Services Inpatient	965,386	\$ 5.12	\$ -	\$ 5.12	1.0%	1.3%	2.3%	\$ 5.36	\$ -	\$ -	\$ 5.36
PCR	SUD Residential	965,386	\$ 12.63	\$ -	\$ 12.63	1.0%	1.3%	2.3%	\$ 13.21	\$ -	\$ -	\$ 13.21
PCR	ACT/SE	965,386	\$ 1.27	\$ -	\$ 1.27	3.5%	4.0%	7.6%	\$ 1.48	\$ -	\$ -	\$ 1.48
PCR	Applied Behavior Analysis (ABA)	965,386	\$ 0.00	\$ -	\$ 0.00	3.5%	4.0%	7.6%	\$ 0.00	\$ -	\$ -	\$ 0.00
PCR	MH Children's Wraparound	965,386	\$ 1.25	\$ -	\$ 1.25	3.5%	4.0%	7.6%	\$ 1.45	\$ -	\$ -	\$ 1.45
PCR	Mental Health Other Non-Inpatient	965,386	\$ 90.16	\$ -	\$ 90.16	3.5%	4.0%	7.6%	\$ 104.46	\$ 1.47	\$ -	\$ 105.93
PCR	NEMT	965,386	\$ 10.14	\$ -	\$ 10.14	3.0%	1.0%	4.0%	\$ 10.97	\$ -	\$ -	\$ 10.97
PWO	Inpatient-A/B Hospital	172,972	\$ 2.63	\$ 0.01	\$ 2.63	5.0%	1.3%	6.3%	\$ 2.98	\$ -	\$ -	\$ 2.98
PWO	Inpatient-DRG Hospital	172,972	\$ 15.50	\$ 0.13	\$ 15.63	1.0%	1.3%	2.3%	\$ 16.34	\$ -	\$ 0.10	\$ 16.44
PWO	Inpatient-Other Hospital	172,972	\$ 0.39	\$ 0.00	\$ 0.39	0.5%	1.3%	1.8%	\$ 0.41	\$ -	\$ 0.02	\$ 0.42
PWO	Outpatient-A/B Hospital	172,972	\$ 10.28	\$ -	\$ 10.28	1.0%	4.0%	5.0%	\$ 11.35	\$ 0.13	\$ (0.20)	\$ 11.27
PWO	Outpatient-DRG Hospital	172,972	\$ 24.89	\$ -	\$ 24.89	1.0%	4.0%	5.0%	\$ 27.46	\$ 0.31	\$ 0.09	\$ 27.86
PWO	Outpatient-Other Hospital	172,972	\$ 6.55	\$ -	\$ 6.55	1.0%	4.0%	5.0%	\$ 7.23	\$ 0.12	\$ 0.01	\$ 7.36
PWO	Emergency Department-A/B Hospital	172,972	\$ 10.92	\$ 0.76	\$ 11.67	2.5%	4.0%	6.6%	\$ 13.27	\$ -	\$ -	\$ 13.27
PWO	Emergency Department-DRG Hospital	172,972	\$ 14.08	\$ 0.97	\$ 15.05	2.5%	4.0%	6.6%	\$ 17.11	\$ -	\$ -	\$ 17.11
PWO	Emergency Department-Other Hospital	172,972	\$ 0.84	\$ 0.05	\$ 0.89	2.5%	4.0%	6.6%	\$ 1.01	\$ -	\$ -	\$ 1.01
PWO	Physician Services	172,972	\$ 174.60	\$ (0.53)	\$ 174.07	4.0%	1.0%	5.0%	\$ 192.06	\$ 0.47	\$ (0.65)	\$ 191.89
PWO	DME and Miscellaneous	172,972	\$ 32.44	\$ -	\$ 32.44	3.0%	1.0%	4.0%	\$ 35.11	\$ 0.83	\$ 0.00	\$ 35.94
PWO	Substance Use	172,972	\$ 16.38	\$ -	\$ 16.38	3.5%	4.0%	7.6%	\$ 18.97	\$ -	\$ -	\$ 18.97
PWO	Prescription Drugs	172,972	\$ 35.92	\$ -	\$ 35.92	1.9%	5.6%	7.5%	\$ 41.53	\$ 1.97	\$ 0.20	\$ 43.69
PWO	Mental Health Services Inpatient	172,972	\$ 5.20	\$ -	\$ 5.20	1.0%	1.3%	2.3%	\$ 5.44	\$ -	\$ -	\$ 5.44
PWO	SUD Residential	172,972	\$ 21.41	\$ -	\$ 21.41	1.0%	1.3%	2.3%	\$ 22.39	\$ -	\$ -	\$ 22.39
PWO	ACT/SE	172,972	\$ 0.87	\$ -	\$ 0.87	3.5%	4.0%	7.6%	\$ 1.01	\$ -	\$ -	\$ 1.01
PWO	Applied Behavior Analysis (ABA)	172,972	\$ -	\$ -	\$ -	3.5%	4.0%	7.6%	\$ -	\$ -	\$ -	\$ -
PWO	MH Children's Wraparound	172,972	\$ 0.78	\$ -	\$ 0.78	3.5%	4.0%	7.6%	\$ 0.91	\$ -	\$ -	\$ 0.91
PWO	Mental Health Other Non-Inpatient	172,972	\$ 73.81	\$ -	\$ 73.81	3.5%	4.0%	7.6%	\$ 85.52	\$ 0.68	\$ -	\$ 86.20
PWO	NEMT	172,972	\$ 7.93	\$ -	\$ 7.93	3.0%	1.0%	4.0%	\$ 8.58	\$ -	\$ -	\$ 8.58

CY27 CCO Rate Certification
Appendix B: CCOA and CCOB Statewide Rate Buildup

COA	COS	2025 Base Data				Annual Trend			PMPM Subtotal	Program Changes - PMPM		
		Member Months ¹	Base PMPM: Clinical Efficiencies Removed ²	Clinical Efficiencies TEL Adjustment ³	Final Base PMPM	Util/1,000	Unit Cost	PMPM		Benefits Update Project	Health Evidence Research Committee	Statewide Rate PMPM
CHILD 00-01	Inpatient-A/B Hospital	267,168	\$ 46.61	\$ 0.01	\$ 46.62	3.0%	1.3%	4.3%	\$ 50.71	\$ -	\$ -	\$ 50.71
CHILD 00-01	Inpatient-DRG Hospital	267,168	\$ 556.33	\$ 0.26	\$ 556.59	0.5%	1.3%	1.8%	\$ 576.31	\$ -	\$ 0.03	\$ 576.34
CHILD 00-01	Inpatient-Other Hospital	267,168	\$ 63.95	\$ 0.00	\$ 63.95	0.5%	1.3%	1.8%	\$ 66.21	\$ -	\$ -	\$ 66.21
CHILD 00-01	Outpatient-A/B Hospital	267,168	\$ 2.90	\$ -	\$ 2.90	2.5%	2.0%	4.5%	\$ 3.17	\$ 0.08	\$ (0.15)	\$ 3.10
CHILD 00-01	Outpatient-DRG Hospital	267,168	\$ 18.88	\$ -	\$ 18.88	2.5%	2.0%	4.5%	\$ 20.63	\$ 0.19	\$ 0.29	\$ 21.11
CHILD 00-01	Outpatient-Other Hospital	267,168	\$ 1.53	\$ -	\$ 1.53	2.5%	2.0%	4.5%	\$ 1.67	\$ 0.07	\$ 0.01	\$ 1.75
CHILD 00-01	Emergency Department-A/B Hospital	267,168	\$ 9.73	\$ 0.76	\$ 10.50	2.5%	2.0%	4.5%	\$ 11.47	\$ -	\$ -	\$ 11.47
CHILD 00-01	Emergency Department-DRG Hospital	267,168	\$ 14.00	\$ 1.33	\$ 15.33	2.5%	2.0%	4.5%	\$ 16.76	\$ -	\$ -	\$ 16.76
CHILD 00-01	Emergency Department-Other Hospital	267,168	\$ 0.64	\$ 0.05	\$ 0.68	2.5%	2.0%	4.5%	\$ 0.75	\$ -	\$ -	\$ 0.75
CHILD 00-01	Physician Services	267,168	\$ 188.31	\$ (0.73)	\$ 187.57	2.0%	2.0%	4.0%	\$ 203.03	\$ 0.59	\$ (0.72)	\$ 202.91
CHILD 00-01	DME and Miscellaneous	267,168	\$ 23.27	\$ -	\$ 23.27	4.5%	1.0%	5.5%	\$ 25.92	\$ 0.13	\$ -	\$ 26.06
CHILD 00-01	Substance Use	267,168	\$ 0.31	\$ -	\$ 0.31	4.5%	1.0%	5.5%	\$ 0.35	\$ -	\$ -	\$ 0.35
CHILD 00-01	Prescription Drugs	267,168	\$ 6.11	\$ -	\$ 6.11	1.4%	5.0%	6.4%	\$ 6.93	\$ 3.47	\$ 0.03	\$ 10.43
CHILD 00-01	Mental Health Services Inpatient	267,168	\$ 1.36	\$ -	\$ 1.36	3.0%	1.3%	4.3%	\$ 1.48	\$ -	\$ -	\$ 1.48
CHILD 00-01	SUD Residential	267,168	\$ 0.10	\$ -	\$ 0.10	3.0%	1.3%	4.3%	\$ 0.11	\$ -	\$ -	\$ 0.11
CHILD 00-01	ACT/SE	267,168	\$ 0.06	\$ -	\$ 0.06	4.5%	1.0%	5.5%	\$ 0.07	\$ -	\$ -	\$ 0.07
CHILD 00-01	Applied Behavior Analysis (ABA)	267,168	\$ 0.19	\$ -	\$ 0.19	4.5%	1.0%	5.5%	\$ 0.22	\$ -	\$ -	\$ 0.22
CHILD 00-01	MH Children's Wraparound	267,168	\$ 0.72	\$ -	\$ 0.72	4.5%	1.0%	5.5%	\$ 0.80	\$ -	\$ -	\$ 0.80
CHILD 00-01	Mental Health Other Non-Inpatient	267,168	\$ 14.01	\$ -	\$ 14.01	4.5%	1.0%	5.5%	\$ 15.61	\$ 0.00	\$ -	\$ 15.61
CHILD 00-01	NEMT	267,168	\$ 4.12	\$ -	\$ 4.12	4.5%	1.0%	5.5%	\$ 4.59	\$ -	\$ -	\$ 4.59
CHILD 01-05	Inpatient-A/B Hospital	1,250,064	\$ 0.24	\$ 0.00	\$ 0.24	3.0%	1.3%	4.3%	\$ 0.27	\$ -	\$ -	\$ 0.27
CHILD 01-05	Inpatient-DRG Hospital	1,250,064	\$ 12.68	\$ 0.26	\$ 12.94	0.5%	1.3%	1.8%	\$ 13.39	\$ -	\$ 0.01	\$ 13.40
CHILD 01-05	Inpatient-Other Hospital	1,250,064	\$ 0.76	\$ 0.01	\$ 0.77	0.5%	1.3%	1.8%	\$ 0.79	\$ -	\$ -	\$ 0.79
CHILD 01-05	Outpatient-A/B Hospital	1,250,064	\$ 2.59	\$ -	\$ 2.59	2.5%	2.0%	4.5%	\$ 2.83	\$ 0.17	\$ (0.07)	\$ 2.94
CHILD 01-05	Outpatient-DRG Hospital	1,250,064	\$ 12.10	\$ -	\$ 12.10	2.5%	2.0%	4.5%	\$ 13.22	\$ 0.43	\$ 0.09	\$ 13.75
CHILD 01-05	Outpatient-Other Hospital	1,250,064	\$ 3.94	\$ -	\$ 3.94	2.5%	2.0%	4.5%	\$ 4.31	\$ 0.17	\$ 0.00	\$ 4.48
CHILD 01-05	Emergency Department-A/B Hospital	1,250,064	\$ 5.58	\$ 0.61	\$ 6.19	2.5%	2.0%	4.5%	\$ 6.77	\$ -	\$ -	\$ 6.77
CHILD 01-05	Emergency Department-DRG Hospital	1,250,064	\$ 6.70	\$ 0.87	\$ 7.57	2.5%	2.0%	4.5%	\$ 8.27	\$ -	\$ -	\$ 8.27
CHILD 01-05	Emergency Department-Other Hospital	1,250,064	\$ 0.37	\$ 0.04	\$ 0.41	2.5%	2.0%	4.5%	\$ 0.44	\$ -	\$ -	\$ 0.44
CHILD 01-05	Physician Services	1,250,064	\$ 57.89	\$ (0.51)	\$ 57.39	2.0%	2.0%	4.0%	\$ 62.12	\$ 0.90	\$ (0.31)	\$ 62.70
CHILD 01-05	DME and Miscellaneous	1,250,064	\$ 18.21	\$ -	\$ 18.21	4.5%	1.0%	5.5%	\$ 20.29	\$ 0.23	\$ -	\$ 20.52
CHILD 01-05	Substance Use	1,250,064	\$ 0.36	\$ -	\$ 0.36	4.5%	1.0%	5.5%	\$ 0.40	\$ -	\$ -	\$ 0.40
CHILD 01-05	Prescription Drugs	1,250,064	\$ 12.82	\$ -	\$ 12.82	1.4%	8.1%	9.6%	\$ 15.41	\$ 1.20	\$ 0.02	\$ 16.63
CHILD 01-05	Mental Health Services Inpatient	1,250,064	\$ 2.58	\$ -	\$ 2.58	3.0%	1.3%	4.3%	\$ 2.81	\$ -	\$ -	\$ 2.81
CHILD 01-05	SUD Residential	1,250,064	\$ 0.10	\$ -	\$ 0.10	3.0%	1.3%	4.3%	\$ 0.11	\$ -	\$ -	\$ 0.11
CHILD 01-05	ACT/SE	1,250,064	\$ 0.06	\$ -	\$ 0.06	4.5%	1.0%	5.5%	\$ 0.07	\$ -	\$ -	\$ 0.07
CHILD 01-05	Applied Behavior Analysis (ABA)	1,250,064	\$ 15.44	\$ -	\$ 15.44	12.3%	1.0%	13.4%	\$ 19.85	\$ -	\$ -	\$ 19.85
CHILD 01-05	MH Children's Wraparound	1,250,064	\$ 3.06	\$ -	\$ 3.06	4.5%	1.0%	5.5%	\$ 3.41	\$ -	\$ -	\$ 3.41
CHILD 01-05	Mental Health Other Non-Inpatient	1,250,064	\$ 19.73	\$ -	\$ 19.73	4.5%	1.0%	5.5%	\$ 21.98	\$ 0.03	\$ -	\$ 22.01
CHILD 01-05	NEMT	1,250,064	\$ 3.10	\$ -	\$ 3.10	4.5%	1.0%	5.5%	\$ 3.45	\$ -	\$ -	\$ 3.45

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Appendix B: CCOA and CCOB Statewide Rate Buildup

COA	COS	2025 Base Data				Annual Trend			PMPM Subtotal	Program Changes - PMPM		
		Member Months ¹	Base PMPM: Clinical Efficiencies Removed ²	Clinical Efficiencies TEL Adjustment ³	Final Base PMPM	Util/1,000	Unit Cost	PMPM		Benefits Update Project	Health Evidence Research Committee	Statewide Rate PMPM
CHILD 06-18	Inpatient-A/B Hospital	3,481,085	\$ 0.34	\$ 0.01	\$ 0.35	3.0%	1.3%	4.3%	\$ 0.38	\$ -	\$ -	\$ 0.38
CHILD 06-18	Inpatient-DRG Hospital	3,481,085	\$ 9.67	\$ 0.11	\$ 9.78	0.5%	1.3%	1.8%	\$ 10.13	\$ -	\$ 0.01	\$ 10.13
CHILD 06-18	Inpatient-Other Hospital	3,481,085	\$ 0.83	\$ 0.02	\$ 0.84	0.5%	1.3%	1.8%	\$ 0.87	\$ -	\$ -	\$ 0.87
CHILD 06-18	Outpatient-A/B Hospital	3,481,085	\$ 3.50	\$ -	\$ 3.50	2.5%	2.0%	4.5%	\$ 3.82	\$ 0.14	\$ (0.05)	\$ 3.91
CHILD 06-18	Outpatient-DRG Hospital	3,481,085	\$ 12.43	\$ -	\$ 12.43	2.5%	2.0%	4.5%	\$ 13.59	\$ 0.34	\$ 0.15	\$ 14.08
CHILD 06-18	Outpatient-Other Hospital	3,481,085	\$ 2.88	\$ -	\$ 2.88	2.5%	2.0%	4.5%	\$ 3.14	\$ 0.14	\$ 0.00	\$ 3.28
CHILD 06-18	Emergency Department-A/B Hospital	3,481,085	\$ 5.72	\$ 0.52	\$ 6.24	2.5%	2.0%	4.5%	\$ 6.82	\$ -	\$ -	\$ 6.82
CHILD 06-18	Emergency Department-DRG Hospital	3,481,085	\$ 5.84	\$ 0.57	\$ 6.41	2.5%	2.0%	4.5%	\$ 7.01	\$ -	\$ -	\$ 7.01
CHILD 06-18	Emergency Department-Other Hospital	3,481,085	\$ 0.33	\$ 0.03	\$ 0.36	2.5%	2.0%	4.5%	\$ 0.39	\$ -	\$ -	\$ 0.39
CHILD 06-18	Physician Services	3,481,085	\$ 47.61	\$ (0.38)	\$ 47.23	2.0%	2.0%	4.0%	\$ 51.12	\$ 0.64	\$ (0.01)	\$ 51.75
CHILD 06-18	DME and Miscellaneous	3,481,085	\$ 16.85	\$ -	\$ 16.85	4.5%	1.0%	5.5%	\$ 18.77	\$ 0.31	\$ -	\$ 19.09
CHILD 06-18	Substance Use	3,481,085	\$ 0.93	\$ -	\$ 0.93	4.5%	1.0%	5.5%	\$ 1.04	\$ -	\$ -	\$ 1.04
CHILD 06-18	Prescription Drugs	3,481,085	\$ 26.62	\$ -	\$ 26.62	1.4%	6.6%	8.1%	\$ 31.12	\$ 0.87	\$ 0.11	\$ 32.11
CHILD 06-18	Mental Health Services Inpatient	3,481,085	\$ 3.99	\$ -	\$ 3.99	3.0%	1.3%	4.3%	\$ 4.34	\$ -	\$ -	\$ 4.34
CHILD 06-18	SUD Residential	3,481,085	\$ 0.80	\$ -	\$ 0.80	3.0%	1.3%	4.3%	\$ 0.87	\$ -	\$ -	\$ 0.87
CHILD 06-18	ACT/SE	3,481,085	\$ 0.08	\$ -	\$ 0.08	4.5%	1.0%	5.5%	\$ 0.09	\$ -	\$ -	\$ 0.09
CHILD 06-18	Applied Behavior Analysis (ABA)	3,481,085	\$ 4.75	\$ -	\$ 4.75	12.3%	1.0%	13.4%	\$ 6.10	\$ -	\$ -	\$ 6.10
CHILD 06-18	MH Children's Wraparound	3,481,085	\$ 4.41	\$ -	\$ 4.41	4.5%	1.0%	5.5%	\$ 4.91	\$ -	\$ -	\$ 4.91
CHILD 06-18	Mental Health Other Non-Inpatient	3,481,085	\$ 68.62	\$ -	\$ 68.62	4.5%	1.0%	5.5%	\$ 76.44	\$ 0.21	\$ -	\$ 76.65
CHILD 06-18	NEMT	3,481,085	\$ 3.40	\$ -	\$ 3.40	4.5%	1.0%	5.5%	\$ 3.78	\$ -	\$ -	\$ 3.78
DUAL-MEDS	Inpatient-A/B Hospital	1,089,390	\$ 2.76	\$ -	\$ 2.76	1.0%	1.3%	2.3%	\$ 2.89	\$ -	\$ -	\$ 2.89
DUAL-MEDS	Inpatient-DRG Hospital	1,089,390	\$ 7.59	\$ -	\$ 7.59	1.0%	1.3%	2.3%	\$ 7.94	\$ -	\$ 0.06	\$ 8.00
DUAL-MEDS	Inpatient-Other Hospital	1,089,390	\$ 2.08	\$ -	\$ 2.08	1.0%	1.3%	2.3%	\$ 2.17	\$ -	\$ 0.01	\$ 2.18
DUAL-MEDS	Outpatient-A/B Hospital	1,089,390	\$ 12.89	\$ -	\$ 12.89	1.0%	2.0%	3.0%	\$ 13.68	\$ 0.01	\$ (0.03)	\$ 13.66
DUAL-MEDS	Outpatient-DRG Hospital	1,089,390	\$ 10.34	\$ -	\$ 10.34	1.0%	2.0%	3.0%	\$ 10.97	\$ 0.03	\$ (0.00)	\$ 11.00
DUAL-MEDS	Outpatient-Other Hospital	1,089,390	\$ 10.63	\$ -	\$ 10.63	1.0%	2.0%	3.0%	\$ 11.28	\$ 0.01	\$ (0.00)	\$ 11.29
DUAL-MEDS	Emergency Department-A/B Hospital	1,089,390	\$ 9.17	\$ -	\$ 9.17	1.0%	2.0%	3.0%	\$ 9.73	\$ -	\$ -	\$ 9.73
DUAL-MEDS	Emergency Department-DRG Hospital	1,089,390	\$ 3.32	\$ -	\$ 3.32	1.0%	2.0%	3.0%	\$ 3.52	\$ -	\$ -	\$ 3.52
DUAL-MEDS	Emergency Department-Other Hospital	1,089,390	\$ 0.14	\$ -	\$ 0.14	1.0%	2.0%	3.0%	\$ 0.15	\$ -	\$ -	\$ 0.15
DUAL-MEDS	Physician Services	1,089,390	\$ 51.06	\$ -	\$ 51.06	1.5%	1.5%	3.0%	\$ 54.19	\$ 0.12	\$ (0.07)	\$ 54.24
DUAL-MEDS	DME and Miscellaneous	1,089,390	\$ 28.05	\$ -	\$ 28.05	2.0%	1.0%	3.0%	\$ 29.77	\$ 0.22	\$ 0.00	\$ 29.99
DUAL-MEDS	Substance Use	1,089,390	\$ 5.14	\$ -	\$ 5.14	2.3%	2.0%	4.3%	\$ 5.59	\$ -	\$ -	\$ 5.59
DUAL-MEDS	Prescription Drugs	1,089,390	\$ 13.89	\$ -	\$ 13.89	0.5%	1.0%	1.5%	\$ 14.31	\$ 0.33	\$ 0.00	\$ 14.65
DUAL-MEDS	Mental Health Services Inpatient	1,089,390	\$ 3.68	\$ -	\$ 3.68	1.0%	1.3%	2.3%	\$ 3.85	\$ -	\$ -	\$ 3.85
DUAL-MEDS	SUD Residential	1,089,390	\$ 1.85	\$ -	\$ 1.85	1.0%	1.3%	2.3%	\$ 1.93	\$ -	\$ -	\$ 1.93
DUAL-MEDS	ACT/SE	1,089,390	\$ 3.81	\$ -	\$ 3.81	2.3%	2.0%	4.3%	\$ 4.14	\$ -	\$ -	\$ 4.14
DUAL-MEDS	Applied Behavior Analysis (ABA)	1,089,390	\$ 0.14	\$ -	\$ 0.14	2.3%	2.0%	4.3%	\$ 0.15	\$ -	\$ -	\$ 0.15
DUAL-MEDS	MH Children's Wraparound	1,089,390	\$ 0.86	\$ -	\$ 0.86	2.3%	2.0%	4.3%	\$ 0.93	\$ -	\$ -	\$ 0.93
DUAL-MEDS	Mental Health Other Non-Inpatient	1,089,390	\$ 48.40	\$ -	\$ 48.40	2.3%	2.0%	4.3%	\$ 52.64	\$ 0.87	\$ -	\$ 53.51
DUAL-MEDS	NEMT	1,089,390	\$ 52.67	\$ -	\$ 52.67	2.0%	1.0%	3.0%	\$ 55.90	\$ -	\$ -	\$ 55.90

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Appendix B: CCOA and CCOB Statewide Rate Buildup

COA	COS	2025 Base Data				Annual Trend			PMPM Subtotal	Program Changes - PMPM		
		Member Months ¹	Base PMPM: Clinical Efficiencies Removed ²	Clinical Efficiencies TEL Adjustment ³	Final Base PMPM	Util/1,000	Unit Cost	PMPM		Benefits Update Project	Health Evidence Research Committee	Statewide Rate PMPM
ABAD & OAA	Inpatient-A/B Hospital	613,282	\$ 30.53	\$ 1.41	\$ 31.94	0.5%	1.3%	1.8%	\$ 33.07	\$ -	\$ -	\$ 33.07
ABAD & OAA	Inpatient-DRG Hospital	613,282	\$ 189.68	\$ 8.64	\$ 198.32	0.5%	1.3%	1.8%	\$ 205.34	\$ -	\$ 1.12	\$ 206.46
ABAD & OAA	Inpatient-Other Hospital	613,282	\$ 20.89	\$ 0.83	\$ 21.72	0.5%	1.3%	1.8%	\$ 22.49	\$ -	\$ 0.20	\$ 22.69
ABAD & OAA	Outpatient-A/B Hospital	613,282	\$ 32.39	\$ -	\$ 32.39	2.0%	3.0%	5.1%	\$ 35.75	\$ 0.12	\$ 0.00	\$ 35.87
ABAD & OAA	Outpatient-DRG Hospital	613,282	\$ 101.07	\$ -	\$ 101.07	2.0%	3.0%	5.1%	\$ 111.55	\$ 0.29	\$ 0.97	\$ 112.82
ABAD & OAA	Outpatient-Other Hospital	613,282	\$ 59.98	\$ -	\$ 59.98	2.0%	3.0%	5.1%	\$ 66.21	\$ 0.12	\$ 0.07	\$ 66.40
ABAD & OAA	Emergency Department-A/B Hospital	613,282	\$ 29.14	\$ 1.19	\$ 30.32	2.0%	3.0%	5.1%	\$ 33.47	\$ -	\$ -	\$ 33.47
ABAD & OAA	Emergency Department-DRG Hospital	613,282	\$ 39.77	\$ 1.71	\$ 41.48	2.0%	3.0%	5.1%	\$ 45.78	\$ -	\$ -	\$ 45.78
ABAD & OAA	Emergency Department-Other Hospital	613,282	\$ 1.84	\$ 0.07	\$ 1.91	2.0%	3.0%	5.1%	\$ 2.11	\$ -	\$ -	\$ 2.11
ABAD & OAA	Physician Services	613,282	\$ 197.83	\$ (0.85)	\$ 196.98	1.5%	2.0%	3.5%	\$ 211.13	\$ 0.68	\$ 0.14	\$ 211.94
ABAD & OAA	DME and Miscellaneous	613,282	\$ 103.49	\$ -	\$ 103.49	3.5%	1.0%	4.5%	\$ 113.09	\$ 0.75	\$ 0.02	\$ 113.85
ABAD & OAA	Substance Use	613,282	\$ 17.70	\$ -	\$ 17.70	3.3%	2.0%	5.3%	\$ 19.63	\$ -	\$ -	\$ 19.63
ABAD & OAA	Prescription Drugs	613,282	\$ 366.51	\$ -	\$ 366.51	2.0%	3.6%	5.7%	\$ 409.72	\$ 3.20	\$ 0.92	\$ 413.84
ABAD & OAA	Mental Health Services Inpatient	613,282	\$ 26.92	\$ -	\$ 26.92	0.5%	1.3%	1.8%	\$ 27.87	\$ -	\$ -	\$ 27.87
ABAD & OAA	SUD Residential	613,282	\$ 5.11	\$ -	\$ 5.11	0.5%	1.3%	1.8%	\$ 5.29	\$ -	\$ -	\$ 5.29
ABAD & OAA	ACT/SE	613,282	\$ 6.64	\$ -	\$ 6.64	3.3%	2.0%	5.3%	\$ 7.37	\$ -	\$ -	\$ 7.37
ABAD & OAA	Applied Behavior Analysis (ABA)	613,282	\$ 28.68	\$ -	\$ 28.68	7.0%	2.0%	9.1%	\$ 34.17	\$ -	\$ -	\$ 34.17
ABAD & OAA	MH Children's Wraparound	613,282	\$ 3.59	\$ -	\$ 3.59	3.3%	2.0%	5.3%	\$ 3.98	\$ -	\$ -	\$ 3.98
ABAD & OAA	Mental Health Other Non-Inpatient	613,282	\$ 144.96	\$ -	\$ 144.96	3.3%	2.0%	5.3%	\$ 160.78	\$ 2.10	\$ -	\$ 162.88
ABAD & OAA	NEMT	613,282	\$ 40.46	\$ -	\$ 40.46	3.5%	1.0%	4.5%	\$ 44.21	\$ -	\$ -	\$ 44.21
FOSTER	Inpatient-A/B Hospital	153,924	\$ 1.09	\$ -	\$ 1.09	0.5%	1.8%	2.3%	\$ 1.14	\$ -	\$ -	\$ 1.14
FOSTER	Inpatient-DRG Hospital	153,924	\$ 24.28	\$ 0.25	\$ 24.54	0.5%	1.8%	2.3%	\$ 25.66	\$ -	\$ 0.01	\$ 25.67
FOSTER	Inpatient-Other Hospital	153,924	\$ 0.43	\$ -	\$ 0.43	0.5%	1.8%	2.3%	\$ 0.45	\$ -	\$ -	\$ 0.45
FOSTER	Outpatient-A/B Hospital	153,924	\$ 6.20	\$ -	\$ 6.20	2.5%	2.0%	4.5%	\$ 6.77	\$ 0.17	\$ (0.07)	\$ 6.87
FOSTER	Outpatient-DRG Hospital	153,924	\$ 20.91	\$ -	\$ 20.91	2.5%	2.0%	4.5%	\$ 22.86	\$ 0.43	\$ 0.11	\$ 23.41
FOSTER	Outpatient-Other Hospital	153,924	\$ 7.00	\$ -	\$ 7.00	8.0%	2.0%	10.2%	\$ 8.49	\$ 0.17	\$ 0.00	\$ 8.66
FOSTER	Emergency Department-A/B Hospital	153,924	\$ 7.73	\$ 0.58	\$ 8.31	2.5%	2.0%	4.5%	\$ 9.08	\$ -	\$ -	\$ 9.08
FOSTER	Emergency Department-DRG Hospital	153,924	\$ 11.71	\$ 0.84	\$ 12.55	2.5%	2.0%	4.5%	\$ 13.72	\$ -	\$ -	\$ 13.72
FOSTER	Emergency Department-Other Hospital	153,924	\$ 0.34	\$ 0.02	\$ 0.37	2.5%	2.0%	4.5%	\$ 0.40	\$ -	\$ -	\$ 0.40
FOSTER	Physician Services	153,924	\$ 83.85	\$ (0.56)	\$ 83.29	4.0%	3.0%	7.1%	\$ 95.58	\$ 0.99	\$ (0.22)	\$ 96.35
FOSTER	DME and Miscellaneous	153,924	\$ 47.15	\$ -	\$ 47.15	5.0%	1.0%	6.1%	\$ 53.03	\$ 0.39	\$ -	\$ 53.42
FOSTER	Substance Use	153,924	\$ 4.83	\$ -	\$ 4.83	7.0%	2.0%	9.1%	\$ 5.76	\$ -	\$ -	\$ 5.76
FOSTER	Prescription Drugs	153,924	\$ 70.99	\$ -	\$ 70.99	1.4%	4.6%	6.0%	\$ 79.83	\$ 1.53	\$ 0.21	\$ 81.57
FOSTER	Mental Health Services Inpatient	153,924	\$ 16.02	\$ -	\$ 16.02	3.0%	1.8%	4.8%	\$ 17.60	\$ -	\$ -	\$ 17.60
FOSTER	SUD Residential	153,924	\$ 2.42	\$ -	\$ 2.42	3.0%	1.8%	4.8%	\$ 2.65	\$ -	\$ -	\$ 2.65
FOSTER	ACT/SE	153,924	\$ 0.68	\$ -	\$ 0.68	7.0%	2.0%	9.1%	\$ 0.81	\$ -	\$ -	\$ 0.81
FOSTER	Applied Behavior Analysis (ABA)	153,924	\$ 13.48	\$ -	\$ 13.48	12.3%	2.0%	14.5%	\$ 17.68	\$ -	\$ -	\$ 17.68
FOSTER	MH Children's Wraparound	153,924	\$ 12.31	\$ -	\$ 12.31	7.0%	2.0%	9.1%	\$ 14.66	\$ -	\$ -	\$ 14.66
FOSTER	Mental Health Other Non-Inpatient	153,924	\$ 365.87	\$ -	\$ 365.87	7.0%	2.0%	9.1%	\$ 435.81	\$ 0.29	\$ -	\$ 436.10
FOSTER	NEMT	153,924	\$ 7.10	\$ -	\$ 7.10	5.0%	1.0%	6.1%	\$ 7.98	\$ -	\$ -	\$ 7.98

CY27 CCO Rate Certification

Appendix B: CCOA and CCOB Statewide Rate Buildup

COA	COS	2025 Base Data				Annual Trend			PMPM Subtotal	Program Changes - PMPM		
		Member Months ¹	Base PMPM: Clinical Efficiencies Removed ²	Clinical Efficiencies TEL Adjustment ³	Final Base PMPM	Util/1,000	Unit Cost	PMPM		Benefits Update Project	Health Evidence Research Committee	Statewide Rate PMPM
ACA 19-34	Inpatient-A/B Hospital	2,862,172	\$ 2.69	\$ 0.12	\$ 2.81	3.0%	1.3%	4.3%	\$ 3.06	\$ -	\$ -	\$ 3.06
ACA 19-34	Inpatient-DRG Hospital	2,862,172	\$ 20.45	\$ 0.59	\$ 21.04	1.0%	1.3%	2.3%	\$ 22.01	\$ -	\$ 0.08	\$ 22.08
ACA 19-34	Inpatient-Other Hospital	2,862,172	\$ 1.29	\$ 0.05	\$ 1.34	1.0%	1.3%	2.3%	\$ 1.40	\$ -	\$ 0.01	\$ 1.41
ACA 19-34	Outpatient-A/B Hospital	2,862,172	\$ 6.84	\$ -	\$ 6.84	2.0%	4.0%	6.1%	\$ 7.70	\$ 0.09	\$ (0.08)	\$ 7.71
ACA 19-34	Outpatient-DRG Hospital	2,862,172	\$ 19.32	\$ -	\$ 19.32	2.0%	4.0%	6.1%	\$ 21.74	\$ 0.23	\$ 0.23	\$ 22.21
ACA 19-34	Outpatient-Other Hospital	2,862,172	\$ 6.27	\$ -	\$ 6.27	2.0%	4.0%	6.1%	\$ 7.06	\$ 0.09	\$ 0.01	\$ 7.16
ACA 19-34	Emergency Department-A/B Hospital	2,862,172	\$ 10.19	\$ 0.68	\$ 10.87	2.0%	4.0%	6.1%	\$ 12.23	\$ -	\$ -	\$ 12.23
ACA 19-34	Emergency Department-DRG Hospital	2,862,172	\$ 13.25	\$ 0.92	\$ 14.18	2.0%	4.0%	6.1%	\$ 15.95	\$ -	\$ -	\$ 15.95
ACA 19-34	Emergency Department-Other Hospital	2,862,172	\$ 0.94	\$ 0.06	\$ 1.00	2.0%	4.0%	6.1%	\$ 1.12	\$ -	\$ -	\$ 1.12
ACA 19-34	Physician Services	2,862,172	\$ 75.04	\$ (0.52)	\$ 74.52	4.0%	2.0%	6.1%	\$ 83.85	\$ 0.47	\$ (0.06)	\$ 84.26
ACA 19-34	DME and Miscellaneous	2,862,172	\$ 16.03	\$ -	\$ 16.03	2.5%	1.0%	3.5%	\$ 17.18	\$ 0.43	\$ 0.00	\$ 17.61
ACA 19-34	Substance Use	2,862,172	\$ 15.10	\$ -	\$ 15.10	3.0%	4.0%	7.1%	\$ 17.33	\$ -	\$ -	\$ 17.33
ACA 19-34	Prescription Drugs	2,862,172	\$ 47.62	\$ -	\$ 47.62	1.7%	5.7%	7.5%	\$ 55.03	\$ 1.33	\$ 0.47	\$ 56.83
ACA 19-34	Mental Health Services Inpatient	2,862,172	\$ 11.74	\$ -	\$ 11.74	1.0%	1.3%	2.3%	\$ 12.28	\$ -	\$ -	\$ 12.28
ACA 19-34	SUD Residential	2,862,172	\$ 8.16	\$ -	\$ 8.16	1.0%	1.3%	2.3%	\$ 8.53	\$ -	\$ -	\$ 8.53
ACA 19-34	ACT/SE	2,862,172	\$ 3.37	\$ -	\$ 3.37	3.0%	4.0%	7.1%	\$ 3.87	\$ -	\$ -	\$ 3.87
ACA 19-34	Applied Behavior Analysis (ABA)	2,862,172	\$ 0.01	\$ -	\$ 0.01	3.0%	4.0%	7.1%	\$ 0.01	\$ -	\$ -	\$ 0.01
ACA 19-34	MH Children's Wraparound	2,862,172	\$ 0.83	\$ -	\$ 0.83	3.0%	4.0%	7.1%	\$ 0.96	\$ -	\$ -	\$ 0.96
ACA 19-34	Mental Health Other Non-Inpatient	2,862,172	\$ 97.95	\$ -	\$ 97.95	3.0%	4.0%	7.1%	\$ 112.40	\$ 0.59	\$ -	\$ 112.98
ACA 19-34	NEMT	2,862,172	\$ 6.17	\$ -	\$ 6.17	2.5%	1.0%	3.5%	\$ 6.61	\$ -	\$ -	\$ 6.61
ACA 35-44	Inpatient-A/B Hospital	1,447,424	\$ 6.22	\$ 0.17	\$ 6.40	3.0%	1.3%	4.3%	\$ 6.96	\$ -	\$ -	\$ 6.96
ACA 35-44	Inpatient-DRG Hospital	1,447,424	\$ 43.47	\$ 1.26	\$ 44.73	1.0%	1.3%	2.3%	\$ 46.77	\$ -	\$ 0.20	\$ 46.97
ACA 35-44	Inpatient-Other Hospital	1,447,424	\$ 3.65	\$ 0.08	\$ 3.73	1.0%	1.3%	2.3%	\$ 3.90	\$ -	\$ 0.03	\$ 3.93
ACA 35-44	Outpatient-A/B Hospital	1,447,424	\$ 13.53	\$ -	\$ 13.53	2.0%	4.0%	6.1%	\$ 15.23	\$ 0.09	\$ (0.05)	\$ 15.27
ACA 35-44	Outpatient-DRG Hospital	1,447,424	\$ 31.66	\$ -	\$ 31.66	2.0%	4.0%	6.1%	\$ 35.63	\$ 0.23	\$ 0.40	\$ 36.26
ACA 35-44	Outpatient-Other Hospital	1,447,424	\$ 11.07	\$ -	\$ 11.07	2.0%	4.0%	6.1%	\$ 12.46	\$ 0.09	\$ 0.03	\$ 12.58
ACA 35-44	Emergency Department-A/B Hospital	1,447,424	\$ 13.92	\$ 0.77	\$ 14.69	2.0%	4.0%	6.1%	\$ 16.54	\$ -	\$ -	\$ 16.54
ACA 35-44	Emergency Department-DRG Hospital	1,447,424	\$ 17.11	\$ 1.01	\$ 18.12	2.0%	4.0%	6.1%	\$ 20.39	\$ -	\$ -	\$ 20.39
ACA 35-44	Emergency Department-Other Hospital	1,447,424	\$ 1.10	\$ 0.06	\$ 1.15	2.0%	4.0%	6.1%	\$ 1.30	\$ -	\$ -	\$ 1.30
ACA 35-44	Physician Services	1,447,424	\$ 97.04	\$ (0.56)	\$ 96.48	4.0%	2.0%	6.1%	\$ 108.57	\$ 0.53	\$ (0.01)	\$ 109.09
ACA 35-44	DME and Miscellaneous	1,447,424	\$ 24.39	\$ -	\$ 24.39	2.5%	1.0%	3.5%	\$ 26.14	\$ 0.53	\$ 0.00	\$ 26.67
ACA 35-44	Substance Use	1,447,424	\$ 31.73	\$ -	\$ 31.73	3.0%	4.0%	7.1%	\$ 36.41	\$ -	\$ -	\$ 36.41
ACA 35-44	Prescription Drugs	1,447,424	\$ 93.65	\$ -	\$ 93.65	1.9%	4.9%	6.9%	\$ 107.01	\$ 1.76	\$ 0.71	\$ 109.47
ACA 35-44	Mental Health Services Inpatient	1,447,424	\$ 10.53	\$ -	\$ 10.53	1.0%	1.3%	2.3%	\$ 11.01	\$ -	\$ -	\$ 11.01
ACA 35-44	SUD Residential	1,447,424	\$ 16.70	\$ -	\$ 16.70	1.0%	1.3%	2.3%	\$ 17.46	\$ -	\$ -	\$ 17.46
ACA 35-44	ACT/SE	1,447,424	\$ 3.49	\$ -	\$ 3.49	3.0%	4.0%	7.1%	\$ 4.01	\$ -	\$ -	\$ 4.01
ACA 35-44	Applied Behavior Analysis (ABA)	1,447,424	\$ -	\$ -	\$ -	3.0%	4.0%	7.1%	\$ -	\$ -	\$ -	\$ -
ACA 35-44	MH Children's Wraparound	1,447,424	\$ 1.86	\$ -	\$ 1.86	3.0%	4.0%	7.1%	\$ 2.14	\$ -	\$ -	\$ 2.14
ACA 35-44	Mental Health Other Non-Inpatient	1,447,424	\$ 100.62	\$ -	\$ 100.62	3.0%	4.0%	7.1%	\$ 115.46	\$ 1.05	\$ -	\$ 116.51
ACA 35-44	NEMT	1,447,424	\$ 12.02	\$ -	\$ 12.02	2.5%	1.0%	3.5%	\$ 12.88	\$ -	\$ -	\$ 12.88

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Appendix B: CCOA and CCOB Statewide Rate Buildup

COA	COS	2025 Base Data				Annual Trend			PMPM Subtotal	Program Changes - PMPM		
		Member Months ¹	Base PMPM: Clinical Efficiencies Removed ²	Clinical Efficiencies TEL Adjustment ³	Final Base PMPM	Util/1,000	Unit Cost	PMPM		Benefits Update Project	Health Evidence Research Committee	Statewide Rate PMPM
ACA 45-54	Inpatient-A/B Hospital	1,076,335	\$ 11.44	\$ 0.45	\$ 11.89	3.0%	1.3%	4.3%	\$ 12.93	\$ -	\$ -	\$ 12.93
ACA 45-54	Inpatient-DRG Hospital	1,076,335	\$ 77.22	\$ 2.98	\$ 80.20	1.0%	1.3%	2.3%	\$ 83.87	\$ -	\$ 0.47	\$ 84.35
ACA 45-54	Inpatient-Other Hospital	1,076,335	\$ 6.94	\$ 0.27	\$ 7.21	1.0%	1.3%	2.3%	\$ 7.54	\$ -	\$ 0.08	\$ 7.62
ACA 45-54	Outpatient-A/B Hospital	1,076,335	\$ 22.75	\$ -	\$ 22.75	2.0%	4.0%	6.1%	\$ 25.60	\$ 0.09	\$ 0.01	\$ 25.70
ACA 45-54	Outpatient-DRG Hospital	1,076,335	\$ 53.99	\$ -	\$ 53.99	2.0%	4.0%	6.1%	\$ 60.76	\$ 0.23	\$ 0.71	\$ 61.69
ACA 45-54	Outpatient-Other Hospital	1,076,335	\$ 20.56	\$ -	\$ 20.56	2.0%	4.0%	6.1%	\$ 23.14	\$ 0.09	\$ 0.06	\$ 23.29
ACA 45-54	Emergency Department-A/B Hospital	1,076,335	\$ 18.07	\$ 0.87	\$ 18.94	2.0%	4.0%	6.1%	\$ 21.31	\$ -	\$ -	\$ 21.31
ACA 45-54	Emergency Department-DRG Hospital	1,076,335	\$ 20.12	\$ 1.04	\$ 21.16	2.0%	4.0%	6.1%	\$ 23.81	\$ -	\$ -	\$ 23.81
ACA 45-54	Emergency Department-Other Hospital	1,076,335	\$ 1.39	\$ 0.06	\$ 1.46	2.0%	4.0%	6.1%	\$ 1.64	\$ -	\$ -	\$ 1.64
ACA 45-54	Physician Services	1,076,335	\$ 128.04	\$ (0.57)	\$ 127.47	4.0%	2.0%	6.1%	\$ 143.44	\$ 0.53	\$ 0.10	\$ 144.08
ACA 45-54	DME and Miscellaneous	1,076,335	\$ 34.21	\$ -	\$ 34.21	2.5%	1.0%	3.5%	\$ 36.67	\$ 0.63	\$ 0.01	\$ 37.30
ACA 45-54	Substance Use	1,076,335	\$ 25.32	\$ -	\$ 25.32	3.0%	4.0%	7.1%	\$ 29.05	\$ -	\$ -	\$ 29.05
ACA 45-54	Prescription Drugs	1,076,335	\$ 147.21	\$ -	\$ 147.21	2.1%	3.5%	5.7%	\$ 164.43	\$ 2.22	\$ 0.77	\$ 167.42
ACA 45-54	Mental Health Services Inpatient	1,076,335	\$ 8.38	\$ -	\$ 8.38	1.0%	1.3%	2.3%	\$ 8.77	\$ -	\$ -	\$ 8.77
ACA 45-54	SUD Residential	1,076,335	\$ 11.18	\$ -	\$ 11.18	1.0%	1.3%	2.3%	\$ 11.70	\$ -	\$ -	\$ 11.70
ACA 45-54	ACT/SE	1,076,335	\$ 3.34	\$ -	\$ 3.34	3.0%	4.0%	7.1%	\$ 3.83	\$ -	\$ -	\$ 3.83
ACA 45-54	Applied Behavior Analysis (ABA)	1,076,335	\$ -	\$ -	\$ -	3.0%	4.0%	7.1%	\$ -	\$ -	\$ -	\$ -
ACA 45-54	MH Children's Wraparound	1,076,335	\$ 1.42	\$ -	\$ 1.42	3.0%	4.0%	7.1%	\$ 1.63	\$ -	\$ -	\$ 1.63
ACA 45-54	Mental Health Other Non-Inpatient	1,076,335	\$ 80.86	\$ -	\$ 80.86	3.0%	4.0%	7.1%	\$ 92.78	\$ 1.56	\$ -	\$ 94.34
ACA 45-54	NEMT	1,076,335	\$ 14.71	\$ -	\$ 14.71	2.5%	1.0%	3.5%	\$ 15.76	\$ -	\$ -	\$ 15.76
ACA 55-64	Inpatient-A/B Hospital	1,008,975	\$ 19.13	\$ 0.74	\$ 19.86	3.0%	1.3%	4.3%	\$ 21.60	\$ -	\$ -	\$ 21.60
ACA 55-64	Inpatient-DRG Hospital	1,008,975	\$ 107.22	\$ 3.76	\$ 110.98	1.0%	1.3%	2.3%	\$ 116.06	\$ -	\$ 0.89	\$ 116.94
ACA 55-64	Inpatient-Other Hospital	1,008,975	\$ 12.25	\$ 0.42	\$ 12.67	1.0%	1.3%	2.3%	\$ 13.25	\$ -	\$ 0.16	\$ 13.40
ACA 55-64	Outpatient-A/B Hospital	1,008,975	\$ 35.81	\$ -	\$ 35.81	2.0%	4.0%	6.1%	\$ 40.30	\$ 0.09	\$ 0.06	\$ 40.44
ACA 55-64	Outpatient-DRG Hospital	1,008,975	\$ 80.59	\$ -	\$ 80.59	2.0%	4.0%	6.1%	\$ 90.68	\$ 0.21	\$ 0.96	\$ 91.86
ACA 55-64	Outpatient-Other Hospital	1,008,975	\$ 31.97	\$ -	\$ 31.97	2.0%	4.0%	6.1%	\$ 35.97	\$ 0.08	\$ 0.08	\$ 36.14
ACA 55-64	Emergency Department-A/B Hospital	1,008,975	\$ 18.49	\$ 0.71	\$ 19.20	2.0%	4.0%	6.1%	\$ 21.61	\$ -	\$ -	\$ 21.61
ACA 55-64	Emergency Department-DRG Hospital	1,008,975	\$ 19.18	\$ 0.79	\$ 19.98	2.0%	4.0%	6.1%	\$ 22.48	\$ -	\$ -	\$ 22.48
ACA 55-64	Emergency Department-Other Hospital	1,008,975	\$ 1.01	\$ 0.04	\$ 1.04	2.0%	4.0%	6.1%	\$ 1.18	\$ -	\$ -	\$ 1.18
ACA 55-64	Physician Services	1,008,975	\$ 154.28	\$ (0.43)	\$ 153.85	4.0%	2.0%	6.1%	\$ 173.13	\$ 0.54	\$ 0.19	\$ 173.86
ACA 55-64	DME and Miscellaneous	1,008,975	\$ 40.72	\$ -	\$ 40.72	2.5%	1.0%	3.5%	\$ 43.64	\$ 0.62	\$ 0.02	\$ 44.27
ACA 55-64	Substance Use	1,008,975	\$ 13.30	\$ -	\$ 13.30	3.0%	4.0%	7.1%	\$ 15.27	\$ -	\$ -	\$ 15.27
ACA 55-64	Prescription Drugs	1,008,975	\$ 193.11	\$ -	\$ 193.11	2.2%	2.6%	4.9%	\$ 212.32	\$ 2.56	\$ 0.65	\$ 215.52
ACA 55-64	Mental Health Services Inpatient	1,008,975	\$ 5.45	\$ -	\$ 5.45	1.0%	1.3%	2.3%	\$ 5.70	\$ -	\$ -	\$ 5.70
ACA 55-64	SUD Residential	1,008,975	\$ 6.01	\$ -	\$ 6.01	1.0%	1.3%	2.3%	\$ 6.29	\$ -	\$ -	\$ 6.29
ACA 55-64	ACT/SE	1,008,975	\$ 2.98	\$ -	\$ 2.98	3.0%	4.0%	7.1%	\$ 3.42	\$ -	\$ -	\$ 3.42
ACA 55-64	Applied Behavior Analysis (ABA)	1,008,975	\$ -	\$ -	\$ -	3.0%	4.0%	7.1%	\$ -	\$ -	\$ -	\$ -
ACA 55-64	MH Children's Wraparound	1,008,975	\$ 0.80	\$ -	\$ 0.80	3.0%	4.0%	7.1%	\$ 0.91	\$ -	\$ -	\$ 0.91
ACA 55-64	Mental Health Other Non-Inpatient	1,008,975	\$ 54.11	\$ -	\$ 54.11	3.0%	4.0%	7.1%	\$ 62.09	\$ 1.75	\$ -	\$ 63.84
ACA 55-64	NEMT	1,008,975	\$ 12.60	\$ -	\$ 12.60	2.5%	1.0%	3.5%	\$ 13.50	\$ -	\$ -	\$ 13.50

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Appendix B: CCOA and CCOB Statewide Rate Buildup

COA	COS	2025 Base Data				Annual Trend			PMPM Subtotal	Program Changes - PMPM		
		Member Months ¹	Base PMPM: Clinical Efficiencies Removed ²	Clinical Efficiencies TEL Adjustment ³	Final Base PMPM	Util/1,000	Unit Cost	PMPM		Benefits Update Project	Health Evidence Research Committee	Statewide Rate PMPM
BBM 19-34	Inpatient-A/B Hospital	2,892	\$ 3.20	\$ 0.28	\$ 3.48	3.0%	1.3%	4.3%	\$ 3.79	\$ -	\$ -	\$ 3.79
BBM 19-34	Inpatient-DRG Hospital	2,892	\$ 19.59	\$ 0.17	\$ 19.76	1.0%	1.3%	2.3%	\$ 20.66	\$ -	\$ 0.02	\$ 20.69
BBM 19-34	Inpatient-Other Hospital	2,892	\$ 1.54	\$ -	\$ 1.54	1.0%	1.3%	2.3%	\$ 1.61	\$ -	\$ -	\$ 1.61
BBM 19-34	Outpatient-A/B Hospital	2,892	\$ 8.32	\$ -	\$ 8.32	2.0%	4.0%	6.1%	\$ 9.37	\$ 0.13	\$ 0.02	\$ 9.52
BBM 19-34	Outpatient-DRG Hospital	2,892	\$ 17.07	\$ -	\$ 17.07	2.0%	4.0%	6.1%	\$ 19.21	\$ 0.32	\$ 0.97	\$ 20.50
BBM 19-34	Outpatient-Other Hospital	2,892	\$ 6.73	\$ -	\$ 6.73	2.0%	4.0%	6.1%	\$ 7.58	\$ 0.13	\$ 0.01	\$ 7.71
BBM 19-34	Emergency Department-A/B Hospital	2,892	\$ 12.31	\$ 0.83	\$ 13.14	2.0%	4.0%	6.1%	\$ 14.79	\$ -	\$ -	\$ 14.79
BBM 19-34	Emergency Department-DRG Hospital	2,892	\$ 11.99	\$ 0.62	\$ 12.62	2.0%	4.0%	6.1%	\$ 14.20	\$ -	\$ -	\$ 14.20
BBM 19-34	Emergency Department-Other Hospital	2,892	\$ 1.14	\$ 0.00	\$ 1.14	2.0%	4.0%	6.1%	\$ 1.28	\$ -	\$ -	\$ 1.28
BBM 19-34	Physician Services	2,892	\$ 72.88	\$ -	\$ 72.88	4.0%	2.0%	6.1%	\$ 82.01	\$ 0.65	\$ 1.42	\$ 84.08
BBM 19-34	DME and Miscellaneous	2,892	\$ 15.34	\$ -	\$ 15.34	2.5%	1.0%	3.5%	\$ 16.44	\$ 0.60	\$ -	\$ 17.04
BBM 19-34	Substance Use	2,892	\$ 14.96	\$ -	\$ 14.96	3.0%	4.0%	7.1%	\$ 17.16	\$ -	\$ -	\$ 17.16
BBM 19-34	Prescription Drugs	2,892	\$ 44.77	\$ -	\$ 44.77	1.7%	5.7%	7.5%	\$ 51.73	\$ 1.68	\$ 0.76	\$ 54.17
BBM 19-34	Mental Health Services Inpatient	2,892	\$ 11.06	\$ -	\$ 11.06	1.0%	1.3%	2.3%	\$ 11.57	\$ -	\$ -	\$ 11.57
BBM 19-34	SUD Residential	2,892	\$ 8.68	\$ -	\$ 8.68	1.0%	1.3%	2.3%	\$ 9.08	\$ -	\$ -	\$ 9.08
BBM 19-34	ACT/SE	2,892	\$ 2.94	\$ -	\$ 2.94	3.0%	4.0%	7.1%	\$ 3.38	\$ -	\$ -	\$ 3.38
BBM 19-34	Applied Behavior Analysis (ABA)	2,892	\$ 0.01	\$ -	\$ 0.01	3.0%	4.0%	7.1%	\$ 0.01	\$ -	\$ -	\$ 0.01
BBM 19-34	MH Children's Wraparound	2,892	\$ 0.77	\$ -	\$ 0.77	3.0%	4.0%	7.1%	\$ 0.89	\$ -	\$ -	\$ 0.89
BBM 19-34	Mental Health Other Non-Inpatient	2,892	\$ 91.29	\$ -	\$ 91.29	3.0%	4.0%	7.1%	\$ 104.75	\$ 0.66	\$ -	\$ 105.40
BBM 19-34	NEMT	2,892	\$ 5.89	\$ -	\$ 5.89	2.5%	1.0%	3.5%	\$ 6.31	\$ -	\$ -	\$ 6.31
BBM 35-44	Inpatient-A/B Hospital	1,550	\$ 7.72	\$ -	\$ 7.72	3.0%	1.3%	4.3%	\$ 8.40	\$ -	\$ -	\$ 8.40
BBM 35-44	Inpatient-DRG Hospital	1,550	\$ 39.77	\$ 1.19	\$ 40.96	1.0%	1.3%	2.3%	\$ 42.84	\$ -	\$ 0.08	\$ 42.92
BBM 35-44	Inpatient-Other Hospital	1,550	\$ 4.58	\$ -	\$ 4.58	1.0%	1.3%	2.3%	\$ 4.79	\$ -	\$ -	\$ 4.79
BBM 35-44	Outpatient-A/B Hospital	1,550	\$ 16.17	\$ -	\$ 16.17	2.0%	4.0%	6.1%	\$ 18.20	\$ 0.14	\$ 0.09	\$ 18.43
BBM 35-44	Outpatient-DRG Hospital	1,550	\$ 28.80	\$ -	\$ 28.80	2.0%	4.0%	6.1%	\$ 32.41	\$ 0.36	\$ 0.45	\$ 33.22
BBM 35-44	Outpatient-Other Hospital	1,550	\$ 11.46	\$ -	\$ 11.46	2.0%	4.0%	6.1%	\$ 12.89	\$ 0.14	\$ 0.04	\$ 13.07
BBM 35-44	Emergency Department-A/B Hospital	1,550	\$ 16.53	\$ 0.71	\$ 17.24	2.0%	4.0%	6.1%	\$ 19.40	\$ -	\$ -	\$ 19.40
BBM 35-44	Emergency Department-DRG Hospital	1,550	\$ 14.97	\$ 0.71	\$ 15.68	2.0%	4.0%	6.1%	\$ 17.65	\$ -	\$ -	\$ 17.65
BBM 35-44	Emergency Department-Other Hospital	1,550	\$ 1.28	\$ 0.01	\$ 1.29	2.0%	4.0%	6.1%	\$ 1.45	\$ -	\$ -	\$ 1.45
BBM 35-44	Physician Services	1,550	\$ 92.88	\$ -	\$ 92.88	4.0%	2.0%	6.1%	\$ 104.52	\$ 0.80	\$ 0.23	\$ 105.55
BBM 35-44	DME and Miscellaneous	1,550	\$ 23.23	\$ -	\$ 23.23	2.5%	1.0%	3.5%	\$ 24.89	\$ 0.87	\$ -	\$ 25.76
BBM 35-44	Substance Use	1,550	\$ 30.45	\$ -	\$ 30.45	3.0%	4.0%	7.1%	\$ 34.94	\$ -	\$ -	\$ 34.94
BBM 35-44	Prescription Drugs	1,550	\$ 90.12	\$ -	\$ 90.12	1.9%	4.9%	6.9%	\$ 102.97	\$ 2.40	\$ 0.47	\$ 105.84
BBM 35-44	Mental Health Services Inpatient	1,550	\$ 9.28	\$ -	\$ 9.28	1.0%	1.3%	2.3%	\$ 9.71	\$ -	\$ -	\$ 9.71
BBM 35-44	SUD Residential	1,550	\$ 16.95	\$ -	\$ 16.95	1.0%	1.3%	2.3%	\$ 17.73	\$ -	\$ -	\$ 17.73
BBM 35-44	ACT/SE	1,550	\$ 3.05	\$ -	\$ 3.05	3.0%	4.0%	7.1%	\$ 3.50	\$ -	\$ -	\$ 3.50
BBM 35-44	Applied Behavior Analysis (ABA)	1,550	\$ -	\$ -	\$ -	3.0%	4.0%	7.1%	\$ -	\$ -	\$ -	\$ -
BBM 35-44	MH Children's Wraparound	1,550	\$ 1.86	\$ -	\$ 1.86	3.0%	4.0%	7.1%	\$ 2.14	\$ -	\$ -	\$ 2.14
BBM 35-44	Mental Health Other Non-Inpatient	1,550	\$ 91.59	\$ -	\$ 91.59	3.0%	4.0%	7.1%	\$ 105.10	\$ 1.34	\$ -	\$ 106.44
BBM 35-44	NEMT	1,550	\$ 10.92	\$ -	\$ 10.92	2.5%	1.0%	3.5%	\$ 11.71	\$ -	\$ -	\$ 11.71

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Appendix B: CCOA and CCOB Statewide Rate Buildup

COA	COS	2025 Base Data				Annual Trend			PMPM Subtotal	Program Changes - PMPM		
		Member Months ¹	Base PMPM: Clinical Efficiencies Removed ²	Clinical Efficiencies TEL Adjustment ³	Final Base PMPM	Util/1,000	Unit Cost	PMPM		Benefits Update Project	Health Evidence Research Committee	Statewide Rate PMPM
BBM 45-54	Inpatient-A/B Hospital	927	\$ 13.38	\$ 0.48	\$ 13.85	3.0%	1.3%	4.3%	\$ 15.07	\$ -	\$ -	\$ 15.07
BBM 45-54	Inpatient-DRG Hospital	927	\$ 73.95	\$ 0.54	\$ 74.49	1.0%	1.3%	2.3%	\$ 77.90	\$ -	\$ 0.12	\$ 78.02
BBM 45-54	Inpatient-Other Hospital	927	\$ 8.63	\$ -	\$ 8.63	1.0%	1.3%	2.3%	\$ 9.02	\$ -	\$ -	\$ 9.02
BBM 45-54	Outpatient-A/B Hospital	927	\$ 28.58	\$ -	\$ 28.58	2.0%	4.0%	6.1%	\$ 32.16	\$ 0.16	\$ 0.24	\$ 32.56
BBM 45-54	Outpatient-DRG Hospital	927	\$ 51.68	\$ -	\$ 51.68	2.0%	4.0%	6.1%	\$ 58.16	\$ 0.40	\$ 1.15	\$ 59.71
BBM 45-54	Outpatient-Other Hospital	927	\$ 20.75	\$ -	\$ 20.75	2.0%	4.0%	6.1%	\$ 23.35	\$ 0.16	\$ 0.10	\$ 23.60
BBM 45-54	Emergency Department-A/B Hospital	927	\$ 22.77	\$ 0.17	\$ 22.94	2.0%	4.0%	6.1%	\$ 25.82	\$ -	\$ -	\$ 25.82
BBM 45-54	Emergency Department-DRG Hospital	927	\$ 18.50	\$ 0.40	\$ 18.91	2.0%	4.0%	6.1%	\$ 21.28	\$ -	\$ -	\$ 21.28
BBM 45-54	Emergency Department-Other Hospital	927	\$ 1.82	\$ -	\$ 1.82	2.0%	4.0%	6.1%	\$ 2.05	\$ -	\$ -	\$ 2.05
BBM 45-54	Physician Services	927	\$ 123.60	\$ -	\$ 123.60	4.0%	2.0%	6.1%	\$ 139.08	\$ 0.94	\$ 0.50	\$ 140.52
BBM 45-54	DME and Miscellaneous	927	\$ 33.23	\$ -	\$ 33.23	2.5%	1.0%	3.5%	\$ 35.61	\$ 1.13	\$ -	\$ 36.74
BBM 45-54	Substance Use	927	\$ 23.86	\$ -	\$ 23.86	3.0%	4.0%	7.1%	\$ 27.38	\$ -	\$ -	\$ 27.38
BBM 45-54	Prescription Drugs	927	\$ 140.20	\$ -	\$ 140.20	2.1%	3.5%	5.7%	\$ 156.60	\$ 2.81	\$ 1.59	\$ 161.00
BBM 45-54	Mental Health Services Inpatient	927	\$ 6.92	\$ -	\$ 6.92	1.0%	1.3%	2.3%	\$ 7.23	\$ -	\$ -	\$ 7.23
BBM 45-54	SUD Residential	927	\$ 11.69	\$ -	\$ 11.69	1.0%	1.3%	2.3%	\$ 12.23	\$ -	\$ -	\$ 12.23
BBM 45-54	ACT/SE	927	\$ 2.84	\$ -	\$ 2.84	3.0%	4.0%	7.1%	\$ 3.26	\$ -	\$ -	\$ 3.26
BBM 45-54	Applied Behavior Analysis (ABA)	927	\$ -	\$ -	\$ -	3.0%	4.0%	7.1%	\$ -	\$ -	\$ -	\$ -
BBM 45-54	MH Children's Wraparound	927	\$ 1.38	\$ -	\$ 1.38	3.0%	4.0%	7.1%	\$ 1.59	\$ -	\$ -	\$ 1.59
BBM 45-54	Mental Health Other Non-Inpatient	927	\$ 70.56	\$ -	\$ 70.56	3.0%	4.0%	7.1%	\$ 80.97	\$ 1.94	\$ -	\$ 82.91
BBM 45-54	NEMT	927	\$ 12.81	\$ -	\$ 12.81	2.5%	1.0%	3.5%	\$ 13.73	\$ -	\$ -	\$ 13.73
BBM 55-64	Inpatient-A/B Hospital	543	\$ 21.87	\$ -	\$ 21.87	3.0%	1.3%	4.3%	\$ 23.78	\$ -	\$ -	\$ 23.78
BBM 55-64	Inpatient-DRG Hospital	543	\$ 104.24	\$ 2.78	\$ 107.02	1.0%	1.3%	2.3%	\$ 111.92	\$ -	\$ 0.93	\$ 112.85
BBM 55-64	Inpatient-Other Hospital	543	\$ 10.03	\$ -	\$ 10.03	1.0%	1.3%	2.3%	\$ 10.49	\$ -	\$ 0.15	\$ 10.65
BBM 55-64	Outpatient-A/B Hospital	543	\$ 34.43	\$ -	\$ 34.43	2.0%	4.0%	6.1%	\$ 38.74	\$ 0.13	\$ 0.17	\$ 39.04
BBM 55-64	Outpatient-DRG Hospital	543	\$ 74.87	\$ -	\$ 74.87	2.0%	4.0%	6.1%	\$ 84.25	\$ 0.33	\$ 0.85	\$ 85.43
BBM 55-64	Outpatient-Other Hospital	543	\$ 28.29	\$ -	\$ 28.29	2.0%	4.0%	6.1%	\$ 31.83	\$ 0.13	\$ 0.07	\$ 32.03
BBM 55-64	Emergency Department-A/B Hospital	543	\$ 20.53	\$ 0.62	\$ 21.15	2.0%	4.0%	6.1%	\$ 23.79	\$ -	\$ -	\$ 23.79
BBM 55-64	Emergency Department-DRG Hospital	543	\$ 18.27	\$ 0.25	\$ 18.52	2.0%	4.0%	6.1%	\$ 20.84	\$ -	\$ -	\$ 20.84
BBM 55-64	Emergency Department-Other Hospital	543	\$ 0.76	\$ -	\$ 0.76	2.0%	4.0%	6.1%	\$ 0.85	\$ -	\$ -	\$ 0.85
BBM 55-64	Physician Services	543	\$ 154.55	\$ -	\$ 154.55	4.0%	2.0%	6.1%	\$ 173.91	\$ 0.85	\$ 0.48	\$ 175.25
BBM 55-64	DME and Miscellaneous	543	\$ 40.28	\$ -	\$ 40.28	2.5%	1.0%	3.5%	\$ 43.17	\$ 1.01	\$ 0.02	\$ 44.19
BBM 55-64	Substance Use	543	\$ 12.84	\$ -	\$ 12.84	3.0%	4.0%	7.1%	\$ 14.74	\$ -	\$ -	\$ 14.74
BBM 55-64	Prescription Drugs	543	\$ 185.84	\$ -	\$ 185.84	2.2%	2.6%	4.9%	\$ 204.33	\$ 3.61	\$ -	\$ 207.94
BBM 55-64	Mental Health Services Inpatient	543	\$ 4.80	\$ -	\$ 4.80	1.0%	1.3%	2.3%	\$ 5.02	\$ -	\$ -	\$ 5.02
BBM 55-64	SUD Residential	543	\$ 5.84	\$ -	\$ 5.84	1.0%	1.3%	2.3%	\$ 6.11	\$ -	\$ -	\$ 6.11
BBM 55-64	ACT/SE	543	\$ 2.74	\$ -	\$ 2.74	3.0%	4.0%	7.1%	\$ 3.14	\$ -	\$ -	\$ 3.14
BBM 55-64	Applied Behavior Analysis (ABA)	543	\$ -	\$ -	\$ -	3.0%	4.0%	7.1%	\$ -	\$ -	\$ -	\$ -
BBM 55-64	MH Children's Wraparound	543	\$ 0.88	\$ -	\$ 0.88	3.0%	4.0%	7.1%	\$ 1.01	\$ -	\$ -	\$ 1.01
BBM 55-64	Mental Health Other Non-Inpatient	543	\$ 49.94	\$ -	\$ 49.94	3.0%	4.0%	7.1%	\$ 57.30	\$ 2.17	\$ -	\$ 59.48
BBM 55-64	NEMT	543	\$ 11.15	\$ -	\$ 11.15	2.5%	1.0%	3.5%	\$ 11.95	\$ -	\$ -	\$ 11.95

CY27 CCO Rate Certification

Appendix B: CCOA and CCOB Statewide Rate Buildup

COA	COS	2025 Base Data				Annual Trend			PMPM Subtotal	Program Changes - PMPM		
		Member Months ¹	Base PMPM: Clinical Efficiencies Removed ²	Clinical Efficiencies TEL Adjustment ³	Final Base PMPM	Util/1,000	Unit Cost	PMPM		Benefits Update Project	Health Evidence Research Committee	Statewide Rate PMPM
YSHCN	Inpatient-A/B Hospital	7,654	\$ -	\$ -	\$ -	1.0%	1.3%	2.3%	\$ -	\$ -	\$ -	\$ -
YSHCN	Inpatient-DRG Hospital	7,654	\$ 20.87	\$ -	\$ 20.87	1.0%	1.3%	2.3%	\$ 21.83	\$ -	\$ 0.09	\$ 21.91
YSHCN	Inpatient-Other Hospital	7,654	\$ -	\$ -	\$ -	1.0%	1.3%	2.3%	\$ -	\$ -	\$ 0.01	\$ 0.01
YSHCN	Outpatient-A/B Hospital	7,654	\$ 8.63	\$ -	\$ 8.63	2.0%	4.0%	6.1%	\$ 9.71	\$ 0.09	\$ (0.12)	\$ 9.68
YSHCN	Outpatient-DRG Hospital	7,654	\$ 24.68	\$ -	\$ 24.68	2.0%	4.0%	6.1%	\$ 27.77	\$ 0.23	\$ 0.41	\$ 28.41
YSHCN	Outpatient-Other Hospital	7,654	\$ 12.56	\$ -	\$ 12.56	2.0%	4.0%	6.1%	\$ 14.13	\$ 0.09	\$ 0.01	\$ 14.24
YSHCN	Emergency Department-A/B Hospital	7,654	\$ 13.46	\$ -	\$ 13.46	2.0%	4.0%	6.1%	\$ 15.14	\$ -	\$ -	\$ 15.14
YSHCN	Emergency Department-DRG Hospital	7,654	\$ 17.39	\$ -	\$ 17.39	2.0%	4.0%	6.1%	\$ 19.57	\$ -	\$ -	\$ 19.57
YSHCN	Emergency Department-Other Hospital	7,654	\$ 0.49	\$ -	\$ 0.49	2.0%	4.0%	6.1%	\$ 0.55	\$ -	\$ -	\$ 0.55
YSHCN	Physician Services	7,654	\$ 82.01	\$ -	\$ 82.01	4.0%	2.0%	6.1%	\$ 92.29	\$ 0.47	\$ 0.13	\$ 92.88
YSHCN	DME and Miscellaneous	7,654	\$ 18.70	\$ -	\$ 18.70	2.5%	1.0%	3.5%	\$ 20.04	\$ 0.43	\$ 0.00	\$ 20.48
YSHCN	Substance Use	7,654	\$ 3.92	\$ -	\$ 3.92	3.0%	4.0%	7.1%	\$ 4.49	\$ -	\$ -	\$ 4.49
YSHCN	Prescription Drugs	7,654	\$ 79.74	\$ -	\$ 79.74	1.7%	6.2%	8.0%	\$ 93.00	\$ 1.33	\$ 0.79	\$ 95.12
YSHCN	Mental Health Services Inpatient	7,654	\$ 20.06	\$ -	\$ 20.06	1.0%	1.3%	2.3%	\$ 20.98	\$ -	\$ -	\$ 20.98
YSHCN	SUD Residential	7,654	\$ 0.11	\$ -	\$ 0.11	1.0%	1.3%	2.3%	\$ 0.11	\$ -	\$ -	\$ 0.11
YSHCN	ACT/SE	7,654	\$ 1.10	\$ -	\$ 1.10	3.0%	4.0%	7.1%	\$ 1.26	\$ -	\$ -	\$ 1.26
YSHCN	Applied Behavior Analysis (ABA)	7,654	\$ -	\$ -	\$ -	3.0%	4.0%	7.1%	\$ -	\$ -	\$ -	\$ -
YSHCN	MH Children's Wraparound	7,654	\$ 0.06	\$ -	\$ 0.06	3.0%	4.0%	7.1%	\$ 0.07	\$ -	\$ -	\$ 0.07
YSHCN	Mental Health Other Non-Inpatient	7,654	\$ 100.90	\$ -	\$ 100.90	3.0%	4.0%	7.1%	\$ 115.78	\$ 0.59	\$ -	\$ 116.37
YSHCN	NEMT	7,654	\$ 4.49	\$ -	\$ 4.49	2.5%	1.0%	3.5%	\$ 4.81	\$ -	\$ -	\$ 4.81
BCCP	Inpatient-A/B Hospital	682	\$ -	\$ -	\$ -	0.5%	1.3%	1.8%	\$ -	\$ -	\$ -	\$ -
BCCP	Inpatient-DRG Hospital	682	\$ 120.97	\$ -	\$ 120.97	0.5%	1.3%	1.8%	\$ 125.25	\$ -	\$ 0.07	\$ 125.33
BCCP	Inpatient-Other Hospital	682	\$ -	\$ -	\$ -	0.5%	1.3%	1.8%	\$ -	\$ -	\$ -	\$ -
BCCP	Outpatient-A/B Hospital	682	\$ 96.28	\$ -	\$ 96.28	2.0%	3.0%	5.1%	\$ 106.27	\$ 0.05	\$ (0.12)	\$ 106.20
BCCP	Outpatient-DRG Hospital	682	\$ 979.74	\$ -	\$ 979.74	2.0%	3.0%	5.1%	\$ 1,081.40	\$ 0.11	\$ 0.38	\$ 1,081.89
BCCP	Outpatient-Other Hospital	682	\$ 80.31	\$ -	\$ 80.31	2.0%	3.0%	5.1%	\$ 88.64	\$ 0.05	\$ 0.04	\$ 88.72
BCCP	Emergency Department-A/B Hospital	682	\$ 29.65	\$ 0.80	\$ 30.46	2.0%	3.0%	5.1%	\$ 33.62	\$ -	\$ -	\$ 33.62
BCCP	Emergency Department-DRG Hospital	682	\$ 18.72	\$ 1.01	\$ 19.73	2.0%	3.0%	5.1%	\$ 21.78	\$ -	\$ -	\$ 21.78
BCCP	Emergency Department-Other Hospital	682	\$ -	\$ -	\$ -	2.0%	3.0%	5.1%	\$ -	\$ -	\$ -	\$ -
BCCP	Physician Services	682	\$ 1,531.98	\$ (0.49)	\$ 1,531.49	1.5%	2.0%	3.5%	\$ 1,641.52	\$ 0.36	\$ (0.73)	\$ 1,641.15
BCCP	DME and Miscellaneous	682	\$ 88.29	\$ -	\$ 88.29	3.5%	1.0%	4.5%	\$ 96.48	\$ 0.91	\$ -	\$ 97.39
BCCP	Substance Use	682	\$ 2.72	\$ -	\$ 2.72	3.3%	2.0%	5.3%	\$ 3.02	\$ -	\$ -	\$ 3.02
BCCP	Prescription Drugs	682	\$ 534.29	\$ -	\$ 534.29	2.2%	8.0%	10.5%	\$ 651.82	\$ 4.65	\$ 2.58	\$ 659.05
BCCP	Mental Health Services Inpatient	682	\$ 0.44	\$ -	\$ 0.44	0.5%	1.3%	1.8%	\$ 0.45	\$ -	\$ -	\$ 0.45
BCCP	SUD Residential	682	\$ 0.17	\$ -	\$ 0.17	0.5%	1.3%	1.8%	\$ 0.17	\$ -	\$ -	\$ 0.17
BCCP	ACT/SE	682	\$ 0.51	\$ -	\$ 0.51	3.3%	2.0%	5.3%	\$ 0.57	\$ -	\$ -	\$ 0.57
BCCP	Applied Behavior Analysis (ABA)	682	\$ -	\$ -	\$ -	3.3%	2.0%	5.3%	\$ -	\$ -	\$ -	\$ -
BCCP	MH Children's Wraparound	682	\$ -	\$ -	\$ -	3.3%	2.0%	5.3%	\$ -	\$ -	\$ -	\$ -
BCCP	Mental Health Other Non-Inpatient	682	\$ 71.95	\$ -	\$ 71.95	3.3%	2.0%	5.3%	\$ 79.80	\$ 2.81	\$ -	\$ 82.60
BCCP	NEMT	682	\$ 8.06	\$ -	\$ 8.06	3.5%	1.0%	4.5%	\$ 8.81	\$ -	\$ -	\$ 8.81
Total	Total	14,402,423	\$ 450.69	\$ 2.63	\$ 453.32	2.6%	2.6%	5.2%	\$ 502.04	\$ 3.77	\$ 0.92	\$ 506.74

CY27 CCO Rate Certification

Appendix B: CCOA and CCOB Statewide Rate Buildup

COA	COS	2025 Base Data				Annual Trend			PMPM Subtotal	Program Changes - PMPM		
		Member Months ¹	Base PMPM: Clinical Efficiencies Removed ²	Clinical Efficiencies TEL Adjustment ³	Final Base PMPM	Util/1,000	Unit Cost	PMPM		Benefits Update Project	Health Evidence Research Committee	Statewide Rate PMPM
PCR	All	965,386	\$ 523.46	\$ 3.45	\$ 526.90	2.9%	2.8%	5.8%	\$ 589.99	\$ 5.44	\$ 1.81	\$ 597.23
PWO	All	172,972	\$ 455.42	\$ 1.39	\$ 456.82	3.0%	2.4%	5.5%	\$ 508.67	\$ 4.51	\$ (0.44)	\$ 512.75
CHILD 00-01	All	267,168	\$ 953.14	\$ 1.67	\$ 954.81	1.2%	1.5%	2.7%	\$ 1,006.79	\$ 4.54	\$ (0.51)	\$ 1,010.81
CHILD 01-05	All	1,250,064	\$ 178.31	\$ 1.28	\$ 179.59	3.5%	2.0%	5.6%	\$ 200.18	\$ 3.13	\$ (0.25)	\$ 203.06
CHILD 06-18	All	3,481,085	\$ 219.59	\$ 0.87	\$ 220.46	3.3%	2.0%	5.4%	\$ 244.74	\$ 2.65	\$ 0.21	\$ 247.60
DUAL-MEDS	All	1,089,390	\$ 268.45	\$ -	\$ 268.45	1.6%	1.5%	3.2%	\$ 285.74	\$ 1.59	\$ (0.03)	\$ 287.30
ABAD & OAA	All	613,282	\$ 1,447.18	\$ 13.00	\$ 1,460.18	2.0%	2.4%	4.5%	\$ 1,593.03	\$ 7.25	\$ 3.44	\$ 1,603.71
FOSTER	All	153,924	\$ 704.39	\$ 1.14	\$ 705.54	5.4%	2.3%	7.8%	\$ 819.95	\$ 3.98	\$ 0.04	\$ 823.98
ACA 19-34	All	2,862,172	\$ 363.27	\$ 1.90	\$ 365.18	2.6%	3.3%	6.0%	\$ 410.31	\$ 3.23	\$ 0.66	\$ 414.21
ACA 35-44	All	1,447,424	\$ 533.78	\$ 2.79	\$ 536.57	2.5%	3.2%	5.8%	\$ 600.26	\$ 4.29	\$ 1.31	\$ 605.86
ACA 45-54	All	1,076,335	\$ 687.16	\$ 5.11	\$ 692.27	2.4%	2.9%	5.4%	\$ 768.67	\$ 5.36	\$ 2.21	\$ 776.23
ACA 55-64	All	1,008,975	\$ 809.00	\$ 6.03	\$ 815.03	2.4%	2.6%	5.0%	\$ 899.39	\$ 5.85	\$ 2.99	\$ 908.23
BBM 19-34	All	2,892	\$ 350.48	\$ 1.91	\$ 352.39	2.6%	3.3%	6.0%	\$ 395.81	\$ 4.15	\$ 3.21	\$ 403.17
BBM 35-44	All	1,550	\$ 511.63	\$ 2.62	\$ 514.25	2.5%	3.2%	5.8%	\$ 575.23	\$ 6.06	\$ 1.34	\$ 582.63
BBM 45-54	All	927	\$ 667.14	\$ 1.59	\$ 668.74	2.4%	2.9%	5.4%	\$ 742.47	\$ 7.54	\$ 3.70	\$ 753.71
BBM 55-64	All	543	\$ 782.15	\$ 3.65	\$ 785.80	2.4%	2.6%	5.1%	\$ 867.19	\$ 8.23	\$ 2.67	\$ 878.09
YSHCN	All	7,654	\$ 409.16	\$ -	\$ 409.16	2.5%	3.6%	6.2%	\$ 461.54	\$ 3.23	\$ 1.32	\$ 466.09
BCCP	All	682	\$ 3,564.08	\$ 1.33	\$ 3,565.40	1.8%	3.2%	5.1%	\$ 3,939.60	\$ 8.93	\$ 2.22	\$ 3,950.75
Total	Total	14,402,423	\$ 450.69	\$ 2.63	\$ 453.32	2.6%	2.6%	5.2%	\$ 502.04	\$ 3.77	\$ 0.92	\$ 506.74
All	Inpatient-A/B Hospital	14,402,423	\$ 6.30	\$ 0.20	\$ 6.50	2.6%	1.3%	3.8%	\$ 7.01	\$ -	\$ -	\$ 7.01
All	Inpatient-DRG Hospital	14,402,423	\$ 47.28	\$ 1.25	\$ 48.54	0.8%	1.3%	2.0%	\$ 50.53	\$ -	\$ 0.22	\$ 50.74
All	Inpatient-Other Hospital	14,402,423	\$ 4.70	\$ 0.11	\$ 4.82	0.7%	1.3%	2.0%	\$ 5.01	\$ -	\$ 0.04	\$ 5.05
All	Outpatient-A/B Hospital	14,402,423	\$ 11.75	\$ -	\$ 11.75	2.1%	3.5%	5.6%	\$ 13.11	\$ 0.11	\$ (0.05)	\$ 13.18
All	Outpatient-DRG Hospital	14,402,423	\$ 29.35	\$ -	\$ 29.35	2.1%	3.5%	5.7%	\$ 32.79	\$ 0.27	\$ 0.34	\$ 33.40
All	Outpatient-Other Hospital	14,402,423	\$ 11.59	\$ -	\$ 11.59	2.1%	3.4%	5.6%	\$ 12.92	\$ 0.11	\$ 0.02	\$ 13.05
All	Emergency Department-A/B Hospital	14,402,423	\$ 11.52	\$ 0.66	\$ 12.18	2.1%	3.4%	5.6%	\$ 13.57	\$ -	\$ -	\$ 13.57
All	Emergency Department-DRG Hospital	14,402,423	\$ 13.03	\$ 0.83	\$ 13.86	2.1%	3.5%	5.7%	\$ 15.48	\$ -	\$ -	\$ 15.48
All	Emergency Department-Other Hospital	14,402,423	\$ 0.79	\$ 0.04	\$ 0.83	2.1%	3.5%	5.8%	\$ 0.93	\$ -	\$ -	\$ 0.93
All	Physician Services	14,402,423	\$ 88.22	\$ (0.48)	\$ 87.74	3.2%	1.9%	5.1%	\$ 96.99	\$ 0.56	\$ (0.05)	\$ 97.51
All	DME and Miscellaneous	14,402,423	\$ 26.27	\$ -	\$ 26.27	3.2%	1.0%	4.2%	\$ 28.53	\$ 0.44	\$ 0.00	\$ 28.98
All	Substance Use	14,402,423	\$ 12.11	\$ -	\$ 12.11	3.1%	3.7%	7.0%	\$ 13.86	\$ -	\$ -	\$ 13.86
All	Prescription Drugs	14,402,423	\$ 74.66	\$ -	\$ 74.66	1.9%	4.2%	6.2%	\$ 84.21	\$ 1.51	\$ 0.39	\$ 86.11
All	Mental Health Services Inpatient	14,402,423	\$ 7.63	\$ -	\$ 7.63	1.3%	1.3%	2.6%	\$ 8.03	\$ -	\$ -	\$ 8.03
All	SUD Residential	14,402,423	\$ 6.25	\$ -	\$ 6.25	1.1%	1.3%	2.3%	\$ 6.54	\$ -	\$ -	\$ 6.54
All	ACT/SE	14,402,423	\$ 2.18	\$ -	\$ 2.18	3.0%	3.4%	6.5%	\$ 2.48	\$ -	\$ -	\$ 2.48
All	Applied Behavior Analysis (ABA)	14,402,423	\$ 3.87	\$ -	\$ 3.87	10.6%	1.3%	12.1%	\$ 4.86	\$ -	\$ -	\$ 4.86
All	MH Children's Wraparound	14,402,423	\$ 2.30	\$ -	\$ 2.30	4.1%	1.9%	6.1%	\$ 2.59	\$ -	\$ -	\$ 2.59
All	Mental Health Other Non-Inpatient	14,402,423	\$ 78.73	\$ -	\$ 78.73	3.6%	2.9%	6.6%	\$ 89.52	\$ 0.78	\$ -	\$ 90.30
All	NEMT	14,402,423	\$ 12.15	\$ -	\$ 12.15	2.7%	1.0%	3.7%	\$ 13.07	\$ -	\$ -	\$ 13.07
Total	Total	14,402,423	\$ 450.69	\$ 2.63	\$ 453.32	2.6%	2.6%	5.2%	\$ 502.04	\$ 3.77	\$ 0.92	\$ 506.74

CY27 CCO Rate Certification
Appendix B: CCOA and CCOB Statewide Rate Buildup

COA	COS	2025 Base Data				Annual Trend			PMPM Subtotal	Program Changes - PMPM		Statewide Rate PMPM
		Member Months ¹	Base PMPM: Clinical Efficiencies Removed ²	Clinical Efficiencies TEL Adjustment ³	Final Base PMPM	Util/1,000	Unit Cost	PMPM		Benefits Update Project	Health Evidence Research Committee	
All	Hospital (IP/OP/ED)	14,402,423	\$ 136.32	\$ 3.11	\$ 139.42	1.6%	2.5%	4.2%	\$ 151.36	\$ 0.48	\$ 0.57	\$ 152.42
All	Non-Hospital PH	14,402,423	\$ 126.64	\$ (0.48)	\$ 126.16	3.2%	1.6%	4.8%	\$ 138.60	\$ 1.01	\$ (0.05)	\$ 139.56
All	Pharmacy	14,402,423	\$ 74.66	\$ -	\$ 74.66	1.9%	4.2%	6.2%	\$ 84.21	\$ 1.51	\$ 0.39	\$ 86.11
All	Behavioral Health	14,402,423	\$ 113.08	\$ -	\$ 113.08	3.5%	2.8%	6.3%	\$ 127.87	\$ 0.78	\$ -	\$ 128.65
All	Total	14,402,423	\$ 450.69	\$ 2.63	\$ 453.32	2.6%	2.6%	5.2%	\$ 502.04	\$ 3.77	\$ 0.92	\$ 506.74

General Note:
- This appendix should be reviewed in conjunction with the accompanying rate certification narrative.

Footnotes:
1. Reflects CCOA plus CCOB enrollment.
2. Reflects repricing DRG hospital claims to 80% of Medicare (excluding DSH and uncompensated care) and a 100% Targeted Efficiency Level (TEL) assumption for all clinical efficiencies.
3. Reflects a revision of TEL assumption for Low Acuity Non-Emergency (LANE) and Potentially Preventable Admissions (PPA) clinical efficiencies to 50%.

CY27 CCO Rate Certification

Appendix B: CCOE and CCOG Statewide Rate Buildup

COA	COS	2025 Base Data				Annual Trend			PMPM Subtotal	Program Changes - PMPM		
		Member Months ¹	Base PMPM: Clinical Efficiencies Removed ²	Clinical Efficiencies TEL Adjustment ³	Final Base PMPM	Util/1,000	Unit Cost	PMPM		Benefits Update Project	Health Evidence Research Committee	Statewide Rate PMPM
PCR	Substance Use	965,386	\$ 21.37	\$ -	\$ 21.37	3.5%	4.0%	7.6%	\$ 24.76	\$ -	\$ -	\$ 24.76
PCR	Mental Health Services Inpatient	965,386	\$ 5.12	\$ -	\$ 5.12	1.0%	1.3%	2.3%	\$ 5.36	\$ -	\$ -	\$ 5.36
PCR	SUD Residential	965,386	\$ 12.63	\$ -	\$ 12.63	1.0%	1.3%	2.3%	\$ 13.21	\$ -	\$ -	\$ 13.21
PCR	ACT/SE	965,386	\$ 1.27	\$ -	\$ 1.27	3.5%	4.0%	7.6%	\$ 1.48	\$ -	\$ -	\$ 1.48
PCR	Applied Behavior Analysis (ABA)	965,386	\$ 0.00	\$ -	\$ 0.00	3.5%	4.0%	7.6%	\$ 0.00	\$ -	\$ -	\$ 0.00
PCR	MH Children's Wraparound	965,386	\$ 1.25	\$ -	\$ 1.25	3.5%	4.0%	7.6%	\$ 1.45	\$ -	\$ -	\$ 1.45
PCR	Mental Health Other Non-Inpatient	965,386	\$ 90.16	\$ -	\$ 90.16	3.5%	4.0%	7.6%	\$ 104.46	\$ 1.47	\$ -	\$ 105.93
PCR	NEMT	965,386	\$ 10.14	\$ -	\$ 10.14	3.0%	1.0%	4.0%	\$ 10.97	\$ -	\$ -	\$ 10.97
PWO	Substance Use	172,972	\$ 16.38	\$ -	\$ 16.38	3.5%	4.0%	7.6%	\$ 18.97	\$ -	\$ -	\$ 18.97
PWO	Mental Health Services Inpatient	172,972	\$ 5.20	\$ -	\$ 5.20	1.0%	1.3%	2.3%	\$ 5.44	\$ -	\$ -	\$ 5.44
PWO	SUD Residential	172,972	\$ 21.41	\$ -	\$ 21.41	1.0%	1.3%	2.3%	\$ 22.39	\$ -	\$ -	\$ 22.39
PWO	ACT/SE	172,972	\$ 0.87	\$ -	\$ 0.87	3.5%	4.0%	7.6%	\$ 1.01	\$ -	\$ -	\$ 1.01
PWO	Applied Behavior Analysis (ABA)	172,972	\$ -	\$ -	\$ -	3.5%	4.0%	7.6%	\$ -	\$ -	\$ -	\$ -
PWO	MH Children's Wraparound	172,972	\$ 0.78	\$ -	\$ 0.78	3.5%	4.0%	7.6%	\$ 0.91	\$ -	\$ -	\$ 0.91
PWO	Mental Health Other Non-Inpatient	172,972	\$ 73.81	\$ -	\$ 73.81	3.5%	4.0%	7.6%	\$ 85.52	\$ 0.68	\$ -	\$ 86.20
PWO	NEMT	172,972	\$ 7.93	\$ -	\$ 7.93	3.0%	1.0%	4.0%	\$ 8.58	\$ -	\$ -	\$ 8.58
CHILD 00-01	Substance Use	267,168	\$ 0.31	\$ -	\$ 0.31	4.5%	1.0%	5.5%	\$ 0.35	\$ -	\$ -	\$ 0.35
CHILD 00-01	Mental Health Services Inpatient	267,168	\$ 1.36	\$ -	\$ 1.36	3.0%	1.3%	4.3%	\$ 1.48	\$ -	\$ -	\$ 1.48
CHILD 00-01	SUD Residential	267,168	\$ 0.10	\$ -	\$ 0.10	3.0%	1.3%	4.3%	\$ 0.11	\$ -	\$ -	\$ 0.11
CHILD 00-01	ACT/SE	267,168	\$ 0.06	\$ -	\$ 0.06	4.5%	1.0%	5.5%	\$ 0.07	\$ -	\$ -	\$ 0.07
CHILD 00-01	Applied Behavior Analysis (ABA)	267,168	\$ 0.19	\$ -	\$ 0.19	4.5%	1.0%	5.5%	\$ 0.22	\$ -	\$ -	\$ 0.22
CHILD 00-01	MH Children's Wraparound	267,168	\$ 0.72	\$ -	\$ 0.72	4.5%	1.0%	5.5%	\$ 0.80	\$ -	\$ -	\$ 0.80
CHILD 00-01	Mental Health Other Non-Inpatient	267,168	\$ 14.01	\$ -	\$ 14.01	4.5%	1.0%	5.5%	\$ 15.61	\$ 0.00	\$ -	\$ 15.61
CHILD 00-01	NEMT	267,168	\$ 4.12	\$ -	\$ 4.12	4.5%	1.0%	5.5%	\$ 4.59	\$ -	\$ -	\$ 4.59
CHILD 01-05	Substance Use	1,250,064	\$ 0.36	\$ -	\$ 0.36	4.5%	1.0%	5.5%	\$ 0.40	\$ -	\$ -	\$ 0.40
CHILD 01-05	Mental Health Services Inpatient	1,250,064	\$ 2.58	\$ -	\$ 2.58	3.0%	1.3%	4.3%	\$ 2.81	\$ -	\$ -	\$ 2.81
CHILD 01-05	SUD Residential	1,250,064	\$ 0.10	\$ -	\$ 0.10	3.0%	1.3%	4.3%	\$ 0.11	\$ -	\$ -	\$ 0.11
CHILD 01-05	ACT/SE	1,250,064	\$ 0.06	\$ -	\$ 0.06	4.5%	1.0%	5.5%	\$ 0.07	\$ -	\$ -	\$ 0.07
CHILD 01-05	Applied Behavior Analysis (ABA)	1,250,064	\$ 15.44	\$ -	\$ 15.44	12.3%	1.0%	13.4%	\$ 19.85	\$ -	\$ -	\$ 19.85
CHILD 01-05	MH Children's Wraparound	1,250,064	\$ 3.06	\$ -	\$ 3.06	4.5%	1.0%	5.5%	\$ 3.41	\$ -	\$ -	\$ 3.41
CHILD 01-05	Mental Health Other Non-Inpatient	1,250,064	\$ 19.73	\$ -	\$ 19.73	4.5%	1.0%	5.5%	\$ 21.98	\$ 0.03	\$ -	\$ 22.01
CHILD 01-05	NEMT	1,250,064	\$ 3.10	\$ -	\$ 3.10	4.5%	1.0%	5.5%	\$ 3.45	\$ -	\$ -	\$ 3.45
CHILD 06-18	Substance Use	3,481,085	\$ 0.93	\$ -	\$ 0.93	4.5%	1.0%	5.5%	\$ 1.04	\$ -	\$ -	\$ 1.04
CHILD 06-18	Mental Health Services Inpatient	3,481,085	\$ 3.99	\$ -	\$ 3.99	3.0%	1.3%	4.3%	\$ 4.34	\$ -	\$ -	\$ 4.34
CHILD 06-18	SUD Residential	3,481,085	\$ 0.80	\$ -	\$ 0.80	3.0%	1.3%	4.3%	\$ 0.87	\$ -	\$ -	\$ 0.87
CHILD 06-18	ACT/SE	3,481,085	\$ 0.08	\$ -	\$ 0.08	4.5%	1.0%	5.5%	\$ 0.09	\$ -	\$ -	\$ 0.09
CHILD 06-18	Applied Behavior Analysis (ABA)	3,481,085	\$ 4.75	\$ -	\$ 4.75	12.3%	1.0%	13.4%	\$ 6.10	\$ -	\$ -	\$ 6.10
CHILD 06-18	MH Children's Wraparound	3,481,085	\$ 4.41	\$ -	\$ 4.41	4.5%	1.0%	5.5%	\$ 4.91	\$ -	\$ -	\$ 4.91
CHILD 06-18	Mental Health Other Non-Inpatient	3,481,085	\$ 68.62	\$ -	\$ 68.62	4.5%	1.0%	5.5%	\$ 76.44	\$ 0.21	\$ -	\$ 76.65
CHILD 06-18	NEMT	3,481,085	\$ 3.40	\$ -	\$ 3.40	4.5%	1.0%	5.5%	\$ 3.78	\$ -	\$ -	\$ 3.78
DUAL-MEDS	Substance Use	1,089,390	\$ 5.14	\$ -	\$ 5.14	2.3%	2.0%	4.3%	\$ 5.59	\$ -	\$ -	\$ 5.59
DUAL-MEDS	Mental Health Services Inpatient	1,089,390	\$ 3.68	\$ -	\$ 3.68	1.0%	1.3%	2.3%	\$ 3.85	\$ -	\$ -	\$ 3.85
DUAL-MEDS	SUD Residential	1,089,390	\$ 1.85	\$ -	\$ 1.85	1.0%	1.3%	2.3%	\$ 1.93	\$ -	\$ -	\$ 1.93
DUAL-MEDS	ACT/SE	1,089,390	\$ 3.81	\$ -	\$ 3.81	2.3%	2.0%	4.3%	\$ 4.14	\$ -	\$ -	\$ 4.14
DUAL-MEDS	Applied Behavior Analysis (ABA)	1,089,390	\$ 0.14	\$ -	\$ 0.14	2.3%	2.0%	4.3%	\$ 0.15	\$ -	\$ -	\$ 0.15
DUAL-MEDS	MH Children's Wraparound	1,089,390	\$ 0.86	\$ -	\$ 0.86	2.3%	2.0%	4.3%	\$ 0.93	\$ -	\$ -	\$ 0.93
DUAL-MEDS	Mental Health Other Non-Inpatient	1,089,390	\$ 48.40	\$ -	\$ 48.40	2.3%	2.0%	4.3%	\$ 52.64	\$ 0.87	\$ -	\$ 53.51
DUAL-MEDS	NEMT	1,089,390	\$ 52.67	\$ -	\$ 52.67	2.0%	1.0%	3.0%	\$ 55.90	\$ -	\$ -	\$ 55.90

CY27 CCO Rate Certification

Appendix B: CCOE and CCOG Statewide Rate Buildup

COA	COS	2025 Base Data				Annual Trend			PMPM Subtotal	Program Changes - PMPM		
		Member Months ¹	Base PMPM: Clinical Efficiencies Removed ²	Clinical Efficiencies TEL Adjustment ³	Final Base PMPM	Util/1,000	Unit Cost	PMPM		Benefits Update Project	Health Evidence Research Committee	Statewide Rate PMPM
ABAD & OAA	Substance Use	613,282	\$ 17.70	\$ -	\$ 17.70	3.3%	2.0%	5.3%	\$ 19.63	\$ -	\$ -	\$ 19.63
ABAD & OAA	Mental Health Services Inpatient	613,282	\$ 26.92	\$ -	\$ 26.92	0.5%	1.3%	1.8%	\$ 27.87	\$ -	\$ -	\$ 27.87
ABAD & OAA	SUD Residential	613,282	\$ 5.11	\$ -	\$ 5.11	0.5%	1.3%	1.8%	\$ 5.29	\$ -	\$ -	\$ 5.29
ABAD & OAA	ACT/SE	613,282	\$ 6.64	\$ -	\$ 6.64	3.3%	2.0%	5.3%	\$ 7.37	\$ -	\$ -	\$ 7.37
ABAD & OAA	Applied Behavior Analysis (ABA)	613,282	\$ 28.68	\$ -	\$ 28.68	7.0%	2.0%	9.1%	\$ 34.17	\$ -	\$ -	\$ 34.17
ABAD & OAA	MH Children's Wraparound	613,282	\$ 3.59	\$ -	\$ 3.59	3.3%	2.0%	5.3%	\$ 3.98	\$ -	\$ -	\$ 3.98
ABAD & OAA	Mental Health Other Non-Inpatient	613,282	\$ 144.96	\$ -	\$ 144.96	3.3%	2.0%	5.3%	\$ 160.78	\$ 2.10	\$ -	\$ 162.88
ABAD & OAA	NEMT	613,282	\$ 40.46	\$ -	\$ 40.46	3.5%	1.0%	4.5%	\$ 44.21	\$ -	\$ -	\$ 44.21
FOSTER	Substance Use	153,924	\$ 4.83	\$ -	\$ 4.83	7.0%	2.0%	9.1%	\$ 5.76	\$ -	\$ -	\$ 5.76
FOSTER	Mental Health Services Inpatient	153,924	\$ 16.02	\$ -	\$ 16.02	3.0%	1.8%	4.8%	\$ 17.60	\$ -	\$ -	\$ 17.60
FOSTER	SUD Residential	153,924	\$ 2.42	\$ -	\$ 2.42	3.0%	1.8%	4.8%	\$ 2.65	\$ -	\$ -	\$ 2.65
FOSTER	ACT/SE	153,924	\$ 0.68	\$ -	\$ 0.68	7.0%	2.0%	9.1%	\$ 0.81	\$ -	\$ -	\$ 0.81
FOSTER	Applied Behavior Analysis (ABA)	153,924	\$ 13.48	\$ -	\$ 13.48	12.3%	2.0%	14.5%	\$ 17.68	\$ -	\$ -	\$ 17.68
FOSTER	MH Children's Wraparound	153,924	\$ 12.31	\$ -	\$ 12.31	7.0%	2.0%	9.1%	\$ 14.66	\$ -	\$ -	\$ 14.66
FOSTER	Mental Health Other Non-Inpatient	153,924	\$ 365.87	\$ -	\$ 365.87	7.0%	2.0%	9.1%	\$ 435.81	\$ 0.29	\$ -	\$ 436.10
FOSTER	NEMT	153,924	\$ 7.10	\$ -	\$ 7.10	5.0%	1.0%	6.1%	\$ 7.98	\$ -	\$ -	\$ 7.98
ACA 19-34	Substance Use	2,862,172	\$ 15.10	\$ -	\$ 15.10	3.0%	4.0%	7.1%	\$ 17.33	\$ -	\$ -	\$ 17.33
ACA 19-34	Mental Health Services Inpatient	2,862,172	\$ 11.74	\$ -	\$ 11.74	1.0%	1.3%	2.3%	\$ 12.28	\$ -	\$ -	\$ 12.28
ACA 19-34	SUD Residential	2,862,172	\$ 8.16	\$ -	\$ 8.16	1.0%	1.3%	2.3%	\$ 8.53	\$ -	\$ -	\$ 8.53
ACA 19-34	ACT/SE	2,862,172	\$ 3.37	\$ -	\$ 3.37	3.0%	4.0%	7.1%	\$ 3.87	\$ -	\$ -	\$ 3.87
ACA 19-34	Applied Behavior Analysis (ABA)	2,862,172	\$ 0.01	\$ -	\$ 0.01	3.0%	4.0%	7.1%	\$ 0.01	\$ -	\$ -	\$ 0.01
ACA 19-34	MH Children's Wraparound	2,862,172	\$ 0.83	\$ -	\$ 0.83	3.0%	4.0%	7.1%	\$ 0.96	\$ -	\$ -	\$ 0.96
ACA 19-34	Mental Health Other Non-Inpatient	2,862,172	\$ 97.95	\$ -	\$ 97.95	3.0%	4.0%	7.1%	\$ 112.40	\$ 0.59	\$ -	\$ 112.98
ACA 19-34	NEMT	2,862,172	\$ 6.17	\$ -	\$ 6.17	2.5%	1.0%	3.5%	\$ 6.61	\$ -	\$ -	\$ 6.61
ACA 35-44	Substance Use	1,447,424	\$ 31.73	\$ -	\$ 31.73	3.0%	4.0%	7.1%	\$ 36.41	\$ -	\$ -	\$ 36.41
ACA 35-44	Mental Health Services Inpatient	1,447,424	\$ 10.53	\$ -	\$ 10.53	1.0%	1.3%	2.3%	\$ 11.01	\$ -	\$ -	\$ 11.01
ACA 35-44	SUD Residential	1,447,424	\$ 16.70	\$ -	\$ 16.70	1.0%	1.3%	2.3%	\$ 17.46	\$ -	\$ -	\$ 17.46
ACA 35-44	ACT/SE	1,447,424	\$ 3.49	\$ -	\$ 3.49	3.0%	4.0%	7.1%	\$ 4.01	\$ -	\$ -	\$ 4.01
ACA 35-44	Applied Behavior Analysis (ABA)	1,447,424	\$ -	\$ -	\$ -	3.0%	4.0%	7.1%	\$ -	\$ -	\$ -	\$ -
ACA 35-44	MH Children's Wraparound	1,447,424	\$ 1.86	\$ -	\$ 1.86	3.0%	4.0%	7.1%	\$ 2.14	\$ -	\$ -	\$ 2.14
ACA 35-44	Mental Health Other Non-Inpatient	1,447,424	\$ 100.62	\$ -	\$ 100.62	3.0%	4.0%	7.1%	\$ 115.46	\$ 1.05	\$ -	\$ 116.51
ACA 35-44	NEMT	1,447,424	\$ 12.02	\$ -	\$ 12.02	2.5%	1.0%	3.5%	\$ 12.88	\$ -	\$ -	\$ 12.88
ACA 45-54	Substance Use	1,076,335	\$ 25.32	\$ -	\$ 25.32	3.0%	4.0%	7.1%	\$ 29.05	\$ -	\$ -	\$ 29.05
ACA 45-54	Mental Health Services Inpatient	1,076,335	\$ 8.38	\$ -	\$ 8.38	1.0%	1.3%	2.3%	\$ 8.77	\$ -	\$ -	\$ 8.77
ACA 45-54	SUD Residential	1,076,335	\$ 11.18	\$ -	\$ 11.18	1.0%	1.3%	2.3%	\$ 11.70	\$ -	\$ -	\$ 11.70
ACA 45-54	ACT/SE	1,076,335	\$ 3.34	\$ -	\$ 3.34	3.0%	4.0%	7.1%	\$ 3.83	\$ -	\$ -	\$ 3.83
ACA 45-54	Applied Behavior Analysis (ABA)	1,076,335	\$ -	\$ -	\$ -	3.0%	4.0%	7.1%	\$ -	\$ -	\$ -	\$ -
ACA 45-54	MH Children's Wraparound	1,076,335	\$ 1.42	\$ -	\$ 1.42	3.0%	4.0%	7.1%	\$ 1.63	\$ -	\$ -	\$ 1.63
ACA 45-54	Mental Health Other Non-Inpatient	1,076,335	\$ 80.86	\$ -	\$ 80.86	3.0%	4.0%	7.1%	\$ 92.78	\$ 1.56	\$ -	\$ 94.34
ACA 45-54	NEMT	1,076,335	\$ 14.71	\$ -	\$ 14.71	2.5%	1.0%	3.5%	\$ 15.76	\$ -	\$ -	\$ 15.76
ACA 55-64	Substance Use	1,008,975	\$ 13.30	\$ -	\$ 13.30	3.0%	4.0%	7.1%	\$ 15.27	\$ -	\$ -	\$ 15.27
ACA 55-64	Mental Health Services Inpatient	1,008,975	\$ 5.45	\$ -	\$ 5.45	1.0%	1.3%	2.3%	\$ 5.70	\$ -	\$ -	\$ 5.70
ACA 55-64	SUD Residential	1,008,975	\$ 6.01	\$ -	\$ 6.01	1.0%	1.3%	2.3%	\$ 6.29	\$ -	\$ -	\$ 6.29
ACA 55-64	ACT/SE	1,008,975	\$ 2.98	\$ -	\$ 2.98	3.0%	4.0%	7.1%	\$ 3.42	\$ -	\$ -	\$ 3.42
ACA 55-64	Applied Behavior Analysis (ABA)	1,008,975	\$ -	\$ -	\$ -	3.0%	4.0%	7.1%	\$ -	\$ -	\$ -	\$ -
ACA 55-64	MH Children's Wraparound	1,008,975	\$ 0.80	\$ -	\$ 0.80	3.0%	4.0%	7.1%	\$ 0.91	\$ -	\$ -	\$ 0.91
ACA 55-64	Mental Health Other Non-Inpatient	1,008,975	\$ 54.11	\$ -	\$ 54.11	3.0%	4.0%	7.1%	\$ 62.09	\$ 1.75	\$ -	\$ 63.84
ACA 55-64	NEMT	1,008,975	\$ 12.60	\$ -	\$ 12.60	2.5%	1.0%	3.5%	\$ 13.50	\$ -	\$ -	\$ 13.50

CY27 CCO Rate Certification

Appendix B: CCOE and CCOG Statewide Rate Buildup

COA	COS	2025 Base Data				Annual Trend			PMPM Subtotal	Program Changes - PMPM		Statewide Rate PMPM
		Member Months ¹	Base PMPM: Clinical Efficiencies Removed ²	Clinical Efficiencies TEL Adjustment ³	Final Base PMPM	Util/1,000	Unit Cost	PMPM		Benefits Update Project	Health Evidence Research Committee	
BBM 19-34	Substance Use	2,892	\$ 14.96	\$ -	\$ 14.96	3.0%	4.0%	7.1%	\$ 17.16	\$ -	\$ -	\$ 17.16
BBM 19-34	Mental Health Services Inpatient	2,892	\$ 11.06	\$ -	\$ 11.06	1.0%	1.3%	2.3%	\$ 11.57	\$ -	\$ -	\$ 11.57
BBM 19-34	SUD Residential	2,892	\$ 8.68	\$ -	\$ 8.68	1.0%	1.3%	2.3%	\$ 9.08	\$ -	\$ -	\$ 9.08
BBM 19-34	ACT/SE	2,892	\$ 2.94	\$ -	\$ 2.94	3.0%	4.0%	7.1%	\$ 3.38	\$ -	\$ -	\$ 3.38
BBM 19-34	Applied Behavior Analysis (ABA)	2,892	\$ 0.01	\$ -	\$ 0.01	3.0%	4.0%	7.1%	\$ 0.01	\$ -	\$ -	\$ 0.01
BBM 19-34	MH Children's Wraparound	2,892	\$ 0.77	\$ -	\$ 0.77	3.0%	4.0%	7.1%	\$ 0.89	\$ -	\$ -	\$ 0.89
BBM 19-34	Mental Health Other Non-Inpatient	2,892	\$ 91.29	\$ -	\$ 91.29	3.0%	4.0%	7.1%	\$ 104.75	\$ 0.66	\$ -	\$ 105.40
BBM 19-34	NEMT	2,892	\$ 5.89	\$ -	\$ 5.89	2.5%	1.0%	3.5%	\$ 6.31	\$ -	\$ -	\$ 6.31
BBM 35-44	Substance Use	1,550	\$ 30.45	\$ -	\$ 30.45	3.0%	4.0%	7.1%	\$ 34.94	\$ -	\$ -	\$ 34.94
BBM 35-44	Mental Health Services Inpatient	1,550	\$ 9.28	\$ -	\$ 9.28	1.0%	1.3%	2.3%	\$ 9.71	\$ -	\$ -	\$ 9.71
BBM 35-44	SUD Residential	1,550	\$ 16.95	\$ -	\$ 16.95	1.0%	1.3%	2.3%	\$ 17.73	\$ -	\$ -	\$ 17.73
BBM 35-44	ACT/SE	1,550	\$ 3.05	\$ -	\$ 3.05	3.0%	4.0%	7.1%	\$ 3.50	\$ -	\$ -	\$ 3.50
BBM 35-44	Applied Behavior Analysis (ABA)	1,550	\$ -	\$ -	\$ -	3.0%	4.0%	7.1%	\$ -	\$ -	\$ -	\$ -
BBM 35-44	MH Children's Wraparound	1,550	\$ 1.86	\$ -	\$ 1.86	3.0%	4.0%	7.1%	\$ 2.14	\$ -	\$ -	\$ 2.14
BBM 35-44	Mental Health Other Non-Inpatient	1,550	\$ 91.59	\$ -	\$ 91.59	3.0%	4.0%	7.1%	\$ 105.10	\$ 1.34	\$ -	\$ 106.44
BBM 35-44	NEMT	1,550	\$ 10.92	\$ -	\$ 10.92	2.5%	1.0%	3.5%	\$ 11.71	\$ -	\$ -	\$ 11.71
BBM 45-54	Substance Use	927	\$ 23.86	\$ -	\$ 23.86	3.0%	4.0%	7.1%	\$ 27.38	\$ -	\$ -	\$ 27.38
BBM 45-54	Mental Health Services Inpatient	927	\$ 6.92	\$ -	\$ 6.92	1.0%	1.3%	2.3%	\$ 7.23	\$ -	\$ -	\$ 7.23
BBM 45-54	SUD Residential	927	\$ 11.69	\$ -	\$ 11.69	1.0%	1.3%	2.3%	\$ 12.23	\$ -	\$ -	\$ 12.23
BBM 45-54	ACT/SE	927	\$ 2.84	\$ -	\$ 2.84	3.0%	4.0%	7.1%	\$ 3.26	\$ -	\$ -	\$ 3.26
BBM 45-54	Applied Behavior Analysis (ABA)	927	\$ -	\$ -	\$ -	3.0%	4.0%	7.1%	\$ -	\$ -	\$ -	\$ -
BBM 45-54	MH Children's Wraparound	927	\$ 1.38	\$ -	\$ 1.38	3.0%	4.0%	7.1%	\$ 1.59	\$ -	\$ -	\$ 1.59
BBM 45-54	Mental Health Other Non-Inpatient	927	\$ 70.56	\$ -	\$ 70.56	3.0%	4.0%	7.1%	\$ 80.97	\$ 1.94	\$ -	\$ 82.91
BBM 45-54	NEMT	927	\$ 12.81	\$ -	\$ 12.81	2.5%	1.0%	3.5%	\$ 13.73	\$ -	\$ -	\$ 13.73
BBM 55-64	Substance Use	543	\$ 12.84	\$ -	\$ 12.84	3.0%	4.0%	7.1%	\$ 14.74	\$ -	\$ -	\$ 14.74
BBM 55-64	Mental Health Services Inpatient	543	\$ 4.80	\$ -	\$ 4.80	1.0%	1.3%	2.3%	\$ 5.02	\$ -	\$ -	\$ 5.02
BBM 55-64	SUD Residential	543	\$ 5.84	\$ -	\$ 5.84	1.0%	1.3%	2.3%	\$ 6.11	\$ -	\$ -	\$ 6.11
BBM 55-64	ACT/SE	543	\$ 2.74	\$ -	\$ 2.74	3.0%	4.0%	7.1%	\$ 3.14	\$ -	\$ -	\$ 3.14
BBM 55-64	Applied Behavior Analysis (ABA)	543	\$ -	\$ -	\$ -	3.0%	4.0%	7.1%	\$ -	\$ -	\$ -	\$ -
BBM 55-64	MH Children's Wraparound	543	\$ 0.88	\$ -	\$ 0.88	3.0%	4.0%	7.1%	\$ 1.01	\$ -	\$ -	\$ 1.01
BBM 55-64	Mental Health Other Non-Inpatient	543	\$ 49.94	\$ -	\$ 49.94	3.0%	4.0%	7.1%	\$ 57.30	\$ 2.17	\$ -	\$ 59.48
BBM 55-64	NEMT	543	\$ 11.15	\$ -	\$ 11.15	2.5%	1.0%	3.5%	\$ 11.95	\$ -	\$ -	\$ 11.95
YSHCN	Substance Use	7,654	\$ 3.92	\$ -	\$ 3.92	3.0%	4.0%	7.1%	\$ 4.49	\$ -	\$ -	\$ 4.49
YSHCN	Mental Health Services Inpatient	7,654	\$ 20.06	\$ -	\$ 20.06	1.0%	1.3%	2.3%	\$ 20.98	\$ -	\$ -	\$ 20.98
YSHCN	SUD Residential	7,654	\$ 0.11	\$ -	\$ 0.11	1.0%	1.3%	2.3%	\$ 0.11	\$ -	\$ -	\$ 0.11
YSHCN	ACT/SE	7,654	\$ 1.10	\$ -	\$ 1.10	3.0%	4.0%	7.1%	\$ 1.26	\$ -	\$ -	\$ 1.26
YSHCN	Applied Behavior Analysis (ABA)	7,654	\$ -	\$ -	\$ -	3.0%	4.0%	7.1%	\$ -	\$ -	\$ -	\$ -
YSHCN	MH Children's Wraparound	7,654	\$ 0.06	\$ -	\$ 0.06	3.0%	4.0%	7.1%	\$ 0.07	\$ -	\$ -	\$ 0.07
YSHCN	Mental Health Other Non-Inpatient	7,654	\$ 100.90	\$ -	\$ 100.90	3.0%	4.0%	7.1%	\$ 115.78	\$ 0.59	\$ -	\$ 116.37
YSHCN	NEMT	7,654	\$ 4.49	\$ -	\$ 4.49	2.5%	1.0%	3.5%	\$ 4.81	\$ -	\$ -	\$ 4.81

CY27 CCO Rate Certification

Appendix B: CCOE and CCOG Statewide Rate Buildup

COA	COS	2025 Base Data				Annual Trend			PMPM Subtotal	Program Changes - PMPM		
		Member Months ¹	Base PMPM: Clinical Efficiencies Removed ²	Clinical Efficiencies TEL Adjustment ³	Final Base PMPM	Util/1,000	Unit Cost	PMPM		Benefits Update Project	Health Evidence Research Committee	Statewide Rate PMPM
BCCP	Substance Use	682	\$ 2.72	\$ -	\$ 2.72	3.3%	2.0%	5.3%	\$ 3.02	\$ -	\$ -	\$ 3.02
BCCP	Mental Health Services Inpatient	682	\$ 0.44	\$ -	\$ 0.44	0.5%	1.3%	1.8%	\$ 0.45	\$ -	\$ -	\$ 0.45
BCCP	SUD Residential	682	\$ 0.17	\$ -	\$ 0.17	0.5%	1.3%	1.8%	\$ 0.17	\$ -	\$ -	\$ 0.17
BCCP	ACT/SE	682	\$ 0.51	\$ -	\$ 0.51	3.3%	2.0%	5.3%	\$ 0.57	\$ -	\$ -	\$ 0.57
BCCP	Applied Behavior Analysis (ABA)	682	\$ -	\$ -	\$ -	3.3%	2.0%	5.3%	\$ -	\$ -	\$ -	\$ -
BCCP	MH Children's Wraparound	682	\$ -	\$ -	\$ -	3.3%	2.0%	5.3%	\$ -	\$ -	\$ -	\$ -
BCCP	Mental Health Other Non-Inpatient	682	\$ 71.95	\$ -	\$ 71.95	3.3%	2.0%	5.3%	\$ 79.80	\$ 2.81	\$ -	\$ 82.60
BCCP	NEMT	682	\$ 8.06	\$ -	\$ 8.06	3.5%	1.0%	4.5%	\$ 8.81	\$ -	\$ -	\$ 8.81
Total	Total	14,402,423	\$ 125.23	\$ -	\$ 125.23	3.4%	2.6%	6.1%	\$ 140.95	\$ 0.78	\$ -	\$ 141.73
PCR	All	965,386	\$ 141.95	\$ -	\$ 141.95	3.2%	3.5%	6.7%	\$ 161.69	\$ 1.47	\$ -	\$ 163.16
PWO	All	172,972	\$ 126.39	\$ -	\$ 126.39	2.9%	3.3%	6.3%	\$ 142.83	\$ 0.68	\$ -	\$ 143.51
CHILD 00-01	All	267,168	\$ 20.87	\$ -	\$ 20.87	4.4%	1.0%	5.5%	\$ 23.21	\$ 0.00	\$ -	\$ 23.21
CHILD 01-05	All	1,250,064	\$ 44.43	\$ -	\$ 44.43	7.2%	1.0%	8.3%	\$ 52.07	\$ 0.03	\$ -	\$ 52.10
CHILD 06-18	All	3,481,085	\$ 86.98	\$ -	\$ 86.98	4.9%	1.0%	5.9%	\$ 97.58	\$ 0.21	\$ -	\$ 97.78
DUAL-MEDS	All	1,089,390	\$ 116.54	\$ -	\$ 116.54	2.1%	1.5%	3.6%	\$ 125.14	\$ 0.87	\$ -	\$ 126.01
ABAD & OAA	All	613,282	\$ 274.07	\$ -	\$ 274.07	3.4%	1.8%	5.2%	\$ 303.30	\$ 2.10	\$ -	\$ 305.40
FOSTER	All	153,924	\$ 422.71	\$ -	\$ 422.71	7.0%	2.0%	9.1%	\$ 502.94	\$ 0.29	\$ -	\$ 503.23
ACA 19-34	All	2,862,172	\$ 143.34	\$ -	\$ 143.34	2.7%	3.5%	6.3%	\$ 161.98	\$ 0.59	\$ -	\$ 162.57
ACA 35-44	All	1,447,424	\$ 176.95	\$ -	\$ 176.95	2.7%	3.4%	6.1%	\$ 199.37	\$ 1.05	\$ -	\$ 200.42
ACA 45-54	All	1,076,335	\$ 145.21	\$ -	\$ 145.21	2.7%	3.3%	6.1%	\$ 163.52	\$ 1.56	\$ -	\$ 165.08
ACA 55-64	All	1,008,975	\$ 95.26	\$ -	\$ 95.26	2.7%	3.3%	6.1%	\$ 107.19	\$ 1.75	\$ -	\$ 108.94
BBM 19-34	All	2,892	\$ 135.60	\$ -	\$ 135.60	2.7%	3.5%	6.3%	\$ 153.14	\$ 0.66	\$ -	\$ 153.80
BBM 35-44	All	1,550	\$ 164.11	\$ -	\$ 164.11	2.6%	3.4%	6.1%	\$ 184.82	\$ 1.34	\$ -	\$ 186.16
BBM 45-54	All	927	\$ 130.06	\$ -	\$ 130.06	2.7%	3.3%	6.1%	\$ 146.38	\$ 1.94	\$ -	\$ 148.32
BBM 55-64	All	543	\$ 88.19	\$ -	\$ 88.19	2.7%	3.3%	6.1%	\$ 99.27	\$ 2.17	\$ -	\$ 101.44
YSHCN	All	7,654	\$ 130.64	\$ -	\$ 130.64	2.7%	3.5%	6.3%	\$ 147.51	\$ 0.59	\$ -	\$ 148.10
BCCP	All	682	\$ 83.84	\$ -	\$ 83.84	3.3%	1.9%	5.2%	\$ 92.81	\$ 2.81	\$ -	\$ 95.62
Total	Total	14,402,423	\$ 125.23	\$ -	\$ 125.23	3.4%	2.6%	6.1%	\$ 140.95	\$ 0.78	\$ -	\$ 141.73
All	Substance Use	14,402,423	\$ 12.11	\$ -	\$ 12.11	3.1%	3.7%	7.0%	\$ 13.86	\$ -	\$ -	\$ 13.86
All	Mental Health Services Inpatient	14,402,423	\$ 7.63	\$ -	\$ 7.63	1.3%	1.3%	2.6%	\$ 8.03	\$ -	\$ -	\$ 8.03
All	SUD Residential	14,402,423	\$ 6.25	\$ -	\$ 6.25	1.1%	1.3%	2.3%	\$ 6.54	\$ -	\$ -	\$ 6.54
All	ACT/SE	14,402,423	\$ 2.18	\$ -	\$ 2.18	3.0%	3.4%	6.5%	\$ 2.48	\$ -	\$ -	\$ 2.48
All	Applied Behavior Analysis (ABA)	14,402,423	\$ 3.87	\$ -	\$ 3.87	10.6%	1.3%	12.1%	\$ 4.86	\$ -	\$ -	\$ 4.86
All	MH Children's Wraparound	14,402,423	\$ 2.30	\$ -	\$ 2.30	4.1%	1.9%	6.1%	\$ 2.59	\$ -	\$ -	\$ 2.59
All	Mental Health Other Non-Inpatient	14,402,423	\$ 78.73	\$ -	\$ 78.73	3.6%	2.9%	6.6%	\$ 89.52	\$ 0.78	\$ -	\$ 90.30
All	NEMT	14,402,423	\$ 12.15	\$ -	\$ 12.15	2.7%	1.0%	3.7%	\$ 13.07	\$ -	\$ -	\$ 13.07
Total	Total	14,402,423	\$ 125.23	\$ -	\$ 125.23	3.4%	2.6%	6.1%	\$ 140.95	\$ 0.78	\$ -	\$ 141.73

General Note:

- This appendix should be reviewed in conjunction with the accompanying rate certification narrative.

Footnotes:

1. Reflects CCOA plus CCOB enrollment.
2. Reflects repricing DRG hospital claims to 80% of Medicare (excluding DSH and uncompensated care) and a 100% Targeted Efficiency Level (TEL) assumption for all clinical efficiencies.
3. Not applicable to CCOE/CCOG.

CY27 CCO Rate Certification
Appendix B: CCOF Statewide Rate Buildup

COA	COS	2025 Base Data				Annual Trend			PMPM Subtotal	Program Changes - PMPM		
		Member Months ¹	Base PMPM: Clinical Efficiencies Removed ²	Clinical Efficiencies TEL Adjustment ³	Final Base PMPM	Util/1,000	Unit Cost	PMPM		Benefits Update Project	Health Evidence Research Committee	Statewide Rate PMPM
PCR	NEMT	965,386	\$ 10.14	\$ -	\$ 10.14	3.0%	1.0%	4.0%	\$ 10.97	\$ -	\$ -	\$ 10.97
PWO	NEMT	172,972	\$ 7.93	\$ -	\$ 7.93	3.5%	4.0%	7.6%	\$ 9.18	\$ -	\$ -	\$ 9.18
CHILD 00-01	NEMT	267,168	\$ 4.12	\$ -	\$ 4.12	4.5%	1.0%	5.5%	\$ 4.59	\$ -	\$ -	\$ 4.59
CHILD 01-05	NEMT	1,250,064	\$ 3.10	\$ -	\$ 3.10	3.0%	1.3%	4.3%	\$ 3.37	\$ -	\$ -	\$ 3.37
CHILD 06-18	NEMT	3,481,085	\$ 3.40	\$ -	\$ 3.40	4.5%	1.0%	5.5%	\$ 3.78	\$ -	\$ -	\$ 3.78
DUAL-MEDS	NEMT	1,089,390	\$ 52.67	\$ -	\$ 52.67	1.5%	1.5%	3.0%	\$ 55.90	\$ -	\$ -	\$ 55.90
ABAD & OAA	NEMT	613,282	\$ 40.46	\$ -	\$ 40.46	2.0%	3.0%	5.1%	\$ 44.66	\$ -	\$ -	\$ 44.66
FOSTER	NEMT	153,924	\$ 7.10	\$ -	\$ 7.10	8.0%	2.0%	10.2%	\$ 8.61	\$ -	\$ -	\$ 8.61
ACA 19-34	NEMT	2,862,172	\$ 6.17	\$ -	\$ 6.17	2.0%	4.0%	6.1%	\$ 6.94	\$ -	\$ -	\$ 6.94
ACA 35-44	NEMT	1,447,424	\$ 12.02	\$ -	\$ 12.02	1.0%	1.3%	2.3%	\$ 12.57	\$ -	\$ -	\$ 12.57
ACA 45-54	NEMT	1,076,335	\$ 14.71	\$ -	\$ 14.71	0.0%	0.0%	0.0%	\$ 14.71	\$ -	\$ -	\$ 14.71
ACA 55-64	NEMT	1,008,975	\$ 12.60	\$ -	\$ 12.60	0.0%	0.0%	0.0%	\$ 12.60	\$ -	\$ -	\$ 12.60
BBM 19-34	NEMT	2,892	\$ 5.89	\$ -	\$ 5.89	2.5%	1.0%	3.5%	\$ 6.31	\$ -	\$ -	\$ 6.31
BBM 35-44	NEMT	1,550	\$ 10.92	\$ -	\$ 10.92	3.0%	4.0%	7.1%	\$ 12.53	\$ -	\$ -	\$ 12.53
BBM 45-54	NEMT	927	\$ 12.81	\$ -	\$ 12.81	3.0%	4.0%	7.1%	\$ 14.70	\$ -	\$ -	\$ 14.70
BBM 55-64	NEMT	543	\$ 11.15	\$ -	\$ 11.15	1.0%	1.3%	2.3%	\$ 11.66	\$ -	\$ -	\$ 11.66
YSHCN	NEMT	7,654	\$ 4.49	\$ -	\$ 4.49	3.0%	4.0%	7.1%	\$ 5.15	\$ -	\$ -	\$ 5.15
BCCP	NEMT	682	\$ 8.06	\$ -	\$ 8.06	4.0%	2.0%	6.1%	\$ 9.07	\$ -	\$ -	\$ 9.07
Total	Total	14,402,423	\$ 12.15	\$ -	\$ 12.15	1.7%	1.7%	\$ -	\$ 12.99	\$ -	\$ -	\$ 12.99
PCR	All	965,386	\$ 10.14	\$ -	\$ 10.14	3.0%	1.0%	4.0%	\$ 10.97	\$ -	\$ -	\$ 10.97
PWO	All	172,972	\$ 7.93	\$ -	\$ 7.93	3.5%	4.0%	7.6%	\$ 9.18	\$ -	\$ -	\$ 9.18
CHILD 00-01	All	267,168	\$ 4.12	\$ -	\$ 4.12	4.5%	1.0%	5.5%	\$ 4.59	\$ -	\$ -	\$ 4.59
CHILD 01-05	All	1,250,064	\$ 3.10	\$ -	\$ 3.10	3.0%	1.3%	4.3%	\$ 3.37	\$ -	\$ -	\$ 3.37
CHILD 06-18	All	3,481,085	\$ 3.40	\$ -	\$ 3.40	4.5%	1.0%	5.5%	\$ 3.78	\$ -	\$ -	\$ 3.78
DUAL-MEDS	All	1,089,390	\$ 52.67	\$ -	\$ 52.67	1.5%	1.5%	3.0%	\$ 55.90	\$ -	\$ -	\$ 55.90
ABAD & OAA	All	613,282	\$ 40.46	\$ -	\$ 40.46	2.0%	3.0%	5.1%	\$ 44.66	\$ -	\$ -	\$ 44.66
FOSTER	All	153,924	\$ 7.10	\$ -	\$ 7.10	8.0%	2.0%	10.2%	\$ 8.61	\$ -	\$ -	\$ 8.61
ACA 19-34	All	2,862,172	\$ 6.17	\$ -	\$ 6.17	2.0%	4.0%	6.1%	\$ 6.94	\$ -	\$ -	\$ 6.94
ACA 35-44	All	1,447,424	\$ 12.02	\$ -	\$ 12.02	1.0%	1.3%	2.3%	\$ 12.57	\$ -	\$ -	\$ 12.57
ACA 45-54	All	1,076,335	\$ 14.71	\$ -	\$ 14.71	0.0%	0.0%	0.0%	\$ 14.71	\$ -	\$ -	\$ 14.71
ACA 55-64	All	1,008,975	\$ 12.60	\$ -	\$ 12.60	0.0%	0.0%	0.0%	\$ 12.60	\$ -	\$ -	\$ 12.60
BBM 19-34	All	2,892	\$ 5.89	\$ -	\$ 5.89	2.5%	1.0%	3.5%	\$ 6.31	\$ -	\$ -	\$ 6.31
BBM 35-44	All	1,550	\$ 10.92	\$ -	\$ 10.92	3.0%	4.0%	7.1%	\$ 12.53	\$ -	\$ -	\$ 12.53
BBM 45-54	All	927	\$ 12.81	\$ -	\$ 12.81	3.0%	4.0%	7.1%	\$ 14.70	\$ -	\$ -	\$ 14.70
BBM 55-64	All	543	\$ 11.15	\$ -	\$ 11.15	1.0%	1.3%	2.3%	\$ 11.66	\$ -	\$ -	\$ 11.66
YSHCN	All	7,654	\$ 4.49	\$ -	\$ 4.49	3.0%	4.0%	7.1%	\$ 5.15	\$ -	\$ -	\$ 5.15
BCCP	All	682	\$ 8.06	\$ -	\$ 8.06	4.0%	2.0%	6.1%	\$ 9.07	\$ -	\$ -	\$ 9.07
Total	Total	14,402,423	\$ 12.15	\$ -	\$ 12.15	1.7%	1.7%	3.4%	\$ 12.99	\$ -	\$ -	\$ 12.99
All	NEMT	14,402,423	\$ 12.15	\$ -	\$ 12.15	1.7%	1.7%	3.4%	\$ 12.99	\$ -	\$ -	\$ 12.99
Total	Total	14,402,423	\$ 12.15	\$ -	\$ 12.15	1.7%	1.7%	3.4%	\$ 12.99	\$ -	\$ -	\$ 12.99
General Note:												
- This appendix should be reviewed in conjunction with the accompanying rate certification narrative.												
Footnotes:												
1. Reflects CCOA plus CCOB enrollment.												
2. Reflects repricing DRG hospital claims to 80% of Medicare (excluding DSH and uncompensated care) and a 100% Targeted Efficiency Level (TEL) assumption for all clinical efficiencies.												
3. Not applicable to CCOF.												

Appendix C: Certified CCO Rates

CV27 CCO Rate Certification
Appendix C: CCDA Certified Rates

CCO	Region	COA	CV27 Casehead Forecast	Statewide Medical Expenditures	Regional Risk Adjustment	CCO Risk Adjustment	Regional Factors		ACA Acuity	Dental PAFM	Child Residential	Handicapping Allocation	Gender	Age	Youth with Special Health Care Needs	MCP PM	MCP BH	MCP Dental	MCP Dental	Credibility Element	NML %	HRSN Home Changes for Health-Related Supports	PER PAFM	HRSN Home Changes for Health-Related Supports	MCO Tax %	Certified Rate	HRSN Housing-Related Administration	HRSN Nutrition-Related Administration	HRSN Non-Risk	Total		
							Factor Adjusted	PMF Subtotal																							ACA Acuity	Dental PAFM
Advanced Health, LLC	Northwest	PCR	22,083	597.23	1.018	0.969	0.941	1.039	1.019	543.63	9	20,132	-	0.06	-	0.039	0.03	0.12	-	564.65	564.65	10.0%	0.18	9.36	0.10	642.31	2.0%	655.42	1.34	0.45	1.79	
Advanced Health, LLC	Southwest	PWDO	2,937	512.75	1.000	1.000	0.955	1.013	1.013	498.81	9	17,134	-	0.06	-	0.039	0.03	0.12	-	516.47	516.47	10.0%	0.18	9.36	0.10	697.52	2.0%	698.51	1.34	0.45	1.79	
Advanced Health, LLC	Southwest	CHLD 00-01	5,038	1,010.81	1.000	1.000	0.955	1.013	1.013	1,180.54	9	7,94	-	0.06	-	0.039	0.03	0.12	-	1,186.98	1,186.98	10.0%	0.18	9.36	0.10	1,361.06	2.0%	1,369.06	1.34	0.45	1.79	
Advanced Health, LLC	Southwest	CHLD 01-05	23,413	203.06	0.993	1.078	0.973	1,033	1,033	1,180.54	9	35,55	0.01	0.01	0.01	0.01	0.039	0.03	0.12	-	1,186.98	1,186.98	10.0%	0.18	9.36	0.10	1,361.06	2.0%	1,369.06	1.34	0.45	1.79
Advanced Health, LLC	Southwest	CHLD 06-18	23,413	203.06	0.993	1.078	0.973	1,033	1,033	1,180.54	9	35,55	0.01	0.01	0.01	0.01	0.039	0.03	0.12	-	1,186.98	1,186.98	10.0%	0.18	9.36	0.10	1,361.06	2.0%	1,369.06	1.34	0.45	1.79
Advanced Health, LLC	Southwest	DUAL MEDS	25,858	287.30	1.000	0.919	1.000	0.919	1.000	286.11	9	22,74	0.01	0.01	0.01	0.01	0.039	0.03	0.12	-	287.30	287.30	10.0%	0.18	9.36	0.10	301.77	2.0%	307.93	1.34	0.45	1.79
Advanced Health, LLC	Southwest	ADAD & OAA	17,119	1,603.71	0.976	1.010	0.932	1,033	1,033	1,474.66	9	26,88	0.01	0.01	0.01	0.01	0.039	0.03	0.12	-	1,474.66	1,474.66	10.0%	0.18	9.36	0.10	1,603.71	2.0%	1,603.71	1.34	0.45	1.79
Advanced Health, LLC	Southwest	FOSTER	4,413	823.98	0.962	0.964	0.964	1,013	1,013	823.98	9	37,13	0.01	0.01	0.01	0.01	0.039	0.03	0.12	-	823.98	823.98	10.0%	0.18	9.36	0.10	823.98	2.0%	823.98	1.34	0.45	1.79
Advanced Health, LLC	Southwest	ACA 19-34	43,635	414.21	1.013	1.023	0.932	1,033	1,033	414.21	9	14,58	-	0.06	-	0.039	0.03	0.12	-	414.21	414.21	10.0%	0.18	9.36	0.10	414.21	2.0%	414.21	1.34	0.45	1.79	
Advanced Health, LLC	Southwest	ACA 35-44	29,184	605.86	0.996	1.023	0.932	1,033	1,033	605.86	9	17,13	-	0.06	-	0.039	0.03	0.12	-	605.86	605.86	10.0%	0.18	9.36	0.10	605.86	2.0%	605.86	1.34	0.45	1.79	
Advanced Health, LLC	Southwest	ACA 45-54	24,244	776.23	0.998	1.020	0.932	1,033	1,033	776.23	9	14,58	-	0.06	-	0.039	0.03	0.12	-	776.23	776.23	10.0%	0.18	9.36	0.10	776.23	2.0%	776.23	1.34	0.45	1.79	
Advanced Health, LLC	Southwest	ACA 55-64	25,878	605.86	0.996	1.023	0.932	1,033	1,033	605.86	9	17,13	-	0.06	-	0.039	0.03	0.12	-	605.86	605.86	10.0%	0.18	9.36	0.10	605.86	2.0%	605.86	1.34	0.45	1.79	
Advanced Health, LLC	Southwest	ACA 65-74	25,878	605.86	0.996	1.023	0.932	1,033	1,033	605.86	9	17,13	-	0.06	-	0.039	0.03	0.12	-	605.86	605.86	10.0%	0.18	9.36	0.10	605.86	2.0%	605.86	1.34	0.45	1.79	
Advanced Health, LLC	Southwest	ACA 75-84	25,878	605.86	0.996	1.023	0.932	1,033	1,033	605.86	9	17,13	-	0.06	-	0.039	0.03	0.12	-	605.86	605.86	10.0%	0.18	9.36	0.10	605.86	2.0%	605.86	1.34	0.45	1.79	
Advanced Health, LLC	Southwest	ACA 85-94	25,878	605.86	0.996	1.023	0.932	1,033	1,033	605.86	9	17,13	-	0.06	-	0.039	0.03	0.12	-	605.86	605.86	10.0%	0.18	9.36	0.10	605.86	2.0%	605.86	1.34	0.45	1.79	
Advanced Health, LLC	Southwest	ACA 95-104	25,878	605.86	0.996	1.023	0.932	1,033	1,033	605.86	9	17,13	-	0.06	-	0.039	0.03	0.12	-	605.86	605.86	10.0%	0.18	9.36	0.10	605.86	2.0%	605.86	1.34	0.45	1.79	
Advanced Health, LLC	Southwest	ACA 105-114	25,878	605.86	0.996	1.023	0.932	1,033	1,033	605.86	9	17,13	-	0.06	-	0.039	0.03	0.12	-	605.86	605.86	10.0%	0.18	9.36	0.10	605.86	2.0%	605.86	1.34	0.45	1.79	
Advanced Health, LLC	Southwest	ACA 115-124	25,878	605.86	0.996	1.023	0.932	1,033	1,033	605.86	9	17,13	-	0.06	-	0.039	0.03	0.12	-	605.86	605.86	10.0%	0.18	9.36	0.10	605.86	2.0%	605.86	1.34	0.45	1.79	
Advanced Health, LLC	Southwest	ACA 125-134	25,878	605.86	0.996	1.023	0.932	1,033	1,033	605.86	9	17,13	-	0.06	-	0.039	0.03	0.12	-	605.86	605.86	10.0%	0.18	9.36	0.10	605.86	2.0%	605.86	1.34	0.45	1.79	
Advanced Health, LLC	Southwest	ACA 135-144	25,878	605.86	0.996	1.023	0.932	1,033	1,033	605.86	9	17,13	-	0.06	-	0.039	0.03	0.12	-	605.86	605.86	10.0%	0.18	9.36	0.10	605.86	2.0%	605.86	1.34	0.45	1.79	
Advanced Health, LLC	Southwest	ACA 145-154	25,878	605.86	0.996	1.023	0.932	1,033	1,033	605.86	9	17,13	-	0.06	-	0.039	0.03	0.12	-	605.86	605.86	10.0%	0.18	9.36	0.10	605.86	2.0%	605.86	1.34	0.45	1.79	
Advanced Health, LLC	Southwest	ACA 155-164	25,878	605.86	0.996	1.023	0.932	1,033	1,033	605.86	9	17,13	-	0.06	-	0.039	0.03	0.12	-	605.86	605.86	10.0%	0.18	9.36	0.10	605.86	2.0%	605.86	1.34	0.45	1.79	
Advanced Health, LLC	Southwest	ACA 165-174	25,878	605.86	0.996	1.023	0.932	1,033	1,033	605.86	9	17,13	-	0.06	-	0.039	0.03	0.12	-	605.86	605.86	10.0%	0.18	9.36	0.10	605.86	2.0%	605.86	1.34	0.45	1.79	
Advanced Health, LLC	Southwest	ACA 175-184	25,878	605.86	0.996	1.023	0.932	1,033	1,033	605.86	9	17,13	-	0.06	-	0.039	0.03	0.12	-	605.86	605.86	10.0%	0.18	9.36	0.10	605.86	2.0%	605.86	1.34	0.45	1.79	
Advanced Health, LLC	Southwest	ACA 185-194	25,878	605.86	0.996	1.023	0.932	1,033	1,033	605.86	9	17,13	-	0.06	-	0.039	0.03	0.12	-	605.86	605.86	10.0%	0.18	9.36	0.10	605.86	2.0%	605.86	1.34	0.45	1.79	
Advanced Health, LLC	Southwest	ACA 195-204	25,878	605.86	0.996	1.023	0.932	1,033	1,033	605.86	9	17,13	-	0.06	-	0.039	0.03	0.12	-	605.86	605.86	10.0%	0.18	9.36	0.10	605.86	2.0%	605.86	1.34	0.45	1.79	
Advanced Health, LLC	Southwest	ACA 205-214	25,878	605.86	0.996	1.023	0.932	1,033	1,033	605.86	9	17,13	-	0.06	-	0.039	0.03	0.12	-	605.86	605.86	10.0%	0.18	9.36	0.10	605.86	2.0%	605.86	1.34	0.45	1.79	
Advanced Health, LLC	Southwest	ACA 215-224	25,878	605.86	0.996	1.023	0.932	1,033	1,033	605.86	9	17,13	-	0.06	-	0.039	0.03	0.12	-	605.86	605.86	10.0%	0.18	9.36	0.10	605.86	2.0%	605.86	1.34	0.45	1.79	
Advanced Health, LLC	Southwest	ACA 225-234	25,878	605.86	0.996	1.023	0.932	1,033	1,033	605.86	9	17,13	-	0.06	-	0.039	0.03	0.12	-	605.86	605.86	10.0%	0.18	9.36	0.10	605.86	2.0%	605.86	1.34	0.45	1.79	
Advanced Health, LLC	Southwest	ACA 235-244	25,878	605.86	0.996	1.023	0.932	1,033	1,033	605.86	9	17,13	-	0.06	-	0.039	0.03	0.12	-	605.86	605.86	10.0%	0.18	9.36	0.10	605.86	2.0%	605.86	1.34	0.45	1.79	
Advanced Health, LLC	Southwest	ACA 245-254	25,878	605.86	0.996	1.023	0.932	1,033	1,033	605.86	9	17,13	-	0.06	-	0.039	0.03	0.12	-	605.86	605.86	10.0%	0.18	9.36	0.10	605.86	2.0%	605.86	1.34	0.45	1.79	
Advanced Health, LLC	Southwest	ACA 255-264	25,878	605.86	0.996	1.023	0.932	1,033	1,033	605.86	9	17,13	-	0.06	-	0.039	0.03	0.12	-	605.86	605.86	10.0%	0.18	9.36	0.10	605.86	2.0%	605.86	1.34	0.45	1.79	
Advanced Health, LLC	Southwest	ACA 265-274	25,878	605.86	0.996	1.023	0.932	1,033	1,033	605.86	9	17,13	-	0.06	-	0.039	0.03	0.12	-	605.86	605.86	10.0%	0.18	9.36	0.10	605.86	2.0%	605.86	1.34	0.45	1.79	
Advanced Health, LLC	Southwest	ACA 275-284	25,878	605.86	0.996	1.023	0.932	1,033	1,033	605.86	9	17,13	-	0.06	-	0.039	0.03	0.12	-	605.86	605.86	10.0%	0.18	9.36	0.10	605.86	2.0%	605.86	1.34	0.45	1.79	
Advanced Health, LLC	Southwest	ACA 285-294	25,878	605.86	0.996	1.023	0.932	1,033	1,033	605.86	9																					

Appendix C: CCOA Certified Rate

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CY27 CCO Rate Certification
Appendix C: CCOA Certified Rates

CCO	Region	COA	CY27 Caseload Forecast	Statewide Medical Payment	Regional Risk Adjustment	CCO Risk Adjustment	Regional Factors	Hospital Factor (Tri-County BH Factor Adjustment)	PMPPI Subtotal	ACA Actuarial	Dental PMPPI	Child Residential	Handicapping Autocapitation	Gender Affirming Care	Youth with Special Health Care Needs	HCP PH	HCP BH	HCP Dental	PMPPI Subtotal	Credibility Blendability	NML %	HRSN Home Changes for Health-Related Supports Benefit	PER PMPPI	HRSN Home Changes for Health-Related Supports Admin	PMPPI Subtotal	MCO Tax %	Certified Rate PMPPI ¹
Statewide	Statewide	PCR	1,000,132	\$ 597.23	1,000	1,000	1,000	1,000	\$ 597.23	\$ -	\$ 19.97	\$ -	\$ 0.11	\$ -	\$ 0.03	\$ 0.01	\$ 2.46	\$ 0.35	\$ 623.17	\$ 623.17	10.3%	\$ 0.18	\$ 5.40	\$ 0.09	\$ 700.27	2.0%	\$ 714.56
Statewide	Statewide	PWO	173,488	\$ 512.75	1,000	1,000	1,000	1,000	\$ 512.75	\$ -	\$ 17.36	\$ -	\$ 0.11	\$ -	\$ 0.00	\$ 0.33	\$ 1.31	\$ 1.11	\$ 533.10	\$ 533.10	10.3%	\$ 0.18	\$ 4.85	\$ 0.09	\$ 598.94	2.0%	\$ 611.16
Statewide	Statewide	CHILD 00-01	270,078	\$ 1,010.81	1,000	1,000	1,000	1,000	\$ 1,010.81	\$ -	\$ 6.44	\$ -	\$ -	\$ -	\$ -	\$ 0.96	\$ 0.00	\$ 0.02	\$ 1,017.84	\$ 1,017.84	10.3%	\$ 0.18	\$ 8.02	\$ 0.09	\$ 1,143.35	2.0%	\$ 1,166.68
Statewide	Statewide	CHILD 01-05	1,284,424	\$ 203.06	1,000	1,000	1,000	1,000	\$ 203.06	\$ -	\$ 33.23	\$ 0.01	\$ -	\$ (0.04)	\$ -	\$ 0.61	\$ 0.06	\$ 0.20	\$ 237.11	\$ 237.11	10.3%	\$ 0.18	\$ 2.03	\$ 0.09	\$ 266.45	2.0%	\$ 271.89
Statewide	Statewide	CHILD 06-18	3,305,236	\$ 247.80	1,000	1,000	1,000	1,000	\$ 247.80	\$ -	\$ 30.32	\$ 0.30	\$ 2.99	\$ (1.17)	\$ -	\$ 0.85	\$ 0.84	\$ 0.18	\$ 281.73	\$ 281.73	10.3%	\$ 0.18	\$ 2.46	\$ 0.09	\$ 316.67	2.0%	\$ 323.13
Statewide	Statewide	DUAL MEDS	929,174	\$ 287.30	1,000	1,000	1,000	1,000	\$ 287.30	\$ -	\$ 23.27	\$ -	\$ 0.10	\$ -	\$ 0.02	\$ 0.91	\$ 0.96	\$ 0.19	\$ 312.76	\$ 312.76	10.3%	\$ 0.18	\$ 2.66	\$ 0.09	\$ 351.44	2.0%	\$ 358.61
Statewide	Statewide	ADAD & QAA	635,242	\$ 1,603.71	1,000	1,000	1,000	1,000	\$ 1,603.71	\$ -	\$ 25.93	\$ 0.19	\$ 0.11	\$ (0.37)	\$ 0.31	\$ 4.86	\$ 2.82	\$ 0.36	\$ 1,637.92	\$ 1,640.45	10.3%	\$ 0.18	\$ 13.77	\$ 0.09	\$ 1,841.60	2.0%	\$ 1,879.18
Statewide	Statewide	POSTPR	133,448	\$ 823.98	1,000	1,000	1,000	1,000	\$ 823.98	\$ -	\$ 36.14	\$ 7.16	\$ 3.06	\$ (2.38)	\$ 0.17	\$ 2.44	\$ 2.71	\$ 0.52	\$ 873.80	\$ 873.80	10.3%	\$ 0.18	\$ 7.05	\$ 0.09	\$ 981.80	2.0%	\$ 1,001.84
Statewide	Statewide	ACA 19-34	2,584,834	\$ 414.21	1,000	1,000	1,000	1,000	\$ 414.21	\$ 13.16	\$ 14.67	\$ -	\$ 0.10	\$ -	\$ 0.74	\$ 1.17	\$ 1.11	\$ 0.16	\$ 446.32	\$ 445.32	10.3%	\$ 0.18	\$ 3.76	\$ 0.09	\$ 499.98	2.0%	\$ 510.19
Statewide	Statewide	ACA 35-44	1,379,913	\$ 605.86	1,000	1,000	1,000	1,000	\$ 605.86	\$ 18.65	\$ 16.67	\$ -	\$ -	\$ -	\$ -	\$ 2.77	\$ 1.80	\$ 0.21	\$ 646.14	\$ 646.14	10.3%	\$ 0.18	\$ 5.05	\$ 0.09	\$ 725.50	2.0%	\$ 740.31
Statewide	Statewide	ACA 45-54	996,292	\$ 776.23	1,000	1,000	1,000	1,000	\$ 776.23	\$ 22.96	\$ 18.94	\$ -	\$ -	\$ -	\$ -	\$ 3.59	\$ 1.83	\$ 0.19	\$ 823.55	\$ 823.55	10.3%	\$ 0.18	\$ 7.13	\$ 0.09	\$ 925.03	2.0%	\$ 943.91
Statewide	Statewide	ACA 55-64	916,954	\$ 908.23	1,000	1,000	1,000	1,000	\$ 908.23	\$ 29.81	\$ 20.39	\$ -	\$ -	\$ -	\$ -	\$ 4.18	\$ 1.07	\$ 0.33	\$ 959.98	\$ 959.98	10.3%	\$ 0.18	\$ 8.43	\$ 0.09	\$ 1,078.96	2.0%	\$ 1,100.96
Statewide	Statewide	BBM 19-34	5,302	\$ 403.17	1,000	1,000	1,000	1,000	\$ 403.17	\$ -	\$ 14.76	\$ -	\$ -	\$ -	\$ -	\$ 46.92	\$ 44.80	\$ 10.07	\$ 519.42	\$ 519.42	10.4%	\$ -	\$ 4.62	\$ -	\$ 584.38	2.0%	\$ 596.31
Statewide	Statewide	BBM 35-44	3,546	\$ 582.63	1,000	1,000	1,000	1,000	\$ 582.63	\$ -	\$ 16.74	\$ -	\$ -	\$ -	\$ -	\$ 110.42	\$ 64.66	\$ 7.96	\$ 782.41	\$ 782.41	10.4%	\$ -	\$ 6.80	\$ -	\$ 879.77	2.0%	\$ 897.73
Statewide	Statewide	BBM 45-54	2,089	\$ 753.71	1,000	1,000	1,000	1,000	\$ 753.71	\$ -	\$ 18.69	\$ -	\$ -	\$ -	\$ -	\$ 174.65	\$ 66.12	\$ 8.56	\$ 1,022.02	\$ 1,022.02	10.6%	\$ -	\$ 8.85	\$ -	\$ 1,151.98	2.0%	\$ 1,175.08
Statewide	Statewide	BBM 55-64	1,170	\$ 878.09	1,000	1,000	1,000	1,000	\$ 878.09	\$ -	\$ 20.22	\$ -	\$ -	\$ -	\$ -	\$ 172.78	\$ 37.34	\$ 18.71	\$ 1,127.15	\$ 1,127.15	10.5%	\$ -	\$ 10.08	\$ -	\$ 1,269.03	2.0%	\$ 1,294.93
Statewide	Statewide	YOUTH	44,469	\$ 466.09	1,000	1,000	1,000	1,000	\$ 466.09	\$ -	\$ 14.72	\$ -	\$ 0.11	\$ -	\$ -	\$ 1.22	\$ 1.12	\$ 0.17	\$ 482.44	\$ 482.44	10.3%	\$ 0.18	\$ 4.23	\$ 0.09	\$ 542.21	2.0%	\$ 554.30
Statewide	Statewide	BCCP	686	\$ 3,950.75	1,000	1,000	1,000	1,000	\$ 3,950.75	\$ -	\$ 26.04	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -	\$ 3,976.80	\$ 1,636.11	10.3%	\$ 0.18	\$ 16.87	\$ 0.10	\$ 1,842.05	2.0%	\$ 1,879.64
Statewide	Statewide	Maternity	14,121	\$ 12,793.30	1,000	1,000	1,000	1,000	\$ 12,793.30	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -	\$ 12,793.30	\$ 12,793.30	10.3%	\$ -	\$ -	\$ -	\$ 14,259.21	2.0%	\$ 14,550.21
Statewide	Statewide		13,597,228	\$ 524.63	12,000	12,000	12,000	12,000	\$ 524.63	\$ 7.77	\$ 22.69	\$ 0.17	\$ 0.88	\$ (0.33)	\$ 0.13	\$ 1.96	\$ 1.23	\$ 0.22	\$ 525.23	\$ 525.23	10.3%	\$ 0.18	\$ 4.68	\$ 0.09	\$ 572.71	2.0%	\$ 574.68

General Note:
1. This appendix should be reviewed in conjunction with the accompanying rate certification narrative.

- Footnotes:
1. Reflects CCOA projected enrollment. Values for maternity represent 2025 delivery counts.
2. Values for maternity are CCO-specific, not Statewide figures.
3. Marsh is certifying the COA specific rates, not the Statewide aggregate values.

HRSN Housing-Related Supports Administration ¹	HRSN Nutrition-Related Supports Administration ¹	HRSN Non-Risk Total Administration ¹
\$ 1.20	\$ 0.43	\$ 1.72
\$ 1.28	\$ 0.43	\$ 1.71
\$ 1.28	\$ 0.43	\$ 1.71
\$ 1.28	\$ 0.43	\$ 1.71
\$ 1.28	\$ 0.43	\$ 1.71
\$ 1.28	\$ 0.43	\$ 1.71
\$ 1.29	\$ 0.43	\$ 1.72
\$ 1.29	\$ 0.43	\$ 1.73
\$ 1.32	\$ 0.44	\$ 1.76
\$ 1.26	\$ 0.42	\$ 1.68
\$ 1.27	\$ 0.42	\$ 1.69
\$ 1.28	\$ 0.43	\$ 1.71
\$ 1.30	\$ 0.44	\$ 1.73
\$ -	\$ -	\$ -
\$ -	\$ -	\$ -
\$ -	\$ -	\$ -
\$ 1.27	\$ 0.43	\$ 1.70
\$ 1.35	\$ 0.45	\$ 1.80
\$ -	\$ -	\$ -
\$ 1.29	\$ 0.43	\$ 1.70

Appendix C: CCOB Certified Rates

MARSH

CV27 CCO Rate Certification

Appendix C: CCOB Certified Rates

CCO	Region	COA	CV27 Casehead Forecast	Statewide Payer Weight	Regional Risk Adjustment	CCO Risk Adjustment	Regional Factors	Hospital Factor Adjustment	Factor Adjustment	PMPPU Subsidy	ACA Actuality	Deviant PMPPU	Child Residential	Handicapping Allocation	Gender Equity	Youth with Special Health Care Needs	HCP Pd	BCHP BH	NCOP Deviant	PMPPU Subsidy	Credibility Element	NML %	HRSN Home Changes for Health-Related Supports	PER PMPPU	HRSN Home Changes for Health-Related Supports	PMPPU Subsidy	MCO Tax %	Certified Rate PMPPU	HRSN Housing-Related Supports Administration	HRSN Nutrition-Related Supports Administration	HRSN Non-Risk Administration	Total
Health Share of Oregon	Northwest	PCR	1	597.23	0.995	1.013	0.546	1.000	1.000	571.19	\$	\$	\$	\$	\$	\$	0.025	0.04	0.39	575.05	575.05	9.6%	0.18	0.96	0.08	64.03	2.0%	597.23	1.34	0.45	1.45	
Health Share of Oregon	Tricounty	PWO	2	512.75	1.000	1.000	0.956	1.000	1.000	493.41	\$	\$	\$	\$	\$	\$	0.025	0.02	1.09	495.28	495.28	9.6%	0.18	4.27	0.08	552.10	2.0%	563.37	1.09	0.36	1.45	
Health Share of Oregon	Tricounty	CHLD 00-01	0	1,010.81	1.000	1.000	0.952	1.000	1.000	934.20	\$	\$	\$	\$	\$	\$	0.025	0.03	1.29	934.23	934.23	9.6%	0.18	8.06	0.08	1,082.43	2.0%	1,063.37	1.09	0.36	1.45	
Health Share of Oregon	Tricounty	CHLD 01-05	4	203.06	1.000	1.010	1.023	1.000	1.000	212.75	\$	\$	\$	\$	\$	\$	0.025	0.04	0.01	212.79	212.79	9.6%	0.18	1.83	0.08	237.35	2.0%	242.20	1.09	0.36	1.45	
Health Share of Oregon	Tricounty	CHLD 06-18	3	247.60	1.000	1.000	0.984	1.000	1.000	238.26	\$	\$	\$	\$	\$	\$	0.025	0.04	0.01	238.26	238.26	9.6%	0.18	0.47	0.08	271.96	2.0%	271.96	1.09	0.36	1.45	
Health Share of Oregon	Tricounty	DUAL MEDS	38	287.30	1.000	1.000	0.940	1.000	1.000	271.97	\$	\$	\$	\$	\$	\$	0.01	0.03	1.30	271.91	273.51	9.6%	0.18	2.36	0.08	305.01	2.0%	311.24	1.09	0.36	1.45	
Health Share of Oregon	Tricounty	ABAD & OAA	2	1,603.71	1.027	1.013	0.996	1.000	1.000	1,603.98	\$	\$	\$	\$	\$	\$	0.02	0.03	0.54	1,607.28	1,607.28	9.6%	0.18	14.29	0.08	1,846.81	2.0%	1,846.80	1.09	0.36	1.45	
Health Share of Oregon	Tricounty	FOSTER	19	823.98	1.000	1.000	0.954	1.000	1.000	823.98	\$	\$	\$	\$	\$	\$	0.02	0.04	1.29	827.77	827.77	9.6%	0.18	6.00	0.08	1,008.08	2.0%	1,008.08	1.09	0.36	1.45	
Health Share of Oregon	Tricounty	ACA 19-34	11	414.21	1.004	1.021	0.996	1.000	1.000	413.02	\$	\$	\$	\$	\$	\$	0.06	0.04	1.03	428.08	428.08	9.6%	0.18	3.49	0.08	477.24	2.0%	486.98	1.09	0.36	1.45	
Health Share of Oregon	Tricounty	ACA 35-64	32	606.86	1.000	1.000	0.980	1.000	1.000	606.86	\$	\$	\$	\$	\$	\$	0.04	0.03	1.09	629.33	629.33	9.6%	0.18	6.43	0.08	1,051.46	2.0%	1,051.46	1.09	0.36	1.45	
Health Share of Oregon	Tricounty	ACA 65-64	11	776.23	0.983	1.029	0.966	1.000	1.000	762.66	\$	\$	\$	\$	\$	\$	0.06	0.06	1.89	787.77	787.77	9.6%	0.18	6.79	0.08	878.00	2.0%	885.34	1.09	0.36	1.45	
Health Share of Oregon	Tricounty	ACA 65-64	11	776.23	0.983	1.029	0.966	1.000	1.000	762.66	\$	\$	\$	\$	\$	\$	0.06	0.06	1.89	787.77	787.77	9.6%	0.18	6.79	0.08	878.00	2.0%	885.34	1.09	0.36	1.45	
Health Share of Oregon	Tricounty	ACA 65-64	11	776.23	0.983	1.029	0.966	1.000	1.000	762.66	\$	\$	\$	\$	\$	\$	0.06	0.06	1.89	787.77	787.77	9.6%	0.18	6.79	0.08	878.00	2.0%	885.34	1.09	0.36	1.45	
Health Share of Oregon	Tricounty	ACA 65-64	11	776.23	0.983	1.029	0.966	1.000	1.000	762.66	\$	\$	\$	\$	\$	\$	0.06	0.06	1.89	787.77	787.77	9.6%	0.18	6.79	0.08	878.00	2.0%	885.34	1.09	0.36	1.45	
Health Share of Oregon	Tricounty	ACA 65-64	11	776.23	0.983	1.029	0.966	1.000	1.000	762.66	\$	\$	\$	\$	\$	\$	0.06	0.06	1.89	787.77	787.77	9.6%	0.18	6.79	0.08	878.00	2.0%	885.34	1.09	0.36	1.45	
Health Share of Oregon	Tricounty	ACA 65-64	11	776.23	0.983	1.029	0.966	1.000	1.000	762.66	\$	\$	\$	\$	\$	\$	0.06	0.06	1.89	787.77	787.77	9.6%	0.18	6.79	0.08	878.00	2.0%	885.34	1.09	0.36	1.45	
Health Share of Oregon	Tricounty	ACA 65-64	11	776.23	0.983	1.029	0.966	1.000	1.000	762.66	\$	\$	\$	\$	\$	\$	0.06	0.06	1.89	787.77	787.77	9.6%	0.18	6.79	0.08	878.00	2.0%	885.34	1.09	0.36	1.45	
Health Share of Oregon	Tricounty	ACA 65-64	11	776.23	0.983	1.029	0.966	1.000	1.000	762.66	\$	\$	\$	\$	\$	\$	0.06	0.06	1.89	787.77	787.77	9.6%	0.18	6.79	0.08	878.00	2.0%	885.34	1.09	0.36	1.45	
Health Share of Oregon	Tricounty	ACA 65-64	11	776.23	0.983	1.029	0.966	1.000	1.000	762.66	\$	\$	\$	\$	\$	\$	0.06	0.06	1.89	787.77	787.77	9.6%	0.18	6.79	0.08	878.00	2.0%	885.34	1.09	0.36	1.45	
Health Share of Oregon	Tricounty	ACA 65-64	11	776.23	0.983	1.029	0.966	1.000	1.000	762.66	\$	\$	\$	\$	\$	\$	0.06	0.06	1.89	787.77	787.77	9.6%	0.18	6.79	0.08	878.00	2.0%	885.34	1.09	0.36	1.45	
Health Share of Oregon	Tricounty	ACA 65-64	11	776.23	0.983	1.029	0.966	1.000	1.000	762.66	\$	\$	\$	\$	\$	\$	0.06	0.06	1.89	787.77	787.77	9.6%	0.18	6.79	0.08	878.00	2.0%	885.34	1.09	0.36	1.45	
Health Share of Oregon	Tricounty	ACA 65-64	11	776.23	0.983	1.029	0.966	1.000	1.000	762.66	\$	\$	\$	\$	\$	\$	0.06	0.06	1.89	787.77	787.77	9.6%	0.18	6.79	0.08	878.00	2.0%	885.34	1.09	0.36	1.45	
Health Share of Oregon	Tricounty	ACA 65-64	11	776.23	0.983	1.029	0.966	1.000	1.000	762.66	\$	\$	\$	\$	\$	\$	0.06	0.06	1.89	787.77	787.77	9.6%	0.18	6.79	0.08	878.00	2.0%	885.34	1.09	0.36	1.45	
Health Share of Oregon	Tricounty	ACA 65-64	11	776.23	0.983	1.029	0.966	1.000	1.000	762.66	\$	\$	\$	\$	\$	\$	0.06	0.06	1.89	787.77	787.77	9.6%	0.18	6.79	0.08	878.00	2.0%	885.34	1.09	0.36	1.45	
Health Share of Oregon	Tricounty	ACA 65-64	11	776.23	0.983	1.029	0.966	1.000	1.000	762.66	\$	\$	\$	\$	\$	\$	0.06	0.06	1.89	787.77	787.77	9.6%	0.18	6.79	0.08	878.00	2.0%	885.34	1.09	0.36	1.45	
Health Share of Oregon	Tricounty	ACA 65-64	11	776.23	0.983	1.029	0.966	1.000	1.000	762.66	\$	\$	\$	\$	\$	\$	0.06	0.06	1.89	787.77	787.77	9.6%	0.18	6.79	0.08	878.00	2.0%	885.34	1.09	0.36	1.45	
Health Share of Oregon	Tricounty	ACA 65-64	11	776.23	0.983	1.029	0.966	1.000	1.000	762.66	\$	\$	\$	\$	\$	\$	0.06	0.06	1.89	787.77	787.77	9.6%	0.18	6.79	0.08	878.00	2.0%	885.34	1.09	0.36	1.45	
Health Share of Oregon	Tricounty	ACA 65-64	11	776.23	0.983	1.029	0.966	1.000	1.000	762.66	\$	\$	\$	\$	\$	\$	0.06	0.06	1.89	787.77	787.77	9.6%	0.18	6.79	0.08	878.00	2.0%	885.34	1.09	0.36	1.45	
Health Share of Oregon	Tricounty	ACA 65-64	11	776.23	0.983	1.029	0.966	1.000	1.000	762.66	\$	\$	\$	\$	\$	\$	0.06	0.06	1.89	787.77	787.77	9.6%	0.18	6.79	0.08	878.00	2.0%	885.34	1.09	0.36	1.45	
Health Share of Oregon	Tricounty	ACA 65-64	11	776.23	0.983	1.029	0.966	1.000	1.000	762.66	\$	\$	\$	\$	\$	\$	0.06	0.06	1.89	787.77	787.77	9.6%	0.18	6.79	0.08	878.00	2.0%	885.34	1.09	0.36	1.45	
Health Share of Oregon	Tricounty	ACA 65-64	11	776.23	0.983	1.029	0.966	1.000	1.000	762.66	\$	\$	\$	\$	\$	\$	0.06	0.06	1.89	787.77	787.77	9.6%	0.18	6.79	0.08	878.00	2.0%	885.34	1.09	0.36	1.45	
Health Share of Oregon	Tricounty	ACA 65-64	11	776.23	0.983	1.029	0.966	1.000	1.000	762.66	\$	\$	\$	\$	\$	\$	0.06	0.06	1.89	787.77	787.77	9.6%	0.18	6.79	0.08	878.00	2.0%	885.34	1.09	0.36	1.45	
Health Share of Oregon	Tricounty	ACA 65-64	11	776.23	0.983	1.029	0.966	1.000	1.000	762.66	\$	\$	\$	\$	\$	\$	0.06	0.06	1.89	787.77	787.77	9.6%	0.18	6.79	0.08	878.00	2.0%	885.34	1.09	0.36	1.45	
Health Share of Oregon	Tricounty	ACA 65-64	11	776.23	0.983	1.029	0.966	1.000	1.000	762.66	\$	\$	\$	\$	\$	\$	0.06	0.06	1.89	787.77	787.77	9.6%	0.18	6.79	0.08	878.00	2.0%	885.34	1.09	0.36	1.45	
Health Share of Oregon	Tricounty	ACA 65-64	11	776.23	0.983	1.029	0.966	1.000	1.000	762.66	\$	\$	\$	\$	\$	\$	0.06	0.06	1.89	787.77	787.77	9.6%	0.18	6.79	0.08	878.00	2.0%	885.34	1.09	0.36	1.45	
Health Share of Oregon	Tricounty	ACA 65-64	11	776.23	0.983	1.029	0.966	1.000	1.000	762.66	\$	\$	\$	\$	\$	\$	0.06	0.06	1.89	787.77	787.77	9.6%	0.18	6.79	0.08	878.00	2.0%	885.34	1.09	0.36	1.45	
Health Share of Oregon	Tricounty	ACA 65-64	11	776.23	0.983	1.029	0.966	1.000	1.000	762.66	\$	\$	\$	\$	\$	\$	0.06	0.06	1.89	787.77	787.77	9.6%	0.18	6.79	0.08	878.00	2.0%	885.34	1.09	0.36	1.45	
Health Share of Oregon	Tricounty	ACA 65-64	11	776.23	0.983	1.029	0.966	1.000	1.000	762.66	\$	\$	\$	\$	\$	\$	0.06	0.06	1.89	787.77	787.77	9.6%	0.18	6.79	0.08	878.00	2.0%	885.34	1.09	0.36	1.45	
Health Share of Oregon	Tricounty	ACA 65-64	11	776.23	0.983	1.029	0.966	1.000	1.000	762.66	\$	\$	\$	\$	\$	\$	0.06	0.06	1.89	787.77	787.77	9.6%	0.18	6.79	0.08	878.00	2.0%	885.34	1.09	0.36	1.45	
Health Share of Oregon	Tricounty	ACA 65-64	11	776.23	0.983	1.029	0.966	1.000	1.000	762.66	\$	\$	\$	\$	\$	\$	0.06	0.06	1.89	787.77	787.77	9.6%	0.18	6.79	0.08	878.00	2.0%	885.34	1.09	0.36	1.45	
Health Share of Oregon	Tricounty	ACA 65-64	11	776.23	0.983	1.029	0.966	1.000	1.000	762.66	\$	\$	\$	\$	\$	\$	0.06	0.06	1.89	787.77	787.77	9.6%	0.18	6.79	0.08	878.00	2.0%	885.34	1.09	0.36	1.45	
Health Share of Oregon	Tricounty	ACA 65-64	11	776.23	0.983	1.029	0.966	1.000	1.000	762.66	\$	\$	\$	\$	\$	\$	0.06	0.06	1.89	787.77	787.77	9.6%	0.18	6.79	0.08	878.00	2.0%	885.34	1.09	0.36	1.45	
Health Share of Oregon																																

CV27 CCO Rate Certification

Appendix C: CCOB Certified Rates

CCO	Region	COA	CV27 Casehead Forecast	Statewide Payers	Regional Risk Adjustment	CCO Risk Adjustment	Regional Factors	Hospital Factor Adjustment	Factor Adjustment	PMPI Subtotal	ACA Actuality	Dental PMPI	Child Residential	Handicapping Exclusion	Gender Equity	Youth with Special Health Care Needs	HCP Pd	BCH PPM	HCP Dental	PMPI Subtotal	Credibility Element	NML %	HRSN Home Changes for Health-Related Supports	PER PPM	HRSN Home Changes for Health-Related Supports	PMPI Subtotal	MCO Tax %	Certified Rate PPM	HRSN Housing-Related Supports	HRSN Nutrition-Related Supports	HRSN Non-Risk	Total Administration	
PacificSource Community Solutions (Marion Pk)	Northwest	PCR	1	517.23	1.000	0.980	1.063	0.987	0.987	615.95	5	-	-	-	-	-	0.11	0.36	0.03	615.45	615.45	10.2%	0.18	0.28	0.09	608.10	2.0%	702.14	0	0	0.36	1.45	
PacificSource Community Solutions (Marion Pk)	Northwest	PWDO	1	512.75	1.000	1.000	1.063	0.980	0.980	534.32	5	-	-	-	-	-	0.38	0.37	-	535.27	535.27	10.2%	0.18	0.28	0.09	598.48	2.0%	610.70	1	0	0.36	1.45	
PacificSource Community Solutions (Marion Pk)	Northwest	CHLD 00-01	0	1,010.81	1.000	1.000	0.910	0.977	0.977	893.21	5	-	-	-	-	-	0.41	-	-	898.62	898.62	10.2%	0.18	0.18	0.09	1,005.06	2.0%	1,005.06	0	0	0.36	1.45	
PacificSource Community Solutions (Marion Pk)	Northwest	CHLD 01-05	1	203.06	0.984	0.984	1.052	0.999	0.999	208.81	5	-	-	-	-	-	0.03	0.14	-	208.94	208.94	10.2%	0.18	0.09	0.09	233.78	2.0%	238.55	1	0	0.36	1.45	
PacificSource Community Solutions (Marion Pk)	Northwest	CHLD 06-18	8	247.60	1.000	1.000	0.986	0.987	0.987	247.60	5	-	-	-	-	-	0.00	0.18	0.02	247.60	247.60	10.2%	0.18	0.09	0.09	277.43	2.0%	277.43	0	0	0.36	1.45	
PacificSource Community Solutions (Marion Pk)	Northwest	DUAL MEDS	11	287.30	1.000	1.000	0.980	0.983	0.983	290.52	5	-	-	-	-	-	0.03	0.32	0.11	299.98	299.98	10.2%	0.18	0.18	0.09	335.52	2.0%	342.37	1	0	0.36	1.45	
PacificSource Community Solutions (Marion Pk)	Northwest	ADAD & OAA	7	1,603.71	0.995	1.000	1.037	0.979	0.979	1,625.51	5	-	-	-	-	-	0.07	0.39	0.15	1,635.51	1,635.51	10.2%	0.18	0.17	0.09	1,828.19	2.0%	1,865.41	1	0	0.36	1.45	
PacificSource Community Solutions (Marion Pk)	Northwest	FOSTER	5	823.98	0.992	1.000	1.033	0.984	0.984	823.98	5	-	-	-	-	-	0.11	0.12	0.02	823.98	823.98	10.2%	0.18	0.12	0.09	916.36	2.0%	929.46	1	0	0.36	1.45	
PacificSource Community Solutions (Marion Pk)	Northwest	ACA 19-34	3	434.21	0.983	0.982	1.004	0.987	0.987	404.52	5	-	-	-	-	-	0.38	0.38	0.17	420.46	420.46	10.2%	0.18	0.18	0.09	470.17	2.0%	479.76	1	0	0.36	1.45	
PacificSource Community Solutions (Marion Pk)	Northwest	ACA 35-64	8	605.86	1.000	1.000	0.984	0.983	0.983	605.86	5	-	-	-	-	-	0.00	0.31	0.03	606.34	606.34	10.2%	0.18	0.18	0.09	711.79	2.0%	711.79	1	0	0.36	1.45	
PacificSource Community Solutions (Marion Pk)	Northwest	ACA 65-84	3	776.23	1.028	1.033	1.085	0.984	0.984	880.34	5	-	-	-	-	-	0.12	0.34	0.13	912.26	912.26	10.2%	0.18	0.18	0.09	1,019.80	2.0%	1,040.61	1	0	0.36	1.45	
PacificSource Community Solutions (Marion Pk)	Northwest	ACA 85-94	3	608.23	1.010	1.008	1.120	0.983	0.983	1,026.32	5	-	-	-	-	-	0.00	0.61	0.04	1,062.34	1,062.34	10.2%	0.18	0.18	0.09	1,211.77	2.0%	1,211.77	1	0	0.36	1.45	
PacificSource Community Solutions (Marion Pk)	Northwest	ACA 95-99	3	403.17	1.000	1.000	1.026	0.986	0.986	408.01	5	-	-	-	-	-	0.00	0.74	0.02	463.17	463.17	10.2%	0.18	0.18	0.09	546.45	2.0%	546.45	1	0	0.36	1.45	
PacificSource Community Solutions (Marion Pk)	Northwest	BBM 35-44	-	582.63	1.000	1.000	1.000	0.986	0.986	603.34	5	-	-	-	-	-	-	0.19	0.12	0.03	608.53	608.53	10.2%	-	-	-	699.85	2.0%	718.23	1	0	0.36	1.45
PacificSource Community Solutions (Marion Pk)	Northwest	BBM 45-54	-	753.71	1.000	1.000	1.000	0.983	0.983	800.36	5	-	-	-	-	-	-	0.18	0.18	0.03	899.40	899.40	10.2%	-	-	-	1,035.62	2.0%	1,035.62	1	0	0.36	1.45
PacificSource Community Solutions (Marion Pk)	Northwest	BBM 55-64	-	878.09	1.000	1.000	1.000	0.986	0.986	974.59	5	-	-	-	-	-	-	0.22	0.18	0.03	1,099.73	1,099.73	10.2%	-	-	-	1,335.26	2.0%	1,362.51	1	0	0.36	1.45
PacificSource Community Solutions (Marion Pk)	Northwest	BBM 65-84	-	466.09	1.000	1.000	1.000	0.985	0.985	472.75	5	-	-	-	-	-	-	0.25	0.17	0.03	520.28	520.28	10.2%	0.18	0.20	0.09	591.35	2.0%	541.94	1	0	0.36	1.45
PacificSource Community Solutions (Marion Pk)	Northwest	BCCP	-	3,950.75	1.000	1.000	1.007	0.984	0.984	4,032.13	5	-	-	-	-	-	-	0.00	0.18	0.03	4,032.13	4,032.13	10.2%	0.18	0.18	0.09	4,657.69	2.0%	4,657.69	1	0	0.36	1.45
PacificSource Community Solutions (Marion Pk)	Northwest	Meternity	-	14,418.73	1.000	1.000	1.000	1.000	1.000	14,418.73	5	-	-	-	-	-	-	0.00	0.18	0.03	14,418.73	14,418.73	10.2%	0.18	0.18	0.09	16,047.65	2.0%	16,047.65	1	0	0.36	1.45
PacificSource Community Solutions (Marion Pk)	Northwest	Total	53	12,938.33	1.000	1.000	1.000	0.987	0.987	13,942.33	5	-	-	-	-	-	-	0.08	0.23	0.03	14,418.73	14,418.73	10.2%	0.18	0.18	0.09	16,047.65	2.0%	16,047.65	1	0	0.36	1.45
Trillium Community Health Plan, Inc. (Tri County)	Tricounty	PCR	1	597.23	0.989	0.830	0.948	0.948	0.948	437.76	5	-	-	-	-	-	0.08	0.10	0.14	440.06	440.06	10.2%	0.18	0.18	0.09	482.34	2.0%	502.39	1	0	0.36	1.45	
Trillium Community Health Plan, Inc. (Tri County)	Tricounty	PWDO	0	1,010.81	0.996	1.000	0.956	0.947	0.947	464.24	5	-	-	-	-	-	0.22	0.04	0.36	467.75	467.75	10.2%	0.18	0.18	0.09	529.31	2.0%	533.96	1	0	0.36	1.45	
Trillium Community Health Plan, Inc. (Tri County)	Tricounty	CHLD 00-01	0	1,010.81	1.000	1.000	0.910	0.975	0.975	893.21	5	-	-	-	-	-	0.15	-	-	899.25	899.25	10.2%	0.18	0.18	0.09	1,056.53	2.0%	1,071.97	1	0	0.36	1.45	
Trillium Community Health Plan, Inc. (Tri County)	Tricounty	CHLD 01-05	0	203.06	1.008	0.997	1.023	0.935	0.935	175.76	5	-	-	-	-	-	0.09	0.18	0.02	176.42	176.42	10.2%	0.18	0.18	0.09	207.54	2.0%	207.54	1	0	0.36	1.45	
Trillium Community Health Plan, Inc. (Tri County)	Tricounty	CHLD 06-18	8	247.60	0.987	0.989	0.964	0.934	0.934	189.97	5	-	-	-	-	-	0.19	0.19	1.62	189.43	189.43	10.2%	0.18	0.18	0.09	212.09	2.0%	216.42	1	0	0.36	1.45	
Trillium Community Health Plan, Inc. (Tri County)	Tricounty	DUAL MEDS	4	287.30	1.000	1.000	0.940	0.940	0.940	253.87	5	-	-	-	-	-	0.01	0.26	0.11	254.25	254.25	10.2%	0.18	0.13	0.09	284.57	2.0%	290.38	1	0	0.36	1.45	
Trillium Community Health Plan, Inc. (Tri County)	Tricounty	ADAD & OAA	2	1,603.71	1.027	0.980	1.061	0.974	0.974	1,339.69	5	-	-	-	-	-	0.38	0.31	0.12	1,339.69	1,339.69	10.2%	0.18	0.18	0.09	1,487.96	2.0%	1,528.53	1	0	0.36	1.45	
Trillium Community Health Plan, Inc. (Tri County)	Tricounty	FOSTER	1	823.98	0.958	1.035	1.064	0.937	0.937	900.08	5	-	-	-	-	-	0.39	0.31	0.06	904.12	904.12	10.2%	0.18	0.18	0.09	1,011.23	2.0%	1,033.88	1	0	0.36	1.45	
Trillium Community Health Plan, Inc. (Tri County)	Tricounty	ACA 19-34	3	434.21	0.986	0.986	1.000	0.987	0.987	364.72	5	-	-	-	-	-	0.31	0.38	0.10	394.17	394.17	10.2%	0.18	0.18	0.09	454.39	2.0%	464.39	1	0	0.36	1.45	
Trillium Community Health Plan, Inc. (Tri County)	Tricounty	ACA 35-44	-	605.86	0.981	0.983	1.089	0.987	0.987	468.46	5	-	-	-	-	-	0.37	0.35	0.13	503.71	503.71	10.2%	0.18	0.18	0.09	582.64	2.0%	593.71	1	0	0.36	1.45	
Trillium Community Health Plan, Inc. (Tri County)	Tricounty	ACA 45-54	-	776.23	0.983	0.986	1.085	0.959	0.959	976.24	5	-	-	-	-	-	0.00	0.63	0.40	995.04	995.04	10.2%	0.18	0.18	0.09	1,106.84	2.0%	1,126.84	1	0	0.36	1.45	
Trillium Community Health Plan, Inc. (Tri County)	Tricounty	ACA 65-84	-	608.23	0.987	0.985	1.087	0.983	0.983	1,045.53	5	-	-	-	-	-	0.00	0.60	0.40	1,080.38	1,080.38	10.2%	0.18	0.18	0.09	1,245.53	2.0%	1,265.53	1	0	0.36	1.45	
Trillium Community Health Plan, Inc. (Tri County)	Tricounty	BBM 35-44	-	403.17	1.000	1.000	0.956	0.956	0.956	368.41	5	-	-	-	-	-	-	0.12	0.13	0.03	410.76	410.76	10.2%	-	-	-	467.17	2.0%	466.50	1	0	0.36	1.45
Trillium Community Health Plan, Inc. (Tri County)	Tricounty	BBM 45-54	-	753.71	1.000	1.000	0.980	0.980	0.980	800.36	5	-	-	-	-	-	-	0.18	0.18	0.03	899.40	899.40	10.2%	-	-	-	1,035.62	2.0%	1,035.62	1	0	0.36	1.45
Trillium Community Health Plan, Inc. (Tri County)	Tricounty	BBM 55-64	-	878.09	1.000	1.000	0.984	0.984	0.984	959.29	5	-	-	-	-	-	-	0.22	0.18	0.03	1,099.73	1,099.73	10.2%	-	-	-	1,335.26	2.0%	1,362.51	1	0	0.36	1.45
Trillium Community Health Plan, Inc. (Tri County)	Tricounty	BBM 65-84	-	466.09	1.000	1.000	0.985	0.985	0.985	472.75	5	-	-	-	-	-	-	0.25	0.17	0.03	520.28	520.28	10.2%	0.18	0.18	0.09	591.35	2.0%	541.94	1	0	0.36	1.45
Trillium Community Health Plan, Inc. (Tri County)	Tricounty	YHCHN	0	466.09	1.000	1.000	0.984	0.984	0.984	453.26	5	-	-	-	-	-	-	0.38	0.18	0.03	454.55	454.55	10.2%	0.18	0.18	0.09	508.54	2.0%	518.54	1	0	0.36	1.45
Trillium Community Health Plan, Inc. (Tri County)	Tricounty	BCCP	-	3,950.75	1.000	1.000	0.990	0.979	0.979	3,818.53	5	-	-	-	-	-	-	0.00	0.18	0.03	3,818.53	3,818.53	10.2%	0.18	0.18	0.09	4,400.56	2.0%	4,400.56	1	0	0.36	1.45
Trillium Community Health Plan, Inc. (Tri County)	Tricounty	Meternity	-	14,418.73	1.000	1.000	1.000	0.984	0.984	14,418.73	5	-	-	-	-	-	-	0.00	0.18	0.03	14,418.73	14,418.73	10.2%	0.18	0.18	0.09	16,047.65	2.0%	16,047.65	1	0	0.36	1.45
Trillium Community Health Plan, Inc. (Tri County)	Tricounty	Total	21	12,938.33	1.000	0.983	0.979	0.979	0.979	12,945.53	5	-	-	-	-	-	0.16	0.16	0.03	14,418.73	14,418.73	10.2%	0.18	0.18	0.09	16,047.65	2.0%	16,047.65	1	0	0.36	1.45	
Trillium Community Health Plan, Inc. (Southwest)	Southwest	PCR	1	597.23	0.989	0.830	0.948	0.948	0.948	437.76																							

CY27 CCO Rate Certification
Appendix C: CCOB Certified Rates

CCO	Region	COA	CY27 Caseload Forecast	Regional Factors		Hospital Factor (Tri-County BH Factor Adjustment)		ACA Acty	Dental PMPJM	Child Residential	Handicapping Malocclusion	Gender Affirming Care	Youth with Special Health Care Needs	HRSN Home Changes for Health-Related Supports		Credibility Blendity	NML %	HRSN Home Changes for Health-Related Supports Benefit	PER PMPJM	HRSN Home Changes for Health-Related Supports Admin	PMPJM Subtotal	MCO Tax %	Certified Rate PMPJM				
				Statewide Medical Expense	Regional Risk Adjustment	CCO Risk Adjustment	Regional Factors							PMPJM Subtotal	PMPJM Subtotal									PMPJM Subtotal			
Statewide	Statewide	PCR	23	\$ 597.23	1,000	1,000	1,000	1,000	\$ 597.23	\$ -	\$ -	\$ -	\$ 0.00	\$ 0.01	\$ 0.01	10.3%	\$ 0.18	\$ 5.22	\$ 0.09	\$ 607.39	2.0%	\$ 601.19					
Statewide	Statewide	PWO	7	\$ 512.75	1,000	1,000	1,000	1,000	\$ 512.75	\$ -	\$ -	\$ -	\$ (0.00)	\$ 0.33	\$ 1.31	10.3%	\$ 0.18	\$ 4.40	\$ 0.09	\$ 579.18	2.0%	\$ 590.99					
Statewide	Statewide	CHILD 00-01	1	\$ 1,010.81	1,000	1,000	1,000	1,000	\$ 1,010.81	\$ -	\$ -	\$ -	\$ -	\$ -	\$ 0.96	\$ 0.00	\$ -	\$ 1,011.37	\$ 1,011.37	10.3%	\$ 0.18	\$ 8.57	\$ 0.09	\$ 1,136.06	2.0%	\$ 1,159.27	
Statewide	Statewide	CHILD 01-05	11	\$ 203.06	1,000	1,000	1,000	1,000	\$ 203.06	\$ -	\$ -	\$ 0.01	\$ -	\$ -	\$ (0.04)	\$ -	\$ 0.61	\$ 0.06	\$ 203.69	\$ 203.69	10.3%	\$ 0.18	\$ 1.74	\$ 0.09	\$ 228.91	2.0%	\$ 233.58
Statewide	Statewide	CHILD 06-18	61	\$ 247.60	1,000	1,000	1,000	1,000	\$ 247.60	\$ -	\$ -	\$ 0.32	\$ -	\$ -	\$ (1.17)	\$ -	\$ 0.85	\$ 0.64	\$ 248.24	\$ 248.24	10.3%	\$ 0.18	\$ 2.16	\$ 0.09	\$ 279.06	2.0%	\$ 284.75
Statewide	Statewide	DUAL MEDS	110	\$ 287.30	1,000	1,000	1,000	1,000	\$ 287.30	\$ -	\$ -	\$ -	\$ -	\$ -	\$ 0.02	\$ 0.91	\$ 0.96	\$ 289.19	\$ 289.19	10.3%	\$ 0.18	\$ 2.46	\$ 0.09	\$ 324.98	2.0%	\$ 331.61	
Statewide	Statewide	ABAD & OAA	60	\$ 1,603.71	1,000	1,000	1,000	1,000	\$ 1,603.71	\$ -	\$ -	\$ 0.19	\$ -	\$ -	\$ (0.97)	\$ 0.31	\$ 4.86	\$ 2.82	\$ 1,611.53	\$ 1,611.53	10.3%	\$ 0.18	\$ 10.52	\$ 0.09	\$ 1,809.11	2.0%	\$ 1,846.03
Statewide	Statewide	POSTPR	66	\$ 823.98	1,000	1,000	1,000	1,000	\$ 823.98	\$ -	\$ 7.16	\$ -	\$ -	\$ -	\$ (2.20)	\$ 0.12	\$ 2.44	\$ 2.71	\$ 834.12	\$ 834.12	10.3%	\$ 0.18	\$ 7.31	\$ 0.09	\$ 937.14	2.0%	\$ 956.26
Statewide	Statewide	ACA 19-34	32	\$ 414.21	1,000	1,000	1,000	1,000	\$ 414.21	\$ 13.16	\$ -	\$ -	\$ -	\$ -	\$ -	\$ 0.74	\$ 1.17	\$ 1.11	\$ 430.40	\$ 430.40	10.3%	\$ 0.18	\$ 3.63	\$ 0.09	\$ 483.23	2.0%	\$ 493.09
Statewide	Statewide	ACA 35-44	90	\$ 606.86	1,000	1,000	1,000	1,000	\$ 606.86	\$ 18.68	\$ -	\$ -	\$ -	\$ -	\$ -	\$ 2.77	\$ 1.80	\$ -	\$ 629.26	\$ 629.26	10.3%	\$ 0.18	\$ 5.41	\$ 0.09	\$ 706.55	2.0%	\$ 720.97
Statewide	Statewide	ACA 45-54	33	\$ 776.23	1,000	1,000	1,000	1,000	\$ 776.23	\$ 22.92	\$ -	\$ -	\$ -	\$ -	\$ -	\$ 3.59	\$ 1.83	\$ -	\$ 804.42	\$ 804.42	10.3%	\$ 0.18	\$ 6.96	\$ 0.09	\$ 903.55	2.0%	\$ 921.99
Statewide	Statewide	ACA 55-64	33	\$ 908.23	1,000	1,000	1,000	1,000	\$ 908.23	\$ 25.81	\$ -	\$ -	\$ -	\$ -	\$ -	\$ 4.18	\$ 1.97	\$ -	\$ 939.29	\$ 939.29	10.3%	\$ 0.18	\$ 8.24	\$ 0.09	\$ 1,065.71	2.0%	\$ 1,077.26
Statewide	Statewide	BBM 19-34	-	\$ -	-	-	-	-	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -	0.0%	\$ -	\$ -	\$ -	\$ -	0.0%	\$ -
Statewide	Statewide	BBM 35-44	-	\$ -	-	-	-	-	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -	0.0%	\$ -	\$ -	\$ -	\$ -	0.0%	\$ -
Statewide	Statewide	BBM 45-54	-	\$ -	-	-	-	-	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -	0.0%	\$ -	\$ -	\$ -	\$ -	0.0%	\$ -
Statewide	Statewide	BBM 55-64	-	\$ -	-	-	-	-	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -	0.0%	\$ -	\$ -	\$ -	\$ -	0.0%	\$ -
Statewide	Statewide	YOUTH	1	\$ 466.09	1,000	1,000	1,000	1,000	\$ 466.09	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -	\$ 1.23	\$ 1.12	\$ -	\$ 468.44	\$ 468.44	10.3%	\$ 0.18	\$ 4.10	\$ 0.09	\$ 526.36	2.0%	\$ 537.11
Statewide	Statewide	BCCP	-	\$ -	-	-	-	-	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -	0.0%	\$ -	\$ -	\$ -	\$ -	0.0%	\$ -
Statewide	Statewide	Maternity	-	\$ -	-	-	-	-	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -	0.0%	\$ -	\$ -	\$ -	\$ -	0.0%	\$ -
Statewide	Statewide	Maternity	526	\$ 646.34	1,000	1,000	1,000	1,000	\$ 646.34	\$ 7.05	\$ -	\$ 0.54	\$ -	\$ (0.48)	\$ 0.11	\$ 2.33	\$ 1.62	\$ 656.92	\$ 656.92	7.7%	\$ 0.18	\$ 5.63	\$ 0.09	\$ 737.85	2.0%	\$ 752.91	

General Note:
This appendix should be reviewed in conjunction with the accompanying rate certification narrative.

Footnotes:
1. Reflects CCOB projected enrollment. Values for maternity represent 2025 delivery counts.
2. Values for maternity are CCO-specific, not Statewide figures.
3. Marsh is certifying the COA-specific rates, not the Statewide aggregate values.

HRSN Housing-Related Supports Administration	HRSN Nutrition-Related Supports Administration	HRSN Non-Risk Total Administration
\$ 1.20	\$ 0.43	\$ 1.72
\$ 1.28	\$ 0.43	\$ 1.71
\$ 1.28	\$ 0.43	\$ 1.71
\$ 1.28	\$ 0.43	\$ 1.71
\$ 1.28	\$ 0.43	\$ 1.71
\$ 1.28	\$ 0.43	\$ 1.71
\$ 1.29	\$ 0.43	\$ 1.72
\$ 1.29	\$ 0.43	\$ 1.73
\$ 1.32	\$ 0.44	\$ 1.76
\$ 1.26	\$ 0.42	\$ 1.68
\$ 1.27	\$ 0.42	\$ 1.69
\$ 1.28	\$ 0.43	\$ 1.71
\$ 1.30	\$ 0.44	\$ 1.73
\$ -	\$ -	\$ -
\$ -	\$ -	\$ -
\$ -	\$ -	\$ -
\$ -	\$ -	\$ -
\$ -	\$ -	\$ -
\$ 1.27	\$ 0.43	\$ 1.70
\$ -	\$ -	\$ -
\$ -	\$ -	\$ -
\$ 1.20	\$ 0.43	\$ 1.72

CY27 CCO Rate Certification
Appendix C: CCOE Certified Rates

CCO	Region	COA	CY27 Caseload Forecast	Statewide Medical Payment	Regional Risk Adjustment	CCO Risk Adjustment	Regional Factor	Hospital Factor / Tri-County BH Adjustment	PMPM Adjusted	ACA Acuity	Dental PMPM	Child Residential	Handicapping PMPM	Gender PMPM	Youth with Special Health Care Needs	ICNP PH	ICNP BH	ICNP Dental	PMPM Adjusted	Credibility Reviewing	NML %	HSRN Home Changes for Health-Related Supports	PBR PMPM	HSRN Home Changes for Health-Related Supports Admin	PMPM Support	MCO Tax %	Certified Rate	
Advanced Health, LLC	Southwest	PCR	0	\$ 163.10	1,000	1,000	0.941	1,000	\$ 153.52	\$ -	\$ -	\$ -	\$ -	\$ -	\$ 0.12	\$ -	\$ -	\$ -	\$ 161.37	\$ 161.37	11.6%	\$ -	\$ 2.22	\$ -	\$ 186.67	2.0%	\$ 186.44	
Advanced Health, LLC	Southwest	PWO	-	\$ 143.51	1,000	1,000	0.955	1,000	\$ 137.03	\$ -	\$ -	\$ -	\$ -	\$ -	\$ 0.59	\$ -	\$ 4.37	\$ -	\$ 141.99	\$ 141.99	11.6%	\$ -	\$ -	\$ -	\$ 160.81	2.0%	\$ 163.81	
Advanced Health, LLC	Southwest	CHLD 00-01	-	\$ 23.21	1,000	1,000	1.132	1,000	\$ 26.29	\$ -	\$ -	\$ -	\$ -	\$ -	\$ 0.01	\$ -	\$ -	\$ -	\$ 26.29	\$ 26.29	11.6%	\$ -	\$ -	\$ -	\$ 30.33	2.0%	\$ 30.33	
Advanced Health, LLC	Southwest	CHLD 01-05	0	\$ 52.10	1,000	1,000	0.873	1,000	\$ 45.48	\$ -	\$ -	\$ -	\$ -	\$ 0.01	\$ (0.01)	\$ -	\$ 0.03	\$ -	\$ 45.51	\$ 45.51	11.6%	\$ -	\$ 0.63	\$ -	\$ 50.08	2.0%	\$ 53.15	
Advanced Health, LLC	Southwest	CHLD 06-18	0	\$ 97.78	1,000	1,000	0.946	1,000	\$ 92.53	\$ -	\$ -	\$ -	\$ -	\$ 0.00	\$ (0.00)	\$ -	\$ 1.87	\$ -	\$ 94.86	\$ 94.86	11.6%	\$ -	\$ 1.31	\$ -	\$ 106.55	2.0%	\$ 110.77	
Advanced Health, LLC	Southwest	DUAL-MEDS	4	\$ 126.01	1,000	1,000	0.946	1,000	\$ 118.34	\$ -	\$ -	\$ -	\$ -	\$ 0.00	\$ 0.00	\$ -	\$ 0.03	\$ -	\$ 123.76	\$ 123.76	11.6%	\$ -	\$ 1.74	\$ -	\$ 144.50	2.0%	\$ 148.24	
Advanced Health, LLC	Southwest	ABAD & OAA	1	\$ 305.40	1,000	1,000	0.932	1,000	\$ 284.60	\$ -	\$ -	\$ -	\$ -	\$ 0.28	\$ (0.19)	\$ 0.23	\$ -	\$ 11.62	\$ -	\$ 286.54	\$ 286.54	11.6%	\$ -	\$ 4.09	\$ -	\$ 339.35	2.0%	\$ 346.28
Advanced Health, LLC	Southwest	FOSTER	3	\$ 503.23	1,000	1,000	0.987	1,000	\$ 496.84	\$ -	\$ -	\$ -	\$ -	\$ 0.00	\$ (0.00)	\$ 0.08	\$ -	\$ 7.70	\$ -	\$ 514.02	\$ 514.02	11.6%	\$ -	\$ 7.08	\$ -	\$ 588.22	2.0%	\$ 600.23
Advanced Health, LLC	Southwest	ACA 19-34	0	\$ 162.57	1,000	1,000	0.945	1,000	\$ 153.64	\$ 4.88	\$ -	\$ -	\$ -	\$ -	\$ 0.91	\$ -	\$ 8.92	\$ -	\$ 169.35	\$ 169.35	11.6%	\$ -	\$ 2.32	\$ -	\$ 186.59	2.0%	\$ 196.59	
Advanced Health, LLC	Southwest	ACA 35-44	0	\$ 200.42	1,000	1,000	0.929	1,000	\$ 186.07	\$ 5.74	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -	\$ 2.88	\$ -	\$ 184.60	\$ 184.60	11.6%	\$ -	\$ 2.66	\$ -	\$ 222.79	2.0%	\$ 227.34	
Advanced Health, LLC	Southwest	ACA 45-54	0	\$ 165.08	1,000	1,000	0.910	1,000	\$ 150.29	\$ 4.45	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -	\$ 7.24	\$ -	\$ 161.98	\$ 161.98	11.6%	\$ -	\$ 2.23	\$ -	\$ 185.36	2.0%	\$ 189.15	
Advanced Health, LLC	Southwest	ACA 55-64	0	\$ 108.94	1,000	1,000	0.927	1,000	\$ 100.96	\$ 2.87	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -	\$ 6.22	\$ -	\$ 110.05	\$ 110.05	11.6%	\$ -	\$ 1.52	\$ -	\$ 125.94	2.0%	\$ 128.51	
Advanced Health, LLC	Southwest	BM 19-34	-	\$ 153.80	1,000	1,000	0.935	1,000	\$ 143.77	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -	\$ 1.82	\$ -	\$ 154.75	\$ 154.75	11.6%	\$ -	\$ 1.57	\$ -	\$ 175.86	2.0%	\$ 179.55	
Advanced Health, LLC	Southwest	BM 35-44	-	\$ 186.16	1,000	1,000	0.920	1,000	\$ 171.29	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -	\$ 0.46	\$ -	\$ 185.24	\$ 185.24	11.6%	\$ -	\$ -	\$ -	\$ 206.61	2.0%	\$ 210.48	
Advanced Health, LLC	Southwest	BM 45-54	-	\$ 148.32	1,000	1,000	0.909	1,000	\$ 134.77	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -	\$ 0.39	\$ -	\$ 145.59	\$ 145.59	11.6%	\$ -	\$ -	\$ -	\$ 166.46	2.0%	\$ 170.25	
Advanced Health, LLC	Southwest	BM 55-64	-	\$ 148.32	1,000	1,000	0.909	1,000	\$ 134.77	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -	\$ 0.39	\$ -	\$ 145.59	\$ 145.59	11.6%	\$ -	\$ -	\$ -	\$ 166.46	2.0%	\$ 170.25	
Advanced Health, LLC	Southwest	YSHCN	0	\$ 101.44	1,000	1,000	0.924	1,000	\$ 93.73	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -	\$ 0.44	\$ -	\$ 94.16	\$ 94.16	11.6%	\$ -	\$ -	\$ -	\$ 105.50	2.0%	\$ 107.66	
Advanced Health, LLC	Southwest	BCCP	0	\$ 148.10	1,000	1,000	0.938	1,000	\$ 138.87	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -	\$ 0.06	\$ -	\$ 139.92	\$ 139.92	11.6%	\$ -	\$ 2.30	\$ -	\$ 157.96	2.0%	\$ 161.18	
Advanced Health, LLC	Southwest	Maternity	-	\$ 95.62	1,000	1,000	0.932	1,000	\$ 89.11	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -	\$ 0.04	\$ -	\$ 89.11	\$ 89.11	11.6%	\$ -	\$ -	\$ -	\$ 98.28	2.0%	\$ 101.28	
Advanced Health, LLC	Southwest	Total	10	\$ 256.88	1,000	1,000	0.963	1,000	\$ 247.32	\$ 0.77	\$ -	\$ 2.49	\$ -	\$ (0.02)	\$ 0.10	\$ -	\$ 6.85	\$ -	\$ 257.81	\$ 257.81	11.6%	\$ -	\$ 3.55	\$ -	\$ 294.78	2.0%	\$ 300.81	
AlCare CCO	Southwest	PCR	1	\$ 163.10	1,000	1,000	0.941	1,000	\$ 153.52	\$ -	\$ -	\$ -	\$ -	\$ -	\$ 0.09	\$ -	\$ 0.16	\$ -	\$ 153.77	\$ 153.77	10.8%	\$ -	\$ 2.55	\$ -	\$ 174.84	2.0%	\$ 178.40	
AlCare CCO	Southwest	PWO	-	\$ 143.51	1,000	1,000	0.955	1,000	\$ 137.03	\$ -	\$ -	\$ -	\$ -	\$ -	\$ 0.36	\$ -	\$ -	\$ -	\$ 137.98	\$ 137.98	10.8%	\$ -	\$ -	\$ -	\$ 153.92	2.0%	\$ 157.07	
AlCare CCO	Southwest	CHLD 00-01	-	\$ 23.21	1,000	1,000	1.132	1,000	\$ 26.29	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -	\$ 26.29	\$ 26.29	10.8%	\$ -	\$ -	\$ -	\$ 30.06	2.0%	\$ 30.06	
AlCare CCO	Southwest	CHLD 01-05	0	\$ 52.10	1,000	1,000	0.873	1,000	\$ 45.48	\$ -	\$ -	\$ -	\$ -	\$ (0.00)	\$ -	\$ -	\$ -	\$ -	\$ 45.48	\$ 45.48	10.8%	\$ -	\$ 0.75	\$ -	\$ 51.71	2.0%	\$ 52.77	
AlCare CCO	Southwest	CHLD 06-18	0	\$ 97.78	1,000	1,000	0.946	1,000	\$ 92.53	\$ -	\$ -	\$ -	\$ -	\$ 0.00	\$ (0.00)	\$ -	\$ 0.04	\$ -	\$ 92.29	\$ 92.29	10.8%	\$ -	\$ 1.57	\$ -	\$ 104.92	2.0%	\$ 107.06	
AlCare CCO	Southwest	DUAL-MEDS	9	\$ 126.01	1,000	1,000	0.939	1,000	\$ 118.34	\$ -	\$ -	\$ -	\$ -	\$ -	\$ 0.02	\$ -	\$ 0.08	\$ -	\$ 118.44	\$ 118.44	10.8%	\$ -	\$ 1.96	\$ -	\$ 134.66	2.0%	\$ 137.41	
AlCare CCO	Southwest	ABAD & OAA	2	\$ 305.40	1,000	1,000	0.932	1,000	\$ 284.60	\$ -	\$ -	\$ -	\$ -	\$ 0.17	\$ (0.44)	\$ 0.27	\$ -	\$ -	\$ 284.60	\$ 284.60	10.8%	\$ -	\$ 4.72	\$ -	\$ 323.99	2.0%	\$ 330.20	
AlCare CCO	Southwest	FOSTER	3	\$ 503.23	1,000	1,000	0.987	1,000	\$ 496.84	\$ -	\$ -	\$ -	\$ -	\$ 0.09	\$ (0.04)	\$ 0.09	\$ -	\$ -	\$ 502.49	\$ 502.49	10.8%	\$ -	\$ 6.32	\$ -	\$ 563.00	2.0%	\$ 574.93	
AlCare CCO	Southwest	ACA 19-34	1	\$ 162.57	1,000	1,000	0.945	1,000	\$ 153.64	\$ 4.88	\$ -	\$ -	\$ -	\$ -	\$ 0.64	\$ -	\$ 0.06	\$ -	\$ 159.21	\$ 159.21	10.8%	\$ -	\$ 2.64	\$ -	\$ 181.02	2.0%	\$ 184.72	
AlCare CCO	Southwest	ACA 35-44	1	\$ 200.42	1,000	1,000	0.928	1,000	\$ 186.07	\$ 5.74	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -	\$ 0.01	\$ -	\$ 191.82	\$ 191.82	10.8%	\$ -	\$ 3.18	\$ -	\$ 218.11	2.0%	\$ 222.56	
AlCare CCO	Southwest	ACA 45-54	1	\$ 165.08	1,000	1,000	0.910	1,000	\$ 150.29	\$ 4.45	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -	\$ 0.01	\$ -	\$ 154.75	\$ 154.75	10.8%	\$ -	\$ 2.57	\$ -	\$ 175.86	2.0%	\$ 179.55	
AlCare CCO	Southwest	ACA 55-64	1	\$ 108.94	1,000	1,000	0.927	1,000	\$ 100.96	\$ 2.87	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -	\$ 0.01	\$ -	\$ 103.84	\$ 103.84	10.8%	\$ -	\$ 1.72	\$ -	\$ 118.07	2.0%	\$ 120.48	
AlCare CCO	Southwest	BM 19-34	-	\$ 153.80	1,000	1,000	0.935	1,000	\$ 143.77	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -	\$ 1.82	\$ -	\$ 145.59	\$ 145.59	10.8%	\$ -	\$ -	\$ -	\$ 163.13	2.0%	\$ 166.46	
AlCare CCO	Southwest	BM 35-44	-	\$ 186.16	1,000	1,000	0.920	1,000	\$ 171.29	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -	\$ 0.39	\$ -	\$ 171.65	\$ 171.65	10.8%	\$ -	\$ -	\$ -	\$ 192.62	2.0%	\$ 196.26	
AlCare CCO	Southwest	BM 45-54	-	\$ 148.32	1,000	1,000	0.909	1,000	\$ 134.77	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -	\$ 0.47	\$ -	\$ 145.24	\$ 145.24	10.8%	\$ -	\$ -	\$ -	\$ 165.53	2.0%	\$ 169.42	
AlCare CCO	Southwest	BM 55-64	-	\$ 101.44	1,000	1,000	0.924	1,000	\$ 93.73	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -	\$ 0.44	\$ -	\$ 94.16	\$ 94.16	10.8%	\$ -	\$ -	\$ -	\$ 105.50	2.0%	\$ 107.66	
AlCare CCO	Southwest	YSHCN	0	\$ 148.10	1,000	1,000	0.938	1,000	\$ 138.87	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -	\$ 0.06	\$ -	\$ 139.92	\$ 139.92	10.8%	\$ -	\$ 2.30	\$ -	\$ 157.96	2.0%	\$ 161.18	
AlCare CCO	Southwest	BCCP	0	\$ 95.62	1,000	1,000	0.932	1,000	\$ 89.11	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -	\$ 0.04	\$ -	\$ 89.11	\$ 89.11	10.8%	\$ -	\$ -	\$ -	\$ 98.28	2.0%	\$ 101.28	
AlCare CCO	Southwest	Maternity	-	\$ -	1,000	1,000	1,000	1,000	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -	10.8%	\$ -	\$ -	\$ -	\$ -	2.0%	\$ -	
AlCare CCO	Southwest	Total	20	\$ 234.88	1,000	1,000	0.965	1,000	\$ 223.06	\$ 0.86	\$ -	\$ 1.49	\$ -	\$ (0.06)	\$ 0.10	\$ -	\$ 0.04	\$ -	\$ 223.81	\$ 223.81	10.8%	\$ -	\$ 3.85	\$ -	\$ 244.13	2.0%	\$ 251.24	
Cascade Health Alliance, LLC	Southwest	PCR	0	\$ 163.10	1,000	1,000	0.941	1,000	\$ 153.52	\$ -	\$ -	\$ -	\$ -	\$ -	\$ 0.12	\$ -	\$ -	\$ -	\$ 159.79	\$ 159.79	11.6%	\$ -	\$ -	\$ -	\$ 186.68	2.0%	\$ 192.43	
Cascade Health Alliance, LLC	Southwest	PWO	-	\$ 143.51	1,000	1,000	0.955	1,000	\$ 137.03	\$ -	\$ -	\$ -	\$ -	\$ -	\$ 0.39	\$ -	\$ -	\$ -	\$ 139.81	\$ 139.81	11.6%	\$ -	\$ -	\$ -	\$ 158.06	2.0%	\$ 161.29	
Cascade Health Alliance, LLC	Southwest	CHLD 00-01	-	\$ 23.21	1,000	1,000	1.132	1,000	\$ 26.29	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -	\$ 26.29	\$ 26.29	11.6%	\$ -	\$ -	\$ -	\$ 30.33	2.0%	\$ 30.33	
Cascade Health Alliance, LLC	Southwest	CHLD 01-05	0	\$ 52.10	1,000	1,000	0.873	1,000	\$ 45.48	\$ -	\$ -	\$ -	\$ -	\$ 0.02	\$ (0.03)	\$ -	\$ -	\$ -	\$ 46.00	\$ 46.00	11.6%	\$ -	\$ 0.92	\$ -	\$ 52.46	2.0%	\$ 53.38	
Cascade Health Alliance, LLC	Southwest	CHLD 06-18	0	\$ 97.78	1,000	1,000	0.946	1,000	\$ 92.53	\$ -	\$ -	\$ -	\$ -	\$ 0.01	\$ (0.01)	\$ -	\$ 1.44	\$ -	\$ 94.97	\$ 94.97	11.6%	\$ -	\$ 0.82	\$ -	\$ 106.29	2.0%	\$ 110.50	
Cascade Health Alliance, LLC	Southwest	DUAL-MEDS	3	\$ 126.01	1,000	1,000	0.939	1,000	\$ 118.34	\$ -	\$ -	\$ -	\$ -	\$ 0.02	\$ (0.02)	\$ -	\$ 0.04	\$ -	\$ 118.40	\$ 118.40	11.6%	\$ -	\$ 1.15	\$ -	\$ 135.01	2.0%	\$ 137.76	
Cascade Health Alliance, LLC	Southwest	ABAD & OAA	1	\$ 305.40	1,000	1,000	0.932	1,000	\$ 284.60	\$ -	\$ -	\$ -	\$ -	\$ 0.57	\$ (0.09)	\$ 0.57	\$ -	\$ -	\$ 285.67	\$ 285.67	11.6%	\$ -	\$ 2.77	\$ -	\$ 325.74	2.0%	\$ 333.21	
Cascade Health Alliance, LLC	Southwest	FOSTER	2	\$ 503.23	1,000	1,000	0.987	1,000	\$ 496.84	\$ -	\$ -	\$ -	\$ -	\$ 0.02	\$ (0.02)	\$ 0.20	\$ -	\$ -	\$ 526.54	\$ 526.54	11.6%	\$ -	\$ 5.10	\$ -	\$ 600.40	2.0%	\$ 612.66	
Cascade Health Alliance, LLC	Southwest	ACA 19-34	0	\$ 162.57	1,000	1,000	0.940	1,000	\$ 153.64	\$ 4.88	\$ -	\$ -	\$ -	\$ -	\$ 0.81	\$ -	\$ 1.06	\$ -	\$ 160.38	\$ 160.38	11.6%							

CY27 CCO Rate Certification
Appendix C: CCOE Certified Rates

CCO	Region	COA	CY27 Caseload Forecast	Medical PMPM Adjusted	Regional Risk Adjustment	CCO Risk Adjustment	Regional Factor	Hospital Factor / Tri-County BH Adjustment	PMPM Adjusted	ACA Acuity	Dental PMPM	Child Residential	Handicapping PMPM	Gender PMPM	Youth with Special Health Care Needs	ICNP PH	ICNP BH	ICNP Dental	PMPM Adjusted	CCOE PMPM	NML %	HSRN Home Changes for Health-Related Supports	HSRN Home Changes for Health-Related Supports Admin	PMPM Adjusted	MCO Tax %	Certified Rate
Health Share of Oregon	Tricounty	PCR	1	\$ 163.10	1,000	1,000	0.948	1,006	\$ 156.67	\$ -	\$ -	\$ -	\$ -	\$ -	0.07	\$ -	\$ -	\$ -	\$ 159.13	\$ 159.13	9.6%	\$ -	\$ -	\$ 177.30	2.0%	\$ 160.92
Health Share of Oregon	Tricounty	PWO	-	\$ 143.51	1,000	1,000	0.956	1,006	\$ 138.12	\$ -	\$ -	\$ -	\$ -	\$ -	0.00	\$ -	\$ -	\$ -	\$ 139.47	\$ 139.47	9.6%	\$ -	\$ -	\$ 154.19	2.0%	\$ 157.34
Health Share of Oregon	Tricounty	CHLD 00-01	-	\$ 23.21	1,000	1,000	0.925	1,006	\$ 21.67	\$ -	\$ -	\$ -	\$ -	\$ -	0.00	\$ -	\$ -	\$ -	\$ 21.67	\$ 21.67	9.6%	\$ -	\$ -	\$ 23.86	2.0%	\$ 24.33
Health Share of Oregon	Tricounty	CHLD 01-05	0	\$ 52.10	1,000	1,000	1.023	1,005	\$ 53.61	\$ -	\$ -	\$ 0.00	\$ -	\$ -	0.02	\$ -	\$ -	\$ -	\$ 53.61	\$ 53.61	9.6%	\$ -	\$ 0.46	\$ 59.73	2.0%	\$ 60.95
Health Share of Oregon	Tricounty	CHLD 06-18	0	\$ 97.78	1,000	1,000	0.964	1,005	\$ 94.74	\$ -	\$ -	\$ 0.12	\$ -	\$ -	0.16	\$ -	\$ -	\$ -	\$ 93.67	\$ 93.67	9.6%	\$ -	\$ 0.81	\$ 104.37	2.0%	\$ 106.50
Health Share of Oregon	Tricounty	DUAL-MEDS	7	\$ 126.01	1,000	1,000	0.940	1,005	\$ 119.21	\$ -	\$ -	\$ -	\$ -	\$ -	0.01	\$ -	\$ -	\$ -	\$ 120.53	\$ 120.53	9.6%	\$ -	\$ 1.04	\$ 134.93	2.0%	\$ 137.03
Health Share of Oregon	Tricounty	AB&A & OAA	31	\$ 305.40	1,000	1,000	0.990	1,005	\$ 303.74	\$ -	\$ -	\$ -	\$ -	\$ -	0.02	\$ -	\$ -	\$ -	\$ 305.01	\$ 305.01	9.6%	\$ -	\$ 2.64	\$ 341.50	2.0%	\$ 348.47
Health Share of Oregon	Tricounty	FOSTER	26	\$ 503.23	1,000	1,000	1.004	1,002	\$ 536.67	\$ -	\$ -	\$ 2.34	\$ -	\$ -	0.14	\$ -	\$ -	\$ -	\$ 535.03	\$ 535.03	9.6%	\$ -	\$ 4.61	\$ 596.13	2.0%	\$ 608.30
Health Share of Oregon	Tricounty	ACA 19-34	1	\$ 162.57	1,000	1,000	0.966	1,010	\$ 158.58	\$ 5.04	\$ -	\$ -	\$ -	\$ -	0.06	\$ -	\$ -	\$ -	\$ 165.31	\$ 165.31	9.6%	\$ -	\$ 1.43	\$ 184.19	2.0%	\$ 187.95
Health Share of Oregon	Tricounty	ACA 35-44	10	\$ 200.42	1,000	1,000	0.989	1,009	\$ 199.96	\$ 6.17	\$ -	\$ -	\$ -	\$ -	0.12	\$ -	\$ -	\$ -	\$ 200.25	\$ 200.25	9.6%	\$ -	\$ 1.86	\$ 232.04	2.0%	\$ 236.77
Health Share of Oregon	Tricounty	ACA 45-54	6	\$ 165.08	1,000	1,000	0.966	1,008	\$ 160.86	\$ 4.76	\$ -	\$ -	\$ -	\$ -	0.10	\$ -	\$ -	\$ -	\$ 167.51	\$ 167.51	9.6%	\$ -	\$ 1.44	\$ 186.64	2.0%	\$ 190.45
Health Share of Oregon	Tricounty	BM 15-34	0	\$ 108.94	1,000	1,000	0.925	1,009	\$ 101.67	\$ 2.89	\$ -	\$ -	\$ -	\$ -	0.02	\$ -	\$ -	\$ -	\$ 106.40	\$ 106.40	9.6%	\$ -	\$ 0.92	\$ 118.55	2.0%	\$ 120.97
Health Share of Oregon	Tricounty	BM 35-44	-	\$ 153.80	1,000	1,000	0.956	1,004	\$ 147.49	\$ -	\$ -	\$ -	\$ -	\$ -	0.00	\$ -	\$ -	\$ -	\$ 151.17	\$ 151.17	9.6%	\$ -	\$ -	\$ 170.28	2.0%	\$ 173.76
Health Share of Oregon	Tricounty	BM 45-54	-	\$ 186.16	1,000	1,000	0.980	1,003	\$ 183.03	\$ -	\$ -	\$ -	\$ -	\$ -	0.00	\$ -	\$ -	\$ -	\$ 187.78	\$ 187.78	9.6%	\$ -	\$ -	\$ 214.88	2.0%	\$ 218.18
Health Share of Oregon	Tricounty	BM 55-64	-	\$ 148.32	1,000	1,000	0.964	1,004	\$ 143.60	\$ -	\$ -	\$ -	\$ -	\$ -	0.00	\$ -	\$ -	\$ -	\$ 148.32	\$ 148.32	9.6%	\$ -	\$ -	\$ 170.28	2.0%	\$ 173.76
Health Share of Oregon	Tricounty	BM 65-74	-	\$ 101.44	1,000	1,000	0.922	1,001	\$ 93.62	\$ -	\$ -	\$ -	\$ -	\$ -	0.00	\$ -	\$ -	\$ -	\$ 101.44	\$ 101.44	9.6%	\$ -	\$ -	\$ 117.08	2.0%	\$ 120.97
Health Share of Oregon	Tricounty	YSMCH	0	\$ 148.10	1,000	1,000	0.958	1,000	\$ 141.95	\$ -	\$ -	\$ -	\$ -	\$ -	0.00	\$ -	\$ -	\$ -	\$ 142.98	\$ 142.98	9.6%	\$ -	\$ 1.23	\$ 159.31	2.0%	\$ 162.56
Health Share of Oregon	Tricounty	BCPC	-	\$ 95.62	1,000	1,000	0.990	1,009	\$ 95.57	\$ -	\$ -	\$ -	\$ -	\$ -	0.00	\$ -	\$ -	\$ -	\$ 95.57	\$ 95.57	9.6%	\$ -	\$ -	\$ 108.86	2.0%	\$ 112.56
Health Share of Oregon	Tricounty	Maternity	-	\$ -	1,000	1,000	1.000	1,000	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -	0.00	\$ -	\$ -	\$ -	\$ -	\$ -	9.6%	\$ -	\$ -	\$ -	2.0%	\$ -
Health Share of Oregon	Tricounty	Total	120	\$ 239.89	1,000	1,000	1.010	1,004	\$ 243.24	\$ 1.09	\$ -	\$ 0.62	\$ -	\$ -	0.12	\$ -	\$ 1.63	\$ -	\$ 245.37	\$ 245.37	9.6%	\$ -	\$ 2.12	\$ 273.38	2.0%	\$ 278.97
InterCommunity Health Network, Inc.	Northwest	PCR	1	\$ 163.10	1,000	1,000	1.003	1,000	\$ 175.50	\$ -	\$ -	\$ -	\$ -	\$ -	0.12	\$ -	\$ -	\$ -	\$ 179.17	\$ 179.17	10.8%	\$ -	\$ 1.34	\$ 200.29	2.0%	\$ 206.21
InterCommunity Health Network, Inc.	Northwest	PWO	-	\$ 143.51	1,000	1,000	1.003	1,000	\$ 152.54	\$ -	\$ -	\$ -	\$ -	\$ -	0.00	\$ -	\$ -	\$ -	\$ 153.52	\$ 153.52	10.8%	\$ -	\$ -	\$ 172.01	2.0%	\$ 175.52
InterCommunity Health Network, Inc.	Northwest	CHLD 00-01	-	\$ 23.21	1,000	1,000	0.910	1,000	\$ 21.12	\$ -	\$ -	\$ -	\$ -	\$ -	0.00	\$ -	\$ -	\$ -	\$ 21.12	\$ 21.12	10.8%	\$ -	\$ -	\$ 23.66	2.0%	\$ 24.15
InterCommunity Health Network, Inc.	Northwest	CHLD 01-05	0	\$ 52.10	1,000	1,000	1.052	1,000	\$ 54.80	\$ -	\$ -	\$ 0.01	\$ -	\$ -	0.01	\$ -	\$ -	\$ -	\$ 54.88	\$ 54.88	10.8%	\$ -	\$ 0.41	\$ 61.90	2.0%	\$ 63.16
InterCommunity Health Network, Inc.	Northwest	CHLD 06-18	0	\$ 97.78	1,000	1,000	1.045	1,000	\$ 102.23	\$ -	\$ -	\$ 0.35	\$ -	\$ -	0.19	\$ -	\$ -	\$ -	\$ 101.46	\$ 101.46	10.8%	\$ -	\$ 0.76	\$ 114.44	2.0%	\$ 116.77
InterCommunity Health Network, Inc.	Northwest	DUAL-MEDS	9	\$ 126.01	1,000	1,000	1.000	1,000	\$ 133.62	\$ -	\$ -	\$ -	\$ -	\$ -	0.02	\$ -	\$ -	\$ -	\$ 134.14	\$ 134.14	10.8%	\$ -	\$ 1.01	\$ 151.30	2.0%	\$ 154.39
InterCommunity Health Network, Inc.	Northwest	AB&A & OAA	3	\$ 305.40	1,000	1,000	1.037	1,000	\$ 316.62	\$ -	\$ -	\$ 0.20	\$ -	\$ -	0.01	\$ 0.33	\$ -	\$ -	\$ 324.30	\$ 324.30	10.8%	\$ -	\$ 2.43	\$ 365.79	2.0%	\$ 373.26
InterCommunity Health Network, Inc.	Northwest	FOSTER	1	\$ 503.23	1,000	1,000	1.062	1,000	\$ 479.32	\$ 6.58	\$ -	\$ -	\$ -	\$ -	0.11	\$ 0.32	\$ -	\$ -	\$ 491.16	\$ 491.16	10.8%	\$ -	\$ 3.69	\$ 561.38	2.0%	\$ 574.86
InterCommunity Health Network, Inc.	Northwest	ACA 19-34	2	\$ 162.57	1,000	1,000	1.037	1,000	\$ 168.64	\$ 5.36	\$ -	\$ -	\$ -	\$ -	0.00	\$ -	\$ -	\$ -	\$ 177.69	\$ 177.69	10.8%	\$ -	\$ 1.33	\$ 200.43	2.0%	\$ 204.52
InterCommunity Health Network, Inc.	Northwest	ACA 35-44	2	\$ 200.42	1,000	1,000	1.059	1,000	\$ 212.32	\$ 6.55	\$ -	\$ -	\$ -	\$ -	0.00	\$ -	\$ -	\$ -	\$ 229.18	\$ 229.18	10.8%	\$ -	\$ 1.72	\$ 258.50	2.0%	\$ 263.78
InterCommunity Health Network, Inc.	Northwest	ACA 45-54	1	\$ 165.08	1,000	1,000	1.085	1,000	\$ 179.17	\$ 5.20	\$ -	\$ -	\$ -	\$ -	0.00	\$ -	\$ -	\$ -	\$ 188.93	\$ 188.93	10.8%	\$ -	\$ 1.42	\$ 212.98	2.0%	\$ 218.84
InterCommunity Health Network, Inc.	Northwest	ACA 55-64	1	\$ 108.94	1,000	1,000	1.130	1,000	\$ 123.09	\$ 3.50	\$ -	\$ -	\$ -	\$ -	0.00	\$ -	\$ -	\$ -	\$ 131.17	\$ 131.17	10.8%	\$ -	\$ 0.96	\$ 144.57	2.0%	\$ 147.52
InterCommunity Health Network, Inc.	Northwest	BM 15-34	-	\$ 153.80	1,000	1,000	1.028	1,000	\$ 157.81	\$ -	\$ -	\$ -	\$ -	\$ -	0.00	\$ -	\$ -	\$ -	\$ 165.51	\$ 165.51	10.8%	\$ -	\$ -	\$ 183.83	2.0%	\$ 189.62
InterCommunity Health Network, Inc.	Northwest	BM 35-44	-	\$ 186.16	1,000	1,000	1.050	1,000	\$ 185.45	\$ -	\$ -	\$ -	\$ -	\$ -	0.00	\$ -	\$ -	\$ -	\$ 193.44	\$ 193.44	10.8%	\$ -	\$ -	\$ 218.84	2.0%	\$ 224.93
InterCommunity Health Network, Inc.	Northwest	BM 45-54	-	\$ 148.32	1,000	1,000	1.083	1,000	\$ 160.67	\$ -	\$ -	\$ -	\$ -	\$ -	0.00	\$ -	\$ -	\$ -	\$ 168.66	\$ 168.66	10.8%	\$ -	\$ -	\$ 190.57	2.0%	\$ 197.52
InterCommunity Health Network, Inc.	Northwest	BM 55-64	-	\$ 101.44	1,000	1,000	1.126	1,000	\$ 114.27	\$ -	\$ -	\$ -	\$ -	\$ -	0.00	\$ -	\$ -	\$ -	\$ 117.25	\$ 117.25	10.8%	\$ -	\$ -	\$ 135.99	2.0%	\$ 141.98
InterCommunity Health Network, Inc.	Northwest	YSMCH	0	\$ 148.10	1,000	1,000	1.029	1,000	\$ 152.43	\$ -	\$ -	\$ -	\$ -	\$ -	0.00	\$ -	\$ -	\$ -	\$ 155.33	\$ 155.33	10.8%	\$ -	\$ 1.17	\$ 175.21	2.0%	\$ 178.78
InterCommunity Health Network, Inc.	Northwest	BCPC	-	\$ 95.62	1,000	1,000	1.037	1,000	\$ 95.14	\$ -	\$ -	\$ -	\$ -	\$ -	0.00	\$ -	\$ -	\$ -	\$ 99.14	\$ 99.14	10.8%	\$ -	\$ -	\$ 110.86	2.0%	\$ 114.97
InterCommunity Health Network, Inc.	Northwest	Maternity	-	\$ -	1,000	1,000	1.000	1,000	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -	0.00	\$ -	\$ -	\$ -	\$ -	\$ -	10.8%	\$ -	\$ -	\$ -	2.0%	\$ -
InterCommunity Health Network, Inc.	Northwest	Total	23	\$ 252.24	1,000	1,000	1.033	1,000	\$ 253.39	\$ 1.48	\$ -	\$ 1.48	\$ -	\$ -	0.00	\$ -	\$ 3.74	\$ -	\$ 254.94	\$ 254.94	10.8%	\$ -	\$ 1.60	\$ 292.22	2.0%	\$ 297.77
Jackson County COO, LLC	Southwest	PCR	1	\$ 163.10	1,000	1,000	0.941	1,000	\$ 153.92	\$ -	\$ -	\$ -	\$ -	\$ -	0.07	\$ -	\$ -	\$ -	\$ 157.39	\$ 157.39	10.8%	\$ -	\$ 1.01	\$ 177.61	2.0%	\$ 182.77
Jackson County COO, LLC	Southwest	PWO	-	\$ 143.51	1,000	1,000	0.955	1,000	\$ 137.03	\$ -	\$ -	\$ -	\$ -	\$ -	0.06	\$ -	\$ -	\$ -	\$ 137.39	\$ 137.39	10.8%	\$ -	\$ -	\$ 153.93	2.0%	\$ 157.07
Jackson County COO, LLC	Southwest	CHLD 00-01	-	\$ 23.21	1,000	1,000	1.132	1,000	\$ 26.29	\$ -	\$ -	\$ -	\$ -	\$ -	0.00	\$ -	\$ -	\$ -	\$ 26.29	\$ 26.29	10.8%	\$ -	\$ -	\$ 29.46	2.0%	\$ 30.06
Jackson County COO, LLC	Southwest	CHLD 01-05	0	\$ 52.10	1,000	1,000	0.973	1,000	\$ 45.48	\$ -	\$ -	\$ -	\$ -	\$ -	0.00	\$ -	\$ -	\$ -	\$ 45.48	\$ 45.48	10.8%	\$ -	\$ 0.40	\$ 58.46	2.0%	\$ 60.49
Jackson County COO, LLC	Southwest	CHLD 06-18	0	\$ 97.78	1,000	1,000	0.946	1,000	\$ 92.53	\$ -	\$ -	\$ 0.13	\$ -	\$ -	0.09	\$ -	\$ -	\$ -	\$ 91.71	\$ 91.71	10.8%	\$ -	\$ 0.97	\$ 105.73	2.0%	\$ 106.85
Jackson County COO, LLC	Southwest	DUAL-MEDS	5	\$ 126.01	1,000	1,000	0.939	1,000	\$ 118.34	\$ -	\$ -	\$ -	\$ -	\$ -	0.02	\$ -	\$ -	\$ -	\$ 118.36	\$ 118.36	10.8%	\$ -	\$ 1.26	\$ 133.87	2.0%	\$ 136.60
Jackson County COO, LLC	Southwest	AB&A & OAA	2	\$ 305.40	1,000	1,000	0.932	1,000	\$ 284.60	\$ -	\$ -	\$ -	\$ -	\$ -	0.04	\$ -	\$ -	\$ -	\$ 284.65	\$ 284.65	10.8%	\$ -	\$ 3.03	\$ 323.30	2.0%	\$ 336.34
Jackson County COO, LLC	Southwest	FOSTER	6	\$ 503.23	1,000	1,000	0.987	1,000	\$ 496.84	\$ -	\$ -	\$ 2.42	\$ -	\$ -	0.07	\$ -	\$ 0.05	\$ -	\$ 495.04	\$ 495.04	10.8%	\$ -	\$ 5.26	\$ 559.93	2.0%	\$ 571.25
Jackson County COO, LLC	Southwest	ACA 19-34	1	\$ 162.57	1,000	1,000	0.910	1,000	\$ 153.64	\$ 4.88	\$ -	\$ -	\$ -	\$ -	0.07	\$ -	\$ 0.11	\$ -	\$ 159.49	\$ 159.49	10.8%	\$ -	\$ 1.69	\$ 180.40	2.0%	\$ 184.08
Jackson County COO, LLC	Southwest	ACA 35-44	1	\$ 200.42	1,000	1,000	0.928	1,000	\$ 186.07	\$ 5.74	\$ -	\$ -	\$ -	\$ -	0.00	\$ -	\$ -	\$ -	\$ 191.93	\$ 191.93	10.8%	\$ -	\$ 1.42	\$ 218.84	2.0%	\$ 224.93
Jackson County COO, LLC	Southwest	ACA 45-54	1	\$ 165.08	1,000	1,000	0.910	1,000	\$ 150.29	\$ 4.45</																

CY27 CCO Rate Certification
Appendix C: CCOE Certified Rates

CCO	Region	COA	CY27 Caseload	Medical PH/PA	Statewide Regional Risk Adjusting	CCO Risk Adjusting	Regional Factor	Hospital Factor / Tri-County BH Adjusted	PMPM PMPM	ACA Acuity	Dental PMPM	Child Residential	Handicapping PMPM	Gender PMPM	Youth with Special Health Care Needs	ICNP PH	ICNP BM	ICNP Dental	PMPM PMPM	Credibility Reviewing	NML %	HSRN Home Changes for Health-Related Supports	PBR PMPM	HSRN Home Changes for Health-Related Supports Admin	PMPM PMPM	MCO Tax %	Certified Rate	
PacificSource Community Solutions (Marion Pk)	Northwest	PCR	2	\$ 163.10	1,000	1,000	1.063	1,000	\$ 173.50	\$ -	\$ -	\$ -	\$ -	\$ -	\$ 0.11	\$ -	\$ 0.03	\$ -	\$ 173.64	\$ 173.64	10.2%	\$ -	\$ 0.80	\$ -	\$ 194.08	2.0%	\$ 188.02	
PacificSource Community Solutions (Marion Pk)	Northwest	PWO	0	\$ 143.51	1,000	1,000	1.063	1,000	\$ 152.54	\$ -	\$ -	\$ -	\$ -	\$ -	\$ 0.00	\$ -	\$ -	\$ -	\$ 152.91	\$ 152.91	10.2%	\$ -	\$ -	\$ -	\$ 170.19	2.0%	\$ 173.66	
PacificSource Community Solutions (Marion Pk)	Northwest	CHLD 00-01	0	\$ 23.21	1,000	1,000	0.910	1,000	\$ 21.12	\$ -	\$ -	\$ -	\$ -	\$ -	\$ 0.00	\$ -	\$ -	\$ -	\$ 21.12	\$ 21.12	10.2%	\$ -	\$ -	\$ -	\$ 23.51	2.0%	\$ 188.99	
PacificSource Community Solutions (Marion Pk)	Northwest	CHLD 01-05	0	\$ 52.10	1,000	1,000	1.052	1,000	\$ 54.80	\$ -	\$ -	\$ 0.00	\$ -	\$ -	\$ 0.01	\$ -	\$ -	\$ -	\$ 54.80	\$ 54.80	10.2%	\$ -	\$ 0.25	\$ -	\$ 61.25	2.0%	\$ 62.50	
PacificSource Community Solutions (Marion Pk)	Northwest	CHLD 06-18	0	\$ 97.78	1,000	1,000	1.045	1,000	\$ 102.22	\$ -	\$ -	\$ 0.18	\$ -	\$ -	\$ 0.10	\$ -	\$ -	\$ -	\$ 101.05	\$ 101.05	10.2%	\$ -	\$ 0.47	\$ -	\$ 113.60	2.0%	\$ 115.92	
PacificSource Community Solutions (Marion Pk)	Northwest	DUAL-MEDS	14	\$ 126.01	1,000	1,000	1.045	1,000	\$ 133.42	\$ -	\$ -	\$ -	\$ -	\$ -	\$ 0.03	\$ -	\$ -	\$ -	\$ 133.76	\$ 133.76	10.2%	\$ -	\$ 0.62	\$ -	\$ 145.48	2.0%	\$ 152.24	
PacificSource Community Solutions (Marion Pk)	Northwest	AB&A & OAA	4	\$ 305.40	1,000	1,000	1.045	1,000	\$ 316.62	\$ -	\$ -	\$ 0.10	\$ -	\$ -	\$ 0.07	\$ -	\$ -	\$ -	\$ 316.69	\$ 316.69	10.2%	\$ -	\$ 1.48	\$ -	\$ 353.93	2.0%	\$ 361.15	
PacificSource Community Solutions (Marion Pk)	Northwest	FOSTER	7	\$ 503.23	1,000	1,000	1.062	1,000	\$ 479.32	\$ -	\$ -	\$ 3.44	\$ -	\$ -	\$ 0.39	\$ -	\$ -	\$ -	\$ 479.78	\$ 479.78	10.2%	\$ -	\$ 2.22	\$ -	\$ 536.20	2.0%	\$ 547.14	
PacificSource Community Solutions (Marion Pk)	Northwest	ACA 19-34	3	\$ 163.57	1,000	1,000	0.987	1,000	\$ 158.64	\$ -	\$ -	\$ -	\$ -	\$ -	\$ 0.08	\$ -	\$ -	\$ -	\$ 157.02	\$ 157.02	10.2%	\$ -	\$ 0.84	\$ -	\$ 185.40	2.0%	\$ 189.60	
PacificSource Community Solutions (Marion Pk)	Northwest	ACA 35-44	2	\$ 200.42	1,000	1,000	1.059	1,000	\$ 212.32	\$ 6.55	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -	\$ 213.18	\$ 213.18	10.2%	\$ -	\$ 1.01	\$ -	\$ 244.96	2.0%	\$ 249.66	
PacificSource Community Solutions (Marion Pk)	Northwest	ACA 45-54	2	\$ 165.08	1,000	1,000	1.085	1,000	\$ 179.17	\$ 5.30	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -	\$ 184.60	\$ 184.60	10.2%	\$ -	\$ 0.85	\$ -	\$ 206.31	2.0%	\$ 210.52	
PacificSource Community Solutions (Marion Pk)	Northwest	BM 19-34	0	\$ 108.94	1,000	1,000	1.120	1,000	\$ 123.09	\$ 3.50	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -	\$ 126.63	\$ 126.63	10.2%	\$ -	\$ 0.59	\$ -	\$ 141.52	2.0%	\$ 144.41	
PacificSource Community Solutions (Marion Pk)	Northwest	BM 35-44	0	\$ 153.80	1,000	1,000	1.026	1,000	\$ 157.81	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -	\$ 163.44	\$ 163.44	10.2%	\$ -	\$ -	\$ -	\$ 181.90	2.0%	\$ 185.61	
PacificSource Community Solutions (Marion Pk)	Northwest	BM 45-54	0	\$ 186.16	1,000	1,000	1.050	1,000	\$ 195.45	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -	\$ 205.77	\$ 205.77	10.2%	\$ -	\$ -	\$ -	\$ 229.02	2.0%	\$ 233.69	
PacificSource Community Solutions (Marion Pk)	Northwest	BM 55-64	0	\$ 148.32	1,000	1,000	1.083	1,000	\$ 160.67	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -	\$ 164.95	\$ 164.95	10.2%	\$ -	\$ -	\$ -	\$ 183.59	2.0%	\$ 187.23	
PacificSource Community Solutions (Marion Pk)	Northwest	YSMCHN	0	\$ 101.44	1,000	1,000	1.126	1,000	\$ 114.27	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -	\$ 115.45	\$ 115.45	10.2%	\$ -	\$ -	\$ -	\$ 128.49	2.0%	\$ 131.11	
PacificSource Community Solutions (Marion Pk)	Northwest	BCPC	0	\$ 148.10	1,000	1,000	1.029	1,000	\$ 152.43	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -	\$ 152.60	\$ 152.60	10.2%	\$ -	\$ 0.71	\$ -	\$ 170.54	2.0%	\$ 174.02	
PacificSource Community Solutions (Marion Pk)	Northwest	Maternity	0	\$ 95.62	1,000	1,000	1.037	1,000	\$ 99.14	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -	\$ 99.14	\$ 316.69	10.2%	\$ -	\$ -	\$ -	\$ 352.46	2.0%	\$ 359.66	
PacificSource Community Solutions (Marion Pk)	Northwest	Total	36	\$ 240.00	1,000	1,000	1.000	1,000	\$ 241.85	\$ 1.07	\$ -	\$ 0.75	\$ -	\$ -	\$ 0.02	\$ 0.15	\$ -	\$ 0.28	\$ -	\$ 243.20	\$ 243.20	10.2%	\$ -	\$ 1.13	\$ -	\$ 271.88	2.0%	\$ 277.34
Trillium Community Health Plan, Inc. (Tri-County)	Tricounty	PCR	1	\$ 163.10	1,000	1,000	0.948	1,000	\$ 146.16	\$ -	\$ -	\$ -	\$ -	\$ -	\$ 0.06	\$ -	\$ -	\$ -	\$ 147.36	\$ 147.36	10.2%	\$ -	\$ 0.77	\$ -	\$ 164.78	2.0%	\$ 168.14	
Trillium Community Health Plan, Inc. (Tri-County)	Tricounty	PWO	0	\$ 143.51	1,000	1,000	0.956	1,000	\$ 129.99	\$ -	\$ -	\$ -	\$ -	\$ -	\$ 0.02	\$ -	\$ -	\$ -	\$ 133.17	\$ 133.17	10.2%	\$ -	\$ -	\$ -	\$ 148.21	2.0%	\$ 151.23	
Trillium Community Health Plan, Inc. (Tri-County)	Tricounty	CHLD 00-01	0	\$ 23.21	1,000	1,000	0.925	1,000	\$ 20.25	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -	\$ 20.25	\$ 20.25	10.2%	\$ -	\$ -	\$ -	\$ 22.54	2.0%	\$ 23.00	
Trillium Community Health Plan, Inc. (Tri-County)	Tricounty	CHLD 01-05	0	\$ 52.10	1,000	1,000	1.023	1,000	\$ 50.34	\$ -	\$ -	\$ 0.00	\$ -	\$ -	\$ 0.02	\$ -	\$ -	\$ -	\$ 50.91	\$ 50.91	10.2%	\$ -	\$ 0.27	\$ -	\$ 56.93	2.0%	\$ 58.09	
Trillium Community Health Plan, Inc. (Tri-County)	Tricounty	CHLD 06-18	0	\$ 97.78	1,000	1,000	0.964	1,000	\$ 88.96	\$ -	\$ -	\$ 0.15	\$ -	\$ -	\$ 0.01	\$ -	\$ -	\$ -	\$ 89.22	\$ 89.22	10.2%	\$ -	\$ 0.47	\$ -	\$ 99.77	2.0%	\$ 101.86	
Trillium Community Health Plan, Inc. (Tri-County)	Tricounty	DUAL-MEDS	6	\$ 126.01	1,000	1,000	0.940	1,000	\$ 111.94	\$ -	\$ -	\$ -	\$ -	\$ -	\$ 0.01	\$ -	\$ -	\$ -	\$ 112.05	\$ 112.05	10.2%	\$ -	\$ 0.59	\$ -	\$ 125.30	2.0%	\$ 127.85	
Trillium Community Health Plan, Inc. (Tri-County)	Tricounty	AB&A & OAA	1	\$ 305.40	1,000	1,000	0.990	1,000	\$ 285.19	\$ -	\$ -	\$ 0.08	\$ -	\$ -	\$ 0.00	\$ 0.38	\$ -	\$ -	\$ 288.38	\$ 288.38	10.2%	\$ -	\$ 1.51	\$ -	\$ 322.46	2.0%	\$ 329.04	
Trillium Community Health Plan, Inc. (Tri-County)	Tricounty	ACA 19-34	1	\$ 163.57	1,000	1,000	0.941	1,000	\$ 153.61	\$ 4.47	\$ -	\$ 2.78	\$ -	\$ -	\$ 0.01	\$ -	\$ -	\$ -	\$ 156.42	\$ 156.42	10.2%	\$ -	\$ 0.86	\$ -	\$ 174.91	2.0%	\$ 178.48	
Trillium Community Health Plan, Inc. (Tri-County)	Tricounty	ACA 35-44	2	\$ 200.42	1,000	1,000	0.989	1,000	\$ 148.89	\$ 5.79	\$ -	\$ -	\$ -	\$ -	\$ 0.31	\$ -	\$ -	\$ -	\$ 154.85	\$ 154.85	10.2%	\$ -	\$ 0.81	\$ -	\$ 173.15	2.0%	\$ 176.68	
Trillium Community Health Plan, Inc. (Tri-County)	Tricounty	ACA 45-54	2	\$ 165.08	1,000	1,000	0.986	1,000	\$ 187.75	\$ 5.79	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -	\$ 195.11	\$ 195.11	10.2%	\$ -	\$ 1.02	\$ -	\$ 218.17	2.0%	\$ 222.62	
Trillium Community Health Plan, Inc. (Tri-County)	Tricounty	BM 19-34	0	\$ 108.94	1,000	1,000	0.964	1,000	\$ 151.24	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -	\$ 156.42	\$ 156.42	10.2%	\$ -	\$ 0.82	\$ -	\$ 174.91	2.0%	\$ 178.48	
Trillium Community Health Plan, Inc. (Tri-County)	Tricounty	BM 35-44	0	\$ 153.80	1,000	1,000	0.956	1,000	\$ 195.47	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -	\$ 205.77	\$ 205.77	10.2%	\$ -	\$ -	\$ -	\$ 229.02	2.0%	\$ 233.69	
Trillium Community Health Plan, Inc. (Tri-County)	Tricounty	BM 45-54	0	\$ 148.32	1,000	1,000	0.980	1,000	\$ 171.85	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -	\$ 181.41	\$ 181.41	10.2%	\$ -	\$ -	\$ -	\$ 206.31	2.0%	\$ 210.52	
Trillium Community Health Plan, Inc. (Tri-County)	Tricounty	BM 55-64	0	\$ 101.44	1,000	1,000	0.984	1,000	\$ 124.83	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -	\$ 124.83	\$ 124.83	10.2%	\$ -	\$ -	\$ -	\$ 138.54	2.0%	\$ 141.79	
Trillium Community Health Plan, Inc. (Tri-County)	Tricounty	YSMCHN	0	\$ 148.10	1,000	1,000	0.922	1,000	\$ 87.90	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -	\$ 101.04	\$ 101.04	10.2%	\$ -	\$ -	\$ -	\$ 112.45	2.0%	\$ 114.74	
Trillium Community Health Plan, Inc. (Tri-County)	Tricounty	BCPC	0	\$ 148.10	1,000	1,000	0.958	1,000	\$ 141.95	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -	\$ 142.86	\$ 142.86	10.2%	\$ -	\$ 0.75	\$ -	\$ 159.74	2.0%	\$ 163.00	
Trillium Community Health Plan, Inc. (Tri-County)	Tricounty	Maternity	0	\$ 95.62	1,000	1,000	0.960	1,000	\$ 98.73	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -	\$ 98.73	\$ 288.38	10.2%	\$ -	\$ -	\$ -	\$ 307.50	2.0%	\$ 312.50	
Trillium Community Health Plan, Inc. (Tri-County)	Tricounty	Total	13	\$ 164.91	1,000	1,000	0.952	1,000	\$ 171.56	\$ 1.49	\$ -	\$ 0.20	\$ -	\$ -	\$ 0.00	\$ 0.12	\$ -	\$ 0.33	\$ -	\$ 174.70	\$ 174.70	10.2%	\$ -	\$ 0.81	\$ -	\$ 191.30	2.0%	\$ 196.35
Umpqua Health Alliance	Southwest	PCR	2	\$ 163.10	1,000	1,000	0.941	1,000	\$ 153.52	\$ -	\$ -	\$ -	\$ -	\$ -	\$ 0.01	\$ -	\$ -	\$ -	\$ 154.48	\$ 154.48	11.6%	\$ -	\$ 0.61	\$ -	\$ 172.82	2.0%	\$ 176.35	
Umpqua Health Alliance	Southwest	PWO	0	\$ 143.51	1,000	1,000	0.955	1,000	\$ 137.03	\$ -	\$ -	\$ -	\$ -	\$ -	\$ 0.01	\$ -	\$ -	\$ -	\$ 139.15	\$ 139.15	10.2%	\$ -	\$ -	\$ -	\$ 154.87	2.0%	\$ 158.03	
Umpqua Health Alliance	Southwest	CHLD 00-01	0	\$ 23.21	1,000	1,000	0.912	1,000	\$ 26.29	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -	\$ 26.29	\$ 26.29	10.2%	\$ -	\$ -	\$ -	\$ 29.26	2.0%	\$ 29.86	
Umpqua Health Alliance	Southwest	CHLD 01-05	0	\$ 52.10	1,000	1,000	0.873	1,000	\$ 45.48	\$ -	\$ -	\$ 0.03	\$ -	\$ -	\$ 0.01	\$ -	\$ -	\$ -	\$ 45.91	\$ 45.91	10.2%	\$ -	\$ -	\$ -	\$ 50.75	2.0%	\$ 51.78	
Umpqua Health Alliance	Southwest	CHLD 06-18	0	\$ 97.78	1,000	1,000	0.946	1,000	\$ 92.53	\$ -	\$ -	\$ 0.24	\$ -	\$ -	\$ 0.14	\$ -	\$ -	\$ -	\$ 93.14	\$ 93.14	10.2%	\$ -	\$ 0.20	\$ -	\$ 103.87	2.0%	\$ 105.98	
Umpqua Health Alliance	Southwest	DUAL-MEDS	17	\$ 126.01	1,000	1,000	0.939	1,000	\$ 118.34	\$ -	\$ -	\$ -	\$ -	\$ -	\$ 0.02	\$ -	\$ -	\$ -	\$ 118.80	\$ 118.80	10.2%	\$ -	\$ 0.25	\$ -	\$ 132.48	2.0%	\$ 135.18	
Umpqua Health Alliance	Southwest	AB&A & OAA	10	\$ 305.40	1,000	1,000	0.932	1,000	\$ 284.60	\$ -	\$ -	\$ 0.05	\$ -	\$ -	\$ 0.04	\$ -	\$ -	\$ -	\$ 287.57	\$ 287.57	10.2%	\$ -	\$ 0.61	\$ -	\$ 320.72	2.0%	\$ 327.22	
Umpqua Health Alliance	Southwest	FOSTER	12	\$ 503.23	1,000	1,000	0.987	1,000	\$ 496.84	\$ -	\$ -	\$ 23.46	\$ -	\$ -	\$ 0.00	\$ 0.10	\$ -	\$ -	\$ 522.65	\$ 522.65	10.2%	\$ -	\$ 1.11	\$ -	\$ 582.80	2.0%	\$ 594.70	
Umpqua Health Alliance	Southwest	ACA 19-34	3	\$ 162.57	1,000	1,000	0.945	1,000	\$ 153.64	\$ 4.88	\$ -	\$ -	\$ -	\$ -	\$ 0.83	\$ -	\$ -	\$ -	\$ 160.45	\$ 160.45	10.2%	\$ -	\$ 0.34	\$ -	\$ 179.92	2.0%	\$ 182.57	
Umpqua Health Alliance	Southwest	ACA 35-44	2	\$ 200.42	1,000	1,000	0.928	1,000	\$ 186.07	\$ 5.74	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -	\$ 193.02	\$ 193.02	10.2%	\$ -	\$ 0.41	\$ -	\$ 216.46	2.0%	\$ 220.94	
Umpqua Health Alliance	Southwest	ACA 45-54	2	\$ 165.08	1,000	1,000	0.910	1,000	\$ 150.29	\$																		

CY27 CCO Rate Certification
Appendix C: CCOE Certified Rates

CCO	Region	COA	CY27 Caseload Forecast ¹	Statewide Medical PMPM	Regional Risk Adjustment	CCO Risk Adjustment	Regional Factors	Hospital Factor / Tri-County BH Factor Adjustment	PMPM Subtotal	ACA Acuity	Dental PMPM	Child Residential	Handicapping Malocclusion	Gender Affirming Care	Youth with Special Health Care Needs	IMCP PH	IMCP BH	IMCP Dental	PMPM Subtotal	Credibility Blending	NML %	HRSN Home Changes for Health-Related Supports Benefit	PBR PMPM	HRSN Home Changes for Health-Related Supports Admin	PMPM Subtotal	MCO Tax %	Certified Rate PMPM ²
Statewide		PCR	16	\$ 163.16	1,000	1,000	1,000	1,000	\$ 163.17	\$ -	\$ -	\$ -	\$ -	\$ -	\$ 0.09	\$ -	\$ 2.45	\$ -	\$ 165.71	\$ 165.71	10.3%	\$ -	\$ 1.44	\$ -	\$ 166.14	2.0%	\$ 169.93
Statewide	Statewide	PWO	-	\$ -	-	-	-	-	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -	0.0%	\$ -	\$ -	\$ -	\$ -	0.0%	\$ -
Statewide	Statewide	CHLD 00-01	-	\$ -	-	-	-	-	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -	0.0%	\$ -	\$ -	\$ -	\$ -	0.0%	\$ -
Statewide	Statewide	CHLD 01-05	1	\$ 52.10	1,000	1,000	1,000	1,000	\$ 52.08	\$ -	\$ -	\$ 0.01	\$ -	\$ (0.04)	\$ -	\$ -	\$ 0.06	\$ -	\$ 52.10	\$ 52.10	10.2%	\$ -	\$ 0.44	\$ -	\$ 58.48	2.0%	\$ 59.67
Statewide	Statewide	CHLD 06-18	0	\$ 97.78	1,000	1,000	1,000	1,000	\$ 97.78	\$ -	\$ -	\$ 0.32	\$ -	\$ (1.17)	\$ -	\$ -	\$ 0.64	\$ -	\$ 97.57	\$ 97.57	10.3%	\$ -	\$ 0.83	\$ -	\$ 109.56	2.0%	\$ 111.79
Statewide	Statewide	DUAL-MEDS	147	\$ 126.01	1,000	1,000	1,000	1,000	\$ 126.01	\$ -	\$ -	\$ -	\$ -	\$ -	\$ 0.02	\$ -	\$ 0.96	\$ -	\$ 126.99	\$ 126.99	10.3%	\$ -	\$ 1.09	\$ -	\$ 142.59	2.0%	\$ 145.50
Statewide	Statewide	AMAD & OAA	37	\$ 305.40	1,000	1,000	1,000	1,000	\$ 305.38	\$ -	\$ -	\$ 0.19	\$ -	\$ (0.37)	\$ 0.31	\$ -	\$ 2.82	\$ -	\$ 308.33	\$ 308.33	10.2%	\$ -	\$ 2.58	\$ -	\$ 346.12	2.0%	\$ 353.18
Statewide	Statewide	FOSTER	90	\$ 503.23	1,000	1,000	0.998	1,000	\$ 502.30	\$ -	\$ -	\$ 7.16	\$ -	\$ (2.28)	\$ 0.12	\$ -	\$ 2.71	\$ -	\$ 510.01	\$ 510.01	10.3%	\$ -	\$ 4.39	\$ -	\$ 573.02	2.0%	\$ 584.71
Statewide	Statewide	ACA 19-34	25	\$ 162.57	1,000	1,000	1,000	1,000	\$ 162.59	\$ 5.18	\$ -	\$ -	\$ -	\$ -	\$ 0.74	\$ -	\$ 1.11	\$ -	\$ 169.60	\$ 169.60	10.2%	\$ -	\$ 1.44	\$ -	\$ 190.33	2.0%	\$ 194.21
Statewide	Statewide	ACA 35-44	27	\$ 200.42	1,000	1,000	0.999	1,000	\$ 200.27	\$ 6.18	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -	\$ 1.93	\$ -	\$ 208.38	\$ 208.38	10.2%	\$ -	\$ 1.90	\$ -	\$ 233.88	2.0%	\$ 238.65
Statewide	Statewide	ACA 45-54	18	\$ 165.08	1,000	1,000	0.999	1,000	\$ 164.92	\$ 4.88	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -	\$ 1.63	\$ -	\$ 171.43	\$ 171.43	10.2%	\$ -	\$ 1.49	\$ -	\$ 192.49	2.0%	\$ 196.42
Statewide	Statewide	ACA 55-64	0	\$ 108.94	1,000	1,000	1,000	1,000	\$ 108.94	\$ 3.10	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -	\$ 1.07	\$ -	\$ 113.10	\$ 113.10	10.3%	\$ -	\$ 1.00	\$ -	\$ 127.08	2.0%	\$ 129.68
Statewide	Statewide	BBM 15-34	-	\$ -	-	-	-	-	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -	0.0%	\$ -	\$ -	\$ -	\$ -	0.0%	\$ -
Statewide	Statewide	BBM 35-44	-	\$ -	-	-	-	-	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -	0.0%	\$ -	\$ -	\$ -	\$ -	0.0%	\$ -
Statewide	Statewide	BBM 45-54	-	\$ -	-	-	-	-	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -	0.0%	\$ -	\$ -	\$ -	\$ -	0.0%	\$ -
Statewide	Statewide	BBM 55-64	-	\$ -	-	-	-	-	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -	0.0%	\$ -	\$ -	\$ -	\$ -	0.0%	\$ -
Statewide	Statewide	YSHCN	0	\$ 148.10	1,000	1,000	1,000	1,000	\$ 148.10	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -	\$ 1.12	\$ -	\$ 149.22	\$ 149.22	10.3%	\$ -	\$ 1.31	\$ -	\$ 167.58	2.0%	\$ 171.00
Statewide	Statewide	DCCP	-	\$ -	-	-	-	-	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -	0.0%	\$ -	\$ -	\$ -	\$ -	0.0%	\$ -
Statewide	Statewide	Maternity	-	\$ -	-	-	-	-	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -	0.0%	\$ -	\$ -	\$ -	\$ -	0.0%	\$ -
Statewide	Statewide	Total	363	\$ 249.84	1,000	1,000	0.999	1,000	\$ 249.69	\$ 1.06	\$ -	\$ 1.80	\$ -	\$ (0.81)	\$ 0.12	\$ -	\$ 1.77	\$ -	\$ 253.73	\$ 253.73	10.3%	\$ -	\$ 2.17	\$ -	\$ 284.97	2.0%	\$ 290.78

General Note:
This appendix should be reviewed in conjunction with the accompanying rate certification narrative.

Footnotes:
1. Reflects CCOE projected enrollment. Values for maternity represent 2025 delivery counts.
2. Values for maternity are CCO-specific, not Statewide figures.
3. Marsh is certifying the COA-specific rates, not the Statewide aggregate values.

CY27 CCO Rate Certification
Appendix C: CCOF Certified Rates

CCO	Region	COA	CY27 CCOF Rates	Statewide Medical PHW	Regional Risk Adjusted	CCO Risk Adjusted	Regional Factor	Hospital Factor / Tri-County BH Factor	PMPM Subsidy	ACA Acuity	Dental PMPM	Child Residential	Handicapping Procedure	Gender Affirming Care	Youth with Special Health Care Needs	INCP PH	INCP BH	INCP BH	PMPM Subsidy	Credibility Reviewing	NML %	HRSN Home Changes for Health-Related Supports	PBR Admin	HRSN Home Changes for Health-Related Supports Admin	PMPM Subsidy	MCO Tax %	Certified Rate PAPA		
Advanced Health, LLC	Southwest	PCR	1,862	0.97	1,000	0.941	1,000	10.32	\$	20.12	\$	0.06	\$	0.06	\$	\$	\$	\$	\$	39.22	39.22	11.6%	\$	0.54	\$	44.83	2.0%	45.30	
Advanced Health, LLC	Southwest	PWO	2,099	0.98	1,000	0.955	1,000	8.77	\$	17.14	\$	0.06	\$	0.06	\$	\$	\$	\$	\$	5.20	31.18	31.18	11.6%	\$	0.43	\$	35.68	2.0%	36.41
Advanced Health, LLC	Southwest	CHLD 00-01	71	0.93	1,000	1.132	1,000	5.30	\$	7.94	\$	0.06	\$	0.06	\$	\$	\$	\$	\$	0.05	13.89	13.89	11.6%	\$	0.18	\$	15.36	2.0%	15.98
Advanced Health, LLC	Southwest	CHLD 01-05	1,095	0.97	1,000	0.873	1,000	2.94	\$	35.55	\$	0.06	\$	0.06	\$	\$	\$	\$	\$	3.28	41.77	41.77	11.6%	\$	0.58	\$	48.78	2.0%	48.78
Advanced Health, LLC	Southwest	CHLD 06-18	4,075	0.97	1,000	0.946	1,000	3.58	\$	31.81	\$	0.06	\$	0.06	\$	\$	\$	\$	\$	3.42	41.72	41.72	11.6%	\$	0.57	\$	47.74	2.0%	48.71
Advanced Health, LLC	Southwest	DUAL-MEDS	546	0.98	1,000	0.939	1,000	52.50	\$	22.74	\$	0.06	\$	0.06	\$	\$	\$	\$	\$	5.32	80.82	80.82	11.6%	\$	1.14	\$	47.28	2.0%	48.73
Advanced Health, LLC	Southwest	ABAD & OAA	1,216	0.98	1,000	0.932	1,000	41.62	\$	26.88	\$	0.06	\$	0.06	\$	\$	\$	\$	\$	9.33	77.89	77.89	11.6%	\$	1.07	\$	89.13	2.0%	90.95
Advanced Health, LLC	Southwest	FOSTER	465	0.94	1,000	0.987	1,000	8.50	\$	37.71	\$	0.06	\$	0.06	\$	\$	\$	\$	\$	6.39	55.52	55.52	11.6%	\$	0.76	\$	63.53	2.0%	64.83
Advanced Health, LLC	Southwest	ACA 19-34	1,257	0.94	1,000	0.929	1,000	6.56	\$	0.21	\$	14.98	\$	0.06	\$	\$	\$	\$	\$	5.06	27.48	27.48	11.6%	\$	0.38	\$	31.45	2.0%	32.09
Advanced Health, LLC	Southwest	ACA 35-44	1,257	0.97	1,000	0.929	1,000	11.67	\$	0.36	\$	17.03	\$	0.06	\$	\$	\$	\$	\$	6.40	35.45	35.45	11.6%	\$	0.45	\$	40.57	2.0%	41.40
Advanced Health, LLC	Southwest	ACA 45-54	999	0.94	1,000	0.910	1,000	13.39	\$	0.40	\$	19.07	\$	0.06	\$	\$	\$	\$	\$	4.33	37.18	37.18	11.6%	\$	0.51	\$	42.55	2.0%	43.42
Advanced Health, LLC	Southwest	ACA 55-64	794	0.94	1,000	0.927	1,000	11.68	\$	0.33	\$	19.82	\$	0.06	\$	\$	\$	\$	\$	8.89	40.72	40.72	11.6%	\$	0.56	\$	46.60	2.0%	47.55
Advanced Health, LLC	Southwest	BM 19-34	1,71	0.94	1,000	0.935	1,000	5.90	\$	0.40	\$	14.98	\$	0.06	\$	\$	\$	\$	\$	108.18	207.06	207.06	11.6%	\$	2.85	\$	248.01	2.0%	241.71
Advanced Health, LLC	Southwest	BM 35-44	3	0.93	1,000	0.920	1,000	11.53	\$	0.40	\$	17.03	\$	0.06	\$	\$	\$	\$	\$	210.30	238.85	238.85	11.6%	\$	3.29	\$	273.34	2.0%	278.91
Advanced Health, LLC	Southwest	BM 45-54	3	0.93	1,000	0.909	1,000	13.35	\$	0.40	\$	19.07	\$	0.06	\$	\$	\$	\$	\$	142.28	174.71	174.71	11.6%	\$	2.41	\$	199.53	2.0%	204.01
Advanced Health, LLC	Southwest	BM 55-64	0	0.93	1,000	0.924	1,000	10.77	\$	0.40	\$	19.82	\$	0.06	\$	\$	\$	\$	\$	292.32	322.91	322.91	11.6%	\$	4.45	\$	369.53	2.0%	377.07
Advanced Health, LLC	Southwest	YSHCN	52	0.93	1,000	0.938	1,000	4.83	\$	0.40	\$	14.98	\$	0.06	\$	\$	\$	\$	\$	5.66	25.54	25.54	11.6%	\$	0.35	\$	29.23	2.0%	29.82
Advanced Health, LLC	Southwest	BCCP	-	0.97	1,000	0.932	1,000	8.45	\$	0.40	\$	25.13	\$	0.06	\$	\$	\$	\$	\$	6.40	33.59	33.59	11.6%	\$	0.45	\$	88.06	2.0%	89.86
Advanced Health, LLC	Southwest	Maternity	-	0.97	1,000	1.000	1,000	10.00	\$	0.40	\$	0.00	\$	0.06	\$	\$	\$	\$	\$	0.00	0.00	0.00	11.6%	\$	0.00	\$	0.00	2.0%	0.00
Advanced Health, LLC	Southwest	Total	14,511	0.94	1,000	0.935	1,000	11.78	\$	0.11	\$	24.36	\$	0.04	\$	\$	\$	\$	\$	5.71	42.90	42.90	11.6%	\$	0.59	\$	46.10	2.0%	46.10
AiCare CCO	Southwest	PCR	2,867	0.97	1,000	0.941	1,000	10.32	\$	20.12	\$	0.13	\$	0.13	\$	\$	\$	\$	\$	0.00	30.57	30.57	10.8%	\$	0.51	\$	34.76	2.0%	35.47
AiCare CCO	Southwest	PWO	1,957	0.98	1,000	0.955	1,000	8.77	\$	17.14	\$	0.13	\$	0.13	\$	\$	\$	\$	\$	0.04	26.94	26.94	10.8%	\$	0.40	\$	29.61	2.0%	30.21
AiCare CCO	Southwest	CHLD 00-01	159	0.93	1,000	1.132	1,000	5.20	\$	7.94	\$	0.13	\$	0.13	\$	\$	\$	\$	\$	0.02	13.14	13.14	10.8%	\$	0.22	\$	14.94	2.0%	15.24
AiCare CCO	Southwest	CHLD 01-05	2,315	0.97	1,000	0.873	1,000	2.94	\$	35.55	\$	0.13	\$	0.13	\$	\$	\$	\$	\$	0.02	38.51	38.51	10.8%	\$	0.64	\$	43.78	2.0%	44.88
AiCare CCO	Southwest	CHLD 06-18	9,482	0.97	1,000	0.946	1,000	3.58	\$	31.81	\$	0.13	\$	0.13	\$	\$	\$	\$	\$	0.04	38.03	38.03	10.8%	\$	0.60	\$	43.25	2.0%	44.13
AiCare CCO	Southwest	DUAL-MEDS	1,095	0.98	1,000	0.939	1,000	52.50	\$	22.74	\$	0.13	\$	0.13	\$	\$	\$	\$	\$	0.02	75.39	75.39	10.8%	\$	1.25	\$	85.72	2.0%	87.47
AiCare CCO	Southwest	ABAD & OAA	2,187	0.98	1,000	0.932	1,000	41.62	\$	26.88	\$	0.13	\$	0.13	\$	\$	\$	\$	\$	0.02	68.65	68.65	10.8%	\$	1.14	\$	78.05	2.0%	79.95
AiCare CCO	Southwest	FOSTER	1,611	0.94	1,000	0.987	1,000	8.50	\$	37.71	\$	0.13	\$	0.13	\$	\$	\$	\$	\$	0.10	59.12	59.12	10.8%	\$	0.82	\$	66.62	2.0%	68.42
AiCare CCO	Southwest	ACA 19-34	3,645	0.94	1,000	0.945	1,000	6.56	\$	0.21	\$	14.98	\$	0.13	\$	\$	\$	\$	\$	0.03	21.91	21.91	10.8%	\$	0.36	\$	24.91	2.0%	25.42
AiCare CCO	Southwest	ACA 35-44	3,863	0.97	1,000	0.928	1,000	11.67	\$	0.36	\$	17.03	\$	0.13	\$	\$	\$	\$	\$	0.02	29.08	29.08	10.8%	\$	0.48	\$	33.06	2.0%	33.74
AiCare CCO	Southwest	ACA 45-54	2,372	0.94	1,000	0.910	1,000	13.39	\$	0.40	\$	19.07	\$	0.13	\$	\$	\$	\$	\$	0.04	32.85	32.85	10.8%	\$	0.54	\$	37.25	2.0%	38.12
AiCare CCO	Southwest	ACA 55-64	1,773	0.94	1,000	0.927	1,000	11.68	\$	0.33	\$	19.82	\$	0.13	\$	\$	\$	\$	\$	0.03	31.63	31.63	10.8%	\$	0.55	\$	36.19	2.0%	36.93
AiCare CCO	Southwest	BM 19-34	7	0.93	1,000	0.935	1,000	5.90	\$	0.40	\$	14.98	\$	0.13	\$	\$	\$	\$	\$	0.84	21.72	21.72	10.8%	\$	0.38	\$	24.69	2.0%	25.20
AiCare CCO	Southwest	BM 35-44	5	0.93	1,000	0.909	1,000	13.35	\$	0.40	\$	19.07	\$	0.13	\$	\$	\$	\$	\$	0.63	29.19	29.19	10.8%	\$	0.46	\$	33.19	2.0%	33.87
AiCare CCO	Southwest	BM 45-54	4	0.93	1,000	0.899	1,000	10.77	\$	0.40	\$	19.82	\$	0.13	\$	\$	\$	\$	\$	0.63	32.42	32.42	10.8%	\$	0.46	\$	36.82	2.0%	37.62
AiCare CCO	Southwest	BM 55-64	0	0.93	1,000	0.924	1,000	10.77	\$	0.40	\$	19.82	\$	0.13	\$	\$	\$	\$	\$	0.03	30.59	30.59	10.8%	\$	0.51	\$	34.78	2.0%	35.49
AiCare CCO	Southwest	YSHCN	93	0.93	1,000	0.938	1,000	4.83	\$	0.40	\$	14.98	\$	0.13	\$	\$	\$	\$	\$	0.03	19.97	19.97	10.8%	\$	0.33	\$	22.71	2.0%	23.17
AiCare CCO	Southwest	BCCP	-	0.97	1,000	0.932	1,000	8.45	\$	0.40	\$	25.13	\$	0.13	\$	\$	\$	\$	\$	0.03	33.57	33.57	10.8%	\$	0.45	\$	78.62	2.0%	79.42
AiCare CCO	Southwest	Maternity	-	0.97	1,000	1.000	1,000	10.00	\$	0.40	\$	0.00	\$	0.13	\$	\$	\$	\$	\$	0.00	0.00	0.00	10.8%	\$	0.00	\$	0.00	2.0%	0.00
AiCare CCO	Southwest	Total	14,421	0.94	1,000	0.935	1,000	11.02	\$	0.12	\$	23.97	\$	0.13	\$	\$	\$	\$	\$	0.02	33.74	33.74	10.8%	\$	0.59	\$	43.93	2.0%	44.14
Cascade Health Alliance, LLC	Southwest	PCR	1,359	0.97	1,000	0.941	1,000	10.32	\$	20.12	\$	0.09	\$	0.09	\$	\$	\$	\$	\$	1.22	31.72	31.72	11.6%	\$	0.51	\$	36.17	2.0%	36.93
Cascade Health Alliance, LLC	Southwest	PWO	386	0.98	1,000	0.955	1,000	8.77	\$	17.14	\$	0.06	\$	0.06	\$	\$	\$	\$	\$	1.40	27.36	27.36	11.6%	\$	0.27	\$	31.20	2.0%	31.84
Cascade Health Alliance, LLC	Southwest	CHLD 00-01	78	0.93	1,000	1.132	1,000	5.20	\$	7.94	\$	0.06	\$	0.06	\$	\$	\$	\$	\$	0.46	13.59	13.59	11.6%	\$	0.19	\$	15.50	2.0%	15.82
Cascade Health Alliance, LLC	Southwest	CHLD 01-05	1,244	0.97	1,000	0.873	1,000	2.94	\$	35.55	\$	0.06	\$	0.06	\$	\$	\$	\$	\$	3.42	41.81	41.81	11.6%	\$	0.41	\$	47.79	2.0%	48.76
Cascade Health Alliance, LLC	Southwest	CHLD 06-18	4,599	0.98	1,000	0.946	1,000	3.58	\$	31.81	\$	0.06	\$	0.06	\$	\$	\$	\$	\$	3.07	41.48	41.48	11.6%	\$	0.40	\$	47.30	2.0%	48.27
Cascade Health Alliance, LLC	Southwest	DUAL-MEDS	374	0.98	1,000	0.939	1,000	52.50	\$	22.74	\$	0.06	\$	0.06	\$	\$	\$	\$	\$	0.74	76.03	76.03	11.6%	\$	0.74	\$	86.70	2.0%	88.46
Cascade Health Alliance, LLC	Southwest	ABAD & OAA	1,081	0.98	1,000	0.932	1,000	41.62	\$	26.88	\$	0.06	\$	0.06	\$	\$	\$	\$	\$	0.61	69.16	69.16	11.6%	\$	0.67	\$	78.66	2.0%	80.42
Cascade Health Alliance, LLC	Southwest	FOSTER	442	0.94	1,000	0.987	1,000	8.50	\$	37.71	\$	0.06	\$	0.06	\$	\$	\$	\$	\$	6.82	56.06	56.06	11.6%	\$	0.54	\$	63.93	2.0%	65.23
Cascade Health Alliance, LLC	Southwest	ACA 19-34	2,520	0.94	1,000	0.910	1,000	13.39	\$	0.40	\$	19.07	\$	0.06	\$	\$	\$	\$	\$	0.64	32.45	32.45	11.6%	\$	0.22	\$	35.59	2.0%	36.12
Cascade Health Alliance, LLC	Southwest	ACA 35-44	1,245	0.94	1,000	0.927	1,000	11.68	\$	0.36	\$	17.03	\$	0.06	\$	\$	\$	\$	\$	0.61	29.08	29.08	11.6%						

CY27 CCO Rate Certification
Appendix C: CCOF Certified Rates

CCO	Region	COA	CY27 Caseload	Medical PHM	Statewide PHM	Regional Risk	CCO Risk	Regional Factor	Hospital Factor / Tri-County BH Factor	PMPM Subsidy	ACA Acuity	Dental PMPM	Child Residential	Handicapping	Gender Affirming Care	Youth with Special Health Care Needs	INCP PH	INCP BH	INCP Dental	PMPM Subsidy	Credibility	NML %	HRSN Home Changes for Health-Related Supports	PBR PMPM	HRSN Home Changes for Health-Related Supports Admin	PMPM Subsidy	MCO Tar. %	Certified Rate	
Health Share of Oregon	Tricounty	PCR	16,389	0.97	1,000	1,000	0.948	1,000	1,000	10.41	\$	19.70	\$	0.08	\$	\$	\$	\$	\$	0.03	30.29	30.29	9.6%	\$	0.28	\$	33.75	2.0%	34.44
Health Share of Oregon	Tricounty	PWO	5,524	0.97	1,000	1,000	0.956	1,000	1,000	8.78	\$	17.77	\$	0.08	\$	\$	\$	\$	\$	0.03	26.67	26.67	9.6%	\$	0.23	\$	29.71	2.0%	30.32
Health Share of Oregon	Tricounty	CHLD 00-01	1,261	0.97	1,000	1,000	0.925	1,000	1,000	4.26	\$	3.78	\$	0.05	\$	\$	\$	\$	\$	0.02	6.05	6.05	9.6%	\$	0.07	\$	6.95	0.1%	9.13
Health Share of Oregon	Tricounty	CHLD 01-05	18,309	0.97	1,000	1,000	1.023	1,000	1,000	3.45	\$	28.98	\$	\$	\$	\$	\$	\$	\$	0.02	32.45	32.45	9.6%	\$	0.28	\$	36.15	2.0%	36.89
Health Share of Oregon	Tricounty	CHLD 06-18	73,300	0.97	1,000	1,000	0.964	1,000	1,000	3.65	\$	27.83	\$	2.52	\$	\$	\$	\$	\$	0.05	33.85	33.85	9.6%	\$	0.29	\$	37.72	2.0%	38.49
Health Share of Oregon	Tricounty	DUAL-MEDS	6,775	0.97	1,000	1,000	0.965	1,000	1,000	12.95	\$	14.23	\$	0.08	\$	\$	\$	\$	\$	0.05	76.82	76.82	9.6%	\$	0.06	\$	87.94	2.0%	89.24
Health Share of Oregon	Tricounty	ABAD & OAA	15,482	0.97	1,000	1,000	0.990	1,000	1,000	44.21	\$	24.32	\$	0.08	\$	\$	\$	\$	\$	0.09	68.71	68.71	9.6%	\$	0.59	\$	76.56	2.0%	78.12
Health Share of Oregon	Tricounty	FOSTER	4,700	0.97	1,000	1,000	1.064	1,000	1,000	9.17	\$	32.50	\$	2.52	\$	\$	\$	\$	\$	0.15	44.34	44.34	9.6%	\$	0.38	\$	49.40	2.0%	50.41
Health Share of Oregon	Tricounty	ACA 19-34	48,331	0.97	1,000	1,000	0.964	1,000	1,000	6.71	\$	0.21	\$	0.08	\$	\$	\$	\$	\$	0.05	21.27	21.27	9.6%	\$	0.18	\$	23.70	2.0%	24.39
Health Share of Oregon	Tricounty	ACA 35-44	23,955	0.97	1,000	1,000	0.989	1,000	1,000	12.43	\$	0.38	\$	0.08	\$	\$	\$	\$	\$	0.09	29.06	29.06	9.6%	\$	0.25	\$	32.38	2.0%	33.04
Health Share of Oregon	Tricounty	ACA 45-54	13,564	0.97	1,000	1,000	0.966	1,000	1,000	14.21	\$	0.42	\$	0.08	\$	\$	\$	\$	\$	0.15	33.52	33.52	9.6%	\$	0.29	\$	37.35	2.0%	38.11
Health Share of Oregon	Tricounty	ACA 55-64	8,866	0.97	1,000	1,000	0.925	1,000	1,000	11.66	\$	0.33	\$	0.08	\$	\$	\$	\$	\$	0.10	33.41	33.41	9.6%	\$	0.29	\$	37.22	2.0%	37.98
Health Share of Oregon	Tricounty	BBM 19-34	40	0.97	1,000	1,000	0.956	1,000	1,000	6.03	\$	0.08	\$	0.08	\$	\$	\$	\$	\$	0.11	21.86	21.86	9.6%	\$	0.19	\$	24.08	2.0%	24.88
Health Share of Oregon	Tricounty	BBM 35-44	35	0.97	1,000	1,000	0.980	1,000	1,000	12.28	\$	0.08	\$	0.08	\$	\$	\$	\$	\$	0.22	31.26	31.26	9.6%	\$	0.27	\$	34.83	2.0%	35.54
Health Share of Oregon	Tricounty	BBM 45-54	17	0.97	1,000	1,000	0.984	1,000	1,000	14.17	\$	0.08	\$	0.08	\$	\$	\$	\$	\$	0.45	37.77	37.77	9.6%	\$	0.33	\$	42.08	2.0%	42.94
Health Share of Oregon	Tricounty	BBM 55-64	1	0.97	1,000	1,000	0.922	1,000	1,000	10.76	\$	0.08	\$	0.08	\$	\$	\$	\$	\$	0.30	35.36	35.36	9.6%	\$	0.31	\$	39.42	2.0%	40.22
Health Share of Oregon	Tricounty	YSHCH	764	0.97	1,000	1,000	0.958	1,000	1,000	4.84	\$	14.22	\$	0.08	\$	\$	\$	\$	\$	0.05	19.29	19.29	9.6%	\$	0.17	\$	21.49	2.0%	22.53
Health Share of Oregon	Tricounty	BCCP	-	0.97	1,000	1,000	0.990	1,000	1,000	8.88	\$	0.08	\$	0.08	\$	\$	\$	\$	\$	0.09	37.27	37.27	9.6%	\$	0.17	\$	75.97	2.0%	77.52
Health Share of Oregon	Tricounty	Maternity	-	0.97	1,000	1,000	1.000	1,000	1,000	1.000	\$	0.08	\$	0.08	\$	\$	\$	\$	\$	0.09	37.27	37.27	9.6%	\$	0.17	\$	75.97	2.0%	77.52
Health Share of Oregon	Tricounty	Total	237,144	0.97	1,000	1,000	0.971	1,000	1,000	10.78	\$	0.12	\$	0.08	\$	\$	\$	\$	\$	0.07	33.77	33.77	9.6%	\$	0.28	\$	37.83	2.0%	38.48
InterCommunity Health Network, Inc.	Northwest	PCR	3,112	0.97	1,000	1,000	1.063	1,000	1,000	11.67	\$	20.12	\$	0.08	\$	\$	\$	\$	\$	0.41	32.28	32.28	10.8%	\$	0.24	\$	36.41	2.0%	37.15
InterCommunity Health Network, Inc.	Northwest	PWO	1,111	0.97	1,000	1,000	1.063	1,000	1,000	9.76	\$	17.14	\$	0.08	\$	\$	\$	\$	\$	0.02	27.00	27.00	10.8%	\$	0.20	\$	30.45	2.0%	31.08
InterCommunity Health Network, Inc.	Northwest	CHLD 00-01	230	0.97	1,000	1,000	0.910	1,000	1,000	5.20	\$	7.94	\$	0.05	\$	\$	\$	\$	\$	0.12	12.11	12.11	10.8%	\$	0.09	\$	13.66	2.0%	13.94
InterCommunity Health Network, Inc.	Northwest	CHLD 01-05	3,415	0.97	1,000	1,000	1.052	1,000	1,000	3.54	\$	35.55	\$	\$	\$	\$	\$	\$	\$	0.78	39.88	39.88	10.8%	\$	0.30	\$	44.98	2.0%	45.90
InterCommunity Health Network, Inc.	Northwest	CHLD 06-18	13,540	0.97	1,000	1,000	1.045	1,000	1,000	3.96	\$	31.81	\$	3.63	\$	\$	\$	\$	\$	0.29	39.89	39.89	10.8%	\$	0.47	\$	44.76	2.0%	45.68
InterCommunity Health Network, Inc.	Northwest	DUAL-MEDS	5,920	0.97	1,000	1,000	1.060	1,000	1,000	59.28	\$	22.74	\$	0.08	\$	\$	\$	\$	\$	0.02	82.12	82.12	10.8%	\$	0.62	\$	92.63	2.0%	94.52
InterCommunity Health Network, Inc.	Northwest	ABAD & OAA	3,184	0.97	1,000	1,000	1.037	1,000	1,000	46.30	\$	26.88	\$	0.08	\$	\$	\$	\$	\$	0.18	73.44	73.44	10.8%	\$	0.56	\$	82.83	2.0%	84.52
InterCommunity Health Network, Inc.	Northwest	FOSTER	8,611	0.97	1,000	1,000	0.962	1,000	1,000	8.71	\$	37.22	\$	2.52	\$	\$	\$	\$	\$	0.09	35.32	35.32	10.8%	\$	0.28	\$	39.61	2.0%	40.38
InterCommunity Health Network, Inc.	Northwest	ACA 19-34	9,459	0.97	1,000	1,000	1.037	1,000	1,000	7.20	\$	0.23	\$	0.08	\$	\$	\$	\$	\$	0.04	22.53	22.53	10.8%	\$	0.17	\$	25.42	2.0%	25.94
InterCommunity Health Network, Inc.	Northwest	ACA 35-44	3,657	0.97	1,000	1,000	1.059	1,000	1,000	13.32	\$	0.41	\$	0.08	\$	\$	\$	\$	\$	0.06	30.82	30.82	10.8%	\$	0.23	\$	34.76	2.0%	35.47
InterCommunity Health Network, Inc.	Northwest	ACA 45-54	1,564	0.97	1,000	1,000	0.956	1,000	1,000	15.56	\$	0.47	\$	0.08	\$	\$	\$	\$	\$	0.03	35.53	35.53	10.8%	\$	0.23	\$	40.08	2.0%	40.89
InterCommunity Health Network, Inc.	Northwest	ACA 55-64	1,795	0.97	1,000	1,000	0.920	1,000	1,000	14.24	\$	0.40	\$	0.08	\$	\$	\$	\$	\$	0.20	34.66	34.66	10.8%	\$	0.29	\$	39.10	2.0%	39.90
InterCommunity Health Network, Inc.	Northwest	BBM 19-34	11	0.97	1,000	1,000	1.028	1,000	1,000	6.47	\$	0.08	\$	0.08	\$	\$	\$	\$	\$	0.13	22.78	22.78	10.8%	\$	0.17	\$	25.70	2.0%	26.22
InterCommunity Health Network, Inc.	Northwest	BBM 35-44	8	0.97	1,000	1,000	1.046	1,000	1,000	13.16	\$	0.08	\$	0.08	\$	\$	\$	\$	\$	0.24	32.22	32.22	10.8%	\$	0.24	\$	37.68	2.0%	38.49
InterCommunity Health Network, Inc.	Northwest	BBM 45-54	8	0.97	1,000	1,000	1.089	1,000	1,000	15.52	\$	0.08	\$	0.08	\$	\$	\$	\$	\$	0.06	36.05	36.05	10.8%	\$	0.27	\$	40.66	2.0%	41.49
InterCommunity Health Network, Inc.	Northwest	BBM 55-64	0	0.97	1,000	1,000	1.128	1,000	1,000	13.14	\$	0.08	\$	0.08	\$	\$	\$	\$	\$	0.68	39.63	39.63	10.8%	\$	0.30	\$	44.70	2.0%	45.61
InterCommunity Health Network, Inc.	Northwest	YSHCH	170	0.97	1,000	1,000	1.029	1,000	1,000	5.30	\$	14.98	\$	0.08	\$	\$	\$	\$	\$	0.04	20.41	20.41	10.8%	\$	0.15	\$	23.02	2.0%	23.49
InterCommunity Health Network, Inc.	Northwest	BCCP	-	0.97	1,000	1,000	1.037	1,000	1,000	8.41	\$	25.13	\$	0.08	\$	\$	\$	\$	\$	0.09	34.58	34.58	10.8%	\$	0.17	\$	68.86	2.0%	70.38
InterCommunity Health Network, Inc.	Northwest	Maternity	-	0.97	1,000	1,000	1.000	1,000	1,000	1.000	\$	0.08	\$	0.08	\$	\$	\$	\$	\$	0.04	20.41	20.41	10.8%	\$	0.15	\$	23.02	2.0%	23.49
InterCommunity Health Network, Inc.	Northwest	Total	45,451	0.97	1,000	1,000	1.054	1,000	1,000	10.84	\$	0.13	\$	0.08	\$	\$	\$	\$	\$	0.04	37.43	37.43	10.8%	\$	0.28	\$	41.63	2.0%	42.33
Jackson County CCO, LLC	Southwest	PCR	2,661	0.97	1,000	1,000	0.952	1,000	1,000	10.91	\$	20.12	\$	0.09	\$	\$	\$	\$	\$	0.41	32.92	32.92	10.8%	\$	0.24	\$	36.47	2.0%	37.15
Jackson County CCO, LLC	Southwest	PWO	833	0.97	1,000	1,000	0.965	1,000	1,000	8.77	\$	17.14	\$	0.09	\$	\$	\$	\$	\$	0.02	26.00	26.00	10.8%	\$	0.28	\$	29.41	2.0%	30.01
Jackson County CCO, LLC	Southwest	CHLD 00-01	203	0.97	1,000	1,000	0.910	1,000	1,000	5.20	\$	7.94	\$	0.05	\$	\$	\$	\$	\$	0.12	13.14	13.14	10.8%	\$	0.14	\$	14.86	2.0%	15.16
Jackson County CCO, LLC	Southwest	CHLD 01-05	3,179	0.97	1,000	1,000	1.073	1,000	1,000	3.37	\$	35.55	\$	\$	\$	\$	\$	\$	\$	0.06	38.55	38.55	10.8%	\$	0.43	\$	43.60	2.0%	44.49
Jackson County CCO, LLC	Southwest	CHLD 06-18	12,178	0.97	1,000	1,000	1.046	1,000	1,000	3.58	\$	31.81	\$	2.94	\$	\$	\$	\$	\$	0.02	38.35	38.35	10.8%	\$	0.41	\$	43.37	2.0%	44.26
Jackson County CCO, LLC	Southwest	DUAL-MEDS	711	0.97	1,000	1,000	0.939	1,000	1,000	52.50	\$	22.74	\$	0.09	\$	\$	\$	\$	\$	0.05	75.33	75.33	10.8%	\$	0.80	\$	85.20	2.0%	86.94
Jackson County CCO, LLC	Southwest	ABAD & OAA	4,466	0.97	1,000	1,000	1.032	1,000	1,000	41.62	\$	26.88	\$	0.09	\$	\$	\$	\$	\$	0.18	68.59	68.59	10.8%	\$	0.57	\$	77.58	2.0%	79.28
Jackson County CCO, LLC	Southwest	FOSTER	993	0.97	1,000	1,000	0.987	1,000	1,000	8.50	\$	37.71	\$	2.54	\$	\$	\$	\$	\$	0.09	49.15	49.15	10.8%	\$	0.52	\$	55.60	2.0%	56.73
Jackson County CCO, LLC	Southwest	ACA 19-34	6,081	0.97	1,000	1,000	0.945	1,000	1,000	6.56	\$																		

CY27 CCO Rate Certification
Appendix C: CCOF Certified Rates

CCO	Region	COA	CY27 Caseload	Statewide Medical Payment	Regional Risk	CCO Risk	Regional Factor	Hospital Factor / Tri-County BH Factor	PMPM Subject	ACA Acuity	Dental PMPM	Child Residential	Handicapping PMPM	Gender Affirming Care	Youth with Special Health Care Needs	INCP PH	INCP BH	INCP Dental	PMPM Subject	Credibility Review	NML %	HRSN Home Changes for Health-Related Supports	PBR Admin	HRSN Home Changes for Health-Related Supports	PMPM Subject	MCO Tax %	Certified Rate	
PacificSource Community Solutions (Marion Polk)	Northwest	PCR	5,640	10.97	1,000	1,000	1.063	1,000	11,167	\$	\$ 20.12	\$	\$ 0.17	\$	\$	\$	\$	\$	\$ 0.08	\$ 32.03	\$ 32.03	10.2%	\$	\$ 0.15	\$	\$ 35.80	2.0%	\$ 35.53
PacificSource Community Solutions (Marion Polk)	Northwest	PWO	2,664	9.18	1,000	1,000	1.053	1,000	9,776	\$	\$ 17.14	\$	\$ 0.17	\$	\$	\$	\$	\$	\$	\$ 27.07	\$ 27.07	10.2%	\$	\$ 0.13	\$	\$ 30.87	2.0%	\$ 30.87
PacificSource Community Solutions (Marion Polk)	Northwest	CHLD 00-01	1,520	4.59	1,000	1,000	0.910	1,000	4,118	\$	\$ 7.94	\$	\$	\$	\$	\$	\$	\$	\$	\$ 12.11	\$ 12.11	10.2%	\$	\$ 0.05	\$	\$ 13.51	2.0%	\$ 13.51
PacificSource Community Solutions (Marion Polk)	Northwest	CHLD 01-05	7,168	3.18	1,000	1,000	1.063	1,000	3,554	\$	\$ 35.55	\$	\$	\$	\$	\$	\$	\$	\$ 0.01	\$ 39.10	\$ 39.10	10.2%	\$	\$ 0.18	\$	\$ 43.70	2.0%	\$ 44.59
PacificSource Community Solutions (Marion Polk)	Northwest	CHLD 06-18	29,781	3.78	1,000	1,000	1.045	1,000	3,395	\$	\$ 31.81	\$	\$ 2.96	\$	\$	\$	\$	\$	\$ 0.06	\$ 38.79	\$ 38.79	10.2%	\$	\$ 0.18	\$	\$ 43.35	2.0%	\$ 44.23
PacificSource Community Solutions (Marion Polk)	Northwest	DUAL-MEDS	1,928	55.90	1,000	1,000	1.063	1,000	59,285	\$	\$ 22.55	\$	\$ 0.17	\$	\$	\$	\$	\$	\$ 0.01	\$ 82.20	\$ 82.20	10.2%	\$	\$ 0.38	\$	\$ 93.77	2.0%	\$ 93.77
PacificSource Community Solutions (Marion Polk)	Northwest	ABAD & OAA	5,020	46.30	1,000	1,000	1.037	1,000	46,300	\$	\$ 26.88	\$	\$ 0.17	\$	\$	\$	\$	\$	\$ 0.12	\$ 73.46	\$ 73.46	10.2%	\$	\$ 0.38	\$	\$ 82.09	2.0%	\$ 83.77
PacificSource Community Solutions (Marion Polk)	Northwest	FOSTER	1,328	8.61	1,000	1,000	0.952	1,000	8,200	\$	\$ 37.71	\$	\$ 2.96	\$	\$	\$	\$	\$	\$	\$ 48.88	\$ 48.88	10.2%	\$	\$ 0.23	\$	\$ 54.63	2.0%	\$ 55.74
PacificSource Community Solutions (Marion Polk)	Northwest	ACA 19-34	14,366	10.37	1,000	1,000	1.037	1,000	7,200	\$	\$ 20.23	\$	\$ 14.98	\$	\$	\$	\$	\$	\$ 0.09	\$ 30.88	\$ 30.88	10.2%	\$	\$ 0.10	\$	\$ 25.34	2.0%	\$ 25.85
PacificSource Community Solutions (Marion Polk)	Northwest	ACA 35-44	5,723	12.57	1,000	1,000	1.059	1,000	13,332	\$	\$ 17.03	\$	\$	\$	\$	\$	\$	\$	\$ 0.12	\$ 22.67	\$ 22.67	10.2%	\$	\$ 0.15	\$	\$ 34.51	2.0%	\$ 35.21
PacificSource Community Solutions (Marion Polk)	Northwest	ACA 45-54	3,537	14.71	1,000	1,000	1.085	1,000	15,596	\$	\$ 0.47	\$ 19.07	\$	\$	\$	\$	\$	\$	\$ 0.06	\$ 35.56	\$ 35.56	10.2%	\$	\$ 0.16	\$	\$ 39.75	2.0%	\$ 40.56
PacificSource Community Solutions (Marion Polk)	Northwest	ACA 55-64	2,502	12.60	1,000	1,000	1.130	1,000	14,224	\$	\$ 0.40	\$ 19.82	\$	\$	\$	\$	\$	\$	\$ 0.05	\$ 45.51	\$ 45.51	10.2%	\$	\$ 0.16	\$	\$ 38.57	2.0%	\$ 39.36
PacificSource Community Solutions (Marion Polk)	Northwest	BM 19-34	19	6.31	1,000	1,000	1.026	1,000	6,47	\$	\$ 14.98	\$	\$	\$	\$	\$	\$	\$	\$ 0.05	\$ 24.63	\$ 24.63	10.2%	\$	\$ 0.11	\$	\$ 27.73	2.0%	\$ 27.88
PacificSource Community Solutions (Marion Polk)	Northwest	BM 35-44	14	12.53	1,000	1,000	1.050	1,000	13,116	\$	\$ 17.03	\$	\$	\$	\$	\$	\$	\$	\$ 0.05	\$ 34.24	\$ 34.24	10.2%	\$	\$ 0.16	\$	\$ 38.27	2.0%	\$ 39.05
PacificSource Community Solutions (Marion Polk)	Northwest	BM 45-54	8	14.70	1,000	1,000	1.083	1,000	15,592	\$	\$ 19.07	\$	\$	\$	\$	\$	\$	\$	\$ 0.21	\$ 37.10	\$ 37.10	10.2%	\$	\$ 0.17	\$	\$ 41.46	2.0%	\$ 42.31
PacificSource Community Solutions (Marion Polk)	Northwest	BM 55-64	1	11.66	1,000	1,000	1.126	1,000	13,114	\$	\$ 19.82	\$	\$	\$	\$	\$	\$	\$	\$ 1.76	\$ 34.71	\$ 34.71	10.2%	\$	\$ 0.16	\$	\$ 38.79	2.0%	\$ 39.59
PacificSource Community Solutions (Marion Polk)	Northwest	YSNCH	288	5.15	1,000	1,000	1.029	1,000	5,300	\$	\$ 14.98	\$	\$ 0.17	\$	\$	\$	\$	\$	\$ 0.09	\$ 20.54	\$ 20.54	10.2%	\$	\$ 0.10	\$	\$ 22.86	2.0%	\$ 23.43
PacificSource Community Solutions (Marion Polk)	Northwest	BCCP	-	9.07	1,000	1,000	1.037	1,000	9,41	\$	\$ 25.13	\$	\$	\$	\$	\$	\$	\$	\$	\$ 34.54	\$ 73.46	10.2%	\$	\$	\$	\$ 81.75	2.0%	\$ 83.42
PacificSource Community Solutions (Marion Polk)	Northwest	Maternity	-	-	1,000	1,000	1,000	1,000	-	\$	\$	\$	\$	\$	\$	\$	\$	\$	\$	\$	\$	10.2%	\$	\$	\$	\$	2.0%	\$
PacificSource Community Solutions (Marion Polk)	Northwest	Total	86,507	10.22	1,000	1,000	1.051	1,000	10,176	\$	\$ 0.10	\$ 25.12	\$	\$ 1.21	\$	\$	\$	\$	\$ 0.07	\$ 37.41	\$ 37.41	10.2%	\$	\$ 0.17	\$	\$ 41.85	2.0%	\$ 42.78
Trillium Community Health Plan, Inc. (Tri-County)	Tricounty	PCR	1,807	10.97	1,000	1,000	0.948	1,000	10,41	\$	\$ 19.70	\$	\$ 0.08	\$	\$	\$	\$	\$	\$	\$ 30.18	\$ 30.18	10.2%	\$	\$ 0.16	\$	\$ 33.75	2.0%	\$ 34.44
Trillium Community Health Plan, Inc. (Tri-County)	Tricounty	PWO	643	9.18	1,000	1,000	0.956	1,000	8,776	\$	\$ 17.77	\$	\$ 0.08	\$	\$	\$	\$	\$	\$	\$ 26.69	\$ 26.69	10.2%	\$	\$ 0.14	\$	\$ 29.85	2.0%	\$ 30.46
Trillium Community Health Plan, Inc. (Tri-County)	Tricounty	CHLD 00-01	112	4.59	1,000	1,000	0.925	1,000	4,25	\$	\$ 7.94	\$	\$	\$	\$	\$	\$	\$	\$ 0.06	\$ 8.09	\$ 8.09	10.2%	\$	\$ 0.04	\$	\$ 9.04	2.0%	\$ 9.23
Trillium Community Health Plan, Inc. (Tri-County)	Tricounty	CHLD 01-05	1,778	3.37	1,000	1,000	1.023	1,000	3,445	\$	\$ 35.55	\$	\$	\$	\$	\$	\$	\$	\$ 0.02	\$ 32.45	\$ 32.45	10.2%	\$	\$ 0.17	\$	\$ 36.28	2.0%	\$ 37.02
Trillium Community Health Plan, Inc. (Tri-County)	Tricounty	CHLD 06-18	5,950	3.78	1,000	1,000	1.064	1,000	3,865	\$	\$ 27.63	\$	\$ 2.04	\$	\$	\$	\$	\$	\$ 0.06	\$ 33.89	\$ 33.89	10.2%	\$	\$ 0.17	\$	\$ 37.32	2.0%	\$ 38.08
Trillium Community Health Plan, Inc. (Tri-County)	Tricounty	DUAL-MEDS	792	55.90	1,000	1,000	0.940	1,000	52,555	\$	\$ 24.13	\$	\$ 0.08	\$	\$	\$	\$	\$	\$	\$ 76.76	\$ 76.76	10.2%	\$	\$ 0.40	\$	\$ 85.83	2.0%	\$ 87.58
Trillium Community Health Plan, Inc. (Tri-County)	Tricounty	ABAD & OAA	1,233	44.66	1,000	1,000	0.990	1,000	44,21	\$	\$ 24.32	\$	\$ 0.08	\$	\$	\$	\$	\$	\$ 0.11	\$ 68.72	\$ 68.72	10.2%	\$	\$ 0.38	\$	\$ 76.85	2.0%	\$ 78.41
Trillium Community Health Plan, Inc. (Tri-County)	Tricounty	FOSTER	811	9.17	1,000	1,000	0.964	1,000	9,17	\$	\$ 32.82	\$	\$ 2.04	\$	\$	\$	\$	\$	\$ 0.02	\$ 43.93	\$ 43.93	10.2%	\$	\$ 0.15	\$	\$ 49.29	2.0%	\$ 50.73
Trillium Community Health Plan, Inc. (Tri-County)	Tricounty	ACA 19-34	9,110	6.94	1,000	1,000	0.966	1,000	6,71	\$	\$ 0.21	\$ 14.22	\$	\$ 0.08	\$	\$	\$	\$	\$ 0.10	\$ 21.32	\$ 21.32	10.2%	\$	\$ 0.11	\$	\$ 23.84	2.0%	\$ 24.33
Trillium Community Health Plan, Inc. (Tri-County)	Tricounty	ACA 35-44	4,106	12.57	1,000	1,000	0.989	1,000	12,43	\$	\$ 0.38	\$ 16.16	\$	\$	\$	\$	\$	\$	\$ 0.08	\$ 29.05	\$ 29.05	10.2%	\$	\$ 0.15	\$	\$ 32.49	2.0%	\$ 33.15
Trillium Community Health Plan, Inc. (Tri-County)	Tricounty	ACA 45-54	2,213	14.71	1,000	1,000	1.066	1,000	14,21	\$	\$ 0.42	\$ 19.74	\$	\$	\$	\$	\$	\$	\$ 0.12	\$ 33.49	\$ 33.49	10.2%	\$	\$ 0.16	\$	\$ 37.45	2.0%	\$ 38.22
Trillium Community Health Plan, Inc. (Tri-County)	Tricounty	ACA 55-64	1,459	12.60	1,000	1,000	1.025	1,000	11,66	\$	\$ 0.33	\$ 21.32	\$	\$	\$	\$	\$	\$	\$ 0.08	\$ 23.58	\$ 23.58	10.2%	\$	\$ 0.13	\$	\$ 27.30	2.0%	\$ 28.09
Trillium Community Health Plan, Inc. (Tri-County)	Tricounty	BM 19-34	3	6.31	1,000	1,000	0.956	1,000	6,03	\$	\$	\$ 14.22	\$	\$	\$	\$	\$	\$	\$ 0.33	\$ 23.58	\$ 23.58	10.2%	\$	\$ 0.12	\$	\$ 26.37	2.0%	\$ 26.90
Trillium Community Health Plan, Inc. (Tri-County)	Tricounty	BM 35-44	2	12.60	1,000	1,000	1.046	1,000	9,80	\$	\$ 16.16	\$	\$	\$	\$	\$	\$	\$	\$ 0.267	\$ 31.11	\$ 31.11	10.2%	\$	\$ 0.16	\$	\$ 34.29	2.0%	\$ 35.07
Trillium Community Health Plan, Inc. (Tri-County)	Tricounty	BM 45-54	1	14.70	1,000	1,000	1.070	1,000	14,17	\$	\$	\$ 16.16	\$	\$	\$	\$	\$	\$	\$ 3.94	\$ 36.65	\$ 36.65	10.2%	\$	\$ 0.16	\$	\$ 40.74	2.0%	\$ 41.52
Trillium Community Health Plan, Inc. (Tri-County)	Tricounty	BM 55-64	0	11.66	1,000	1,000	1.022	1,000	10,76	\$	\$ 21.32	\$	\$	\$	\$	\$	\$	\$	\$ 0.24	\$ 34.61	\$ 34.61	10.2%	\$	\$ 0.18	\$	\$ 38.70	2.0%	\$ 39.49
Trillium Community Health Plan, Inc. (Tri-County)	Tricounty	YSNCH	56	5.15	1,000	1,000	0.958	1,000	4,94	\$	\$ 14.22	\$	\$ 0.08	\$	\$	\$	\$	\$	\$ 0.10	\$ 19.34	\$ 19.34	10.2%	\$	\$ 0.10	\$	\$ 21.62	2.0%	\$ 22.06
Trillium Community Health Plan, Inc. (Tri-County)	Tricounty	BCCP	-	9.07	1,000	1,000	0.990	1,000	9,08	\$	\$ 25.13	\$	\$	\$	\$	\$	\$	\$	\$	\$ 37.23	\$ 68.72	10.2%	\$	\$	\$	\$ 76.49	2.0%	\$ 78.04
Trillium Community Health Plan, Inc. (Tri-County)	Tricounty	Maternity	-	-	1,000	1,000	1,000	1,000	-	\$	\$	\$	\$	\$	\$	\$	\$	\$	\$	\$	\$	10.2%	\$	\$	\$	\$	2.0%	\$
Trillium Community Health Plan, Inc. (Tri-County)	Tricounty	Total	24,243	10.92	1,000	1,000	0.993	1,000	10,57	\$	\$ 0.17	\$ 19.95	\$	\$ 0.12	\$	\$	\$	\$	\$ 0.04	\$ 11.23	\$ 11.23	10.2%	\$	\$ 0.11	\$	\$ 14.32	2.0%	\$ 14.74
Umpqua Health Alliance	Southwest	PCR	4,744	10.97	1,000	1,000	0.941	1,000	10,32	\$	\$ 19.70	\$	\$ 0.12	\$	\$	\$	\$	\$	\$	\$ 30.12	\$ 30.12	10.2%	\$	\$ 0.15	\$	\$ 33.70	2.0%	\$ 34.36
Umpqua Health Alliance	Southwest	PWO	1,680	9.18	1,000	1,000	0.955	1,000	8,77	\$	\$ 17.14	\$	\$ 0.12	\$	\$	\$	\$	\$	\$	\$ 26.03	\$ 26.03	10.2%	\$	\$ 0.06	\$	\$ 29.03	2.0%	\$ 29.62
Umpqua Health Alliance	Southwest	CHLD 00-01	304	4.59	1,000	1,000	0.910	1,000	5,20	\$	\$ 7.94	\$	\$	\$	\$	\$	\$	\$	\$	\$ 13.14	\$ 13.14	10.2%	\$	\$ 0.09	\$	\$ 14.65	2.0%	\$ 14.95
Umpqua Health Alliance	Southwest	CHLD 01-05	4,863	3.37	1,000	1,000	1.073	1,000	3,37	\$	\$ 35.55	\$	\$	\$	\$	\$	\$	\$	\$ 0.02	\$ 38.61	\$ 38.61	10.2%	\$	\$ 0.08	\$	\$ 42.96	2.0%	\$ 43.82
Umpqua Health Alliance	Southwest	CHLD 06-18	19,118	3.78	1,000	1,000	1.046	1,000	3,58	\$	\$ 31.81	\$	\$ 4.92	\$	\$	\$	\$	\$	\$ 0.06	\$ 40.37	\$ 40.37	10.2%	\$	\$ 0.09	\$	\$ 45.02	2.0%	\$ 45.84
Umpqua Health Alliance	Southwest	DUAL-MEDS	2,246	55.90	1,000	1,000	0.939	1,000	52,55	\$	\$ 22.74	\$	\$ 0.12	\$	\$	\$	\$	\$	\$ 0.04	\$ 75.40	\$ 75.40	10.2%	\$	\$ 0.16	\$	\$ 84.08	2.0%	\$ 85.79
Umpqua Health Alliance	Southwest	ABAD & OAA	4,466	46.30	1,000	1,000	0.932	1,000	41,192	\$	\$ 26.88	\$	\$ 0.12	\$	\$	\$	\$	\$	\$ 0.13	\$ 68.74	\$ 68.74	10.2%	\$	\$ 0.38	\$	\$ 76.65	2.0%	\$ 78.21
Umpqua Health Alliance	Southwest	FOSTER	2,130	8.61	1,000	1,000	0.987	1,000	8,50	\$	\$ 37.71	\$	\$ 4.87	\$	\$	\$	\$	\$	\$ 0.05	\$ 51.09	\$ 51.09	10.2%	\$	\$ 0.11	\$	\$ 56.97	2.0%	\$ 58.13
Umpqua Health Alliance	Southwest	ACA 19-34	14,499	6.94	1,000	1,000	0.945	1,000	6,56	\$	\$ 0.21	\$ 14.98	\$	\$ 0.12	\$	\$	\$	\$	\$									

CY27 CCO Rate Certification
Appendix C: CCOF Certified Rates

CCO	Region	COA	CY27 Forecast Caseload	Statewide Medical PMPM	Regional Risk Adjustment	CCO Risk Adjustment	Regional Factors	Hospital Factor / Tri-County BH Factor	PMPM Subtotal	ACA Acuity	Dental PMPM	Child Residential	Handicapping Malocclusion	Gender Affirming Care	Youth with Special Health Care Needs	INCP PH	INCP BH	INCP Dental	PMPM Subtotal	Credibility Blending	NML %	HRSN Home Changes for Health-Related Supports		HRSN Home Changes for Health-Related Supports Admin		PMPM Subtotal	MCO Tax %	Certified Rate PMPM
																						Benefit	PBR PMPM	Supports	Supports			
Statewide	Statewide	PCR	50,820	\$ 10.97	1,000	1,000	1,000	1,000	\$ 10.97	\$ -	\$ 19.97	\$ -	\$ 0.11	\$ -	\$ -	\$ -	\$ -	\$ -	\$ 0.32	\$ 31.37	\$ 31.37	10.3%	\$ -	\$ 0.27	\$ -	\$ 35.23	2.0%	\$ 35.95
Statewide	Statewide	PWO	17,634	\$ 9.18	1,000	1,000	1,000	1,000	\$ 9.18	\$ -	\$ 17.36	\$ -	\$ 0.11	\$ -	\$ -	\$ -	\$ -	\$ -	\$ 0.13	\$ 26.78	\$ 26.78	10.3%	\$ -	\$ 0.23	\$ -	\$ 30.07	2.0%	\$ 30.69
Statewide	Statewide	CHLD 00-01	2,837	\$ 4.59	1,000	1,000	1,000	1,000	\$ 4.59	\$ -	\$ 6.44	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -	\$ 0.02	\$ 11.06	\$ 11.06	10.3%	\$ -	\$ 0.09	\$ -	\$ 12.43	2.0%	\$ 12.68
Statewide	Statewide	CHLD 01-05	56,800	\$ 3.37	1,000	1,000	1,000	1,000	\$ 3.37	\$ -	\$ 33.23	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -	\$ 0.20	\$ 36.79	\$ 36.79	10.3%	\$ -	\$ 0.31	\$ -	\$ 41.32	2.0%	\$ 42.17
Statewide	Statewide	CHLD 06-18	222,584	\$ 3.78	1,000	1,000	1,000	1,000	\$ 3.78	\$ -	\$ 30.32	\$ -	\$ 2.99	\$ -	\$ -	\$ -	\$ -	\$ -	\$ 0.18	\$ 37.27	\$ 37.27	10.3%	\$ -	\$ 0.32	\$ -	\$ 41.86	2.0%	\$ 42.72
Statewide	Statewide	DUAL-MEDS	19,611	\$ 55.90	1,000	1,000	1,000	1,000	\$ 55.90	\$ -	\$ 23.27	\$ -	\$ 0.10	\$ -	\$ -	\$ -	\$ -	\$ -	\$ 0.19	\$ 79.47	\$ 79.47	10.3%	\$ -	\$ 0.68	\$ -	\$ 89.23	2.0%	\$ 91.05
Statewide	Statewide	AMAD & OAA	45,134	\$ 44.66	1,000	1,000	1,000	1,000	\$ 44.66	\$ -	\$ 25.93	\$ -	\$ 0.11	\$ -	\$ -	\$ -	\$ -	\$ -	\$ 0.36	\$ 71.05	\$ 71.05	10.3%	\$ -	\$ 0.60	\$ -	\$ 79.76	2.0%	\$ 81.39
Statewide	Statewide	FOSTER	16,138	\$ 8.61	1,000	1,000	0.998	1,000	\$ 8.60	\$ -	\$ 36.14	\$ -	\$ 3.06	\$ -	\$ -	\$ -	\$ -	\$ -	\$ 0.52	\$ 48.32	\$ 48.32	10.4%	\$ -	\$ 0.42	\$ -	\$ 54.32	2.0%	\$ 55.43
Statewide	Statewide	ACA 19-34	339,628	\$ 6.94	1,000	1,000	1,000	1,000	\$ 6.94	\$ 0.22	\$ 14.67	\$ -	\$ 0.10	\$ -	\$ -	\$ -	\$ -	\$ -	\$ 0.16	\$ 22.09	\$ 22.09	10.2%	\$ -	\$ 0.19	\$ -	\$ 24.79	2.0%	\$ 25.30
Statewide	Statewide	ACA 35-44	67,940	\$ 12.57	1,000	1,000	0.999	1,000	\$ 12.56	\$ 0.39	\$ 16.67	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -	\$ 0.21	\$ 29.63	\$ 29.63	10.2%	\$ -	\$ 0.26	\$ -	\$ 33.48	2.0%	\$ 34.17
Statewide	Statewide	ACA 45-54	40,651	\$ 14.71	1,000	1,000	0.999	1,000	\$ 14.69	\$ 0.43	\$ 18.94	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -	\$ 0.19	\$ 34.25	\$ 34.25	10.3%	\$ -	\$ 0.30	\$ -	\$ 38.46	2.0%	\$ 39.25
Statewide	Statewide	ACA 55-64	28,013	\$ 12.60	1,000	1,000	1,000	1,000	\$ 12.60	\$ 0.36	\$ 20.36	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -	\$ 0.33	\$ 33.65	\$ 33.65	10.3%	\$ -	\$ 0.30	\$ -	\$ 37.60	2.0%	\$ 38.57
Statewide	Statewide	BBM 15-34	161	\$ 6.31	1,000	1,000	1,000	1,000	\$ 6.31	\$ -	\$ 14.76	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -	\$ 10.07	\$ 31.15	\$ 31.15	10.7%	\$ -	\$ 0.31	\$ -	\$ 35.17	2.0%	\$ 35.89
Statewide	Statewide	BBM 35-44	112	\$ 12.53	1,000	1,000	1,000	1,000	\$ 12.53	\$ -	\$ 16.74	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -	\$ 7.96	\$ 37.23	\$ 37.23	10.5%	\$ -	\$ 0.35	\$ -	\$ 41.94	2.0%	\$ 42.79
Statewide	Statewide	BBM 45-54	76	\$ 14.70	1,000	1,000	1,000	1,000	\$ 14.70	\$ -	\$ 18.99	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -	\$ 8.56	\$ 42.24	\$ 42.24	10.6%	\$ -	\$ 0.39	\$ -	\$ 47.65	2.0%	\$ 48.62
Statewide	Statewide	BBM 55-64	4	\$ 11.66	1,000	1,000	1,000	1,000	\$ 11.66	\$ -	\$ 20.22	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -	\$ 18.71	\$ 50.59	\$ 50.59	10.7%	\$ -	\$ 0.51	\$ -	\$ 57.19	2.0%	\$ 58.35
Statewide	Statewide	YSHCN	2,402	\$ 5.15	1,000	1,000	1,000	1,000	\$ 5.15	\$ -	\$ 14.72	\$ -	\$ 0.11	\$ -	\$ -	\$ -	\$ -	\$ -	\$ 0.17	\$ 20.15	\$ 20.15	10.3%	\$ -	\$ 0.18	\$ -	\$ 22.64	2.0%	\$ 23.10
Statewide	Statewide	BCCP	-	\$ -	-	-	-	-	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -	0.0%	\$ -	\$ -	\$ -	\$ -	0.0%	\$ -
Statewide	Statewide	Maternity	-	\$ -	-	-	-	-	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -	0.0%	\$ -	\$ -	\$ -	\$ -	0.0%	\$ -
Statewide	Statewide	Total	711,543	\$ 10.98	1,000	1,000	1,000	1,000	\$ 10.98	\$ 0.12	\$ 23.55	\$ -	\$ 1.04	\$ -	\$ -	\$ -	\$ -	\$ -	\$ 0.22	\$ 35.90	\$ 35.90	10.3%	\$ -	\$ 0.31	\$ -	\$ 40.32	2.0%	\$ 41.14
General Note: 1. This appendix should be reviewed in conjunction with the accompanying rate certification narrative.																												
Footnotes: 1. Reflects CCOF projected enrollment. Values for maternity represent 2025 delivery counts. 2. Values for maternity are CCO-specific, not Statewide figures. 3. Marsh is certifying the COA-specific rates, not the Statewide aggregate values.																												

CY27 CCO Rate Certification
Appendix C: CCOG Certified Rates

CCO	Region	COA	CY27 Caseload Forecast	Statewide Medical NP/PA	Regional Risk Adjustment	CCO Risk Adjustment	Regional Factor	Hospital Factor / Tri-County BH	PMPM	ACA Activity	Dental PMPM	Child Residential	Handicapping / Malocclusion	Gender Affirming Care	Youth with Special Health Care Needs	ICPC PH	ICPC BM	ICPC DENT	PMPM Subtotal	Credibility	NML %	HRSN Home Changes for Health-Related Supports Benefit	HRSN Home Changes for Health-Related Supports Admin	PMPM Subtotal	NCO Tax %	Certified Rate PMPM	
Advanced Health, LLC	Southwest	PCR	54	\$ 163.16	1,000	1,000	0.941	1,000	\$ 153.52	-	\$ 20.12	-	\$ 0.06	-	\$ 0.12	-	\$ 7.73	\$ 8.72	\$ 190.27	\$ 190.27	11.6%	-	\$ 2.62	-	\$ 21.74	2.0%	\$ 222.18
Advanced Health, LLC	Southwest	PWO	19	\$ 143.51	1,000	1,000	0.955	1,000	\$ 137.03	-	\$ 17.14	-	\$ 0.06	-	\$ 0.59	-	\$ 4.37	\$ 5.20	\$ 164.40	\$ 164.40	11.6%	-	\$ 2.27	-	\$ 188.14	2.0%	\$ 191.98
Advanced Health, LLC	Southwest	CHLD 00-01	8	\$ 23.21	1,000	1,000	1.132	1,000	\$ 26.29	-	\$ 7.94	-	\$ 0.00	-	\$ 0.00	-	\$ 0.00	\$ 0.00	\$ 34.78	\$ 34.78	11.6%	-	\$ 0.40	-	\$ 29.40	2.0%	\$ 30.80
Advanced Health, LLC	Southwest	CHLD 01-05	25	\$ 52.10	1,000	1,000	0.975	1,000	\$ 45.48	-	\$ 35.55	0.01	\$ -	\$ (0.01)	\$ -	\$ -	\$ 0.03	\$ 3.28	\$ 84.35	\$ 84.35	11.6%	-	\$ 1.16	-	\$ 86.35	2.0%	\$ 88.49
Advanced Health, LLC	Southwest	CHLD 06-18	95	\$ 97.78	1,000	1,000	0.946	1,000	\$ 92.53	-	\$ 31.81	0.50	\$ 2.91	\$ (0.09)	\$ 0.00	\$ -	\$ 1.87	\$ 3.42	\$ 133.00	\$ 133.00	11.6%	-	\$ 1.83	-	\$ 152.20	2.0%	\$ 155.30
Advanced Health, LLC	Southwest	DUAL-MEDS	883	\$ 126.01	1,000	1,000	0.939	1,000	\$ 118.34	-	\$ 38.83	0.00	\$ 0.00	\$ 0.00	\$ 0.00	\$ -	\$ 5.39	\$ 5.82	\$ 329.18	\$ 329.18	11.6%	-	\$ 3.80	-	\$ 291.80	2.0%	\$ 297.80
Advanced Health, LLC	Southwest	ABAD & OAA	138	\$ 305.40	1,000	1,000	0.932	1,000	\$ 284.60	-	\$ 38.88	0.28	\$ 0.06	\$ (0.09)	\$ 0.23	\$ -	\$ 11.62	\$ 9.33	\$ 332.81	\$ 332.81	11.6%	-	\$ 4.59	-	\$ 308.63	2.0%	\$ 309.63
Advanced Health, LLC	Southwest	FOSTER	221	\$ 503.23	1,000	1,000	0.987	1,000	\$ 498.84	-	\$ 37.71	0.90	\$ 2.91	\$ (0.00)	\$ 0.00	\$ -	\$ 7.70	\$ 6.39	\$ 561.03	\$ 561.03	11.6%	-	\$ 7.73	-	\$ 642.02	2.0%	\$ 655.13
Advanced Health, LLC	Southwest	ACA 19-34	99	\$ 162.57	1,000	1,000	0.945	1,000	\$ 153.64	-	\$ 14.98	-	\$ 0.06	-	\$ 0.91	-	\$ 8.92	\$ 5.66	\$ 189.06	\$ 189.06	11.6%	-	\$ 2.51	-	\$ 216.36	2.0%	\$ 220.77
Advanced Health, LLC	Southwest	ACA 35-44	55	\$ 200.42	1,000	1,000	0.920	1,000	\$ 186.07	5.74	\$ 17.03	-	\$ -	\$ -	\$ -	\$ -	\$ 2.86	\$ 6.40	\$ 218.11	\$ 218.11	11.6%	-	\$ 3.01	-	\$ 249.60	2.0%	\$ 254.69
Advanced Health, LLC	Southwest	ACA 45-54	37	\$ 165.08	1,000	1,000	0.910	1,000	\$ 150.29	4.45	\$ 19.87	-	\$ -	\$ -	\$ -	\$ -	\$ 7.24	\$ 4.93	\$ 185.37	\$ 185.37	11.6%	-	\$ 2.55	-	\$ 212.19	2.0%	\$ 216.46
Advanced Health, LLC	Southwest	ACA 55-64	41	\$ 108.94	1,000	1,000	0.927	1,000	\$ 100.96	2.87	\$ 19.82	-	\$ -	\$ -	\$ -	\$ -	\$ 6.22	\$ 8.99	\$ 136.76	\$ 136.76	11.6%	-	\$ 1.93	-	\$ 158.79	2.0%	\$ 162.03
Advanced Health, LLC	Southwest	BBM 19-34	5	\$ 153.80	1,000	1,000	0.935	1,000	\$ 145.77	-	\$ 14.98	-	\$ -	\$ -	\$ -	\$ -	\$ 254.43	\$ 186.18	\$ 638.37	\$ 638.37	11.6%	-	\$ -	-	\$ 721.73	2.0%	\$ 728.46
Advanced Health, LLC	Southwest	BBM 35-44	0	\$ 186.16	1,000	1,000	0.920	1,000	\$ 171.29	-	\$ 17.03	-	\$ -	\$ -	\$ -	\$ -	\$ 94.60	\$ 210.30	\$ 493.21	\$ 493.21	11.6%	-	\$ 6.80	-	\$ 564.42	2.0%	\$ 575.93
Advanced Health, LLC	Southwest	BBM 45-54	0	\$ 148.32	1,000	1,000	0.909	1,000	\$ 134.77	-	\$ 19.87	-	\$ -	\$ -	\$ -	\$ -	\$ 236.05	\$ 142.28	\$ 534.17	\$ 534.17	11.6%	-	\$ 7.36	-	\$ 611.22	2.0%	\$ 623.76
Advanced Health, LLC	Southwest	BBM 55-64	1	\$ 101.44	1,000	1,000	0.924	1,000	\$ 93.73	-	\$ 19.82	-	\$ -	\$ -	\$ -	\$ -	\$ 204.66	\$ 292.32	\$ 610.52	\$ 610.52	11.6%	-	\$ 8.41	-	\$ 688.65	2.0%	\$ 712.93
Advanced Health, LLC	Southwest	YSHCN	2	\$ 148.10	1,000	1,000	0.938	1,000	\$ 138.87	-	\$ 14.98	-	\$ 0.06	\$ -	\$ -	\$ -	\$ 8.92	\$ 5.66	\$ 168.50	\$ 168.50	11.6%	-	\$ 2.32	-	\$ 196.76	2.0%	\$ 198.76
Advanced Health, LLC	Southwest	BCCP	-	\$ 95.62	1,000	1,000	0.932	1,000	\$ 89.11	-	\$ 25.13	-	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -	\$ 114.24	\$ 332.81	11.6%	-	\$ -	-	\$ 376.27	2.0%	\$ 383.95
Advanced Health, LLC	Southwest	Maternity	-	-	1,000	1,000	1,000	1,000	\$ -	-	\$ -	-	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -	11.6%	-	\$ -	-	\$ -	2.0%	\$ -
Advanced Health, LLC	Southwest	Total	1,598	\$ 197.02	1,000	1,000	0.955	1,000	\$ 188.08	0.68	\$ 24.12	\$ 1.35	\$ 0.62	\$ (0.02)	\$ 0.11	\$ -	\$ 6.14	\$ 6.08	\$ 228.07	\$ 228.07	11.6%	-	\$ 3.14	-	\$ 261.00	2.0%	\$ 266.92
AltCare CCO	Southwest	PCR	132	\$ 163.16	1,000	1,000	0.941	1,000	\$ 153.52	-	\$ 20.12	-	\$ 0.11	\$ -	\$ 0.09	-	\$ 0.16	\$ -	\$ 174.02	\$ 174.02	10.8%	-	\$ 2.89	-	\$ 197.86	2.0%	\$ 203.90
AltCare CCO	Southwest	PWO	63	\$ 143.51	1,000	1,000	0.955	1,000	\$ 137.03	-	\$ 17.14	-	\$ 0.13	\$ -	\$ 0.35	-	\$ 0.03	\$ -	\$ 154.65	\$ 154.65	10.8%	-	\$ 2.56	-	\$ 175.84	2.0%	\$ 179.43
AltCare CCO	Southwest	CHLD 00-01	18	\$ 23.21	1,000	1,000	1.132	1,000	\$ 26.29	-	\$ 7.94	-	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -	\$ 34.22	\$ 34.22	10.8%	-	\$ 0.57	-	\$ 38.91	2.0%	\$ 39.71
AltCare CCO	Southwest	CHLD 01-05	56	\$ 52.10	1,000	1,000	0.973	1,000	\$ 45.48	-	\$ 35.55	0.01	\$ -	\$ (0.00)	\$ -	\$ -	\$ 0.02	\$ 8.05	\$ 81.05	\$ 81.05	10.8%	-	\$ 1.34	-	\$ 92.15	2.0%	\$ 94.03
AltCare CCO	Southwest	CHLD 06-18	221	\$ 97.78	1,000	1,000	0.946	1,000	\$ 92.53	-	\$ 31.81	0.51	\$ 0.36	\$ (0.00)	\$ 0.00	\$ -	\$ 0.04	\$ 3.73	\$ 126.73	\$ 126.73	10.8%	-	\$ 2.10	-	\$ 144.10	2.0%	\$ 147.04
AltCare CCO	Southwest	DUAL-MEDS	1,733	\$ 126.01	1,000	1,000	0.939	1,000	\$ 118.34	-	\$ 38.83	0.00	\$ 0.13	\$ -	\$ 0.02	\$ -	\$ 0.08	\$ 0.02	\$ 141.32	\$ 141.32	10.8%	-	\$ 2.34	-	\$ 160.69	2.0%	\$ 163.97
AltCare CCO	Southwest	ABAD & OAA	249	\$ 305.40	1,000	1,000	0.932	1,000	\$ 284.60	-	\$ 38.88	0.17	\$ 0.13	\$ (0.44)	\$ 0.27	\$ -	\$ -	\$ 0.02	\$ 31.63	\$ 31.63	10.8%	-	\$ 5.17	-	\$ 354.33	2.0%	\$ 361.56
AltCare CCO	Southwest	FOSTER	1,033	\$ 503.23	1,000	1,000	0.987	1,000	\$ 498.84	-	\$ 37.71	0.90	\$ 2.61	\$ (0.04)	\$ 0.09	\$ -	\$ -	\$ 0.02	\$ 542.91	\$ 542.91	10.8%	-	\$ 8.41	-	\$ 617.29	2.0%	\$ 629.90
AltCare CCO	Southwest	ACA 19-34	267	\$ 162.57	1,000	1,000	0.945	1,000	\$ 153.64	4.88	\$ 14.98	-	\$ 0.13	\$ -	\$ 0.64	-	\$ 0.06	\$ 0.03	\$ 174.34	\$ 174.34	10.8%	-	\$ 2.89	-	\$ 198.23	2.0%	\$ 202.28
AltCare CCO	Southwest	ACA 35-44	148	\$ 200.42	1,000	1,000	0.928	1,000	\$ 186.07	5.74	\$ 17.03	-	\$ -	\$ -	\$ -	\$ -	\$ 0.01	\$ 0.02	\$ 208.87	\$ 208.87	10.8%	-	\$ 3.46	-	\$ 237.49	2.0%	\$ 242.34
AltCare CCO	Southwest	ACA 45-54	88	\$ 165.08	1,000	1,000	0.910	1,000	\$ 150.29	4.45	\$ 19.87	-	\$ -	\$ -	\$ -	\$ -	\$ 0.01	\$ 0.03	\$ 173.82	\$ 173.82	10.8%	-	\$ 2.55	-	\$ 210.67	2.0%	\$ 216.67
AltCare CCO	Southwest	ACA 55-64	92	\$ 108.94	1,000	1,000	0.927	1,000	\$ 100.96	2.87	\$ 19.82	-	\$ -	\$ -	\$ -	\$ -	\$ 0.01	\$ 0.03	\$ 128.66	\$ 128.66	10.8%	-	\$ 2.05	-	\$ 140.80	2.0%	\$ 143.47
AltCare CCO	Southwest	BBM 19-34	-	\$ 153.80	1,000	1,000	0.935	1,000	\$ 143.77	-	\$ 14.98	-	\$ -	\$ -	\$ -	\$ -	\$ 1.82	\$ 0.84	\$ 161.41	\$ 161.41	10.8%	-	\$ -	-	\$ 189.85	2.0%	\$ 194.54
AltCare CCO	Southwest	BBM 35-44	0	\$ 186.16	1,000	1,000	0.920	1,000	\$ 171.29	-	\$ 17.03	-	\$ -	\$ -	\$ -	\$ -	\$ 0.36	\$ 0.63	\$ 189.31	\$ 189.31	10.8%	-	\$ -	-	\$ 215.25	2.0%	\$ 218.64
AltCare CCO	Southwest	BBM 45-54	0	\$ 148.32	1,000	1,000	0.909	1,000	\$ 134.77	-	\$ 19.82	-	\$ -	\$ -	\$ -	\$ -	\$ 0.47	\$ 0.03	\$ 159.43	\$ 159.43	10.8%	-	\$ 2.50	-	\$ 175.45	2.0%	\$ 178.03
AltCare CCO	Southwest	BBM 55-64	1	\$ 101.44	1,000	1,000	0.924	1,000	\$ 93.73	-	\$ 19.82	-	\$ -	\$ -	\$ -	\$ -	\$ 0.44	\$ 0.03	\$ 113.98	\$ 113.98	10.8%	-	\$ 1.89	-	\$ 129.60	2.0%	\$ 132.24
AltCare CCO	Southwest	YSHCN	4	\$ 148.10	1,000	1,000	0.938	1,000	\$ 138.87	-	\$ 14.98	-	\$ 0.13	\$ -	\$ -	\$ -	\$ 0.06	\$ 0.03	\$ 154.06	\$ 154.06	10.8%	-	\$ 2.55	-	\$ 175.17	2.0%	\$ 178.75
AltCare CCO	Southwest	BCCP	-	\$ 95.62	1,000	1,000	0.932	1,000	\$ 89.11	-	\$ 25.13	-	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -	\$ 114.24	\$ 311.63	10.8%	-	\$ -	-	\$ 365.16	2.0%	\$ 369.52
AltCare CCO	Southwest	Maternity	-	-	1,000	1,000	1,000	1,000	\$ -	-	\$ -	-	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -	10.8%	-	\$ -	-	\$ -	2.0%	\$ -
AltCare CCO	Southwest	Total	1,494	\$ 184.82	1,000	1,000	0.932	1,000	\$ 167.74	0.81	\$ 20.12	\$ 0.66	\$ (0.01)	\$ (0.07)	\$ 0.10	\$ -	\$ 0.08	\$ 0.03	\$ 154.04	\$ 154.04	10.8%	-	\$ 1.97	-	\$ 237.17	2.0%	\$ 243.30
Cascade Health Alliance, LLC	Southwest	PCR	139	\$ 163.16	1,000	1,000	0.941	1,000	\$ 153.52	-	\$ 20.12	-	\$ 0.06	-	\$ 0.13	-	\$ 0.16	\$ 1.27	\$ 173.13	\$ 173.13	11.6%	-	\$ -	-	\$ 200.90	2.0%	\$ 207.32
Cascade Health Alliance, LLC	Southwest	PWO	25	\$ 143.51	1,000	1,000	0.955	1,000	\$ 137.03	-	\$ 17.14	-	\$ 0.06	-	\$ 0.39	-	\$ 0.03	\$ -	\$ 140.40	\$ 140.40	11.6%	-	\$ 1.54	-	\$ 180.62	2.0%	\$ 184.31
Cascade Health Alliance, LLC	Southwest	CHLD 00-01	9	\$ 23.21	1,000	1,000	1.132	1,000	\$ 26.29	-	\$ 7.94	-	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -	\$ 34.68	\$ 34.68	11.6%	-	\$ 0.34	-	\$ 39.55	2.0%	\$ 40.35
Cascade Health Alliance, LLC	Southwest	CHLD 01-05	30	\$ 52.10	1,000	1,000	0.973	1,000	\$ 45.48	-	\$ 35.55	0.01	\$ -	\$ (0.00)	\$ -	\$ -	\$ 0.00	\$ 8.97	\$ 84.97	\$ 84.97	11.6%	-	\$ 0.87	-	\$ 96.87	2.0%	\$ 98.87
Cascade Health Alliance, LLC	Southwest	CHLD 06-18	107	\$ 97.78	1,000	1,000	0.946	1,000	\$ 92.53	-	\$ 31.81	1.01	\$ 3.03	\$ (0.03)	\$ -	\$ -	\$ 1.44	\$ 3.07	\$ 132.88	\$ 132.88	11.6%	-	\$ 1.29	-	\$ 151.51	2.0%	\$ 154.61
Cascade Health Alliance, LLC	Southwest	DUAL-MEDS	550	\$ 126.01	1,000	1,000	0.939	1,000	\$ 118.34	-	\$ 38.83	0.00	\$ 0.06	\$ -	\$ 0.02	\$ -	\$ 0.04	\$ 0.24	\$ 143.93	\$ 143.93	11.6%	-	\$ 1.38	-	\$ 161.84	2.0%	\$ 165.14
Cascade Health Alliance, LLC	Southwest	ABAD & OAA	123	\$ 305.40	1,000	1,000	0.932	1,000	\$ 284.60	-	\$ 38.88	0.09	\$ 0.08	\$ (0.00)	\$ 0.26	\$ -	\$ -	\$ 0.03	\$ 31.21	\$ 31.21	11.6%	-	\$ 5.17	-	\$ 357.14	2.0%	\$ 364.61
Cascade Health Alliance, LLC	Southwest	FOSTER	210	\$ 503.23	1,000	1,000	0.																				

CY27 CCO Rate Certification
Appendix C: CCOG Certified Rates

CCO	Region	Tricounty	COA	CY27 Caseload Forecast	Statewide Medical PMPM	Regional Risk Adjustment	CCO Risk Adjustment	Regional Factor	Hospital Factor / Tricounty BH Factor	PMPM	ACA Acuity	Dental PMPM	Child Residential	Handicapping Malocclusion	Gender Affirming Care	Youth with Special Health Care Needs	ICPC PH	ICPC BH	ICPC Dnt	PMPM Subtotal	Credibility	NML %	HRSN Home Changes for Health-Related Supports Benefit	PBR PMPM	HRSN Home Changes for Health-Related Supports Admin	PMPM Subtotal	MCO Tax %	Certified Rate PMPM
Health Share of Oregon	Tricounty	PCR		759	\$ 163.16	1,000	1,000	0.948	1,000	\$ 156.57	-	\$ 197.0	-	\$ 0.00	-	\$ 0.07	-	\$ 3.39	\$ 0.10	\$ 179.01	\$ 179.01	9.6%	-	\$ 154.54	-	\$ 195.45	2.0%	\$ 203.52
Health Share of Oregon	Tricounty	PWO		359	\$ 143.51	1,000	1,000	0.956	1,000	\$ 138.12	-	\$ 177.7	-	\$ 0.08	-	\$ 0.25	-	\$ 1.09	\$ 0.03	\$ 157.35	\$ 157.35	9.6%	-	\$ 136.8	-	\$ 175.32	2.0%	\$ 178.90
Health Share of Oregon	Tricounty	CHLD 00-01		141	\$ 23.21	1,000	1,000	0.955	1,000	\$ 21.72	-	\$ 3.78	-	\$ 0.00	-	\$ 0.00	-	\$ 0.00	\$ 0.00	\$ 25.35	\$ 25.35	9.6%	-	\$ 25.35	-	\$ 25.35	2.0%	\$ 25.35
Health Share of Oregon	Tricounty	CHLD 01-05		443	\$ 52.10	1,000	1,000	1.023	1,005	\$ 53.05	-	\$ 28.98	0.00	\$ 0.00	-	\$ 0.00	-	\$ 0.01	\$ 0.02	\$ 62.61	\$ 62.61	9.6%	-	\$ 7.71	-	\$ 92.04	2.0%	\$ 93.92
Health Share of Oregon	Tricounty	CHLD 06-18		1,705	\$ 97.78	1,000	1,000	0.964	1,005	\$ 94.74	-	\$ 27.83	0.10	\$ 2.52	\$ 1.66	\$ 0.00	-	\$ 0.47	\$ 0.05	\$ 123.88	\$ 123.88	9.6%	-	\$ 107.9	-	\$ 138.03	2.0%	\$ 140.84
Health Share of Oregon	Tricounty	DUAL MEDS		9,962	\$ 126.01	1,000	1,000	0.952	1,000	\$ 119.52	-	\$ 24.13	0.00	\$ 0.00	-	\$ 0.01	-	\$ 1.30	\$ 0.05	\$ 144.79	\$ 144.79	9.6%	-	\$ 125.74	-	\$ 164.62	2.0%	\$ 166.45
Health Share of Oregon	Tricounty	ABAD & OAA		1,705	\$ 305.40	1,000	1,000	0.990	1,005	\$ 303.74	-	\$ 27.83	0.07	\$ 0.07	\$ 0.52	\$ 0.30	-	\$ 2.91	\$ 0.09	\$ 336.99	\$ 336.99	9.6%	-	\$ 285.0	-	\$ 368.73	2.0%	\$ 376.32
Health Share of Oregon	Tricounty	FOSTER		2,231	\$ 503.23	1,000	1,000	1.064	1,002	\$ 506.67	-	\$ 32.50	2.34	\$ 2.52	\$ 5.42	\$ 0.14	-	\$ 1.29	\$ 0.15	\$ 570.20	\$ 570.20	9.6%	-	\$ 492.9	-	\$ 635.32	2.0%	\$ 648.29
Health Share of Oregon	Tricounty	ACA 19-34		2,031	\$ 162.57	1,000	1,000	0.966	1,010	\$ 158.98	-	\$ 14.22	0.00	\$ 0.00	-	\$ 0.66	\$ 0.00	\$ 1.03	\$ 0.05	\$ 179.66	\$ 179.66	9.6%	-	\$ 155.0	-	\$ 200.18	2.0%	\$ 204.26
Health Share of Oregon	Tricounty	ACA 35-44		917	\$ 200.42	1,000	1,000	0.989	1,009	\$ 199.96	6.17	\$ 16.14	-	\$ 0.00	-	\$ 0.00	-	\$ 2.12	\$ 0.09	\$ 224.50	\$ 224.50	9.6%	-	\$ 184.0	-	\$ 250.14	2.0%	\$ 255.24
Health Share of Oregon	Tricounty	ACA 45-54		502	\$ 165.08	1,000	1,000	0.966	1,008	\$ 160.86	4.76	\$ 18.74	-	\$ 0.00	-	\$ 0.00	-	\$ 1.89	\$ 0.15	\$ 186.40	\$ 186.40	9.6%	-	\$ 161.9	-	\$ 207.69	2.0%	\$ 211.93
Health Share of Oregon	Tricounty	ACA 55-64		451	\$ 108.94	1,000	1,000	0.925	1,009	\$ 101.67	2.89	\$ 21.32	-	\$ 0.00	-	\$ 0.00	-	\$ 1.84	\$ 0.10	\$ 127.82	\$ 127.82	9.6%	-	\$ 110.0	-	\$ 142.42	2.0%	\$ 145.32
Health Share of Oregon	Tricounty	BM 19-34		5	\$ 153.80	1,000	1,000	0.956	1,004	\$ 147.49	-	\$ 14.22	0.00	\$ 0.00	-	\$ 0.00	-	\$ 3.92	\$ 1.61	\$ 187.24	\$ 187.24	9.6%	-	\$ 154.0	-	\$ 210.07	2.0%	\$ 222.52
Health Share of Oregon	Tricounty	BM 35-44		2	\$ 186.16	1,000	1,000	0.980	1,003	\$ 183.03	-	\$ 16.16	-	\$ 0.00	-	\$ 0.00	-	\$ 6.95	\$ 2.82	\$ 271.76	\$ 271.76	9.6%	-	\$ 234.0	-	\$ 302.80	2.0%	\$ 308.98
Health Share of Oregon	Tricounty	BM 45-54		1	\$ 148.32	1,000	1,000	0.964	1,004	\$ 143.60	-	\$ 18.74	-	\$ 0.00	-	\$ 0.00	-	\$ 12.28	\$ 6.25	\$ 229.48	\$ 229.48	9.6%	-	\$ 198.9	-	\$ 255.69	2.0%	\$ 260.90
Health Share of Oregon	Tricounty	BM 55-64		5	\$ 101.44	1,000	1,000	0.922	1,001	\$ 93.62	-	\$ 19.07	-	\$ 0.00	-	\$ 0.00	-	\$ 10.40	\$ 3.00	\$ 178.64	\$ 178.64	9.6%	-	\$ 154.0	-	\$ 192.04	2.0%	\$ 203.11
Health Share of Oregon	Tricounty	YSHCN		32	\$ 148.10	1,000	1,000	0.958	1,000	\$ 141.95	-	\$ 14.22	-	\$ 0.08	-	\$ 0.00	-	\$ 1.03	\$ 0.05	\$ 157.33	\$ 157.33	9.6%	-	\$ 136.0	-	\$ 175.30	2.0%	\$ 178.88
Health Share of Oregon	Tricounty	BCCP		-	\$ 95.62	1,000	1,000	0.950	1,009	\$ 95.57	-	\$ 28.29	-	\$ 0.00	-	\$ 0.00	-	\$ 0.00	-	\$ 122.86	\$ 122.86	9.6%	-	\$ 0.00	-	\$ 365.94	2.0%	\$ 373.41
Health Share of Oregon	Tricounty	Maternity		-	-	1,000	1,000	1,000	1,000	-	-	-	-	-	-	-	-	-	-	-	-	9.6%	-	-	-	-	2.0%	-
Health Share of Oregon	Tricounty	Total		21,301	\$ 184.75	1,000	1,000	0.989	1,005	\$ 183.69	0.82	\$ 23.51	0.26	\$ 0.52	\$ 0.74	\$ 0.12	-	\$ 1.46	\$ 0.07	\$ 209.80	\$ 209.80	9.6%	-	\$ 181.5	-	\$ 233.77	2.0%	\$ 238.54
InterCommunity Health Network, Inc.	Northwest	PCR		144	\$ 163.16	1,000	1,000	1.063	1,000	\$ 173.50	-	\$ 20.12	-	\$ 0.08	-	\$ 0.00	-	\$ 1.55	\$ 0.01	\$ 199.77	\$ 199.77	10.8%	-	\$ 150.0	-	\$ 225.34	2.0%	\$ 229.93
InterCommunity Health Network, Inc.	Northwest	PWO		72	\$ 143.51	1,000	1,000	1.063	1,000	\$ 152.54	-	\$ 17.14	-	\$ 0.08	-	\$ 0.30	-	\$ 0.69	\$ 0.02	\$ 170.76	\$ 170.76	10.8%	-	\$ 128.0	-	\$ 192.01	2.0%	\$ 195.54
InterCommunity Health Network, Inc.	Northwest	CHLD 00-01		26	\$ 23.21	1,000	1,000	0.910	1,000	\$ 21.12	-	\$ 7.94	-	\$ 0.00	-	\$ 0.00	-	\$ 0.00	-	\$ 29.06	\$ 29.06	10.8%	-	\$ 0.22	-	\$ 32.78	2.0%	\$ 33.44
InterCommunity Health Network, Inc.	Northwest	CHLD 01-05		83	\$ 52.10	1,000	1,000	1.052	1,000	\$ 54.80	-	\$ 35.55	0.01	\$ 0.00	-	\$ 0.00	-	\$ 0.07	\$ 0.78	\$ 91.21	\$ 91.21	10.8%	-	\$ 0.68	-	\$ 102.88	2.0%	\$ 104.98
InterCommunity Health Network, Inc.	Northwest	CHLD 06-18		315	\$ 97.78	1,000	1,000	1.046	1,000	\$ 102.22	-	\$ 31.81	0.04	\$ 0.38	\$ 1.69	\$ 0.00	-	\$ 0.57	\$ 0.29	\$ 117.19	\$ 117.19	10.8%	-	\$ 1.03	-	\$ 154.74	2.0%	\$ 157.90
InterCommunity Health Network, Inc.	Northwest	DUAL MEDS		1,811	\$ 126.01	1,000	1,000	1.000	1,000	\$ 133.62	-	\$ 22.74	-	\$ 0.08	-	\$ 0.02	-	\$ 0.50	\$ 0.02	\$ 156.97	\$ 156.97	10.8%	-	\$ 118.0	-	\$ 177.06	2.0%	\$ 180.67
InterCommunity Health Network, Inc.	Northwest	ABAD & OAA		362	\$ 305.40	1,000	1,000	1.037	1,000	\$ 316.62	-	\$ 26.88	0.20	\$ 0.08	\$ 0.03	\$ 0.33	-	\$ 7.16	\$ 0.18	\$ 351.44	\$ 351.44	10.8%	-	\$ 264.0	-	\$ 396.40	2.0%	\$ 404.49
InterCommunity Health Network, Inc.	Northwest	FOSTER		498	\$ 503.23	1,000	1,000	1.052	1,000	\$ 479.52	-	\$ 32.50	2.34	\$ 2.52	\$ 5.42	\$ 0.10	-	\$ 3.92	\$ 1.61	\$ 533.50	\$ 533.50	10.8%	-	\$ 450.0	-	\$ 614.78	2.0%	\$ 629.44
InterCommunity Health Network, Inc.	Northwest	ACA 19-34		397	\$ 162.57	1,000	1,000	1.037	1,000	\$ 166.64	5.38	\$ 14.98	-	\$ 0.08	-	\$ 0.80	-	\$ 2.90	\$ 0.04	\$ 192.80	\$ 192.80	10.8%	-	\$ 145.0	-	\$ 217.47	2.0%	\$ 221.90
InterCommunity Health Network, Inc.	Northwest	ACA 35-44		148	\$ 200.42	1,000	1,000	1.059	1,000	\$ 212.32	6.55	\$ 17.03	-	\$ 0.00	-	\$ 0.00	-	\$ 10.31	\$ 0.06	\$ 246.27	\$ 246.27	10.8%	-	\$ 185.0	-	\$ 277.78	2.0%	\$ 283.45
InterCommunity Health Network, Inc.	Northwest	ACA 45-54		93	\$ 165.08	1,000	1,000	1.085	1,000	\$ 179.17	5.26	\$ 19.07	-	\$ 0.00	-	\$ 0.00	-	\$ 4.96	\$ 1.53	\$ 207.93	\$ 207.93	10.8%	-	\$ 156.0	-	\$ 228.32	2.0%	\$ 233.32
InterCommunity Health Network, Inc.	Northwest	ACA 55-64		53	\$ 118.94	1,000	1,000	1.039	1,000	\$ 123.09	3.59	\$ 19.02	-	\$ 0.00	-	\$ 0.00	-	\$ 1.57	\$ 0.20	\$ 148.13	\$ 148.13	10.8%	-	\$ 111.0	-	\$ 167.10	2.0%	\$ 170.56
InterCommunity Health Network, Inc.	Northwest	BM 19-34		-	\$ 153.80	1,000	1,000	1.026	1,000	\$ 155.45	-	\$ 14.98	-	\$ 0.00	-	\$ 0.00	-	\$ 9.51	\$ 1.33	\$ 269.63	\$ 269.63	10.8%	-	\$ 0.00	-	\$ 302.10	2.0%	\$ 308.27
InterCommunity Health Network, Inc.	Northwest	BM 35-44		0	\$ 186.16	1,000	1,000	1.050	1,000	\$ 185.45	-	\$ 17.03	-	\$ 0.00	-	\$ 0.00	-	\$ 10.40	\$ 5.51	\$ 255.51	\$ 255.51	10.8%	-	\$ 0.00	-	\$ 324.33	2.0%	\$ 337.07
InterCommunity Health Network, Inc.	Northwest	BM 45-54		0	\$ 148.32	1,000	1,000	1.082	1,000	\$ 146.02	-	\$ 19.07	-	\$ 0.00	-	\$ 0.00	-	\$ 14.30	\$ 1.06	\$ 324.09	\$ 324.09	10.8%	-	\$ 0.00	-	\$ 483.56	2.0%	\$ 493.32
InterCommunity Health Network, Inc.	Northwest	BM 55-64		1	\$ 101.44	1,000	1,000	1.126	1,000	\$ 114.27	-	\$ 19.02	-	\$ 0.00	-	\$ 0.00	-	\$ 15.72	\$ 6.68	\$ 192.49	\$ 192.49	10.8%	-	\$ 144.0	-	\$ 217.12	2.0%	\$ 221.55
InterCommunity Health Network, Inc.	Northwest	YSHCN		7	\$ 148.10	1,000	1,000	1.029	1,000	\$ 152.49	-	\$ 14.98	-	\$ 0.08	-	\$ 0.00	-	\$ 2.90	\$ 0.04	\$ 170.43	\$ 170.43	10.8%	-	\$ 128.0	-	\$ 192.24	2.0%	\$ 196.17
InterCommunity Health Network, Inc.	Northwest	BCCP		-	\$ 95.62	1,000	1,000	1.027	1,000	\$ 94.14	-	\$ 28.29	-	\$ 0.00	-	\$ 0.00	-	\$ 0.00	-	\$ 125.17	\$ 125.17	10.8%	-	\$ 0.00	-	\$ 365.94	2.0%	\$ 373.41
InterCommunity Health Network, Inc.	Northwest	Maternity		-	-	1,000	1,000	1,000	1,000	-	-	-	-	-	-	-	-	-	-	-	-	10.8%	-	-	-	-	2.0%	-
InterCommunity Health Network, Inc.	Northwest	Total		4,051	\$ 182.82	1,000	1,000	1.021	1,000	\$ 182.82	0.97	\$ 23.12	0.88	\$ 0.74	\$ 0.10	\$ 0.14	-	\$ 2.63	\$ 0.21	\$ 224.31	\$ 224.31	10.8%	-	\$ 170.0	-	\$ 292.67	2.0%	\$ 297.91
Jackson County CCO, LLC	Southwest	PCR		123	\$ 163.16	1,000	1,000	0.941	1,000	\$ 151.52	-	\$ 19.02	-	\$ 0.00	-	\$ 0.00	-	\$ 1.55	\$ 0.01	\$ 172.42	\$ 172.42	10.8%	-	\$ 164.0	-	\$ 219.67	2.0%	\$ 224.66
Jackson County CCO, LLC	Southwest	PWO		54	\$ 143.51	1,000	1,000	0.955	1,000	\$ 137.03	-	\$ 17.14	-	\$ 0.08	-	\$ 0.38	-	\$ 0.69	\$ 0.02	\$ 154.62	\$ 154.62	10.8%	-	\$ 140.0	-	\$ 174.89	2.0%	\$ 178.45
Jackson County CCO, LLC	Southwest	CHLD 00-01		23	\$ 23.21	1,000	1,000	1.132	1,000	\$ 26.29	-	\$ 7.94	-	\$ 0.00	-	\$ 0.00	-	\$ 0.00	-	\$ 34.22	\$ 34.22	10.8%	-	\$ 0.36	-	\$ 38.71	2.0%	\$ 39.50
Jackson County CCO, LLC	Southwest	CHLD 01-05		77	\$ 52.10	1,000	1,000	1.073	1,000	\$ 55.98	-	\$ 35.55	0.00	\$ 0.00	-	\$ 0.00	-	\$ 0.00	\$ 0.00	\$ 64.08	\$ 64.08	10.8%	-	\$ 0.68	-	\$ 70.11	2.0%	\$ 71.98
Jackson County CCO, LLC	Southwest	CHLD 06-18		283	\$ 97.78	1,000	1,000	0.946	1,000	\$ 92.53	-	\$ 31.81	0.13	\$ 2.94	\$ 0.95	\$ 0.00	-	\$ 0.00	\$ 0.02	\$ 126.48	\$ 126.48	10.8%	-	\$ 1.34	-	\$ 143.06	2.0%	\$ 145.98
Jackson County CCO, LLC	Southwest	DUAL MEDS		1,045	\$ 126.01	1,000	1,000	0.939	1,000	\$ 118.34	-	\$ 22.74	-	\$ 0.08	-	\$ 0.02	-	\$ 0.50	\$ 0.02									

CY27 CCO Rate Certification
Appendix C: CCOG Certified Rates

CCO	Region	COA	CY27 Caseload Forecast	Statewide Medical NPI/PAID	Regional Risk Adjustment	CCO Risk Adjustment	Regional Factor	Hospital Factor / Tri-County BH Factor	PMPM	ACA Activity	Dental PMPM	Child Residential	Handicapping Malocclusion	Gender Affirming Care	Youth with Special Health Care Needs	ICPC PH	ICPC BH	ICPC DENT	PMPM Subtotal	Credibility	NML %	HRSN Home Changes for Health-Related Supports Benefit	PBR PMPM	HRSN Home Changes for Health-Related Supports Admin	PMPM Subtotal	MCO Tax %	Certified Rate PMPM
PacificSource Community Solutions (Marion Polk)	Northwest	PCR	260	\$ 133.16	1,000	1,000	1.063	1,000	179.50	\$ -	\$ 20.12	\$ -	\$ 0.17	\$ -	\$ 0.11	\$ -	\$ -	\$ -	194.01	194.01	10.2%	\$ -	\$ 0.90	\$ -	\$ 0.90	2.0%	\$ 221.24
PacificSource Community Solutions (Marion Polk)	Northwest	PWO	141	\$ 143.51	1,000	1,000	1,000	1,000	152.54	\$ -	\$ 17.14	\$ -	\$ 0.17	\$ -	\$ 0.38	\$ -	\$ -	\$ -	170.22	170.22	10.2%	\$ -	\$ 0.79	\$ -	\$ 0.79	2.0%	\$ 194.12
PacificSource Community Solutions (Marion Polk)	Northwest	CHLD 00-01	59	\$ 133.16	1,000	1,000	1,000	1,000	232.12	\$ -	\$ 17.14	\$ -	\$ 0.17	\$ -	\$ 0.38	\$ -	\$ -	\$ -	230.96	230.96	10.2%	\$ -	\$ 0.79	\$ -	\$ 0.79	2.0%	\$ 32.14
PacificSource Community Solutions (Marion Polk)	Northwest	CHLD 01-05	186	\$ 52.10	1,000	1,000	1.052	1,000	54.80	\$ -	\$ 35.55	\$ 0.00	\$ -	\$ (0.00)	\$ -	\$ -	\$ -	\$ 0.01	\$ 90.36	\$ 90.36	10.2%	\$ -	\$ 0.42	\$ -	\$ 0.42	2.0%	\$ 103.05
PacificSource Community Solutions (Marion Polk)	Northwest	CHLD 06-18	693	\$ 97.78	1,000	1,000	1.045	1,000	102.22	\$ -	\$ 31.81	\$ 0.18	\$ -	\$ 2.96	\$ 0.03	\$ -	\$ -	\$ 0.27	\$ 136.49	\$ 136.49	10.2%	\$ -	\$ 0.63	\$ -	\$ 0.63	2.0%	\$ 155.65
PacificSource Community Solutions (Marion Polk)	Northwest	DUAL-MEDS	2,835	\$ 126.01	1,000	1,000	1.028	1,000	133.62	\$ -	\$ 22.84	\$ -	\$ 0.17	\$ -	\$ 0.03	\$ -	\$ -	\$ 0.11	\$ 156.68	\$ 156.68	10.2%	\$ -	\$ 0.72	\$ -	\$ 0.72	2.0%	\$ 178.67
PacificSource Community Solutions (Marion Polk)	Northwest	ABAD & OAA	571	\$ 105.40	1,000	1,000	1.037	1,000	95.62	\$ -	\$ 38.66	\$ 0.10	\$ 0.17	\$ (0.57)	\$ 0.39	\$ -	\$ -	\$ 0.15	\$ 343.85	\$ 343.85	10.2%	\$ -	\$ 1.09	\$ -	\$ 1.09	2.0%	\$ 362.12
PacificSource Community Solutions (Marion Polk)	Northwest	FOSTER	630	\$ 503.23	1,000	1,000	0.952	1,000	479.32	\$ -	\$ 37.71	\$ 3.44	\$ 2.96	\$ (3.93)	\$ 0.13	\$ -	\$ -	\$ 0.82	\$ 520.45	\$ 520.45	10.2%	\$ -	\$ 2.41	\$ -	\$ 2.41	2.0%	\$ 593.53
PacificSource Community Solutions (Marion Polk)	Northwest	ACA 35-44	604	\$ 162.57	1,000	1,000	1.037	1,000	108.64	\$ -	\$ 14.98	\$ -	\$ 0.17	\$ -	\$ 0.86	\$ -	\$ -	\$ 0.17	\$ 190.26	\$ 190.26	10.2%	\$ -	\$ 0.88	\$ -	\$ 0.88	2.0%	\$ 216.98
PacificSource Community Solutions (Marion Polk)	Northwest	ACA 35-44	219	\$ 200.42	1,000	1,000	1.059	1,000	212.32	\$ -	\$ 6.55	\$ 17.03	\$ -	\$ -	\$ 0.31	\$ -	\$ -	\$ 0.12	\$ 236.33	\$ 236.33	10.2%	\$ -	\$ 1.09	\$ -	\$ 1.09	2.0%	\$ 265.51
PacificSource Community Solutions (Marion Polk)	Northwest	ACA 45-54	131	\$ 165.08	1,000	1,000	1.085	1,000	179.17	\$ 5.30	\$ 19.07	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -	\$ 0.13	\$ 203.73	\$ 203.73	10.2%	\$ -	\$ 0.94	\$ -	\$ 0.94	2.0%	\$ 232.34
PacificSource Community Solutions (Marion Polk)	Northwest	ACA 55-64	130	\$ 108.94	1,000	1,000	1.130	1,000	123.09	\$ 3.50	\$ 19.07	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -	\$ 0.04	\$ 145.50	\$ 145.50	10.2%	\$ -	\$ 0.88	\$ -	\$ 0.88	2.0%	\$ 167.07
PacificSource Community Solutions (Marion Polk)	Northwest	BM 19-34	3	\$ 153.80	1,000	1,000	1.026	1,000	157.81	\$ -	\$ 14.98	\$ 1.02	\$ -	\$ -	\$ -	\$ -	\$ -	\$ 0.54	\$ 181.39	\$ 181.39	10.2%	\$ -	\$ 1.09	\$ -	\$ 1.09	2.0%	\$ 200.00
PacificSource Community Solutions (Marion Polk)	Northwest	BM 35-44	1	\$ 186.16	1,000	1,000	1.050	1,000	195.45	\$ -	\$ 17.03	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -	\$ 0.25	\$ 226.86	\$ 226.86	10.2%	\$ -	\$ 1.05	\$ -	\$ 1.05	2.0%	\$ 258.71
PacificSource Community Solutions (Marion Polk)	Northwest	BM 45-54	0	\$ 148.32	1,000	1,000	1.083	1,000	160.67	\$ -	\$ 19.07	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -	\$ 0.39	\$ 189.29	\$ 189.29	10.2%	\$ -	\$ 0.86	\$ -	\$ 0.86	2.0%	\$ 212.26
PacificSource Community Solutions (Marion Polk)	Northwest	BM 55-64	2	\$ 101.44	1,000	1,000	1.126	1,000	114.27	\$ -	\$ 19.07	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -	\$ 1.18	\$ 137.03	\$ 137.03	10.2%	\$ -	\$ 0.53	\$ -	\$ 0.53	2.0%	\$ 154.26
PacificSource Community Solutions (Marion Polk)	Northwest	YSHCN	12	\$ 148.10	1,000	1,000	1.029	1,000	152.43	\$ -	\$ 14.98	\$ -	\$ 0.17	\$ -	\$ -	\$ -	\$ -	\$ 0.17	\$ 167.84	\$ 167.84	10.2%	\$ -	\$ 0.78	\$ -	\$ 0.78	2.0%	\$ 187.57
PacificSource Community Solutions (Marion Polk)	Northwest	BCCP	-	\$ 95.62	1,000	1,000	1.037	1,000	99.14	\$ -	\$ 25.13	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -	\$ 124.27	\$ 343.85	10.2%	\$ -	\$ -	\$ -	\$ -	2.0%	\$ 390.50
PacificSource Community Solutions (Marion Polk)	Northwest	Maternity	-	\$ -	1,000	1,000	1,000	1,000	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -	10.2%	\$ -	\$ -	\$ -	\$ -	2.0%	\$ -
PacificSource Community Solutions (Marion Polk)	Northwest	Total	6,474	\$ 180.76	1,000	1,000	1.028	1,000	165.45	\$ 0.90	\$ 24.47	\$ 0.36	\$ 0.72	\$ (0.54)	\$ 0.15	\$ -	\$ 0.20	\$ 0.04	\$ 211.75	\$ 211.75	10.2%	\$ -	\$ 0.98	\$ -	\$ 0.98	2.0%	\$ 241.46
Trillium Community Health Plan, Inc. (Tri-County)	Tricounty	PCR	83	\$ 163.16	1,000	1,000	0.948	0.945	\$ 146.16	\$ -	\$ 19.70	\$ -	\$ -	\$ 0.08	\$ -	\$ -	\$ -	\$ 1.14	\$ 167.14	\$ 167.14	10.2%	\$ -	\$ 0.87	\$ -	\$ 0.87	2.0%	\$ 190.71
Trillium Community Health Plan, Inc. (Tri-County)	Tricounty	PWO	42	\$ 143.51	1,000	1,000	0.956	0.945	\$ 129.09	\$ -	\$ 17.77	\$ -	\$ -	\$ 0.08	\$ -	\$ -	\$ -	\$ 3.25	\$ 151.08	\$ 151.08	10.2%	\$ -	\$ 0.79	\$ -	\$ 0.79	2.0%	\$ 172.38
Trillium Community Health Plan, Inc. (Tri-County)	Tricounty	CHLD 00-01	13	\$ 23.21	1,000	1,000	0.925	0.944	\$ 20.25	\$ -	\$ 3.78	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -	\$ 0.06	\$ 24.09	\$ 24.09	10.2%	\$ -	\$ 0.13	\$ -	\$ 0.13	2.0%	\$ 27.49
Trillium Community Health Plan, Inc. (Tri-County)	Tricounty	CHLD 01-05	43	\$ 52.10	1,000	1,000	1.023	0.944	\$ 90.34	\$ -	\$ 29.98	\$ 0.00	\$ -	\$ (0.02)	\$ -	\$ -	\$ -	\$ 0.60	\$ 79.91	\$ 79.91	10.2%	\$ -	\$ 0.42	\$ -	\$ 0.42	2.0%	\$ 91.18
Trillium Community Health Plan, Inc. (Tri-County)	Tricounty	CHLD 06-18	138	\$ 97.78	1,000	1,000	0.964	0.944	\$ 88.95	\$ -	\$ 27.03	\$ 0.15	\$ 2.04	\$ (1.50)	\$ -	\$ -	\$ -	\$ 1.62	\$ 118.95	\$ 118.95	10.2%	\$ -	\$ 0.62	\$ -	\$ 0.62	2.0%	\$ 132.72
Trillium Community Health Plan, Inc. (Tri-County)	Tricounty	DUAL-MEDS	1,165	\$ 126.01	1,000	1,000	0.940	0.945	\$ 111.94	\$ -	\$ 24.33	\$ -	\$ 0.08	\$ -	\$ 0.01	\$ -	\$ -	\$ 0.11	\$ 136.26	\$ 136.26	10.2%	\$ -	\$ 0.71	\$ -	\$ 0.71	2.0%	\$ 155.47
Trillium Community Health Plan, Inc. (Tri-County)	Tricounty	ABAD & OAA	140	\$ 305.40	1,000	1,000	0.990	0.943	\$ 285.19	\$ -	\$ 24.32	\$ 0.08	\$ 0.08	\$ (0.00)	\$ 0.38	\$ -	\$ -	\$ 0.11	\$ 312.88	\$ 312.88	10.2%	\$ -	\$ 1.64	\$ -	\$ 1.64	2.0%	\$ 357.00
Trillium Community Health Plan, Inc. (Tri-County)	Tricounty	FOSTER	73	\$ 503.23	1,000	1,000	0.941	0.943	\$ 493.57	\$ -	\$ 37.71	\$ 2.78	\$ 2.94	\$ (3.94)	\$ 0.35	\$ -	\$ -	\$ 0.27	\$ 542.39	\$ 542.39	10.2%	\$ -	\$ 2.67	\$ -	\$ 2.67	2.0%	\$ 618.98
Trillium Community Health Plan, Inc. (Tri-County)	Tricounty	ACA 35-44	382	\$ 162.57	1,000	1,000	0.966	0.948	\$ 148.89	\$ 4.73	\$ 14.22	\$ -	\$ 0.08	\$ -	\$ 0.31	\$ -	\$ -	\$ 0.91	\$ 169.25	\$ 169.25	10.2%	\$ -	\$ 0.88	\$ -	\$ 0.88	2.0%	\$ 193.11
Trillium Community Health Plan, Inc. (Tri-County)	Tricounty	ACA 45-54	158	\$ 200.42	1,000	1,000	0.989	0.947	\$ 187.75	\$ 5.79	\$ 16.16	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -	\$ 0.91	\$ 211.35	\$ 211.35	10.2%	\$ -	\$ 1.10	\$ -	\$ 1.10	2.0%	\$ 241.15
Trillium Community Health Plan, Inc. (Tri-County)	Tricounty	ACA 55-64	79	\$ 165.08	1,000	1,000	0.966	0.947	\$ 153.44	\$ 4.47	\$ 18.74	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -	\$ 0.91	\$ 175.28	\$ 175.28	10.2%	\$ -	\$ 0.88	\$ -	\$ 0.88	2.0%	\$ 200.00
Trillium Community Health Plan, Inc. (Tri-County)	Tricounty	ACA 55-64	148	\$ 108.94	1,000	1,000	0.985	0.947	\$ 126.41	\$ 2.71	\$ 19.07	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -	\$ 0.40	\$ 139.87	\$ 139.87	10.2%	\$ -	\$ 0.63	\$ -	\$ 0.63	2.0%	\$ 136.89
Trillium Community Health Plan, Inc. (Tri-County)	Tricounty	BM 19-34	-	\$ 153.80	1,000	1,000	0.956	0.942	\$ 138.48	\$ -	\$ 14.22	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -	\$ 0.29	\$ 185.96	\$ 185.96	10.2%	\$ -	\$ -	\$ -	\$ -	2.0%	\$ 211.20
Trillium Community Health Plan, Inc. (Tri-County)	Tricounty	BM 35-44	0	\$ 186.16	1,000	1,000	0.980	0.942	\$ 171.85	\$ -	\$ 15.16	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -	\$ 0.33	\$ 242.07	\$ 242.07	10.2%	\$ -	\$ -	\$ -	\$ -	2.0%	\$ 276.22
Trillium Community Health Plan, Inc. (Tri-County)	Tricounty	BM 45-54	0	\$ 148.32	1,000	1,000	0.984	0.942	\$ 148.45	\$ -	\$ 19.07	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -	\$ 0.88	\$ 189.69	\$ 189.69	10.2%	\$ -	\$ 0.98	\$ -	\$ 0.98	2.0%	\$ 214.25
Trillium Community Health Plan, Inc. (Tri-County)	Tricounty	BM 55-64	0	\$ 101.44	1,000	1,000	0.922	0.940	\$ 67.90	\$ -	\$ 23.32	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -	\$ 1.13	\$ 124.89	\$ 124.89	10.2%	\$ -	\$ 0.65	\$ -	\$ 0.65	2.0%	\$ 142.51
Trillium Community Health Plan, Inc. (Tri-County)	Tricounty	YSHCN	2	\$ 148.10	1,000	1,000	0.958	0.940	\$ 141.95	\$ -	\$ 14.22	\$ -	\$ 0.08	\$ -	\$ -	\$ -	\$ -	\$ 0.91	\$ 157.26	\$ 157.26	10.2%	\$ -	\$ 0.82	\$ -	\$ 0.82	2.0%	\$ 178.43
Trillium Community Health Plan, Inc. (Tri-County)	Tricounty	BCCP	-	\$ 95.62	1,000	1,000	0.999	0.948	\$ 87.23	\$ -	\$ 25.13	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -	\$ 118.02	\$ 312.88	10.2%	\$ -	\$ -	\$ -	\$ -	2.0%	\$ 352.34
Trillium Community Health Plan, Inc. (Tri-County)	Tricounty	Maternity	-	\$ -	1,000	1,000	1,000	1,000	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -	10.2%	\$ -	\$ -	\$ -	\$ -	2.0%	\$ -
Trillium Community Health Plan, Inc. (Tri-County)	Tricounty	Total	2,334	\$ 157.44	1,000	1,000	0.978	0.974	\$ 153.54	\$ 1.37	\$ 21.43	\$ 0.10	\$ 0.24	\$ (0.08)	\$ 0.04	\$ -	\$ 0.72	\$ 0.08	\$ 147.47	\$ 147.47	10.2%	\$ -	\$ 0.80	\$ -	\$ 0.80	2.0%	\$ 179.27
Trillium Community Health Plan, Inc. (Southwest)	Southwest	PCR	219	\$ 163.16	1,000	1,000	0.941	0.941	\$ 153.54	\$ -	\$ 19.70	\$ -	\$ -	\$ 0.19	\$ -	\$ -	\$ -	\$ 1.14	\$ 167.14	\$ 167.14	10.2%	\$ -	\$ 0.87	\$ -	\$ 0.87	2.0%	\$ 190.71
Trillium Community Health Plan, Inc. (Southwest)	Southwest	PWO	109	\$ 143.51	1,000	1,000	0.955	0.940	\$ 137.03	\$ -	\$ 17.14	\$ -	\$ -	\$ 0.12	\$ -	\$ -	\$ -	\$ 3.25	\$ 151.42	\$ 151.42	10.2%	\$ -	\$ 0.79	\$ -	\$ 0.79	2.0%	\$ 172.38
Trillium Community Health Plan, Inc. (Southwest)	Southwest	CHLD 00-01	35	\$ 23.21	1,000	1,000	0.921	0.940	\$ 20.29	\$ -	\$ 3.78	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -	\$ 0.06	\$ 24.22	\$ 24.22	10.2%	\$ -	\$ 0.07	\$ -	\$ 0.07	2.0%	\$ 27.49
Trillium Community Health Plan, Inc. (Southwest)	Southwest	CHLD 01-05	118	\$ 52.10	1,000	1,000	0.873	0.940	\$ 45.48	\$ -	\$ 29.98	\$ 0.00	\$ -	\$ (0.01)	\$ -	\$ -	\$ -	\$ 0.60	\$ 79.91	\$ 79.91	10.2%	\$ -	\$ 0.42	\$ -	\$ 0.42	2.0%	\$ 91.18
Trillium Community Health Plan, Inc. (Southwest)	Southwest	CHLD 06-18	445	\$ 97.78	1,000	1,000	0.946	0.940	\$ 92.53	\$ -	\$ 31.81	\$ 1.29	\$ 4.92	\$ (1.24)	\$ -	\$ -	\$ -	\$ 0.56	\$ 129.94	\$ 129.94	10.2%	\$ -	\$ 0.28	\$ -	\$ 0.28	2.0%	\$ 147.85
Trillium Community Health Plan, Inc. (Southwest)	Southwest	DUAL-MEDS	3,303	\$ 126.01	1,000	1,000	0.939	0.940	\$ 118.94	\$ -	\$ 22.74	\$ -	\$ 0.12	\$ -	\$ 0.02	\$ -	\$ -	\$ 0.45	\$ 141.70	\$ 141.70	10.2%	\$ -	\$ 0.30	\$ -	\$ 0.30	2.0%	\$ 161.23
Trillium Community Health Plan, Inc. (Southwest)	Southwest	ABAD & OAA	590	\$ 305.40	1,000</																						

CY27 CCO Rate Certification
Appendix C: CCOG Certified Rates

CCO	Region	COA	CY27 Caseload Forecast ¹	Statewide Medical PMPM	Regional Risk Adjustment	CCO Risk Adjustment	Regional Factors	Hospital Factor / Tri-County BH Factor Adjustment	PMPM Subtotal	ACA Acuity	Dental PMPM	Child Residential	Handicapping Malocclusion	Gender Affirming Care	Youth with Special Health Care Needs	IMCP PH	IMCP BH	IMCP Dental	PMPM Subtotal	Credibility Blending	NML %	HRSN Home Changes for Health-Related Supports Benefit	PBR PMPM	HRSN Home Changes for Health-Related Supports Admin	PMPM Subtotal	MCO Tax %	Certified Rate PMP/L
Statewide		PCR	2,346	\$ 163.16	1,000	1,000	1,000	1,000	\$ 163.17	\$ -	\$ 19.97	\$ -	\$ 0.11	\$ -	\$ 0.09	\$ -	\$ 2.45	\$ 0.32	\$ 186.10	\$ 186.10	10.3%	\$ -	\$ 1.62	\$ -	\$ 209.04	2.0%	\$ 213.31
Statewide		PWO	1,147	\$ 143.51	1,000	1,000	1,000	1,000	\$ 143.51	\$ -	\$ 17.36	\$ -	\$ 0.11	\$ (0.00)	\$ 0.33	\$ -	\$ 1.11	\$ 0.13	\$ 162.54	\$ 162.54	10.3%	\$ -	\$ 1.39	\$ -	\$ 182.53	2.0%	\$ 186.26
Statewide		CHLD 00-01	437	\$ 23.21	1,000	1,000	1,000	1,000	\$ 23.21	\$ -	\$ 6.44	\$ -	\$ -	\$ -	\$ -	\$ -	\$ 0.00	\$ 0.02	\$ 29.68	\$ 29.68	10.3%	\$ -	\$ 0.25	\$ -	\$ 33.34	2.0%	\$ 34.02
Statewide		CHLD 01-05	1,376	\$ 52.10	1,000	1,000	1,000	1,000	\$ 52.08	\$ -	\$ 33.23	\$ 0.01	\$ -	\$ (0.04)	\$ -	\$ -	\$ 0.06	\$ 0.20	\$ 85.52	\$ 85.52	10.3%	\$ -	\$ 0.72	\$ -	\$ 96.02	2.0%	\$ 97.98
Statewide		CHLD 06-18	5,178	\$ 97.78	1,000	1,000	1,000	1,000	\$ 97.78	\$ -	\$ 30.32	\$ 0.32	\$ 2.99	\$ (1.17)	\$ -	\$ -	\$ 0.64	\$ 0.18	\$ 131.06	\$ 131.06	10.3%	\$ -	\$ 1.12	\$ -	\$ 147.17	2.0%	\$ 150.18
Statewide		DUAL MEDS	29,937	\$ 126.01	1,000	1,000	1,000	1,000	\$ 126.01	\$ -	\$ 23.27	\$ -	\$ 0.19	\$ -	\$ 0.02	\$ -	\$ 0.96	\$ 0.19	\$ 155.56	\$ 155.56	10.3%	\$ -	\$ 1.29	\$ -	\$ 169.04	2.0%	\$ 172.49
Statewide		ABAD & OAA	5,131	\$ 305.40	1,000	1,000	1,000	1,000	\$ 305.38	\$ -	\$ 25.93	\$ 0.19	\$ 0.11	\$ (0.37)	\$ 0.31	\$ -	\$ 2.82	\$ 0.36	\$ 334.72	\$ 334.72	10.3%	\$ -	\$ 2.80	\$ -	\$ 375.76	2.0%	\$ 383.42
Statewide		FOSTER	7,662	\$ 503.23	1,000	1,000	0.998	1,000	\$ 502.30	\$ -	\$ 36.14	\$ 7.16	\$ 3.06	\$ (2.28)	\$ 0.12	\$ -	\$ 2.71	\$ 0.52	\$ 549.74	\$ 549.74	10.3%	\$ -	\$ 4.74	\$ -	\$ 617.68	2.0%	\$ 630.29
Statewide		ACA 19-34	5,987	\$ 162.57	1,000	1,000	1,000	1,000	\$ 162.59	\$ 5.16	\$ 14.67	\$ -	\$ 0.10	\$ -	\$ 0.74	\$ -	\$ 1.11	\$ 0.16	\$ 184.53	\$ 184.53	10.2%	\$ -	\$ 1.56	\$ -	\$ 207.08	2.0%	\$ 211.30
Statewide		ACA 35-44	2,862	\$ 200.42	1,000	1,000	0.999	1,000	\$ 200.27	\$ 6.18	\$ 16.67	\$ -	\$ -	\$ -	\$ -	\$ -	\$ 1.93	\$ 0.21	\$ 225.26	\$ 225.26	10.2%	\$ -	\$ 1.95	\$ -	\$ 252.83	2.0%	\$ 257.99
Statewide		ACA 45-54	1,504	\$ 165.08	1,000	1,000	0.999	1,000	\$ 164.92	\$ 4.88	\$ 18.94	\$ -	\$ -	\$ -	\$ -	\$ -	\$ 1.63	\$ 0.19	\$ 190.55	\$ 190.55	10.2%	\$ -	\$ 1.66	\$ -	\$ 213.97	2.0%	\$ 218.34
Statewide		ACA 55-64	1,455	\$ 108.94	1,000	1,000	1,000	1,000	\$ 108.94	\$ 3.10	\$ 20.36	\$ -	\$ -	\$ -	\$ -	\$ -	\$ 1.07	\$ 0.33	\$ 133.79	\$ 133.79	10.2%	\$ -	\$ 1.18	\$ -	\$ 150.33	2.0%	\$ 153.39
Statewide		BBM 19-34	-	\$ -	-	-	-	-	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -	0.0%	\$ -	\$ -	\$ -	\$ -	0.0%	\$ -
Statewide		BBM 35-44	7	\$ 186.16	1,000	1,000	1,000	1,000	\$ 186.16	\$ -	\$ 16.74	\$ -	\$ -	\$ -	\$ -	\$ -	\$ 64.66	\$ 7.96	\$ 275.52	\$ 275.52	10.3%	\$ -	\$ 2.45	\$ -	\$ 309.75	2.0%	\$ 316.07
Statewide		BBM 45-54	3	\$ 148.32	1,000	1,000	1,000	1,000	\$ 148.32	\$ -	\$ 18.99	\$ -	\$ -	\$ -	\$ -	\$ -	\$ 66.12	\$ 8.55	\$ 241.99	\$ 241.99	10.6%	\$ -	\$ 2.24	\$ -	\$ 272.85	2.0%	\$ 278.42
Statewide		BBM 55-64	17	\$ 101.44	1,000	1,000	1,000	1,000	\$ 101.44	\$ -	\$ 20.22	\$ -	\$ -	\$ -	\$ -	\$ -	\$ 27.34	\$ 18.71	\$ 177.71	\$ 177.71	10.5%	\$ -	\$ 1.64	\$ -	\$ 200.15	2.0%	\$ 204.24
Statewide		YSHCN	101	\$ 148.10	1,000	1,000	1,000	1,000	\$ 148.10	\$ -	\$ 14.72	\$ -	\$ 0.11	\$ -	\$ -	\$ -	\$ 1.12	\$ 0.17	\$ 164.22	\$ 164.22	10.3%	\$ -	\$ 1.44	\$ -	\$ 184.43	2.0%	\$ 188.20
Statewide		BCCP	-	\$ -	-	-	-	-	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -	0.0%	\$ -	\$ -	\$ -	\$ -	0.0%	\$ -
Statewide		Maternity	-	\$ -	-	-	-	-	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -	0.0%	\$ -	\$ -	\$ -	\$ -	0.0%	\$ -
Statewide	Statewide	Total	63,689	\$ 189.92	1,000	1,000	0.999	1,000	\$ 189.80	\$ 0.91	\$ 24.23	\$ 0.90	\$ 0.68	\$ (0.40)	\$ 0.12	\$ -	\$ 1.42	\$ 0.25	\$ 217.93	\$ 217.93	10.3%	\$ -	\$ 1.86	\$ -	\$ 244.74	2.0%	\$ 248.73
General Note: - This appendix should be reviewed in conjunction with the accompanying rate certification narrative.																											
Footnotes: 1. Reflects CCOG projected enrollment. Values for maternity represent 2025 delivery counts. 2. Values for maternity are CCO-specific, not Statewide figures. 3. Marsh is certifying the COA-specific rates, not the Statewide aggregate values.																											

Appendix D: Regional Factor Development

CY27 CCO Rate Certification
Appendix D: Regional Factor Development

Region	COA	CY27 Regional Factors				
		Raw PMPM Relativity	Risk Score Relativity ¹	Regional Factor Before COA Blending	Blended Regional Factor ²	Normalized Factors ³
Eastern	PCR	1.161	1.002	1.158	1.158	1.159
Eastern	PWO	1.084	1.000	1.084	1.084	1.085
Eastern	CHILD 00-01	1.121	1.000	1.121	1.121	1.121
Eastern	CHILD 01-05	1.118	1.042	1.073	1.073	1.073
Eastern	CHILD 06-18	1.143	1.036	1.104	1.104	1.104
Eastern	DUAL-MEDS	1.255	1.000	1.255	1.255	1.257
Eastern	ABAD & OAA	1.116	0.971	1.149	1.147	1.147
Eastern	FOSTER	0.924	0.969	0.953	0.953	0.952
Eastern	ACA 19-34	1.195	1.020	1.172	1.171	1.172
Eastern	ACA 35-44	1.121	1.013	1.106	1.106	1.105
Eastern	ACA 45-54	1.184	1.014	1.168	1.168	1.167
Eastern	ACA 55-64	1.120	0.962	1.165	1.165	1.165
Eastern	BBM 19-34	1.210	1.000	1.210	1.171	1.159
Eastern	BBM 35-44	1.097	1.000	1.097	1.106	1.096
Eastern	BBM 45-54	1.185	1.000	1.185	1.168	1.165
Eastern	BBM 55-64	1.093	1.000	1.093	1.165	1.162
Eastern	YSHCN	1.015	1.000	1.015	1.171	1.162
Eastern	BCCP	0.370	1.000	0.370	1.147	1.147
Eastern	Maternity	1.000	1.000	1.000	1.000	1.000
Northwest	PCR	1.068	1.005	1.063	1.063	1.063
Northwest	PWO	1.062	1.000	1.062	1.062	1.063
Northwest	CHILD 00-01	0.910	1.000	0.910	0.910	0.910
Northwest	CHILD 01-05	1.079	1.025	1.052	1.052	1.052
Northwest	CHILD 06-18	1.011	0.967	1.045	1.045	1.045
Northwest	DUAL-MEDS	1.059	1.000	1.059	1.059	1.060
Northwest	ABAD & OAA	1.020	0.986	1.035	1.037	1.037
Northwest	FOSTER	0.876	0.918	0.954	0.954	0.952
Northwest	ACA 19-34	0.992	0.957	1.037	1.037	1.037
Northwest	ACA 35-44	1.093	1.031	1.060	1.060	1.059
Northwest	ACA 45-54	1.123	1.034	1.086	1.086	1.085
Northwest	ACA 55-64	1.150	1.018	1.129	1.129	1.130
Northwest	BBM 19-34	0.963	1.000	0.963	1.037	1.026
Northwest	BBM 35-44	1.168	1.000	1.168	1.060	1.050
Northwest	BBM 45-54	1.076	1.000	1.076	1.086	1.083
Northwest	BBM 55-64	1.149	1.000	1.149	1.129	1.126
Northwest	YSHCN	1.169	1.000	1.169	1.037	1.029
Northwest	BCCP	1.974	1.000	1.974	1.037	1.037
Northwest	Maternity	1.000	1.000	1.000	1.000	1.000
Southwest	PCR	0.969	1.031	0.940	0.940	0.941
Southwest	PWO	0.954	1.000	0.954	0.954	0.955
Southwest	CHILD 00-01	1.133	1.000	1.133	1.133	1.132
Southwest	CHILD 01-05	0.847	0.970	0.873	0.873	0.873
Southwest	CHILD 06-18	0.981	1.037	0.946	0.946	0.946
Southwest	DUAL-MEDS	0.938	1.000	0.938	0.938	0.939
Southwest	ABAD & OAA	0.902	0.969	0.932	0.932	0.932
Southwest	FOSTER	0.956	0.966	0.989	0.989	0.987
Southwest	ACA 19-34	0.976	1.034	0.944	0.945	0.945
Southwest	ACA 35-44	0.925	0.995	0.929	0.929	0.928
Southwest	ACA 45-54	0.915	1.004	0.911	0.911	0.910
Southwest	ACA 55-64	0.950	1.026	0.926	0.926	0.927
Southwest	BBM 19-34	0.959	1.000	0.959	0.945	0.935
Southwest	BBM 35-44	0.988	1.000	0.988	0.929	0.920
Southwest	BBM 45-54	0.947	1.000	0.947	0.911	0.909
Southwest	BBM 55-64	0.933	1.000	0.933	0.926	0.924
Southwest	YSHCN	1.107	1.000	1.107	0.945	0.938
Southwest	BCCP	0.989	1.000	0.989	0.932	0.932
Southwest	Maternity	1.000	1.000	1.000	1.000	1.000
Tricounty	PCR	0.920	0.971	0.948	0.948	0.948
Tricounty	PWO	0.956	1.000	0.956	0.956	0.956
Tricounty	CHILD 00-01	0.925	1.000	0.925	0.925	0.925
Tricounty	CHILD 01-05	1.006	0.982	1.024	1.024	1.023
Tricounty	CHILD 06-18	0.949	0.984	0.964	0.964	0.964
Tricounty	DUAL-MEDS	0.939	1.000	0.939	0.939	0.940
Tricounty	ABAD & OAA	1.034	1.043	0.991	0.990	0.990
Tricounty	FOSTER	1.172	1.099	1.066	1.066	1.064
Tricounty	ACA 19-34	0.963	0.997	0.966	0.966	0.966
Tricounty	ACA 35-44	0.973	0.983	0.990	0.989	0.989
Tricounty	ACA 45-54	0.940	0.972	0.967	0.967	0.966
Tricounty	ACA 55-64	0.909	0.983	0.925	0.925	0.925
Tricounty	BBM 19-34	0.950	1.000	0.950	0.966	0.956
Tricounty	BBM 35-44	0.842	1.000	0.842	0.989	0.980
Tricounty	BBM 45-54	0.869	1.000	0.869	0.967	0.964
Tricounty	BBM 55-64	0.896	1.000	0.896	0.925	0.922
Tricounty	YSHCN	0.789	1.000	0.789	0.966	0.958
Tricounty	BCCP	0.620	1.000	0.620	0.990	0.990
Tricounty	Maternity	1.000	1.000	1.000	1.000	1.000

General Notes:

- Calculations are based on 2025 data.
- DRG hospital costs are repriced to 80% of Medicare.

Footnotes:

1. Risk scores are concurrent 2025 CDPS+Rx version 7.3; CHILD 00-01, DUAL-MEDS, YSHCN, and BCCP are not risk adjusted.
2. Regional factors are blended for ABAD & OAA/BCCP and ACA/BBM populations; factors are normalized based on CY 2025 eligibility and claims.
3. Regional factors are further normalized based on projected CY 2027 enrollment and costs to ensure budget neutrality on 2027 basis.

Appendix E: Dental Benefit Cost PMPM Build-up

CY27 CCO Rate Certification

Appendix E: Dental Buildup

				Rate Buildup						
Region	COA	Dental COS	CY27 CCOA Caseload Forecast	2025 Base Data		Annual Trend			Rate PMPM	ABAD/BCCP Blend
				MMs	Adj. Base PMPM	Util/1,000	Unit Cost	PMPM		
Tricounty	PCR	Diagnostic Services	358,102	369,995	\$ 4.57	4.5%	1.5%	6.1%	\$ 5.15	
Tricounty	PCR	General Services	358,102	369,995	\$ 0.50	4.5%	1.5%	6.1%	\$ 0.56	
Tricounty	PCR	Oral and Maxillofacial Surgery	358,102	369,995	\$ 3.23	2.0%	2.0%	4.0%	\$ 3.49	
Tricounty	PCR	Other Misc.	358,102	369,995	\$ 0.09	4.5%	1.5%	6.1%	\$ 0.11	
Tricounty	PCR	Periodontics	358,102	369,995	\$ 1.95	2.0%	2.0%	4.0%	\$ 2.12	
Tricounty	PCR	Preventative	358,102	369,995	\$ 1.93	4.5%	1.5%	6.1%	\$ 2.17	
Tricounty	PCR	Restorative	358,102	369,995	\$ 3.96	1.5%	1.0%	2.5%	\$ 4.16	
Tricounty	PCR	Endodontics	358,102	369,995	\$ 0.56	2.0%	2.0%	4.0%	\$ 0.61	
Tricounty	PCR	Maxillofacial Prosthetics	358,102	369,995	\$ -	2.0%	2.0%	4.0%	\$ -	
Tricounty	PCR	Prosthodontics	358,102	369,995	\$ 1.16	2.0%	2.0%	4.0%	\$ 1.26	
Tricounty	PCR	Prosthodontics-Fixed	358,102	369,995	\$ 0.00	2.0%	2.0%	4.0%	\$ 0.00	
Tricounty	PCR	Test and Examination	358,102	369,995	\$ 0.07	4.5%	1.5%	6.1%	\$ 0.08	
Tricounty	PCR	Implant Services	358,102	369,995	\$ -	2.0%	2.0%	4.0%	\$ -	
Tricounty	PWO	Diagnostic Services	60,678	66,678	\$ 4.60	4.5%	1.5%	6.1%	\$ 5.18	
Tricounty	PWO	General Services	60,678	66,678	\$ 0.35	4.5%	1.5%	6.1%	\$ 0.40	
Tricounty	PWO	Oral and Maxillofacial Surgery	60,678	66,678	\$ 1.91	2.0%	2.0%	4.0%	\$ 2.06	
Tricounty	PWO	Other Misc.	60,678	66,678	\$ 0.07	4.5%	1.5%	6.1%	\$ 0.08	
Tricounty	PWO	Periodontics	60,678	66,678	\$ 1.88	2.0%	2.0%	4.0%	\$ 2.04	
Tricounty	PWO	Preventative	60,678	66,678	\$ 2.40	4.5%	1.5%	6.1%	\$ 2.70	
Tricounty	PWO	Restorative	60,678	66,678	\$ 3.98	1.5%	1.0%	2.5%	\$ 4.18	
Tricounty	PWO	Endodontics	60,678	66,678	\$ 0.79	2.0%	2.0%	4.0%	\$ 0.85	
Tricounty	PWO	Maxillofacial Prosthetics	60,678	66,678	\$ -	2.0%	2.0%	4.0%	\$ -	
Tricounty	PWO	Prosthodontics	60,678	66,678	\$ 0.17	2.0%	2.0%	4.0%	\$ 0.19	
Tricounty	PWO	Prosthodontics-Fixed	60,678	66,678	\$ 0.00	2.0%	2.0%	4.0%	\$ 0.00	
Tricounty	PWO	Test and Examination	60,678	66,678	\$ 0.07	4.5%	1.5%	6.1%	\$ 0.08	
Tricounty	PWO	Implant Services	60,678	66,678	\$ -	2.0%	2.0%	4.0%	\$ -	
Tricounty	CHILD 00-01	Diagnostic Services	97,374	97,212	\$ 0.60	4.5%	1.5%	6.1%	\$ 0.67	
Tricounty	CHILD 00-01	General Services	97,374	97,212	\$ 0.01	4.5%	1.5%	6.1%	\$ 0.01	
Tricounty	CHILD 00-01	Oral and Maxillofacial Surgery	97,374	97,212	\$ 0.03	2.0%	1.5%	3.5%	\$ 0.03	
Tricounty	CHILD 00-01	Other Misc.	97,374	97,212	\$ 2.20	4.5%	1.5%	6.1%	\$ 2.48	
Tricounty	CHILD 00-01	Periodontics	97,374	97,212	\$ -	2.0%	1.5%	3.5%	\$ -	
Tricounty	CHILD 00-01	Preventative	97,374	97,212	\$ 0.52	4.5%	1.5%	6.1%	\$ 0.59	
Tricounty	CHILD 00-01	Restorative	97,374	97,212	\$ -	1.5%	1.5%	3.0%	\$ -	
Tricounty	CHILD 00-01	Endodontics	97,374	97,212	\$ -	2.0%	1.5%	3.5%	\$ -	
Tricounty	CHILD 00-01	Maxillofacial Prosthetics	97,374	97,212	\$ -	2.0%	1.5%	3.5%	\$ -	
Tricounty	CHILD 00-01	Prosthodontics	97,374	97,212	\$ -	2.0%	1.5%	3.5%	\$ -	
Tricounty	CHILD 00-01	Prosthodontics-Fixed	97,374	97,212	\$ -	2.0%	1.5%	3.5%	\$ -	
Tricounty	CHILD 00-01	Test and Examination	97,374	97,212	\$ -	4.5%	1.5%	6.1%	\$ -	
Tricounty	CHILD 00-01	Implant Services	97,374	97,212	\$ -	2.0%	1.5%	3.5%	\$ -	

CY27 CCO Rate Certification

Appendix E: Dental Buildup

				Rate Buildup						
Region	COA	Dental COS	CY27 CCOA Caseload Forecast	2025 Base Data		Annual Trend			Rate PMPM	ABAD/BCCP Blend
				MMs	Adj. Base PMPM	Util/1,000	Unit Cost	PMPM		
Tricounty	CHILD 01-05	Diagnostic Services	454,253	458,665	\$ 5.66	4.5%	1.5%	6.1%	\$ 6.37	
Tricounty	CHILD 01-05	General Services	454,253	458,665	\$ 0.66	4.5%	1.5%	6.1%	\$ 0.74	
Tricounty	CHILD 01-05	Oral and Maxillofacial Surgery	454,253	458,665	\$ 1.45	2.0%	1.5%	3.5%	\$ 1.55	
Tricounty	CHILD 01-05	Other Misc.	454,253	458,665	\$ 2.51	4.5%	1.5%	6.1%	\$ 2.83	
Tricounty	CHILD 01-05	Periodontics	454,253	458,665	\$ -	2.0%	1.5%	3.5%	\$ -	
Tricounty	CHILD 01-05	Preventative	454,253	458,665	\$ 6.88	4.5%	1.5%	6.1%	\$ 7.74	
Tricounty	CHILD 01-05	Restorative	454,253	458,665	\$ 8.51	1.5%	1.5%	3.0%	\$ 9.04	
Tricounty	CHILD 01-05	Endodontics	454,253	458,665	\$ 0.67	2.0%	1.5%	3.5%	\$ 0.72	
Tricounty	CHILD 01-05	Maxillofacial Prosthetics	454,253	458,665	\$ -	2.0%	1.5%	3.5%	\$ -	
Tricounty	CHILD 01-05	Prosthodontics	454,253	458,665	\$ -	2.0%	1.5%	3.5%	\$ -	
Tricounty	CHILD 01-05	Prosthodontics-Fixed	454,253	458,665	\$ -	2.0%	1.5%	3.5%	\$ -	
Tricounty	CHILD 01-05	Test and Examination	454,253	458,665	\$ 0.00	4.5%	1.5%	6.1%	\$ 0.00	
Tricounty	CHILD 01-05	Implant Services	454,253	458,665	\$ -	2.0%	1.5%	3.5%	\$ -	
Tricounty	CHILD 06-18	Diagnostic Services	1,176,812	1,310,708	\$ 6.99	4.5%	1.5%	6.1%	\$ 7.87	
Tricounty	CHILD 06-18	General Services	1,176,812	1,310,708	\$ 0.76	4.5%	1.5%	6.1%	\$ 0.85	
Tricounty	CHILD 06-18	Oral and Maxillofacial Surgery	1,176,812	1,310,708	\$ 1.79	2.0%	1.5%	3.5%	\$ 1.92	
Tricounty	CHILD 06-18	Other Misc.	1,176,812	1,310,708	\$ 0.74	4.5%	1.5%	6.1%	\$ 0.83	
Tricounty	CHILD 06-18	Periodontics	1,176,812	1,310,708	\$ 0.09	2.0%	1.5%	3.5%	\$ 0.10	
Tricounty	CHILD 06-18	Preventative	1,176,812	1,310,708	\$ 8.08	4.5%	1.5%	6.1%	\$ 9.09	
Tricounty	CHILD 06-18	Restorative	1,176,812	1,310,708	\$ 5.92	1.5%	1.5%	3.0%	\$ 6.28	
Tricounty	CHILD 06-18	Endodontics	1,176,812	1,310,708	\$ 0.56	2.0%	1.5%	3.5%	\$ 0.60	
Tricounty	CHILD 06-18	Maxillofacial Prosthetics	1,176,812	1,310,708	\$ 0.00	2.0%	1.5%	3.5%	\$ 0.00	
Tricounty	CHILD 06-18	Prosthodontics	1,176,812	1,310,708	\$ 0.01	2.0%	1.5%	3.5%	\$ 0.01	
Tricounty	CHILD 06-18	Prosthodontics-Fixed	1,176,812	1,310,708	\$ 0.00	2.0%	1.5%	3.5%	\$ 0.00	
Tricounty	CHILD 06-18	Test and Examination	1,176,812	1,310,708	\$ 0.07	4.5%	1.5%	6.1%	\$ 0.08	
Tricounty	CHILD 06-18	Implant Services	1,176,812	1,310,708	\$ -	2.0%	1.5%	3.5%	\$ -	
Tricounty	DUAL-MEDS	Diagnostic Services	358,523	430,947	\$ 4.50	4.5%	1.5%	6.1%	\$ 5.07	
Tricounty	DUAL-MEDS	General Services	358,523	430,947	\$ 1.03	4.5%	1.5%	6.1%	\$ 1.16	
Tricounty	DUAL-MEDS	Oral and Maxillofacial Surgery	358,523	430,947	\$ 3.89	1.5%	2.5%	4.0%	\$ 4.21	
Tricounty	DUAL-MEDS	Other Misc.	358,523	430,947	\$ 0.07	4.5%	1.5%	6.1%	\$ 0.07	
Tricounty	DUAL-MEDS	Periodontics	358,523	430,947	\$ 2.73	1.5%	2.5%	4.0%	\$ 2.95	
Tricounty	DUAL-MEDS	Preventative	358,523	430,947	\$ 1.91	4.5%	1.5%	6.1%	\$ 2.14	
Tricounty	DUAL-MEDS	Restorative	358,523	430,947	\$ 3.55	3.0%	1.5%	4.5%	\$ 3.88	
Tricounty	DUAL-MEDS	Endodontics	358,523	430,947	\$ 0.38	1.5%	2.5%	4.0%	\$ 0.42	
Tricounty	DUAL-MEDS	Maxillofacial Prosthetics	358,523	430,947	\$ -	1.5%	2.5%	4.0%	\$ -	
Tricounty	DUAL-MEDS	Prosthodontics	358,523	430,947	\$ 3.87	1.5%	2.5%	4.0%	\$ 4.19	
Tricounty	DUAL-MEDS	Prosthodontics-Fixed	358,523	430,947	\$ 0.00	1.5%	2.5%	4.0%	\$ 0.00	
Tricounty	DUAL-MEDS	Test and Examination	358,523	430,947	\$ 0.03	4.5%	1.5%	6.1%	\$ 0.03	
Tricounty	DUAL-MEDS	Implant Services	358,523	430,947	\$ 0.00	1.5%	2.5%	4.0%	\$ 0.00	

CY27 CCO Rate Certification
Appendix E: Dental Buildup

Region	COA	Dental COS	CY27 CCOA Caseload Forecast	Rate Buildup						ABAD/BCCP Blend
				2025 Base Data		Annual Trend			Rate PMPM	
				MMs	Adj. Base PMPM	Util/1,000	Unit Cost	PMPM		
Tricounty	ABAD & OAA	Diagnostic Services	235,255	250,453	\$ 4.81	4.5%	1.5%	6.1%	\$ 5.42	
Tricounty	ABAD & OAA	General Services	235,255	250,453	\$ 0.83	4.5%	1.5%	6.1%	\$ 0.94	
Tricounty	ABAD & OAA	Oral and Maxillofacial Surgery	235,255	250,453	\$ 4.00	1.5%	2.5%	4.0%	\$ 4.33	
Tricounty	ABAD & OAA	Other Misc.	235,255	250,453	\$ 0.20	4.5%	1.5%	6.1%	\$ 0.23	
Tricounty	ABAD & OAA	Periodontics	235,255	250,453	\$ 1.89	1.5%	2.5%	4.0%	\$ 2.05	
Tricounty	ABAD & OAA	Preventative	235,255	250,453	\$ 2.71	4.5%	1.5%	6.1%	\$ 3.05	
Tricounty	ABAD & OAA	Restorative	235,255	250,453	\$ 4.42	3.0%	1.5%	4.5%	\$ 4.83	
Tricounty	ABAD & OAA	Endodontics	235,255	250,453	\$ 0.42	1.5%	2.5%	4.0%	\$ 0.46	
Tricounty	ABAD & OAA	Maxillofacial Prosthetics	235,255	250,453	\$ -	1.5%	2.5%	4.0%	\$ -	
Tricounty	ABAD & OAA	Prosthodontics	235,255	250,453	\$ 2.75	1.5%	2.5%	4.0%	\$ 2.97	
Tricounty	ABAD & OAA	Prosthodontics-Fixed	235,255	250,453	\$ 0.00	1.5%	2.5%	4.0%	\$ 0.00	
Tricounty	ABAD & OAA	Test and Examination	235,255	250,453	\$ 0.05	4.5%	1.5%	6.1%	\$ 0.05	
Tricounty	ABAD & OAA	Implant Services	235,255	250,453	\$ -	1.5%	2.5%	4.0%	\$ -	
Tricounty	FOSTER	Diagnostic Services	46,162	54,672	\$ 7.53	4.5%	1.5%	6.1%	\$ 8.47	
Tricounty	FOSTER	General Services	46,162	54,672	\$ 0.89	4.5%	1.5%	6.1%	\$ 1.00	
Tricounty	FOSTER	Oral and Maxillofacial Surgery	46,162	54,672	\$ 2.40	1.5%	2.5%	4.0%	\$ 2.60	
Tricounty	FOSTER	Other Misc.	46,162	54,672	\$ 1.22	4.5%	1.5%	6.1%	\$ 1.37	
Tricounty	FOSTER	Periodontics	46,162	54,672	\$ 0.23	1.5%	2.5%	4.0%	\$ 0.25	
Tricounty	FOSTER	Preventative	46,162	54,672	\$ 8.01	4.5%	1.5%	6.1%	\$ 9.01	
Tricounty	FOSTER	Restorative	46,162	54,672	\$ 8.08	3.0%	1.5%	4.5%	\$ 8.84	
Tricounty	FOSTER	Endodontics	46,162	54,672	\$ 0.79	1.5%	2.5%	4.0%	\$ 0.85	
Tricounty	FOSTER	Maxillofacial Prosthetics	46,162	54,672	\$ -	1.5%	2.5%	4.0%	\$ -	
Tricounty	FOSTER	Prosthodontics	46,162	54,672	\$ 0.02	1.5%	2.5%	4.0%	\$ 0.02	
Tricounty	FOSTER	Prosthodontics-Fixed	46,162	54,672	\$ -	1.5%	2.5%	4.0%	\$ -	
Tricounty	FOSTER	Test and Examination	46,162	54,672	\$ 0.09	4.5%	1.5%	6.1%	\$ 0.10	
Tricounty	FOSTER	Implant Services	46,162	54,672	\$ -	1.5%	2.5%	4.0%	\$ -	
Tricounty	ACA 19-34	Diagnostic Services	1,063,182	1,245,884	\$ 3.48	4.5%	1.5%	6.1%	\$ 3.92	
Tricounty	ACA 19-34	General Services	1,063,182	1,245,884	\$ 0.42	4.5%	1.5%	6.1%	\$ 0.48	
Tricounty	ACA 19-34	Oral and Maxillofacial Surgery	1,063,182	1,245,884	\$ 1.96	2.0%	2.0%	4.0%	\$ 2.12	
Tricounty	ACA 19-34	Other Misc.	1,063,182	1,245,884	\$ 0.09	4.5%	1.5%	6.1%	\$ 0.10	
Tricounty	ACA 19-34	Periodontics	1,063,182	1,245,884	\$ 1.16	2.0%	2.0%	4.0%	\$ 1.26	
Tricounty	ACA 19-34	Preventative	1,063,182	1,245,884	\$ 2.00	4.5%	1.5%	6.1%	\$ 2.25	
Tricounty	ACA 19-34	Restorative	1,063,182	1,245,884	\$ 3.17	1.5%	1.0%	2.5%	\$ 3.33	
Tricounty	ACA 19-34	Endodontics	1,063,182	1,245,884	\$ 0.43	2.0%	2.0%	4.0%	\$ 0.47	
Tricounty	ACA 19-34	Maxillofacial Prosthetics	1,063,182	1,245,884	\$ -	2.0%	2.0%	4.0%	\$ -	
Tricounty	ACA 19-34	Prosthodontics	1,063,182	1,245,884	\$ 0.18	2.0%	2.0%	4.0%	\$ 0.19	
Tricounty	ACA 19-34	Prosthodontics-Fixed	1,063,182	1,245,884	\$ 0.00	2.0%	2.0%	4.0%	\$ 0.00	
Tricounty	ACA 19-34	Test and Examination	1,063,182	1,245,884	\$ 0.09	4.5%	1.5%	6.1%	\$ 0.10	
Tricounty	ACA 19-34	Implant Services	1,063,182	1,245,884	\$ -	2.0%	2.0%	4.0%	\$ -	

CY27 CCO Rate Certification

Appendix E: Dental Buildup

				Rate Buildup						
Region	COA	Dental COS	CY27 CCOA Caseload Forecast	2025 Base Data		Annual Trend			Rate PMPM	ABAD/BCCP Blend
				MMs	Adj. Base PMPM	Util/1,000	Unit Cost	PMPM		
Tricounty	ACA 35-44	Diagnostic Services	570,154	629,434	\$ 3.64	4.5%	1.5%	6.1%	\$ 4.10	
Tricounty	ACA 35-44	General Services	570,154	629,434	\$ 0.34	4.5%	1.5%	6.1%	\$ 0.38	
Tricounty	ACA 35-44	Oral and Maxillofacial Surgery	570,154	629,434	\$ 2.39	2.0%	2.0%	4.0%	\$ 2.58	
Tricounty	ACA 35-44	Other Misc.	570,154	629,434	\$ 0.07	4.5%	1.5%	6.1%	\$ 0.08	
Tricounty	ACA 35-44	Periodontics	570,154	629,434	\$ 2.10	2.0%	2.0%	4.0%	\$ 2.28	
Tricounty	ACA 35-44	Preventative	570,154	629,434	\$ 1.66	4.5%	1.5%	6.1%	\$ 1.87	
Tricounty	ACA 35-44	Restorative	570,154	629,434	\$ 3.29	1.5%	1.0%	2.5%	\$ 3.45	
Tricounty	ACA 35-44	Endodontics	570,154	629,434	\$ 0.43	2.0%	2.0%	4.0%	\$ 0.46	
Tricounty	ACA 35-44	Maxillofacial Prosthetics	570,154	629,434	\$ -	2.0%	2.0%	4.0%	\$ -	
Tricounty	ACA 35-44	Prosthodontics	570,154	629,434	\$ 0.84	2.0%	2.0%	4.0%	\$ 0.91	
Tricounty	ACA 35-44	Prosthodontics-Fixed	570,154	629,434	\$ 0.00	2.0%	2.0%	4.0%	\$ 0.00	
Tricounty	ACA 35-44	Test and Examination	570,154	629,434	\$ 0.04	4.5%	1.5%	6.1%	\$ 0.04	
Tricounty	ACA 35-44	Implant Services	570,154	629,434	\$ -	2.0%	2.0%	4.0%	\$ -	
Tricounty	ACA 45-54	Diagnostic Services	384,809	434,924	\$ 4.03	4.5%	1.5%	6.1%	\$ 4.53	
Tricounty	ACA 45-54	General Services	384,809	434,924	\$ 0.33	4.5%	1.5%	6.1%	\$ 0.37	
Tricounty	ACA 45-54	Oral and Maxillofacial Surgery	384,809	434,924	\$ 2.97	2.0%	2.0%	4.0%	\$ 3.21	
Tricounty	ACA 45-54	Other Misc.	384,809	434,924	\$ 0.08	4.5%	1.5%	6.1%	\$ 0.09	
Tricounty	ACA 45-54	Periodontics	384,809	434,924	\$ 2.54	2.0%	2.0%	4.0%	\$ 2.75	
Tricounty	ACA 45-54	Preventative	384,809	434,924	\$ 1.75	4.5%	1.5%	6.1%	\$ 1.96	
Tricounty	ACA 45-54	Restorative	384,809	434,924	\$ 3.37	1.5%	1.0%	2.5%	\$ 3.54	
Tricounty	ACA 45-54	Endodontics	384,809	434,924	\$ 0.43	2.0%	2.0%	4.0%	\$ 0.47	
Tricounty	ACA 45-54	Maxillofacial Prosthetics	384,809	434,924	\$ -	2.0%	2.0%	4.0%	\$ -	
Tricounty	ACA 45-54	Prosthodontics	384,809	434,924	\$ 1.65	2.0%	2.0%	4.0%	\$ 1.78	
Tricounty	ACA 45-54	Prosthodontics-Fixed	384,809	434,924	\$ 0.00	2.0%	2.0%	4.0%	\$ 0.00	
Tricounty	ACA 45-54	Test and Examination	384,809	434,924	\$ 0.03	4.5%	1.5%	6.1%	\$ 0.04	
Tricounty	ACA 45-54	Implant Services	384,809	434,924	\$ 0.00	2.0%	2.0%	4.0%	\$ 0.00	
Tricounty	ACA 55-64	Diagnostic Services	332,069	377,993	\$ 4.31	4.5%	1.5%	6.1%	\$ 4.85	
Tricounty	ACA 55-64	General Services	332,069	377,993	\$ 0.39	4.5%	1.5%	6.1%	\$ 0.44	
Tricounty	ACA 55-64	Oral and Maxillofacial Surgery	332,069	377,993	\$ 3.43	2.0%	2.0%	4.0%	\$ 3.71	
Tricounty	ACA 55-64	Other Misc.	332,069	377,993	\$ 0.08	4.5%	1.5%	6.1%	\$ 0.09	
Tricounty	ACA 55-64	Periodontics	332,069	377,993	\$ 2.94	2.0%	2.0%	4.0%	\$ 3.18	
Tricounty	ACA 55-64	Preventative	332,069	377,993	\$ 1.80	4.5%	1.5%	6.1%	\$ 2.02	
Tricounty	ACA 55-64	Restorative	332,069	377,993	\$ 3.27	1.5%	1.0%	2.5%	\$ 3.44	
Tricounty	ACA 55-64	Endodontics	332,069	377,993	\$ 0.40	2.0%	2.0%	4.0%	\$ 0.43	
Tricounty	ACA 55-64	Maxillofacial Prosthetics	332,069	377,993	\$ 0.00	2.0%	2.0%	4.0%	\$ 0.00	
Tricounty	ACA 55-64	Prosthodontics	332,069	377,993	\$ 2.87	2.0%	2.0%	4.0%	\$ 3.11	
Tricounty	ACA 55-64	Prosthodontics-Fixed	332,069	377,993	\$ 0.00	2.0%	2.0%	4.0%	\$ 0.00	
Tricounty	ACA 55-64	Test and Examination	332,069	377,993	\$ 0.04	4.5%	1.5%	6.1%	\$ 0.04	
Tricounty	ACA 55-64	Implant Services	332,069	377,993	\$ 0.00	2.0%	2.0%	4.0%	\$ 0.00	

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Appendix E: Dental Buildup

				Rate Buildup						
Region	COA	Dental COS	CY27 CCOA Caseload Forecast	2025 Base Data		Annual Trend			Rate PMPM	ABAD/BCCP Blend
				MMs	Adj. Base PMPM	Util/1,000	Unit Cost	PMPM		
Tricounty	BBM 19-34	Diagnostic Services	1,684	804	\$ 3.48	4.5%	1.5%	6.1%	\$ 3.92	
Tricounty	BBM 19-34	General Services	1,684	804	\$ 0.42	4.5%	1.5%	6.1%	\$ 0.48	
Tricounty	BBM 19-34	Oral and Maxillofacial Surgery	1,684	804	\$ 1.96	1.5%	2.5%	4.0%	\$ 2.12	
Tricounty	BBM 19-34	Other Misc.	1,684	804	\$ 0.09	4.5%	1.5%	6.1%	\$ 0.10	
Tricounty	BBM 19-34	Periodontics	1,684	804	\$ 1.16	1.5%	2.5%	4.0%	\$ 1.26	
Tricounty	BBM 19-34	Preventative	1,684	804	\$ 2.00	4.5%	1.5%	6.1%	\$ 2.25	
Tricounty	BBM 19-34	Restorative	1,684	804	\$ 3.17	3.0%	1.5%	4.5%	\$ 3.33	
Tricounty	BBM 19-34	Endodontics	1,684	804	\$ 0.43	1.5%	2.5%	4.0%	\$ 0.47	
Tricounty	BBM 19-34	Maxillofacial Prosthetics	1,684	804	\$ -	1.5%	2.5%	4.0%	\$ -	
Tricounty	BBM 19-34	Prosthodontics	1,684	804	\$ 0.18	1.5%	2.5%	4.0%	\$ 0.19	
Tricounty	BBM 19-34	Prosthodontics-Fixed	1,684	804	\$ 0.00	1.5%	2.5%	4.0%	\$ 0.00	
Tricounty	BBM 19-34	Test and Examination	1,684	804	\$ 0.09	4.5%	1.5%	6.1%	\$ 0.10	
Tricounty	BBM 19-34	Implant Services	1,684	804	\$ -	1.5%	2.5%	4.0%	\$ -	
Tricounty	BBM 35-44	Diagnostic Services	1,167	506	\$ 3.64	4.5%	1.5%	6.1%	\$ 4.10	
Tricounty	BBM 35-44	General Services	1,167	506	\$ 0.34	4.5%	1.5%	6.1%	\$ 0.38	
Tricounty	BBM 35-44	Oral and Maxillofacial Surgery	1,167	506	\$ 2.39	1.5%	2.5%	4.0%	\$ 2.58	
Tricounty	BBM 35-44	Other Misc.	1,167	506	\$ 0.07	4.5%	1.5%	6.1%	\$ 0.08	
Tricounty	BBM 35-44	Periodontics	1,167	506	\$ 2.10	1.5%	2.5%	4.0%	\$ 2.28	
Tricounty	BBM 35-44	Preventative	1,167	506	\$ 1.66	4.5%	1.5%	6.1%	\$ 1.87	
Tricounty	BBM 35-44	Restorative	1,167	506	\$ 3.29	3.0%	1.5%	4.5%	\$ 3.45	
Tricounty	BBM 35-44	Endodontics	1,167	506	\$ 0.43	1.5%	2.5%	4.0%	\$ 0.46	
Tricounty	BBM 35-44	Maxillofacial Prosthetics	1,167	506	\$ -	1.5%	2.5%	4.0%	\$ -	
Tricounty	BBM 35-44	Prosthodontics	1,167	506	\$ 0.84	1.5%	2.5%	4.0%	\$ 0.91	
Tricounty	BBM 35-44	Prosthodontics-Fixed	1,167	506	\$ 0.00	1.5%	2.5%	4.0%	\$ 0.00	
Tricounty	BBM 35-44	Test and Examination	1,167	506	\$ 0.04	4.5%	1.5%	6.1%	\$ 0.04	
Tricounty	BBM 35-44	Implant Services	1,167	506	\$ -	1.5%	2.5%	4.0%	\$ -	
Tricounty	BBM 45-54	Diagnostic Services	505	213	\$ 4.03	4.5%	1.5%	6.1%	\$ 4.53	
Tricounty	BBM 45-54	General Services	505	213	\$ 0.33	4.5%	1.5%	6.1%	\$ 0.37	
Tricounty	BBM 45-54	Oral and Maxillofacial Surgery	505	213	\$ 2.97	1.5%	2.5%	4.0%	\$ 3.21	
Tricounty	BBM 45-54	Other Misc.	505	213	\$ 0.08	4.5%	1.5%	6.1%	\$ 0.09	
Tricounty	BBM 45-54	Periodontics	505	213	\$ 2.54	1.5%	2.5%	4.0%	\$ 2.75	
Tricounty	BBM 45-54	Preventative	505	213	\$ 1.75	4.5%	1.5%	6.1%	\$ 1.96	
Tricounty	BBM 45-54	Restorative	505	213	\$ 3.37	3.0%	1.5%	4.5%	\$ 3.54	
Tricounty	BBM 45-54	Endodontics	505	213	\$ 0.43	1.5%	2.5%	4.0%	\$ 0.47	
Tricounty	BBM 45-54	Maxillofacial Prosthetics	505	213	\$ -	1.5%	2.5%	4.0%	\$ -	
Tricounty	BBM 45-54	Prosthodontics	505	213	\$ 1.65	1.5%	2.5%	4.0%	\$ 1.78	
Tricounty	BBM 45-54	Prosthodontics-Fixed	505	213	\$ 0.00	1.5%	2.5%	4.0%	\$ 0.00	
Tricounty	BBM 45-54	Test and Examination	505	213	\$ 0.03	4.5%	1.5%	6.1%	\$ 0.04	
Tricounty	BBM 45-54	Implant Services	505	213	\$ 0.00	1.5%	2.5%	4.0%	\$ 0.00	

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Appendix E: Dental Buildup

				Rate Buildup						
Region	COA	Dental COS	CY27 CCOA Caseload Forecast	2025 Base Data		Annual Trend			Rate PMPM	ABAD/BCCP Blend
				MMs	Adj. Base PMPM	Util/1,000	Unit Cost	PMPM		
Tricounty	BBM 55-64	Diagnostic Services	312	132	\$ 4.31	4.5%	1.5%	6.1%	\$ 4.85	
Tricounty	BBM 55-64	General Services	312	132	\$ 0.39	4.5%	1.5%	6.1%	\$ 0.44	
Tricounty	BBM 55-64	Oral and Maxillofacial Surgery	312	132	\$ 3.43	1.5%	2.5%	4.0%	\$ 3.71	
Tricounty	BBM 55-64	Other Misc.	312	132	\$ 0.08	4.5%	1.5%	6.1%	\$ 0.09	
Tricounty	BBM 55-64	Periodontics	312	132	\$ 2.94	1.5%	2.5%	4.0%	\$ 3.18	
Tricounty	BBM 55-64	Preventative	312	132	\$ 1.80	4.5%	1.5%	6.1%	\$ 2.02	
Tricounty	BBM 55-64	Restorative	312	132	\$ 3.27	3.0%	1.5%	4.5%	\$ 3.44	
Tricounty	BBM 55-64	Endodontics	312	132	\$ 0.40	1.5%	2.5%	4.0%	\$ 0.43	
Tricounty	BBM 55-64	Maxillofacial Prosthetics	312	132	\$ 0.00	1.5%	2.5%	4.0%	\$ 0.00	
Tricounty	BBM 55-64	Prosthodontics	312	132	\$ 2.87	1.5%	2.5%	4.0%	\$ 3.11	
Tricounty	BBM 55-64	Prosthodontics-Fixed	312	132	\$ 0.00	1.5%	2.5%	4.0%	\$ 0.00	
Tricounty	BBM 55-64	Test and Examination	312	132	\$ 0.04	4.5%	1.5%	6.1%	\$ 0.04	
Tricounty	BBM 55-64	Implant Services	312	132	\$ 0.00	1.5%	2.5%	4.0%	\$ 0.00	
Tricounty	BCCP	Diagnostic Services	198	197	\$ 6.09	4.5%	1.5%	6.1%	\$ 6.86	
Tricounty	BCCP	General Services	198	197	\$ 0.90	4.5%	1.5%	6.1%	\$ 1.01	
Tricounty	BCCP	Oral and Maxillofacial Surgery	198	197	\$ 3.73	1.5%	2.5%	4.0%	\$ 4.03	
Tricounty	BCCP	Other Misc.	198	197	\$ -	4.5%	1.5%	6.1%	\$ -	
Tricounty	BCCP	Periodontics	198	197	\$ 2.47	1.5%	2.5%	4.0%	\$ 2.67	
Tricounty	BCCP	Preventative	198	197	\$ 4.82	4.5%	1.5%	6.1%	\$ 5.42	
Tricounty	BCCP	Restorative	198	197	\$ 2.20	3.0%	1.5%	4.5%	\$ 2.40	
Tricounty	BCCP	Endodontics	198	197	\$ -	1.5%	2.5%	4.0%	\$ -	
Tricounty	BCCP	Maxillofacial Prosthetics	198	197	\$ -	1.5%	2.5%	4.0%	\$ -	
Tricounty	BCCP	Prosthodontics	198	197	\$ 5.45	1.5%	2.5%	4.0%	\$ 5.90	
Tricounty	BCCP	Prosthodontics-Fixed	198	197	\$ -	1.5%	2.5%	4.0%	\$ -	
Tricounty	BCCP	Test and Examination	198	197	\$ -	4.5%	1.5%	6.1%	\$ -	
Tricounty	BCCP	Implant Services	198	197	\$ -	1.5%	2.5%	4.0%	\$ -	
Other	PCR	Diagnostic Services	642,030	662,532	\$ 3.97	6.0%	2.0%	8.1%	\$ 4.64	
Other	PCR	General Services	642,030	662,532	\$ 0.43	4.5%	2.0%	6.6%	\$ 0.49	
Other	PCR	Oral and Maxillofacial Surgery	642,030	662,532	\$ 4.15	3.0%	2.0%	5.1%	\$ 4.58	
Other	PCR	Other Misc.	642,030	662,532	\$ 0.26	4.5%	2.0%	6.6%	\$ 0.29	
Other	PCR	Periodontics	642,030	662,532	\$ 1.51	3.0%	2.0%	5.1%	\$ 1.66	
Other	PCR	Preventative	642,030	662,532	\$ 1.83	6.0%	2.0%	8.1%	\$ 2.14	
Other	PCR	Restorative	642,030	662,532	\$ 3.82	4.0%	1.5%	5.6%	\$ 4.26	
Other	PCR	Endodontics	642,030	662,532	\$ 0.54	3.0%	2.0%	5.1%	\$ 0.59	
Other	PCR	Maxillofacial Prosthetics	642,030	662,532	\$ -	3.0%	2.0%	5.1%	\$ -	
Other	PCR	Prosthodontics	642,030	662,532	\$ 1.29	3.0%	2.0%	5.1%	\$ 1.42	
Other	PCR	Prosthodontics-Fixed	642,030	662,532	\$ 0.00	3.0%	2.0%	5.1%	\$ 0.00	
Other	PCR	Test and Examination	642,030	662,532	\$ 0.04	6.0%	2.0%	8.1%	\$ 0.04	
Other	PCR	Implant Services	642,030	662,532	\$ -	3.0%	2.0%	5.1%	\$ -	

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Appendix E: Dental Buildup

				Rate Buildup						
Region	COA	Dental COS	CY27 CCOA Caseload Forecast	2025 Base Data		Annual Trend			Rate PMPM	ABAD/BCCP Blend
				MMs	Adj. Base PMPM	Util/1,000	Unit Cost	PMPM		
Other	PWO	Diagnostic Services	112,811	129,291	\$ 4.10	6.0%	2.0%	8.1%	\$ 4.80	
Other	PWO	General Services	112,811	129,291	\$ 0.26	4.5%	2.0%	6.6%	\$ 0.30	
Other	PWO	Oral and Maxillofacial Surgery	112,811	129,291	\$ 2.22	3.0%	2.0%	5.1%	\$ 2.45	
Other	PWO	Other Misc.	112,811	129,291	\$ 0.11	4.5%	2.0%	6.6%	\$ 0.13	
Other	PWO	Periodontics	112,811	129,291	\$ 1.15	3.0%	2.0%	5.1%	\$ 1.27	
Other	PWO	Preventative	112,811	129,291	\$ 2.32	6.0%	2.0%	8.1%	\$ 2.71	
Other	PWO	Restorative	112,811	129,291	\$ 3.97	4.0%	1.5%	5.6%	\$ 4.42	
Other	PWO	Endodontics	112,811	129,291	\$ 0.74	3.0%	2.0%	5.1%	\$ 0.81	
Other	PWO	Maxillofacial Prosthetics	112,811	129,291	\$ -	3.0%	2.0%	5.1%	\$ -	
Other	PWO	Prosthodontics	112,811	129,291	\$ 0.16	3.0%	2.0%	5.1%	\$ 0.17	
Other	PWO	Prosthodontics-Fixed	112,811	129,291	\$ -	3.0%	2.0%	5.1%	\$ -	
Other	PWO	Test and Examination	112,811	129,291	\$ 0.06	6.0%	2.0%	8.1%	\$ 0.07	
Other	PWO	Implant Services	112,811	129,291	\$ -	3.0%	2.0%	5.1%	\$ -	
Other	CHILD 00-01	Diagnostic Services	173,302	174,174	\$ 1.31	7.5%	1.5%	9.1%	\$ 1.56	
Other	CHILD 00-01	General Services	173,302	174,174	\$ 0.07	4.5%	2.0%	6.6%	\$ 0.08	
Other	CHILD 00-01	Oral and Maxillofacial Surgery	173,302	174,174	\$ 0.32	1.5%	4.5%	6.1%	\$ 0.36	
Other	CHILD 00-01	Other Misc.	173,302	174,174	\$ 4.61	4.5%	2.0%	6.6%	\$ 5.24	
Other	CHILD 00-01	Periodontics	173,302	174,174	\$ 0.00	1.5%	4.5%	6.1%	\$ 0.00	
Other	CHILD 00-01	Preventative	173,302	174,174	\$ 0.58	7.5%	1.5%	9.1%	\$ 0.69	
Other	CHILD 00-01	Restorative	173,302	174,174	\$ 0.00	1.5%	1.5%	3.0%	\$ 0.00	
Other	CHILD 00-01	Endodontics	173,302	174,174	\$ -	1.5%	4.5%	6.1%	\$ -	
Other	CHILD 00-01	Maxillofacial Prosthetics	173,302	174,174	\$ -	1.5%	4.5%	6.1%	\$ -	
Other	CHILD 00-01	Prosthodontics	173,302	174,174	\$ -	1.5%	4.5%	6.1%	\$ -	
Other	CHILD 00-01	Prosthodontics-Fixed	173,302	174,174	\$ -	1.5%	4.5%	6.1%	\$ -	
Other	CHILD 00-01	Test and Examination	173,302	174,174	\$ 0.00	7.5%	1.5%	9.1%	\$ 0.00	
Other	CHILD 00-01	Implant Services	173,302	174,174	\$ -	1.5%	4.5%	6.1%	\$ -	
Other	CHILD 01-05	Diagnostic Services	830,171	848,006	\$ 6.81	7.5%	1.5%	9.1%	\$ 8.11	
Other	CHILD 01-05	General Services	830,171	848,006	\$ 0.93	4.5%	2.0%	6.6%	\$ 1.05	
Other	CHILD 01-05	Oral and Maxillofacial Surgery	830,171	848,006	\$ 0.97	1.5%	4.5%	6.1%	\$ 1.10	
Other	CHILD 01-05	Other Misc.	830,171	848,006	\$ 2.85	4.5%	2.0%	6.6%	\$ 3.23	
Other	CHILD 01-05	Periodontics	830,171	848,006	\$ 0.02	1.5%	4.5%	6.1%	\$ 0.03	
Other	CHILD 01-05	Preventative	830,171	848,006	\$ 8.23	7.5%	1.5%	9.1%	\$ 9.80	
Other	CHILD 01-05	Restorative	830,171	848,006	\$ 10.49	1.5%	1.5%	3.0%	\$ 11.13	
Other	CHILD 01-05	Endodontics	830,171	848,006	\$ 0.97	1.5%	4.5%	6.1%	\$ 1.09	
Other	CHILD 01-05	Maxillofacial Prosthetics	830,171	848,006	\$ -	1.5%	4.5%	6.1%	\$ -	
Other	CHILD 01-05	Prosthodontics	830,171	848,006	\$ -	1.5%	4.5%	6.1%	\$ -	
Other	CHILD 01-05	Prosthodontics-Fixed	830,171	848,006	\$ -	1.5%	4.5%	6.1%	\$ -	
Other	CHILD 01-05	Test and Examination	830,171	848,006	\$ 0.00	7.5%	1.5%	9.1%	\$ 0.00	
Other	CHILD 01-05	Implant Services	830,171	848,006	\$ -	1.5%	4.5%	6.1%	\$ -	

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Appendix E: Dental Buildup

				Rate Buildup						
Region	COA	Dental COS	CY27 CCOA Caseload Forecast	2025 Base Data		Annual Trend			Rate PMPM	ABAD/BCCP Blend
				MMs	Adj. Base PMPM	Util/1,000	Unit Cost	PMPM		
Other	CHILD 06-18	Diagnostic Services	2,128,424	2,412,202	\$ 7.32	7.5%	1.5%	9.1%	\$ 8.72	
Other	CHILD 06-18	General Services	2,128,424	2,412,202	\$ 0.94	4.5%	2.0%	6.6%	\$ 1.07	
Other	CHILD 06-18	Oral and Maxillofacial Surgery	2,128,424	2,412,202	\$ 1.82	1.5%	4.5%	6.1%	\$ 2.05	
Other	CHILD 06-18	Other Misc.	2,128,424	2,412,202	\$ 0.88	4.5%	2.0%	6.6%	\$ 1.00	
Other	CHILD 06-18	Periodontics	2,128,424	2,412,202	\$ 0.10	1.5%	4.5%	6.1%	\$ 0.11	
Other	CHILD 06-18	Preventative	2,128,424	2,412,202	\$ 9.38	7.5%	1.5%	9.1%	\$ 11.16	
Other	CHILD 06-18	Restorative	2,128,424	2,412,202	\$ 6.50	1.5%	1.5%	3.0%	\$ 6.90	
Other	CHILD 06-18	Endodontics	2,128,424	2,412,202	\$ 0.65	1.5%	4.5%	6.1%	\$ 0.73	
Other	CHILD 06-18	Maxillofacial Prosthetics	2,128,424	2,412,202	\$ 0.00	1.5%	4.5%	6.1%	\$ 0.00	
Other	CHILD 06-18	Prosthodontics	2,128,424	2,412,202	\$ 0.01	1.5%	4.5%	6.1%	\$ 0.01	
Other	CHILD 06-18	Prosthodontics-Fixed	2,128,424	2,412,202	\$ -	1.5%	4.5%	6.1%	\$ -	
Other	CHILD 06-18	Test and Examination	2,128,424	2,412,202	\$ 0.05	7.5%	1.5%	9.1%	\$ 0.06	
Other	CHILD 06-18	Implant Services	2,128,424	2,412,202	\$ -	1.5%	4.5%	6.1%	\$ -	
Other	DUAL-MEDS	Diagnostic Services	570,651	715,860	\$ 3.74	6.0%	2.0%	8.1%	\$ 4.37	
Other	DUAL-MEDS	General Services	570,651	715,860	\$ 0.85	4.5%	2.0%	6.6%	\$ 0.97	
Other	DUAL-MEDS	Oral and Maxillofacial Surgery	570,651	715,860	\$ 4.48	3.0%	4.5%	7.6%	\$ 5.19	
Other	DUAL-MEDS	Other Misc.	570,651	715,860	\$ 0.04	4.5%	2.0%	6.6%	\$ 0.05	
Other	DUAL-MEDS	Periodontics	570,651	715,860	\$ 1.76	3.0%	4.5%	7.6%	\$ 2.04	
Other	DUAL-MEDS	Preventative	570,651	715,860	\$ 1.64	6.0%	2.0%	8.1%	\$ 1.92	
Other	DUAL-MEDS	Restorative	570,651	715,860	\$ 3.13	4.0%	1.5%	5.6%	\$ 3.49	
Other	DUAL-MEDS	Endodontics	570,651	715,860	\$ 0.29	3.0%	4.5%	7.6%	\$ 0.33	
Other	DUAL-MEDS	Maxillofacial Prosthetics	570,651	715,860	\$ 0.00	3.0%	4.5%	7.6%	\$ 0.00	
Other	DUAL-MEDS	Prosthodontics	570,651	715,860	\$ 3.75	3.0%	4.5%	7.6%	\$ 4.35	
Other	DUAL-MEDS	Prosthodontics-Fixed	570,651	715,860	\$ 0.00	3.0%	4.5%	7.6%	\$ 0.00	
Other	DUAL-MEDS	Test and Examination	570,651	715,860	\$ 0.02	6.0%	2.0%	8.1%	\$ 0.03	
Other	DUAL-MEDS	Implant Services	570,651	715,860	\$ 0.00	3.0%	4.5%	7.6%	\$ 0.00	
Other	ABAD & OAA	Diagnostic Services	399,986	416,378	\$ 4.77	6.0%	2.0%	8.1%	\$ 5.58	
Other	ABAD & OAA	General Services	399,986	416,378	\$ 0.93	4.5%	2.0%	6.6%	\$ 1.06	
Other	ABAD & OAA	Oral and Maxillofacial Surgery	399,986	416,378	\$ 4.72	3.0%	4.5%	7.6%	\$ 5.46	
Other	ABAD & OAA	Other Misc.	399,986	416,378	\$ 0.34	4.5%	2.0%	6.6%	\$ 0.39	
Other	ABAD & OAA	Periodontics	399,986	416,378	\$ 1.45	3.0%	4.5%	7.6%	\$ 1.68	
Other	ABAD & OAA	Preventative	399,986	416,378	\$ 3.20	6.0%	2.0%	8.1%	\$ 3.75	
Other	ABAD & OAA	Restorative	399,986	416,378	\$ 4.66	4.0%	1.5%	5.6%	\$ 5.20	
Other	ABAD & OAA	Endodontics	399,986	416,378	\$ 0.44	3.0%	4.5%	7.6%	\$ 0.51	
Other	ABAD & OAA	Maxillofacial Prosthetics	399,986	416,378	\$ 0.00	3.0%	4.5%	7.6%	\$ 0.00	
Other	ABAD & OAA	Prosthodontics	399,986	416,378	\$ 2.77	3.0%	4.5%	7.6%	\$ 3.21	
Other	ABAD & OAA	Prosthodontics-Fixed	399,986	416,378	\$ -	3.0%	4.5%	7.6%	\$ -	
Other	ABAD & OAA	Test and Examination	399,986	416,378	\$ 0.04	6.0%	2.0%	8.1%	\$ 0.04	
Other	ABAD & OAA	Implant Services	399,986	416,378	\$ 0.00	3.0%	4.5%	7.6%	\$ 0.00	

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Appendix E: Dental Buildup

				Rate Buildup						
Region	COA	Dental COS	CY27 CCOA Caseload Forecast	2025 Base Data		Annual Trend			Rate PMPM	ABAD/BCCP Blend
				MMs	Adj. Base PMPM	Util/1,000	Unit Cost	PMPM		
Other	FOSTER	Diagnostic Services	107,285	123,141	\$ 8.28	6.0%	2.0%	8.1%	\$ 9.68	
Other	FOSTER	General Services	107,285	123,141	\$ 1.14	4.5%	2.0%	6.6%	\$ 1.29	
Other	FOSTER	Oral and Maxillofacial Surgery	107,285	123,141	\$ 2.34	3.0%	4.5%	7.6%	\$ 2.72	
Other	FOSTER	Other Misc.	107,285	123,141	\$ 1.65	4.5%	2.0%	6.6%	\$ 1.88	
Other	FOSTER	Periodontics	107,285	123,141	\$ 0.14	3.0%	4.5%	7.6%	\$ 0.16	
Other	FOSTER	Preventative	107,285	123,141	\$ 9.98	6.0%	2.0%	8.1%	\$ 11.67	
Other	FOSTER	Restorative	107,285	123,141	\$ 8.37	4.0%	1.5%	5.6%	\$ 9.33	
Other	FOSTER	Endodontics	107,285	123,141	\$ 0.79	3.0%	4.5%	7.6%	\$ 0.92	
Other	FOSTER	Maxillofacial Prosthetics	107,285	123,141	\$ -	3.0%	4.5%	7.6%	\$ -	
Other	FOSTER	Prosthodontics	107,285	123,141	\$ 0.00	3.0%	4.5%	7.6%	\$ 0.00	
Other	FOSTER	Prosthodontics-Fixed	107,285	123,141	\$ -	3.0%	4.5%	7.6%	\$ -	
Other	FOSTER	Test and Examination	107,285	123,141	\$ 0.05	6.0%	2.0%	8.1%	\$ 0.06	
Other	FOSTER	Implant Services	107,285	123,141	\$ -	3.0%	4.5%	7.6%	\$ -	
Other	ACA 19-34	Diagnostic Services	1,521,652	1,812,122	\$ 3.16	6.0%	2.0%	8.1%	\$ 3.70	
Other	ACA 19-34	General Services	1,521,652	1,812,122	\$ 0.39	4.5%	2.0%	6.6%	\$ 0.44	
Other	ACA 19-34	Oral and Maxillofacial Surgery	1,521,652	1,812,122	\$ 2.80	3.0%	2.0%	5.1%	\$ 3.09	
Other	ACA 19-34	Other Misc.	1,521,652	1,812,122	\$ 0.11	4.5%	2.0%	6.6%	\$ 0.13	
Other	ACA 19-34	Periodontics	1,521,652	1,812,122	\$ 0.82	3.0%	2.0%	5.1%	\$ 0.91	
Other	ACA 19-34	Preventative	1,521,652	1,812,122	\$ 1.93	6.0%	2.0%	8.1%	\$ 2.26	
Other	ACA 19-34	Restorative	1,521,652	1,812,122	\$ 3.27	4.0%	1.5%	5.6%	\$ 3.64	
Other	ACA 19-34	Endodontics	1,521,652	1,812,122	\$ 0.39	3.0%	2.0%	5.1%	\$ 0.43	
Other	ACA 19-34	Maxillofacial Prosthetics	1,521,652	1,812,122	\$ -	3.0%	2.0%	5.1%	\$ -	
Other	ACA 19-34	Prosthodontics	1,521,652	1,812,122	\$ 0.30	3.0%	2.0%	5.1%	\$ 0.33	
Other	ACA 19-34	Prosthodontics-Fixed	1,521,652	1,812,122	\$ 0.00	3.0%	2.0%	5.1%	\$ 0.00	
Other	ACA 19-34	Test and Examination	1,521,652	1,812,122	\$ 0.04	6.0%	2.0%	8.1%	\$ 0.04	
Other	ACA 19-34	Implant Services	1,521,652	1,812,122	\$ -	3.0%	2.0%	5.1%	\$ -	
Other	ACA 35-44	Diagnostic Services	809,759	910,263	\$ 3.28	6.0%	2.0%	8.1%	\$ 3.84	
Other	ACA 35-44	Oral and Maxillofacial Surgery	809,759	910,263	\$ 3.56	3.0%	2.0%	5.1%	\$ 3.93	
Other	ACA 35-44	Other Misc.	809,759	910,263	\$ 0.13	4.5%	2.0%	6.6%	\$ 0.15	
Other	ACA 35-44	Periodontics	809,759	910,263	\$ 1.54	3.0%	2.0%	5.1%	\$ 1.70	
Other	ACA 35-44	Preventative	809,759	910,263	\$ 1.53	6.0%	2.0%	8.1%	\$ 1.79	
Other	ACA 35-44	Restorative	809,759	910,263	\$ 3.14	4.0%	1.5%	5.6%	\$ 3.50	
Other	ACA 35-44	Endodontics	809,759	910,263	\$ 0.33	3.0%	2.0%	5.1%	\$ 0.36	
Other	ACA 35-44	Maxillofacial Prosthetics	809,759	910,263	\$ -	3.0%	2.0%	5.1%	\$ -	
Other	ACA 35-44	Prosthodontics	809,759	910,263	\$ 1.28	3.0%	2.0%	5.1%	\$ 1.41	
Other	ACA 35-44	Prosthodontics-Fixed	809,759	910,263	\$ 0.00	3.0%	2.0%	5.1%	\$ 0.00	
Other	ACA 35-44	Test and Examination	809,759	910,263	\$ 0.02	6.0%	2.0%	8.1%	\$ 0.03	
Other	ACA 35-44	Implant Services	809,759	910,263	\$ 0.00	3.0%	2.0%	5.1%	\$ 0.00	

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Appendix E: Dental Buildup

				Rate Buildup						
Region	COA	Dental COS	CY27 CCOA Caseload Forecast	2025 Base Data		Annual Trend			Rate PMPM	ABAD/BCCP Blend
				MMs	Adj. Base PMPM	Util/1,000	Unit Cost	PMPM		
Other	ACA 45-54	Diagnostic Services	611,483	696,862	\$ 3.42	6.0%	2.0%	8.1%	\$ 3.99	
Other	ACA 45-54	General Services	611,483	696,862	\$ 0.32	4.5%	2.0%	6.6%	\$ 0.37	
Other	ACA 45-54	Oral and Maxillofacial Surgery	611,483	696,862	\$ 4.36	3.0%	2.0%	5.1%	\$ 4.81	
Other	ACA 45-54	Other Misc.	611,483	696,862	\$ 0.13	4.5%	2.0%	6.6%	\$ 0.15	
Other	ACA 45-54	Periodontics	611,483	696,862	\$ 1.79	3.0%	2.0%	5.1%	\$ 1.98	
Other	ACA 45-54	Preventative	611,483	696,862	\$ 1.37	6.0%	2.0%	8.1%	\$ 1.60	
Other	ACA 45-54	Restorative	611,483	696,862	\$ 2.81	4.0%	1.5%	5.6%	\$ 3.14	
Other	ACA 45-54	Endodontics	611,483	696,862	\$ 0.33	3.0%	2.0%	5.1%	\$ 0.36	
Other	ACA 45-54	Maxillofacial Prosthetics	611,483	696,862	\$ 0.00	3.0%	2.0%	5.1%	\$ 0.00	
Other	ACA 45-54	Prosthodontics	611,483	696,862	\$ 2.39	3.0%	2.0%	5.1%	\$ 2.64	
Other	ACA 45-54	Prosthodontics-Fixed	611,483	696,862	\$ 0.00	3.0%	2.0%	5.1%	\$ 0.00	
Other	ACA 45-54	Test and Examination	611,483	696,862	\$ 0.02	6.0%	2.0%	8.1%	\$ 0.03	
Other	ACA 45-54	Implant Services	611,483	696,862	\$ 0.00	3.0%	2.0%	5.1%	\$ 0.00	
Other	ACA 55-64	Diagnostic Services	584,884	669,318	\$ 3.78	6.0%	2.0%	8.1%	\$ 4.42	
Other	ACA 55-64	General Services	584,884	669,318	\$ 0.31	4.5%	2.0%	6.6%	\$ 0.35	
Other	ACA 55-64	Oral and Maxillofacial Surgery	584,884	669,318	\$ 4.11	3.0%	2.0%	5.1%	\$ 4.53	
Other	ACA 55-64	Other Misc.	584,884	669,318	\$ 0.09	4.5%	2.0%	6.6%	\$ 0.11	
Other	ACA 55-64	Periodontics	584,884	669,318	\$ 2.05	3.0%	2.0%	5.1%	\$ 2.27	
Other	ACA 55-64	Preventative	584,884	669,318	\$ 1.47	6.0%	2.0%	8.1%	\$ 1.72	
Other	ACA 55-64	Restorative	584,884	669,318	\$ 2.88	4.0%	1.5%	5.6%	\$ 3.21	
Other	ACA 55-64	Endodontics	584,884	669,318	\$ 0.27	3.0%	2.0%	5.1%	\$ 0.30	
Other	ACA 55-64	Maxillofacial Prosthetics	584,884	669,318	\$ -	3.0%	2.0%	5.1%	\$ -	
Other	ACA 55-64	Prosthodontics	584,884	669,318	\$ 2.60	3.0%	2.0%	5.1%	\$ 2.87	
Other	ACA 55-64	Prosthodontics-Fixed	584,884	669,318	\$ 0.00	3.0%	2.0%	5.1%	\$ 0.00	
Other	ACA 55-64	Test and Examination	584,884	669,318	\$ 0.02	6.0%	2.0%	8.1%	\$ 0.03	
Other	ACA 55-64	Implant Services	584,884	669,318	\$ 0.00	3.0%	2.0%	5.1%	\$ 0.00	
Other	BBM 19-34	Diagnostic Services	4,218	2,167	\$ 3.16	6.0%	2.0%	8.1%	\$ 3.70	
Other	BBM 19-34	General Services	4,218	2,167	\$ 0.39	4.5%	2.0%	6.6%	\$ 0.44	
Other	BBM 19-34	Oral and Maxillofacial Surgery	4,218	2,167	\$ 2.80	3.0%	4.5%	7.6%	\$ 3.09	
Other	BBM 19-34	Other Misc.	4,218	2,167	\$ 0.11	4.5%	2.0%	6.6%	\$ 0.13	
Other	BBM 19-34	Periodontics	4,218	2,167	\$ 0.82	3.0%	4.5%	7.6%	\$ 0.91	
Other	BBM 19-34	Preventative	4,218	2,167	\$ 1.93	6.0%	2.0%	8.1%	\$ 2.26	
Other	BBM 19-34	Restorative	4,218	2,167	\$ 3.27	4.0%	1.5%	5.6%	\$ 3.64	
Other	BBM 19-34	Endodontics	4,218	2,167	\$ 0.39	3.0%	4.5%	7.6%	\$ 0.43	
Other	BBM 19-34	Maxillofacial Prosthetics	4,218	2,167	\$ -	3.0%	4.5%	7.6%	\$ -	
Other	BBM 19-34	Prosthodontics	4,218	2,167	\$ 0.30	3.0%	4.5%	7.6%	\$ 0.33	
Other	BBM 19-34	Prosthodontics-Fixed	4,218	2,167	\$ 0.00	3.0%	4.5%	7.6%	\$ 0.00	
Other	BBM 19-34	Test and Examination	4,218	2,167	\$ 0.04	6.0%	2.0%	8.1%	\$ 0.04	
Other	BBM 19-34	Implant Services	4,218	2,167	\$ -	3.0%	4.5%	7.6%	\$ -	

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Appendix E: Dental Buildup

				Rate Buildup						
Region	COA	Dental COS	CY27 CCOA Caseload Forecast	2025 Base Data		Annual Trend			Rate PMPM	ABAD/BCCP Blend
				MMs	Adj. Base PMPM	Util/1,000	Unit Cost	PMPM		
Other	BBM 35-44	Diagnostic Services	2,380	1,098	\$ 3.28	6.0%	2.0%	8.1%	\$ 3.84	
Other	BBM 35-44	General Services	2,380	1,098	\$ 0.29	4.5%	2.0%	6.6%	\$ 0.33	
Other	BBM 35-44	Oral and Maxillofacial Surgery	2,380	1,098	\$ 3.56	3.0%	4.5%	7.6%	\$ 3.93	
Other	BBM 35-44	Other Misc.	2,380	1,098	\$ 0.13	4.5%	2.0%	6.6%	\$ 0.15	
Other	BBM 35-44	Periodontics	2,380	1,098	\$ 1.54	3.0%	4.5%	7.6%	\$ 1.70	
Other	BBM 35-44	Preventative	2,380	1,098	\$ 1.53	6.0%	2.0%	8.1%	\$ 1.79	
Other	BBM 35-44	Restorative	2,380	1,098	\$ 3.14	4.0%	1.5%	5.6%	\$ 3.50	
Other	BBM 35-44	Endodontics	2,380	1,098	\$ 0.33	3.0%	4.5%	7.6%	\$ 0.36	
Other	BBM 35-44	Maxillofacial Prosthetics	2,380	1,098	\$ -	3.0%	4.5%	7.6%	\$ -	
Other	BBM 35-44	Prosthodontics	2,380	1,098	\$ 1.28	3.0%	4.5%	7.6%	\$ 1.41	
Other	BBM 35-44	Prosthodontics-Fixed	2,380	1,098	\$ 0.00	3.0%	4.5%	7.6%	\$ 0.00	
Other	BBM 35-44	Test and Examination	2,380	1,098	\$ 0.02	6.0%	2.0%	8.1%	\$ 0.03	
Other	BBM 35-44	Implant Services	2,380	1,098	\$ 0.00	3.0%	4.5%	7.6%	\$ 0.00	
Other	BBM 45-54	Diagnostic Services	1,584	754	\$ 3.42	6.0%	2.0%	8.1%	\$ 3.99	
Other	BBM 45-54	General Services	1,584	754	\$ 0.32	4.5%	2.0%	6.6%	\$ 0.37	
Other	BBM 45-54	Oral and Maxillofacial Surgery	1,584	754	\$ 4.36	3.0%	4.5%	7.6%	\$ 4.81	
Other	BBM 45-54	Other Misc.	1,584	754	\$ 0.13	4.5%	2.0%	6.6%	\$ 0.15	
Other	BBM 45-54	Periodontics	1,584	754	\$ 1.79	3.0%	4.5%	7.6%	\$ 1.98	
Other	BBM 45-54	Preventative	1,584	754	\$ 1.37	6.0%	2.0%	8.1%	\$ 1.60	
Other	BBM 45-54	Restorative	1,584	754	\$ 2.81	4.0%	1.5%	5.6%	\$ 3.14	
Other	BBM 45-54	Endodontics	1,584	754	\$ 0.33	3.0%	4.5%	7.6%	\$ 0.36	
Other	BBM 45-54	Maxillofacial Prosthetics	1,584	754	\$ 0.00	3.0%	4.5%	7.6%	\$ 0.00	
Other	BBM 45-54	Prosthodontics	1,584	754	\$ 2.39	3.0%	4.5%	7.6%	\$ 2.64	
Other	BBM 45-54	Prosthodontics-Fixed	1,584	754	\$ 0.00	3.0%	4.5%	7.6%	\$ 0.00	
Other	BBM 45-54	Test and Examination	1,584	754	\$ 0.02	6.0%	2.0%	8.1%	\$ 0.03	
Other	BBM 45-54	Implant Services	1,584	754	\$ 0.00	3.0%	4.5%	7.6%	\$ 0.00	
Other	BBM 55-64	Diagnostic Services	858	422	\$ 3.78	6.0%	2.0%	8.1%	\$ 4.42	
Other	BBM 55-64	General Services	858	422	\$ 0.31	4.5%	2.0%	6.6%	\$ 0.35	
Other	BBM 55-64	Oral and Maxillofacial Surgery	858	422	\$ 4.11	3.0%	4.5%	7.6%	\$ 4.53	
Other	BBM 55-64	Other Misc.	858	422	\$ 0.09	4.5%	2.0%	6.6%	\$ 0.11	
Other	BBM 55-64	Periodontics	858	422	\$ 2.05	3.0%	4.5%	7.6%	\$ 2.27	
Other	BBM 55-64	Preventative	858	422	\$ 1.47	6.0%	2.0%	8.1%	\$ 1.72	
Other	BBM 55-64	Restorative	858	422	\$ 2.88	4.0%	1.5%	5.6%	\$ 3.21	
Other	BBM 55-64	Endodontics	858	422	\$ 0.27	3.0%	4.5%	7.6%	\$ 0.30	
Other	BBM 55-64	Maxillofacial Prosthetics	858	422	\$ -	3.0%	4.5%	7.6%	\$ -	
Other	BBM 55-64	Prosthodontics	858	422	\$ 2.60	3.0%	4.5%	7.6%	\$ 2.87	
Other	BBM 55-64	Prosthodontics-Fixed	858	422	\$ 0.00	3.0%	4.5%	7.6%	\$ 0.00	
Other	BBM 55-64	Test and Examination	858	422	\$ 0.02	6.0%	2.0%	8.1%	\$ 0.03	
Other	BBM 55-64	Implant Services	858	422	\$ 0.00	3.0%	4.5%	7.6%	\$ 0.00	

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				Rate Buildup						
Region	COA	Dental COS	CY27 CCOA Caseload Forecast	2025 Base Data		Annual Trend			Rate PMPM	ABAD/BCCP Blend
				MMs	Adj. Base PMPM	Util/1,000	Unit Cost	PMPM		
Other	BCCP	Diagnostic Services	489	485	\$ 4.86	6.0%	2.0%	8.1%	\$ 5.68	
Other	BCCP	General Services	489	485	\$ -	4.5%	2.0%	6.6%	\$ -	
Other	BCCP	Oral and Maxillofacial Surgery	489	485	\$ 4.16	3.0%	4.5%	7.6%	\$ 4.81	
Other	BCCP	Other Misc.	489	485	\$ 0.08	4.5%	2.0%	6.6%	\$ 0.09	
Other	BCCP	Periodontics	489	485	\$ 1.46	3.0%	4.5%	7.6%	\$ 1.70	
Other	BCCP	Preventative	489	485	\$ 2.99	6.0%	2.0%	8.1%	\$ 3.49	
Other	BCCP	Restorative	489	485	\$ 2.97	4.0%	1.5%	5.6%	\$ 3.31	
Other	BCCP	Endodontics	489	485	\$ -	3.0%	4.5%	7.6%	\$ -	
Other	BCCP	Maxillofacial Prosthetics	489	485	\$ -	3.0%	4.5%	7.6%	\$ -	
Other	BCCP	Prosthodontics	489	485	\$ 5.23	3.0%	4.5%	7.6%	\$ 6.06	
Other	BCCP	Prosthodontics-Fixed	489	485	\$ -	3.0%	4.5%	7.6%	\$ -	
Other	BCCP	Test and Examination	489	485	\$ -	6.0%	2.0%	8.1%	\$ -	
Other	BCCP	Implant Services	489	485	\$ -	3.0%	4.5%	7.6%	\$ -	
Total	Total	Total	13,643,208	15,304,491	\$ 20.19	4.2%	1.8%	6.1%	\$ 22.72	

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Appendix E: Dental Buildup

				Rate Buildup						
Region	COA	Dental COS	CY27 CCOA Caseload Forecast	2025 Base Data		Annual Trend			Rate PMPM	ABAD/BCCP Blend
				MMs	Adj. Base PMPM	Util/1,000	Unit Cost	PMPM		
Tricounty	PCR	All	358,102	369,995	\$ 18.03	2.9%	1.6%	4.5%	\$ 19.70	\$ 19.70
Tricounty	PWO	All	60,678	66,678	\$ 16.24	3.0%	1.5%	4.6%	\$ 17.77	\$ 17.77
Tricounty	CHILD 00-01	All	97,374	97,212	\$ 3.36	4.5%	1.5%	6.0%	\$ 3.78	\$ 3.78
Tricounty	CHILD 01-05	All	454,253	458,665	\$ 26.34	3.3%	1.5%	4.9%	\$ 28.98	\$ 28.98
Tricounty	CHILD 06-18	All	1,176,812	1,310,708	\$ 25.01	3.6%	1.5%	5.1%	\$ 27.63	\$ 27.63
Tricounty	DUAL-MEDS	All	358,523	430,947	\$ 21.96	2.8%	2.0%	4.8%	\$ 24.13	\$ 24.13
Tricounty	ABAD & OAA	All	235,255	250,453	\$ 22.09	3.0%	1.9%	4.9%	\$ 24.32	\$ 24.32
Tricounty	FOSTER	All	46,162	54,672	\$ 29.25	3.7%	1.6%	5.4%	\$ 32.50	\$ 32.50
Tricounty	ACA 19-34	All	1,063,182	1,245,884	\$ 12.99	3.1%	1.5%	4.6%	\$ 14.22	\$ 14.22
Tricounty	ACA 35-44	All	570,154	629,434	\$ 14.80	2.9%	1.6%	4.5%	\$ 16.16	\$ 16.16
Tricounty	ACA 45-54	All	384,809	434,924	\$ 17.17	2.8%	1.6%	4.5%	\$ 18.74	\$ 18.74
Tricounty	ACA 55-64	All	332,069	377,993	\$ 19.53	2.8%	1.7%	4.5%	\$ 21.32	\$ 21.32
Tricounty	BBM 19-34	All	1,684	804	\$ 12.99	3.3%	1.8%	5.1%	\$ 14.22	\$ 14.22
Tricounty	BBM 35-44	All	1,167	506	\$ 14.80	3.0%	1.9%	4.9%	\$ 16.16	\$ 16.16
Tricounty	BBM 45-54	All	505	213	\$ 17.17	2.9%	1.9%	4.9%	\$ 18.74	\$ 18.74
Tricounty	BBM 55-64	All	312	132	\$ 19.53	2.8%	2.0%	4.8%	\$ 21.32	\$ 21.32
Tricounty	BCCP	All	198	197	\$ 25.65	3.0%	1.9%	5.0%	\$ 28.29	\$ 28.29
Other	PCR	All	642,030	662,532	\$ 17.83	4.3%	1.9%	6.2%	\$ 20.12	\$ 20.12
Other	PWO	All	112,811	129,291	\$ 15.10	4.6%	1.9%	6.6%	\$ 17.14	\$ 17.14
Other	CHILD 00-01	All	173,302	174,174	\$ 6.90	5.2%	2.0%	7.3%	\$ 7.94	\$ 7.94
Other	CHILD 01-05	All	830,171	848,006	\$ 31.28	4.8%	1.7%	6.6%	\$ 35.55	\$ 35.55
Other	CHILD 06-18	All	2,128,424	2,412,202	\$ 27.65	5.4%	1.8%	7.3%	\$ 31.81	\$ 31.81
Other	DUAL-MEDS	All	570,651	715,860	\$ 19.71	4.1%	3.2%	7.4%	\$ 22.74	\$ 22.74
Other	ABAD & OAA	All	399,986	416,378	\$ 23.33	4.3%	2.9%	7.3%	\$ 26.88	\$ 26.88
Other	FOSTER	All	107,285	123,141	\$ 32.76	5.1%	2.1%	7.3%	\$ 37.71	\$ 37.71
Other	ACA 19-34	All	1,521,652	1,812,122	\$ 13.22	4.5%	1.9%	6.4%	\$ 14.98	\$ 14.98
Other	ACA 35-44	All	809,759	910,263	\$ 15.10	4.2%	1.9%	6.2%	\$ 17.03	\$ 17.03
Other	ACA 45-54	All	611,483	696,862	\$ 16.95	4.1%	1.9%	6.1%	\$ 19.07	\$ 19.07
Other	ACA 55-64	All	584,884	669,318	\$ 17.60	4.1%	1.9%	6.1%	\$ 19.82	\$ 19.82
Other	BBM 19-34	All	4,218	2,167	\$ 13.22	4.5%	2.7%	7.3%	\$ 14.98	\$ 14.98
Other	BBM 35-44	All	2,380	1,098	\$ 15.10	4.2%	3.0%	7.3%	\$ 17.03	\$ 17.03
Other	BBM 45-54	All	1,584	754	\$ 16.95	4.1%	3.2%	7.4%	\$ 19.07	\$ 19.07
Other	BBM 55-64	All	858	422	\$ 17.60	4.1%	3.2%	7.4%	\$ 19.82	\$ 19.82
Other	BCCP	All	489	485	\$ 21.74	4.2%	3.2%	7.5%	\$ 25.13	\$ 25.13
Total	Total	Total	13,643,208	15,304,491	\$ 20.19	4.2%	1.8%	6.1%	\$ 22.72	\$ 22.72

CY27 CCO Rate Certification
Appendix E: Dental Buildup

				Rate Buildup						
Region	COA	Dental COS	CY27 CCOA Caseload Forecast	2025 Base Data		Annual Trend			Rate PMPM	ABAD/BCCP Blend
				MMs	Adj. Base PMPM	Util/1,000	Unit Cost	PMPM		
All	All	Diagnostic Services	13,643,208	15,304,491	\$ 4.83	5.9%	1.7%	7.7%	\$ 5.60	
All	All	General Services	13,643,208	15,304,491	\$ 0.60	4.5%	1.8%	6.4%	\$ 0.68	
All	All	Oral and Maxillofacial Surgery	13,643,208	15,304,491	\$ 2.70	2.4%	2.6%	5.2%	\$ 2.98	
All	All	Other Misc.	13,643,208	15,304,491	\$ 0.63	4.5%	1.8%	6.4%	\$ 0.71	
All	All	Periodontics	13,643,208	15,304,491	\$ 1.06	2.5%	2.4%	4.9%	\$ 1.17	
All	All	Preventative	13,643,208	15,304,491	\$ 4.18	6.2%	1.6%	7.9%	\$ 4.87	
All	All	Restorative	13,643,208	15,304,491	\$ 4.67	2.3%	1.4%	3.8%	\$ 5.03	
All	All	Endodontics	13,643,208	15,304,491	\$ 0.50	2.1%	2.9%	5.1%	\$ 0.55	
All	All	Maxillofacial Prosthetics	13,643,208	15,304,491	\$ 0.00	2.6%	3.2%	5.9%	\$ 0.00	
All	All	Prosthodontics	13,643,208	15,304,491	\$ 0.98	2.6%	2.7%	5.3%	\$ 1.08	
All	All	Prosthodontics-Fixed	13,643,208	15,304,491	\$ 0.00	2.1%	2.4%	4.6%	\$ 0.00	
All	All	Test and Examination	13,643,208	15,304,491	\$ 0.04	5.6%	1.7%	7.3%	\$ 0.05	
All	All	Implant Services	13,643,208	15,304,491	\$ 0.00	2.6%	2.8%	5.4%	\$ 0.00	
Total	Total	Total	13,643,208	15,304,491	\$ 20.19	4.2%	1.8%	6.1%	\$ 22.72	
Tricounty	Non-ACA	All	2,787,357	3,039,527	\$ 22.82	3.3%	1.6%	5.0%	\$ 25.14	
Tricounty	ACA	All	2,353,883	2,689,889	\$ 15.04	2.9%	1.6%	4.5%	\$ 16.43	
Other	Non-ACA	All	4,965,149	5,482,068	\$ 24.82	4.9%	2.0%	7.0%	\$ 28.44	
Other	ACA	All	3,536,819	4,093,006	\$ 15.03	4.3%	1.9%	6.2%	\$ 16.96	
Total	Total	Total	13,643,208	15,304,491	\$ 20.19	4.2%	1.8%	6.1%	\$ 22.72	

General Notes:

- Tricounty, Other, and all region composites are based on CY27 CCOA caseload forecast mixture.

- Program changes by CCO are located on the CCO buildup tabs in Appendix C.

Appendix F: Maternity Case Rate Regional Detail

CY27 CCO Rate Certification

Appendix F: Maternity Case Rate Regional Detail

				Base Data										
				Deliveries		Unadjusted Paid		DRG Repricing		IBNR Adjustment				
Region	Hospital Type	Delivery Type	COS	All Delivery Records	Deliveries for Eligible COAs	Paid - Unadjusted	Cost per Delivery - Unadjusted	Paid - DRG Repriced	Cost per Delivery - DRG Repriced	Completion Percentage	Paid - Completed	Cost per Delivery - Completed	Annual Trend	CY 2027 Projected Cost Per Delivery
Eastern	A/B	V	Maternity - Inpatient	739	733	\$ 8,164,090	\$ 11,138	\$ 8,922,011	\$ 12,172	2.4%	\$ 9,139,720	\$ 12,469	1.0%	\$ 12,729
Eastern	A/B	V	Maternity - Outpatient	739	733	\$ 1,650,404	\$ 2,252	\$ 1,727,224	\$ 2,356	0.8%	\$ 1,741,615	\$ 2,376	4.8%	\$ 2,608
Eastern	A/B	V	Maternity - Physician	739	733	\$ 1,562,170	\$ 2,131	\$ 1,563,669	\$ 2,133	1.1%	\$ 1,580,906	\$ 2,157	5.3%	\$ 2,392
Eastern	DRG	V	Maternity - Inpatient	670	664	\$ 521,719	\$ 786	\$ 2,946,547	\$ 4,438	2.3%	\$ 3,015,604	\$ 4,542	1.0%	\$ 4,636
Eastern	DRG	V	Maternity - Outpatient	670	664	\$ 260,209	\$ 392	\$ 724,619	\$ 1,091	0.7%	\$ 729,847	\$ 1,099	4.8%	\$ 1,206
Eastern	DRG	V	Maternity - Physician	670	664	\$ 2,318,182	\$ 3,491	\$ 2,319,561	\$ 3,493	1.0%	\$ 2,342,668	\$ 3,528	5.3%	\$ 3,912
Eastern	Other	V	Maternity - Inpatient	169	169	\$ 731,446	\$ 4,328	\$ 731,446	\$ 4,328	1.7%	\$ 744,371	\$ 4,405	1.0%	\$ 4,497
Eastern	Other	V	Maternity - Outpatient	169	169	\$ 379,790	\$ 2,247	\$ 379,226	\$ 2,244	0.6%	\$ 381,427	\$ 2,257	4.8%	\$ 2,477
Eastern	Other	V	Maternity - Physician	169	169	\$ 429,661	\$ 2,542	\$ 429,661	\$ 2,542	0.8%	\$ 433,299	\$ 2,564	5.3%	\$ 2,843
Eastern	A/B	C	Maternity - Inpatient	234	232	\$ 5,146,350	\$ 22,183	\$ 5,365,542	\$ 23,127	2.1%	\$ 5,479,532	\$ 23,619	1.0%	\$ 24,112
Eastern	A/B	C	Maternity - Outpatient	234	232	\$ 731,112	\$ 3,151	\$ 742,482	\$ 3,200	0.7%	\$ 747,848	\$ 3,223	4.8%	\$ 3,538
Eastern	A/B	C	Maternity - Physician	234	232	\$ 592,779	\$ 2,555	\$ 593,144	\$ 2,557	1.0%	\$ 599,055	\$ 2,582	5.3%	\$ 2,863
Eastern	DRG	C	Maternity - Inpatient	259	256	\$ 298,926	\$ 1,168	\$ 1,764,760	\$ 6,894	2.1%	\$ 1,802,483	\$ 7,041	1.0%	\$ 7,188
Eastern	DRG	C	Maternity - Outpatient	259	256	\$ 98,476	\$ 385	\$ 309,720	\$ 1,210	0.7%	\$ 311,927	\$ 1,218	4.8%	\$ 1,337
Eastern	DRG	C	Maternity - Physician	259	256	\$ 1,111,641	\$ 4,342	\$ 1,112,015	\$ 4,344	1.0%	\$ 1,123,434	\$ 4,388	5.3%	\$ 4,866
Eastern	Other	C	Maternity - Inpatient	84	84	\$ 753,862	\$ 8,975	\$ 753,862	\$ 8,975	2.0%	\$ 769,058	\$ 9,155	1.0%	\$ 9,347
Eastern	Other	C	Maternity - Outpatient	84	84	\$ 246,184	\$ 2,931	\$ 246,184	\$ 2,931	0.6%	\$ 247,570	\$ 2,947	4.8%	\$ 3,235
Eastern	Other	C	Maternity - Physician	84	84	\$ 261,194	\$ 3,109	\$ 261,194	\$ 3,109	0.8%	\$ 263,427	\$ 3,136	5.3%	\$ 3,477
Eastern	A/B	V	Total	739	733	\$ 11,376,663	\$ 15,521	\$ 12,212,903	\$ 16,662	2.0%	\$ 12,462,241	\$ 17,002	2.1%	\$ 17,729
Eastern	DRG	V	Total	670	664	\$ 3,100,111	\$ 4,669	\$ 5,990,727	\$ 9,022	1.6%	\$ 6,088,119	\$ 9,169	3.1%	\$ 9,755
Eastern	Other	V	Total	169	169	\$ 1,540,898	\$ 9,118	\$ 1,540,333	\$ 9,114	1.2%	\$ 1,559,097	\$ 9,225	3.2%	\$ 9,817
Eastern	A/B	C	Total	234	232	\$ 6,470,242	\$ 27,889	\$ 6,701,168	\$ 28,884	1.8%	\$ 6,826,435	\$ 29,424	1.8%	\$ 30,513
Eastern	DRG	C	Total	259	256	\$ 1,509,044	\$ 5,895	\$ 3,186,495	\$ 12,447	1.6%	\$ 3,237,843	\$ 12,648	2.9%	\$ 13,392
Eastern	Other	C	Total	84	84	\$ 1,261,241	\$ 15,015	\$ 1,261,241	\$ 15,015	1.5%	\$ 1,280,055	\$ 15,239	2.7%	\$ 16,059
Eastern	Total	Total	Total	2,155	2,138	\$ 25,258,198	\$ 11,814	\$ 30,892,868	\$ 14,449	1.8%	\$ 31,453,789	\$ 14,712	2.4%	\$ 15,429

CY27 CCO Rate Certification

Appendix F: Maternity Case Rate Regional Detail

				Base Data										
				Deliveries		Unadjusted Paid		DRG Repricing		IBNR Adjustment				
				All Delivery Records	Deliveries for Eligible COAs	Paid - Unadjusted	Cost per Delivery - Unadjusted	Paid - DRG Repriced	Cost per Delivery - DRG Repriced	Completion Percentage	Paid - Completed	Cost per Delivery - Completed		CY 2027 Projected Cost Per Delivery
Region	Hospital Type	Delivery Type	COS											
Northwest	A/B	V	Maternity - Inpatient	950	949	\$ 9,811,992	\$ 10,339	\$ 9,799,555	\$ 10,326	2.8%	\$ 10,077,689	\$ 10,619	1.0%	\$ 10,841
Northwest	A/B	V	Maternity - Outpatient	950	949	\$ 2,153,618	\$ 2,269	\$ 2,121,990	\$ 2,236	0.5%	\$ 2,133,408	\$ 2,248	4.8%	\$ 2,468
Northwest	A/B	V	Maternity - Physician	950	949	\$ 2,971,975	\$ 3,132	\$ 2,974,633	\$ 3,134	1.5%	\$ 3,018,623	\$ 3,181	5.3%	\$ 3,527
Northwest	DRG	V	Maternity - Inpatient	1,451	1,443	\$ 8,052,462	\$ 5,580	\$ 6,910,389	\$ 4,789	2.9%	\$ 7,118,702	\$ 4,933	1.0%	\$ 5,036
Northwest	DRG	V	Maternity - Outpatient	1,451	1,443	\$ 2,409,326	\$ 1,670	\$ 2,163,172	\$ 1,499	0.7%	\$ 2,177,619	\$ 1,509	4.8%	\$ 1,656
Northwest	DRG	V	Maternity - Physician	1,451	1,443	\$ 5,592,940	\$ 3,876	\$ 5,221,913	\$ 3,619	1.5%	\$ 5,302,025	\$ 3,674	5.3%	\$ 4,074
Northwest	Other	V	Maternity - Inpatient	18	18	\$ 71,356	\$ 3,964	\$ 71,356	\$ 3,964	2.1%	\$ 72,854	\$ 4,047	1.0%	\$ 4,132
Northwest	Other	V	Maternity - Outpatient	18	18	\$ 8,493	\$ 472	\$ 8,125	\$ 451	0.4%	\$ 8,161	\$ 453	4.8%	\$ 498
Northwest	Other	V	Maternity - Physician	18	18	\$ 42,162	\$ 2,342	\$ 42,162	\$ 2,342	1.0%	\$ 42,580	\$ 2,366	5.3%	\$ 2,623
Northwest	A/B	C	Maternity - Inpatient	285	285	\$ 5,702,381	\$ 20,008	\$ 5,688,615	\$ 19,960	2.9%	\$ 5,861,436	\$ 20,566	1.0%	\$ 20,996
Northwest	A/B	C	Maternity - Outpatient	285	285	\$ 741,326	\$ 2,601	\$ 733,835	\$ 2,575	0.6%	\$ 738,353	\$ 2,591	4.8%	\$ 2,844
Northwest	A/B	C	Maternity - Physician	285	285	\$ 1,037,845	\$ 3,642	\$ 1,037,920	\$ 3,642	1.6%	\$ 1,054,807	\$ 3,701	5.3%	\$ 4,104
Northwest	DRG	C	Maternity - Inpatient	687	685	\$ 5,874,764	\$ 8,576	\$ 5,302,432	\$ 7,741	3.1%	\$ 5,474,141	\$ 7,991	1.0%	\$ 8,158
Northwest	DRG	C	Maternity - Outpatient	687	685	\$ 1,431,397	\$ 2,090	\$ 1,330,003	\$ 1,942	0.6%	\$ 1,338,595	\$ 1,954	4.8%	\$ 2,145
Northwest	DRG	C	Maternity - Physician	687	685	\$ 3,166,350	\$ 4,622	\$ 2,915,520	\$ 4,256	1.6%	\$ 2,963,273	\$ 4,326	5.3%	\$ 4,797
Northwest	Other	C	Maternity - Inpatient	1	1	\$ 9,724	\$ 9,724	\$ 9,724	\$ 9,724	0.7%	\$ 9,794	\$ 9,794	1.0%	\$ 9,998
Northwest	Other	C	Maternity - Outpatient	1	1	\$ -	\$ -	\$ -	\$ -	0.0%	\$ -	\$ -	4.8%	\$ -
Northwest	Other	C	Maternity - Physician	1	1	\$ 2,915	\$ 2,915	\$ 2,915	\$ 2,915	0.1%	\$ 2,917	\$ 2,917	5.3%	\$ 3,235
Northwest	A/B	V	Total	950	949	\$ 14,937,586	\$ 15,740	\$ 14,896,179	\$ 15,697	2.2%	\$ 15,229,720	\$ 16,048	2.4%	\$ 16,836
Northwest	DRG	V	Total	1,451	1,443	\$ 16,054,728	\$ 11,126	\$ 14,295,474	\$ 9,907	2.1%	\$ 14,598,345	\$ 10,117	3.2%	\$ 10,767
Northwest	Other	V	Total	18	18	\$ 122,011	\$ 6,778	\$ 121,643	\$ 6,758	1.6%	\$ 123,595	\$ 6,866	2.8%	\$ 7,253
Northwest	A/B	C	Total	285	285	\$ 7,481,552	\$ 26,251	\$ 7,460,370	\$ 26,177	2.5%	\$ 7,654,596	\$ 26,858	2.0%	\$ 27,944
Northwest	DRG	C	Total	687	685	\$ 10,472,511	\$ 15,288	\$ 9,547,955	\$ 13,939	2.3%	\$ 9,776,009	\$ 14,272	2.9%	\$ 15,100
Northwest	Other	C	Total	1	1	\$ 12,639	\$ 12,639	\$ 12,639	\$ 12,639	0.6%	\$ 12,711	\$ 12,711	2.0%	\$ 13,233
Northwest	Total	Total	Total	3,392	3,381	\$ 49,081,027	\$ 14,517	\$ 46,334,260	\$ 13,704	2.2%	\$ 47,394,976	\$ 14,018	2.7%	\$ 14,778

CY27 CCO Rate Certification

Appendix F: Maternity Case Rate Regional Detail

				Base Data										
				Deliveries		Unadjusted Paid		DRG Repricing		IBNR Adjustment				
				All Delivery Records	Deliveries for Eligible COAs	Paid - Unadjusted	Cost per Delivery - Unadjusted	Paid - DRG Repriced	Cost per Delivery - DRG Repriced	Completion Percentage	Paid - Completed	Cost per Delivery - Completed		CY 2027 Projected Cost Per Delivery
Region	Hospital Type	Delivery Type	COS											
Southwest	A/B	V	Maternity - Inpatient	86	86	\$ 883,264	\$ 10,271	\$ 883,264	\$ 10,271	2.8%	\$ 908,879	\$ 10,568	1.0%	\$ 10,789
Southwest	A/B	V	Maternity - Outpatient	86	86	\$ 157,522	\$ 1,832	\$ 147,819	\$ 1,719	0.9%	\$ 149,147	\$ 1,734	4.8%	\$ 1,904
Southwest	A/B	V	Maternity - Physician	86	86	\$ 249,367	\$ 2,900	\$ 249,367	\$ 2,900	3.4%	\$ 258,067	\$ 3,001	5.3%	\$ 3,328
Southwest	DRG	V	Maternity - Inpatient	2,522	2,512	\$ 11,442,679	\$ 4,555	\$ 11,740,232	\$ 4,674	2.8%	\$ 12,082,878	\$ 4,810	1.0%	\$ 4,911
Southwest	DRG	V	Maternity - Outpatient	2,522	2,512	\$ 2,604,158	\$ 1,037	\$ 2,662,463	\$ 1,060	0.7%	\$ 2,679,908	\$ 1,067	4.8%	\$ 1,171
Southwest	DRG	V	Maternity - Physician	2,522	2,512	\$ 7,260,311	\$ 2,890	\$ 7,267,495	\$ 2,893	3.1%	\$ 7,498,175	\$ 2,985	5.3%	\$ 3,310
Southwest	Other	V	Maternity - Inpatient	7	7	\$ 41,385	\$ 5,912	\$ 41,467	\$ 5,924	3.0%	\$ 42,754	\$ 6,108	1.0%	\$ 6,235
Southwest	Other	V	Maternity - Outpatient	7	7	\$ 37,153	\$ 5,308	\$ 36,993	\$ 5,285	0.9%	\$ 37,339	\$ 5,334	4.8%	\$ 5,855
Southwest	Other	V	Maternity - Physician	7	7	\$ 7,567	\$ 1,081	\$ 7,567	\$ 1,081	2.1%	\$ 7,733	\$ 1,105	5.3%	\$ 1,225
Southwest	A/B	C	Maternity - Inpatient	17	17	\$ 222,078	\$ 13,063	\$ 221,730	\$ 13,043	2.8%	\$ 228,024	\$ 13,413	1.0%	\$ 13,693
Southwest	A/B	C	Maternity - Outpatient	17	17	\$ 31,883	\$ 1,875	\$ 30,847	\$ 1,815	0.5%	\$ 30,991	\$ 1,823	4.8%	\$ 2,001
Southwest	A/B	C	Maternity - Physician	17	17	\$ 50,430	\$ 2,966	\$ 50,430	\$ 2,966	3.0%	\$ 52,015	\$ 3,060	5.3%	\$ 3,393
Southwest	DRG	C	Maternity - Inpatient	1,014	1,009	\$ 6,870,205	\$ 6,809	\$ 7,247,921	\$ 7,183	2.9%	\$ 7,464,772	\$ 7,398	1.0%	\$ 7,553
Southwest	DRG	C	Maternity - Outpatient	1,014	1,009	\$ 1,292,082	\$ 1,281	\$ 1,298,969	\$ 1,287	0.7%	\$ 1,308,050	\$ 1,296	4.8%	\$ 1,423
Southwest	DRG	C	Maternity - Physician	1,014	1,009	\$ 3,711,834	\$ 3,679	\$ 3,714,624	\$ 3,681	3.2%	\$ 3,838,779	\$ 3,805	5.3%	\$ 4,219
Southwest	Other	C	Maternity - Inpatient	6	6	\$ 53,198	\$ 8,866	\$ 53,198	\$ 8,866	2.2%	\$ 54,371	\$ 9,062	1.0%	\$ 9,251
Southwest	Other	C	Maternity - Outpatient	6	6	\$ 20,135	\$ 3,356	\$ 19,171	\$ 3,195	0.1%	\$ 19,192	\$ 3,199	4.8%	\$ 3,511
Southwest	Other	C	Maternity - Physician	6	6	\$ 12,357	\$ 2,059	\$ 12,357	\$ 2,059	1.6%	\$ 12,558	\$ 2,093	5.3%	\$ 2,321
Southwest	A/B	V	Total	86	86	\$ 1,290,154	\$ 15,002	\$ 1,280,450	\$ 14,889	2.7%	\$ 1,316,093	\$ 15,303	2.3%	\$ 16,020
Southwest	DRG	V	Total	2,522	2,512	\$ 21,307,148	\$ 8,482	\$ 21,670,189	\$ 8,627	2.7%	\$ 22,260,961	\$ 8,862	2.9%	\$ 9,391
Southwest	Other	V	Total	7	7	\$ 86,105	\$ 12,301	\$ 86,027	\$ 12,290	2.0%	\$ 87,826	\$ 12,547	3.0%	\$ 13,315
Southwest	A/B	C	Total	17	17	\$ 304,391	\$ 17,905	\$ 303,006	\$ 17,824	2.6%	\$ 311,030	\$ 18,296	2.1%	\$ 19,087
Southwest	DRG	C	Total	1,014	1,009	\$ 11,874,121	\$ 11,768	\$ 12,261,514	\$ 12,152	2.8%	\$ 12,611,601	\$ 12,499	2.7%	\$ 13,194
Southwest	Other	C	Total	6	6	\$ 85,689	\$ 14,282	\$ 84,725	\$ 14,121	1.6%	\$ 86,121	\$ 14,353	2.5%	\$ 15,083
Southwest	Total	Total	Total	3,652	3,637	\$ 34,947,608	\$ 9,609	\$ 35,685,911	\$ 9,812	2.7%	\$ 36,673,633	\$ 10,083	2.8%	\$ 10,665

CY27 CCO Rate Certification
Appendix F: Maternity Case Rate Regional Detail

				Base Data										
				Deliveries		Unadjusted Paid		DRG Repricing		IBNR Adjustment			Annual Trend	CY 2027 Projected Cost Per Delivery
Region	Hospital Type	Delivery Type	COS	All Delivery Records	Deliveries for Eligible COAs	Paid - Unadjusted	Cost per Delivery - Unadjusted	Paid - DRG Repriced	Cost per Delivery - DRG Repriced	Completion Percentage	Paid - Completed	Cost per Delivery - Completed		
Tri-County	A/B	V	Maternity - Inpatient	49	49	\$ 553,763	\$ 11,301	\$ 552,374	\$ 11,273	3.3%	\$ 571,223	\$ 11,658	1.0%	\$ 11,901
Tri-County	A/B	V	Maternity - Outpatient	49	49	\$ 50,594	\$ 1,033	\$ 47,424	\$ 968	0.5%	\$ 47,665	\$ 973	4.8%	\$ 1,068
Tri-County	A/B	V	Maternity - Physician	49	49	\$ 161,854	\$ 3,303	\$ 161,854	\$ 3,303	1.2%	\$ 163,842	\$ 3,344	5.3%	\$ 3,708
Tri-County	DRG	V	Maternity - Inpatient	3,543	3,529	\$ 17,385,972	\$ 4,927	\$ 15,935,977	\$ 4,516	3.5%	\$ 16,510,719	\$ 4,679	1.0%	\$ 4,776
Tri-County	DRG	V	Maternity - Outpatient	3,543	3,529	\$ 3,887,239	\$ 1,102	\$ 3,959,395	\$ 1,122	0.5%	\$ 3,978,895	\$ 1,127	4.8%	\$ 1,238
Tri-County	DRG	V	Maternity - Physician	3,543	3,529	\$ 14,621,163	\$ 4,143	\$ 14,616,884	\$ 4,142	1.5%	\$ 14,844,212	\$ 4,206	5.3%	\$ 4,664
Tri-County	Other	V	Maternity - Inpatient	10	10	\$ 44,829	\$ 4,483	\$ 44,829	\$ 4,483	3.3%	\$ 46,360	\$ 4,636	1.0%	\$ 4,733
Tri-County	Other	V	Maternity - Outpatient	10	10	\$ 4,007	\$ 401	\$ 3,368	\$ 337	0.1%	\$ 3,371	\$ 337	4.8%	\$ 370
Tri-County	Other	V	Maternity - Physician	10	10	\$ 23,704	\$ 2,370	\$ 23,704	\$ 2,370	1.6%	\$ 24,086	\$ 2,409	5.3%	\$ 2,671
Tri-County	A/B	C	Maternity - Inpatient	14	14	\$ 327,688	\$ 23,406	\$ 326,705	\$ 23,336	3.6%	\$ 338,993	\$ 24,214	1.0%	\$ 24,719
Tri-County	A/B	C	Maternity - Outpatient	14	14	\$ 9,100	\$ 650	\$ 7,680	\$ 549	0.3%	\$ 7,704	\$ 550	4.8%	\$ 604
Tri-County	A/B	C	Maternity - Physician	14	14	\$ 54,694	\$ 3,907	\$ 54,769	\$ 3,912	2.0%	\$ 55,903	\$ 3,993	5.3%	\$ 4,428
Tri-County	DRG	C	Maternity - Inpatient	1,365	1,358	\$ 10,688,033	\$ 7,870	\$ 9,851,214	\$ 7,254	3.5%	\$ 10,204,928	\$ 7,515	1.0%	\$ 7,672
Tri-County	DRG	C	Maternity - Outpatient	1,365	1,358	\$ 1,895,285	\$ 1,396	\$ 1,860,343	\$ 1,370	0.5%	\$ 1,870,344	\$ 1,377	4.8%	\$ 1,512
Tri-County	DRG	C	Maternity - Physician	1,365	1,358	\$ 6,556,557	\$ 4,828	\$ 6,556,694	\$ 4,828	1.5%	\$ 6,655,953	\$ 4,901	5.3%	\$ 5,435
Tri-County	Other	C	Maternity - Inpatient	5	5	\$ 30,383	\$ 6,077	\$ 30,383	\$ 6,077	2.9%	\$ 31,275	\$ 6,255	1.0%	\$ 6,386
Tri-County	Other	C	Maternity - Outpatient	5	5	\$ 4,023	\$ 805	\$ 3,864	\$ 773	0.3%	\$ 3,876	\$ 775	4.8%	\$ 851
Tri-County	Other	C	Maternity - Physician	5	5	\$ 24,881	\$ 4,976	\$ 24,881	\$ 4,976	1.0%	\$ 25,138	\$ 5,028	5.3%	\$ 5,575
Tri-County	A/B	V	Total	49	49	\$ 766,211	\$ 15,637	\$ 761,653	\$ 15,544	2.7%	\$ 782,730	\$ 15,974	2.2%	\$ 16,677
Tri-County	DRG	V	Total	3,543	3,529	\$ 35,894,373	\$ 10,171	\$ 34,512,256	\$ 9,780	2.3%	\$ 35,333,826	\$ 10,012	3.3%	\$ 10,678
Tri-County	Other	V	Total	10	10	\$ 72,541	\$ 7,254	\$ 71,901	\$ 7,190	2.6%	\$ 73,817	\$ 7,382	2.6%	\$ 7,774
Tri-County	A/B	C	Total	14	14	\$ 391,482	\$ 27,963	\$ 389,153	\$ 27,797	3.3%	\$ 402,600	\$ 28,757	1.7%	\$ 29,751
Tri-County	DRG	C	Total	1,365	1,358	\$ 19,139,875	\$ 14,094	\$ 18,268,251	\$ 13,452	2.5%	\$ 18,731,224	\$ 13,793	2.9%	\$ 14,618
Tri-County	Other	C	Total	5	5	\$ 59,287	\$ 11,857	\$ 59,129	\$ 11,826	1.9%	\$ 60,289	\$ 12,058	3.1%	\$ 12,812
Tri-County	Total	Total	Total	4,986	4,965	\$ 56,323,768	\$ 11,344	\$ 54,062,342	\$ 10,889	2.4%	\$ 55,384,486	\$ 11,155	3.1%	\$ 11,865

General Notes:

- Emergency Department costs are included in the Outpatient rows.

- DRG hospital costs are repriced to 80% of Medicare.

- No directed payments are reflected in the CY27 projected delivery costs shown. Any new Maternity directed payments will be reflected in the final case payments.

Footnote:

1. Trend is applied for 24 months.

Appendix G: Dental Services Excluded from Rate Setting

CY27 CCO Rate Certification

Appendix G: Dental Codes Excluded from Rate Setting

Procedure Code	Code Type	COS
D0321	Excluded	Diagnostic Services
D0340	Excluded	Diagnostic Services
D0350	Excluded	Diagnostic Services
D3110	Excluded	Endodontics
D3910	Excluded	Endodontics
D3950	Excluded	Endodontics
D9219	Excluded	General Services
D9951	Excluded	General Services
D9952	Excluded	General Services
D9995	Excluded	General Services
D9996	Excluded	General Services
D9954	Excluded	General Services
D9955	Excluded	General Services
D9999	Excluded	General Services
D5982	Excluded	Maxillofacial Prosthetics
D5988	Excluded	Maxillofacial Prosthetics
D7310	Excluded	Oral and Maxillofacial Surgery
D7311	Excluded	Oral and Maxillofacial Surgery
D7521	Excluded	Oral and Maxillofacial Surgery
D7980	Excluded	Oral and Maxillofacial Surgery
D7981	Excluded	Oral and Maxillofacial Surgery
D8750	Excluded	Orthodontics
D8670	Excluded	Orthodontics
D8681	Excluded	Orthodontics
D8696	Excluded	Orthodontics
D8697	Excluded	Orthodontics
D8698	Excluded	Orthodontics
D8699	Excluded	Orthodontics
D8701	Excluded	Orthodontics
D8702	Excluded	Orthodontics
D8703	Excluded	Orthodontics
D8704	Excluded	Orthodontics
D8999	Excluded	Orthodontics
D8070	Excluded ¹	Orthodontics
D8080	Excluded ¹	Orthodontics
D8090	Excluded ¹	Orthodontics
D8091	Excluded ¹	Orthodontics
D8220	Excluded ¹	Orthodontics
D8660	Excluded ¹	Orthodontics
D8680	Excluded ¹	Orthodontics
D8695	Excluded ¹	Orthodontics

CY27 CCO Rate Certification

Appendix G: Dental Codes Excluded from Rate Setting

Procedure Code	Code Type	COS
D8010	Excluded ¹	Orthodontics
D8020	Excluded ¹	Orthodontics
D8030	Excluded ¹	Orthodontics
D8040	Excluded ¹	Orthodontics
D1705	Excluded	Other Misc.
D1706	Excluded	Other Misc.
D1707	Excluded	Other Misc.
D1712	Excluded	Other Misc.
D4212	Excluded	Periodontics
D4220	Excluded	Periodontics
D4240	Excluded	Periodontics
D4241	Excluded	Periodontics
D4245	Excluded	Periodontics
D4260	Excluded	Periodontics
D4261	Excluded	Periodontics
D4268	Excluded	Periodontics
D4920	Excluded	Periodontics
D4921	Excluded	Periodontics
D1330	Excluded	Preventative
D1353	Excluded	Preventative
D6980	Excluded	Prosthodontics-Fixed
D2976	Excluded	Restorative
D2989	Excluded	Restorative
D0391	Excluded	Test and Examination
D0396	Excluded	Test and Examination
D0460	Excluded	Test and Examination
D0470	Excluded	Test and Examination
D0601	Excluded	Test and Examination
D0602	Excluded	Test and Examination
D0603	Excluded	Test and Examination
D0604	Excluded	Test and Examination
D0606	Excluded	Test and Examination
D0702	Excluded	Test and Examination
D0703	Excluded	Test and Examination
D0801	Excluded	Test and Examination
D0802	Excluded	Test and Examination

CY27 CCO Rate Certification
Appendix G: Dental Codes Excluded from Rate Setting

Procedure Code	Code Type	COS
General Notes:		
1. Orthodontics codes addressed through separate handicapped malocclusions add-on payment.		
2. All other codes not included in Appendix G were repriced according to either a fee schedule rate, or an average all-payer rate by region as reported in the data. See Appendix H for more information.		
3. This appendix should be reviewed in conjunction with the accompanying rate certification narrative.		

Appendix H: Dental CCO Repricing Fee Schedule

CY27 CCO Rate Certification**Appendix H: Dental Fee Schedule**

Procedure Code	Code Type	COS	Fees
D0120	Dental Code	Diagnostic Services	\$ 50.08
D0140	Dental Code	Diagnostic Services	\$ 61.30
D0145	Dental Code	Diagnostic Services	\$ 50.68
D0150	Dental Code	Diagnostic Services	\$ 71.52
D0160	Dental Code	Diagnostic Services	\$ 111.07
D0170	Dental Code	Diagnostic Services	\$ 52.72
D0171	Dental Code	Diagnostic Services	\$ 77.00
D0180	Dental Code	Diagnostic Services	\$ 76.44
D0190	Dental Code	Diagnostic Services	\$ 38.06
D0191	Dental Code	Diagnostic Services	\$ 25.06
D0210	Dental Code	Diagnostic Services	\$ 89.38
D0220	Dental Code	Diagnostic Services	\$ 22.44
D0230	Dental Code	Diagnostic Services	\$ 17.04
D0240	Dental Code	Diagnostic Services	\$ 24.14
D0250	Dental Code	Diagnostic Services	\$ 34.90
D0251	Dental Code	Diagnostic Services	\$ 17.55
D0270	Dental Code	Diagnostic Services	\$ 19.70
D0272	Dental Code	Diagnostic Services	\$ 34.42
D0273	Dental Code	Diagnostic Services	\$ 40.03
D0274	Dental Code	Diagnostic Services	\$ 49.10
D0277	Dental Code	Diagnostic Services	\$ 64.27
D0322	Dental Code	Diagnostic Services	\$ 393.42
D0330	Dental Code	Diagnostic Services	\$ 78.56
D3220	Dental Code	Endodontics	\$ 140.92
D3221	Dental Code	Endodontics	\$ 143.59
D3222	Dental Code	Endodontics	\$ 160.41
D3230	Dental Code	Endodontics	\$ 149.11
D3240	Dental Code	Endodontics	\$ 152.85
D3310	Dental Code	Endodontics	\$ 502.88
D3320	Dental Code	Endodontics	\$ 583.42
D3330	Dental Code	Endodontics	\$ 742.69
D3331	Dental Code	Endodontics	\$ 376.26
D3332	Dental Code	Endodontics	\$ 365.52
D3333	Dental Code	Endodontics	\$ 218.80
D3346	Dental Code	Endodontics	\$ 784.85
D3351	Dental Code	Endodontics	\$ 254.25
D3352	Dental Code	Endodontics	\$ 147.37
D3353	Dental Code	Endodontics	\$ 441.18
D3410	Dental Code	Endodontics	\$ 557.76
D3430	Dental Code	Endodontics	\$ 308.00
D3921	Dental Code	Endodontics	\$ 314.27
D9120	Dental Code	General Services	\$ 124.48

CY27 CCO Rate Certification**Appendix H: Dental Fee Schedule**

Procedure Code	Code Type	COS	Fees
D9211	Dental Code	General Services	\$ 36.01
D9212	Dental Code	General Services	\$ 31.71
D9222	Dental Code	General Services	\$ 150.10
D9223	Dental Code	General Services	\$ 108.63
D9230	Dental Code	General Services	\$ 47.40
D9239	Dental Code	General Services	\$ 111.97
D9243	Dental Code	General Services	\$ 81.34
D9310	Dental Code	General Services	\$ 80.92
D9410	Dental Code	General Services	\$ 146.65
D9420	Dental Code	General Services	\$ 234.27
D9430	Dental Code	General Services	\$ 54.33
D9440	Dental Code	General Services	\$ 93.62
D9610	Dental Code	General Services	\$ 51.49
D9612	Dental Code	General Services	\$ 85.41
D9912	Dental Code	General Services	\$ 0.01
D9920	Dental Code	General Services	\$ 71.86
D9930	Dental Code	General Services	\$ 83.67
D9947	Dental Code	General Services	\$ 525.17
D9949	Dental Code	General Services	\$ 14.37
D9953	Dental Code	General Services	\$ 347.95
D9990	Dental Code	General Services	\$ 67.35
D9992	Dental Code	General Services	\$ 73.19
D9994	Dental Code	General Services	\$ 13.08
D9997	Dental Code	General Services	\$ 48.86
D9248	Dental Code	General Services	\$ 124.34
D9630	Dental Code	General Services	\$ 50.60
D6096	Dental Code	Implant Services	\$ 87.22
D6100	Dental Code	Implant Services	\$ 243.23
D6105	Dental Code	Implant Services	\$ 93.03
D5986	Dental Code	Maxillofacial Prosthetics	\$ 49.48
D7111	Dental Code	Oral and Maxillofacial Surgery	\$ 89.51
D7140	Dental Code	Oral and Maxillofacial Surgery	\$ 154.59
D7210	Dental Code	Oral and Maxillofacial Surgery	\$ 243.23
D7220	Dental Code	Oral and Maxillofacial Surgery	\$ 243.23
D7230	Dental Code	Oral and Maxillofacial Surgery	\$ 351.37
D7240	Dental Code	Oral and Maxillofacial Surgery	\$ 419.21
D7241	Dental Code	Oral and Maxillofacial Surgery	\$ 419.21
D7250	Dental Code	Oral and Maxillofacial Surgery	\$ 269.18
D7251	Dental Code	Oral and Maxillofacial Surgery	\$ 419.21
D7260	Dental Code	Oral and Maxillofacial Surgery	\$ 1,001.34
D7261	Dental Code	Oral and Maxillofacial Surgery	\$ 667.64
D7270	Dental Code	Oral and Maxillofacial Surgery	\$ 371.71

CY27 CCO Rate Certification**Appendix H: Dental Fee Schedule**

Procedure Code	Code Type	COS	Fees
D7280	Dental Code	Oral and Maxillofacial Surgery	\$ 344.06
D7283	Dental Code	Oral and Maxillofacial Surgery	\$ 251.72
D7285	Dental Code	Oral and Maxillofacial Surgery	\$ 353.42
D7286	Dental Code	Oral and Maxillofacial Surgery	\$ 329.32
D7287	Dental Code	Oral and Maxillofacial Surgery	\$ 116.04
D7288	Dental Code	Oral and Maxillofacial Surgery	\$ 116.04
D7340	Dental Code	Oral and Maxillofacial Surgery	\$ 1,330.00
D7350	Dental Code	Oral and Maxillofacial Surgery	\$ 3,935.72
D7450	Dental Code	Oral and Maxillofacial Surgery	\$ 498.71
D7451	Dental Code	Oral and Maxillofacial Surgery	\$ 1,037.82
D7465	Dental Code	Oral and Maxillofacial Surgery	\$ 226.39
D7471	Dental Code	Oral and Maxillofacial Surgery	\$ 347.11
D7472	Dental Code	Oral and Maxillofacial Surgery	\$ 830.16
D7473	Dental Code	Oral and Maxillofacial Surgery	\$ 803.58
D7509	Dental Code	Oral and Maxillofacial Surgery	\$ 301.74
D7510	Dental Code	Oral and Maxillofacial Surgery	\$ 199.40
D7511	Dental Code	Oral and Maxillofacial Surgery	\$ 336.34
D7520	Dental Code	Oral and Maxillofacial Surgery	\$ 950.43
D7530	Dental Code	Oral and Maxillofacial Surgery	\$ 342.63
D7540	Dental Code	Oral and Maxillofacial Surgery	\$ 449.17
D7550	Dental Code	Oral and Maxillofacial Surgery	\$ 277.25
D7560	Dental Code	Oral and Maxillofacial Surgery	\$ 1,958.69
D7670	Dental Code	Oral and Maxillofacial Surgery	\$ 874.45
D7770	Dental Code	Oral and Maxillofacial Surgery	\$ 1,874.49
D7910	Dental Code	Oral and Maxillofacial Surgery	\$ 304.54
D7911	Dental Code	Oral and Maxillofacial Surgery	\$ 760.14
D7912	Dental Code	Oral and Maxillofacial Surgery	\$ 1,368.20
D7920	Dental Code	Oral and Maxillofacial Surgery	\$ 2,376.29
D7950	Dental Code	Oral and Maxillofacial Surgery	\$ 619.83
D7961	Dental Code	Oral and Maxillofacial Surgery	\$ 181.46
D7962	Dental Code	Oral and Maxillofacial Surgery	\$ 181.46
D7963	Dental Code	Oral and Maxillofacial Surgery	\$ 435.28
D7970	Dental Code	Oral and Maxillofacial Surgery	\$ 260.75
D7971	Dental Code	Oral and Maxillofacial Surgery	\$ 170.92
D7982	Dental Code	Oral and Maxillofacial Surgery	\$ 1,466.17
D7983	Dental Code	Oral and Maxillofacial Surgery	\$ 1,407.19
D7990	Dental Code	Oral and Maxillofacial Surgery	\$ 1,210.31
D7997	Dental Code	Oral and Maxillofacial Surgery	\$ 222.52
D7320	Dental Code	Oral and Maxillofacial Surgery	\$ 268.57
D7321	Dental Code	Oral and Maxillofacial Surgery	\$ 259.95
D1556	Dental Code	Other Misc.	\$ 44.82
D1557	Dental Code	Other Misc.	\$ 44.82

CY27 CCO Rate Certification**Appendix H: Dental Fee Schedule**

Procedure Code	Code Type	COS	Fees
D1558	Dental Code	Other Misc.	\$ 44.82
D1575	Dental Code	Other Misc.	\$ 196.53
D1701	Dental Code	Other Misc.	\$ 17.09
D1702	Dental Code	Other Misc.	\$ 17.09
D1703	Dental Code	Other Misc.	\$ 17.09
D1704	Dental Code	Other Misc.	\$ 17.09
D1708	Dental Code	Other Misc.	\$ 17.09
D1709	Dental Code	Other Misc.	\$ 17.09
D1710	Dental Code	Other Misc.	\$ 17.09
D1711	Dental Code	Other Misc.	\$ 17.09
D1713	Dental Code	Other Misc.	\$ 17.09
D1714	Dental Code	Other Misc.	\$ 17.09
D1720	Dental Code	Other Misc.	\$ 16.61
D1781	Dental Code	Other Misc.	\$ 17.09
D1782	Dental Code	Other Misc.	\$ 17.09
D1783	Dental Code	Other Misc.	\$ 17.09
D4210	Dental Code	Periodontics	\$ 387.71
D4211	Dental Code	Periodontics	\$ 195.77
D4341	Dental Code	Periodontics	\$ 202.05
D4342	Dental Code	Periodontics	\$ 126.88
D4346	Dental Code	Periodontics	\$ 95.76
D4355	Dental Code	Periodontics	\$ 128.05
D4910	Dental Code	Periodontics	\$ 116.57
D1110	Dental Code	Preventative	\$ 78.80
D1120	Dental Code	Preventative	\$ 60.75
D1206	Dental Code	Preventative	\$ 34.92
D1208	Dental Code	Preventative	\$ 33.02
D1351	Dental Code	Preventative	\$ 46.13
D1354	Dental Code	Preventative	\$ 23.34
D1355	Dental Code	Preventative	\$ 24.70
D1510	Dental Code	Preventative	\$ 235.33
D1516	Dental Code	Preventative	\$ 330.41
D1517	Dental Code	Preventative	\$ 330.11
D1520	Dental Code	Preventative	\$ 260.55
D1526	Dental Code	Preventative	\$ 257.80
D1527	Dental Code	Preventative	\$ 257.80
D1551	Dental Code	Preventative	\$ 44.82
D1552	Dental Code	Preventative	\$ 44.82
D1553	Dental Code	Preventative	\$ 44.82
D1301	Dental Code	Preventative	\$ 22.71
D1310	Dental Code	Preventative	\$ 21.43
D1320	Dental Code	Preventative	\$ 22.71

CY27 CCO Rate Certification**Appendix H: Dental Fee Schedule**

Procedure Code	Code Type	COS	Fees
D1321	Dental Code	Preventative	\$ 13.02
D5110	Dental Code	Prosthodontics	\$ 1,071.93
D5120	Dental Code	Prosthodontics	\$ 1,062.56
D5130	Dental Code	Prosthodontics	\$ 1,091.65
D5140	Dental Code	Prosthodontics	\$ 1,076.39
D5211	Dental Code	Prosthodontics	\$ 839.91
D5212	Dental Code	Prosthodontics	\$ 867.60
D5221	Dental Code	Prosthodontics	\$ 722.08
D5222	Dental Code	Prosthodontics	\$ 737.35
D5410	Dental Code	Prosthodontics	\$ 57.11
D5411	Dental Code	Prosthodontics	\$ 56.45
D5421	Dental Code	Prosthodontics	\$ 56.56
D5422	Dental Code	Prosthodontics	\$ 59.00
D5511	Dental Code	Prosthodontics	\$ 129.11
D5512	Dental Code	Prosthodontics	\$ 147.75
D5520	Dental Code	Prosthodontics	\$ 114.83
D5611	Dental Code	Prosthodontics	\$ 119.12
D5612	Dental Code	Prosthodontics	\$ 138.69
D5621	Dental Code	Prosthodontics	\$ 154.44
D5622	Dental Code	Prosthodontics	\$ 154.44
D5630	Dental Code	Prosthodontics	\$ 159.69
D5640	Dental Code	Prosthodontics	\$ 112.62
D5650	Dental Code	Prosthodontics	\$ 141.11
D5660	Dental Code	Prosthodontics	\$ 179.46
D5670	Dental Code	Prosthodontics	\$ 447.88
D5671	Dental Code	Prosthodontics	\$ 468.61
D5710	Dental Code	Prosthodontics	\$ 396.22
D5711	Dental Code	Prosthodontics	\$ 390.56
D5720	Dental Code	Prosthodontics	\$ 385.84
D5721	Dental Code	Prosthodontics	\$ 384.91
D5730	Dental Code	Prosthodontics	\$ 211.82
D5731	Dental Code	Prosthodontics	\$ 197.67
D5740	Dental Code	Prosthodontics	\$ 177.10
D5741	Dental Code	Prosthodontics	\$ 184.91
D5750	Dental Code	Prosthodontics	\$ 314.39
D5751	Dental Code	Prosthodontics	\$ 315.99
D5760	Dental Code	Prosthodontics	\$ 304.84
D5761	Dental Code	Prosthodontics	\$ 306.47
D5765	Dental Code	Prosthodontics	\$ 218.67
D5820	Dental Code	Prosthodontics	\$ 394.51
D5821	Dental Code	Prosthodontics	\$ 389.28
D5850	Dental Code	Prosthodontics	\$ 92.38

CY27 CCO Rate Certification**Appendix H: Dental Fee Schedule**

Procedure Code	Code Type	COS	Fees
D5851	Dental Code	Prosthodontics	\$ 92.38
D5876	Dental Code	Prosthodontics	\$ 210.85
D6930	Dental Code	Prosthodontics-Fixed	\$ 109.01
D2140	Dental Code	Restorative	\$ 100.17
D2150	Dental Code	Restorative	\$ 123.58
D2160	Dental Code	Restorative	\$ 148.74
D2161	Dental Code	Restorative	\$ 177.13
D2330	Dental Code	Restorative	\$ 114.35
D2331	Dental Code	Restorative	\$ 146.52
D2332	Dental Code	Restorative	\$ 180.77
D2335	Dental Code	Restorative	\$ 213.91
D2390	Dental Code	Restorative	\$ 273.88
D2391	Dental Code	Restorative	\$ 122.82
D2392	Dental Code	Restorative	\$ 158.09
D2393	Dental Code	Restorative	\$ 186.78
D2394	Dental Code	Restorative	\$ 212.90
D2710	Dental Code	Restorative	\$ 438.62
D2712	Dental Code	Restorative	\$ 71.07
D2740	Dental Code	Restorative	\$ 576.85
D2751	Dental Code	Restorative	\$ 695.49
D2752	Dental Code	Restorative	\$ 716.77
D2910	Dental Code	Restorative	\$ 58.66
D2915	Dental Code	Restorative	\$ 72.36
D2920	Dental Code	Restorative	\$ 68.61
D2921	Dental Code	Restorative	\$ 114.42
D2929	Dental Code	Restorative	\$ 235.70
D2930	Dental Code	Restorative	\$ 207.16
D2931	Dental Code	Restorative	\$ 225.94
D2932	Dental Code	Restorative	\$ 216.37
D2933	Dental Code	Restorative	\$ 230.06
D2940	Dental Code	Restorative	\$ 78.00
D2950	Dental Code	Restorative	\$ 161.09
D2951	Dental Code	Restorative	\$ 55.31
D2954	Dental Code	Restorative	\$ 199.69
D2957	Dental Code	Restorative	\$ 129.33
D2980	Dental Code	Restorative	\$ 150.72
D0364	Dental Code	Test and Examination	\$ 210.12
D0365	Dental Code	Test and Examination	\$ 242.75
D0366	Dental Code	Test and Examination	\$ 242.75
D0367	Dental Code	Test and Examination	\$ 249.84
D0411	Dental Code	Test and Examination	\$ 8.78
D0415	Dental Code	Test and Examination	\$ 30.63

CY27 CCO Rate Certification**Appendix H: Dental Fee Schedule**

Procedure Code	Code Type	COS	Fees
D0472	Dental Code	Test and Examination	\$ 40.60
D0473	Dental Code	Test and Examination	\$ 40.60
D0474	Dental Code	Test and Examination	\$ 40.60
D0480	Dental Code	Test and Examination	\$ 40.60
D0486	Dental Code	Test and Examination	\$ 101.21
D0701	Dental Code	Test and Examination	\$ 7.33
D0705	Dental Code	Test and Examination	\$ 1.16
D0706	Dental Code	Test and Examination	\$ 1.40
D0707	Dental Code	Test and Examination	\$ 3.02
D0708	Dental Code	Test and Examination	\$ 1.74
D0709	Dental Code	Test and Examination	\$ 9.77
Other - Tri County ¹	All Other Included	Other Misc.	\$ 48.62
Other - Other Region ¹	All Other Included	Other Misc.	\$ 36.56

General Notes:

1. For all other procedure codes that were included in the dental claims base data but not included either in Appendix G (Dental Codes Excluded from Rate Setting) or above in Appendix H (Dental Codes Repriced to a Fee Schedule), an average unit cost was developed based on the all-payer paid amounts by region as reported in the data. An adjustment for third-party payments was made to all included data.
2. This appendix should be reviewed in conjunction with the accompanying rate certification narrative.

Appendix I: Outpatient Hospital Market Basket

CY27 CCO Rate Certification**Appendix I: Outpatient Hospital APCs**

Code Type	Code	Description
APC	5021	Level 1 Type A ED Visits
APC	5022	Level 2 Type A ED Visits
APC	5023	Level 3 Type A ED Visits
APC	5024	Level 4 Type A ED Visits
APC	5025	Level 5 Type A ED Visits
APC	5041	Critical Care
APC	5045	Trauma Response with Critical Care
APC	5052	Level 2 Skin Procedures
APC	5073	Level 3 Excision/ Biopsy/ Incision and Drainage
APC	5113	Level 3 Musculoskeletal Procedures
APC	5114	Level 4 Musculoskeletal Procedures
APC	5115	Level 5 Musculoskeletal Procedures
APC	5164	Level 4 ENT Procedures
APC	5165	Level 5 ENT Procedures
APC	5301	Level 1 Upper GI Procedures
APC	5311	Level 1 Lower GI Procedures
APC	5361	Level 1 Laparoscopy and Related Services
APC	5362	Level 2 Laparoscopy and Related Services
APC	5411	Level 1 Gynecologic Procedures
APC	5522	Level 2 Imaging without Contrast
APC	5623	Level 3 Radiation Therapy
APC	5693	Level 3 Drug Administration
APC	5694	Level 4 Drug Administration
APC	5741	Level 1 Electronic Analysis of Devices

General Note:

- Relied on 2025 OPPS final rule and APCs.
- This appendix should be reviewed in conjunction with the accompanying rate certification narrative.

Appendix J: Outpatient Hospital Average Unit Costs

CY27 CCO Rate Certification

Appendix J: Outpatient Hospital Average Unit Costs

Type	Hospital	FFY 2025 Outpatient Unit Costs	FFY 2025 Emergency Department Unit Costs
A/B	Ashland Community Hospital ¹	\$ 490.01	\$ 294.34
A/B	Blue Mountain Hospital	\$ 449.94	\$ 150.55
A/B	Columbia Memorial Hospital	\$ 552.49	\$ 443.04
A/B	Coquille Valley Hospital	\$ 557.54	\$ 279.26
A/B	Cottage Grove Community Hospital	\$ 502.34	\$ 371.05
A/B	Curry General Hospital	\$ 620.55	\$ 644.67
A/B	Good Shepherd Medical Center	\$ 456.18	\$ 238.66
A/B	Grande Ronde Hospital	\$ 420.37	\$ 236.23
A/B	Harney District Hospital	\$ 462.45	\$ 214.10
A/B	Lake District Hospital	\$ 468.66	\$ 330.55
A/B	Lower Umpqua Hospital	\$ 623.44	\$ 424.01
A/B	Mid-Columbia Medical Center	\$ 484.56	\$ 269.13
A/B	Peace Harbor Hospital	\$ 483.94	\$ 332.90
A/B	Pioneer Memorial Hospital (H)	\$ 463.69	\$ 289.76
A/B	Providence Hood River Memorial Hospital	\$ 722.97	\$ 416.88
A/B	Providence Newberg Hospital	\$ 523.61	\$ 452.63
A/B	Providence Seaside Hospital	\$ 594.06	\$ 482.92
A/B	Saint Anthony Hospital	\$ 599.73	\$ 462.72
A/B	Samaritan Lebanon Community Hospital	\$ 568.26	\$ 409.56
A/B	Samaritan North Lincoln Hospital	\$ 581.35	\$ 468.76
A/B	Samaritan Pacific Communities Hospital	\$ 562.91	\$ 399.52
A/B	Santiam Memorial Hospital	\$ 552.20	\$ 380.09
A/B	Silverton Hospital	\$ 507.34	\$ 270.95
A/B	Southern Coos Hospital & Med Ctr	\$ 573.73	\$ 409.06
A/B	St. Alphonsus — Baker City	\$ 582.97	\$ 373.15
A/B	St. Alphonsus — Ontario	\$ 523.95	\$ 367.14
A/B	St. Charles — Madras	\$ 527.95	\$ 273.07
A/B	St. Charles — Prineville	\$ 496.72	\$ 231.49
A/B	Tillamook County General Hospital	\$ 503.98	\$ 390.86
A/B	Wallowa Memorial Hospital	\$ 603.80	\$ 301.91
A/B	West Valley Community Hospital	\$ 585.78	\$ 551.14
A/B	Willamette Valley Medical Center	\$ 430.82	\$ 271.38

CY27 CCO Rate Certification**Appendix J: Outpatient Hospital Average Unit Costs**

Type	Hospital	FFY 2025 Outpatient Unit Costs	FFY 2025 Emergency Department Unit Costs
DRG	Adventist Medical Center	\$ 446.78	\$ 238.73
DRG	Albany General Hospital	\$ 455.82	\$ 248.51
DRG	Bay Area Hospital	\$ 440.22	\$ 223.15
DRG	Good Samaritan Regional Medical Center	\$ 453.29	\$ 276.65
DRG	Kaiser Foundation Hospital Westside	\$ 450.18	\$ 241.94
DRG	Kaiser Permanente	\$ 459.34	\$ 247.29
DRG	Legacy Emanuel Hospital & Health Center	\$ 474.51	\$ 265.25
DRG	Legacy Good Samaritan Hospital	\$ 411.36	\$ 241.12
DRG	Legacy Meridian Park Hospital	\$ 427.32	\$ 250.36
DRG	Legacy Mt. Hood Medical Center	\$ 452.51	\$ 245.46
DRG	Mckenzie-Willamette Regional Medical Ctr	\$ 440.73	\$ 253.21
DRG	Mercy Medical Center	\$ 461.42	\$ 269.65
DRG	OHSU Hospital	\$ 442.91	\$ 276.10
DRG	Providence Medford Medical Center	\$ 494.98	\$ 286.20
DRG	Providence Milwaukie Hospital	\$ 459.55	\$ 239.77
DRG	Providence Portland Medical	\$ 428.70	\$ 242.90
DRG	Providence St. Vincent Medical Center	\$ 465.62	\$ 260.69
DRG	Rogue Valley Medical Center	\$ 490.01	\$ 294.34
DRG	Sacred Heart Riverbend	\$ 434.49	\$ 239.37
DRG	Salem Hospital	\$ 449.45	\$ 241.36
DRG	Shriners Hospitals for Children	\$ 457.27	\$ 285.98
DRG	Sky Lakes Medical Center	\$ 533.85	\$ 287.92
DRG	St. Charles Medical Center	\$ 472.86	\$ 296.18
DRG	Three Rivers Community Hospital	\$ 406.43	\$ 244.69
DRG	Tuality Community Hospital	\$ 466.28	\$ 256.33
DRG	Willamette Falls Community Hospital	\$ 450.40	\$ 251.63
Other	Other	\$ 475.85	\$ 285.98

General Notes:

1. Ashland Community Hospital will no longer operate independently in CY27. Ashland will continue to provide certain outpatient services, but the billing provider for these services will be Rogue Valley Medical Center. Outpatient rates for Ashland Community Hospital set equal to Rogue Valley Medical Center.
2. This appendix should be reviewed in conjunction with the accompanying rate certification narrative.

Appendix K: Performance Based Reward Report

PERFORMANCE BASED REWARD REPORT

INTRODUCTION

Under its current and prior 1115 waiver, Oregon Health Authority (OHA) has implemented a performance-based reward (PBR) initiative as a component of the CCO Contract. The waiver specified that OHA will fund Flexible Services (formerly referred to as “Health Related Services”) through Oregon Health Plan and establish financial incentives for successful Flexible Services spending.

The purpose of the PBR program is to incentivize CCOs to pay for Flexible Services that will improve health and reduce medical costs. PBR is calculated as part of the capitation rate-setting process to counteract decreases in capitation rates that might otherwise occur on account of successful Flexible Services spending. The program pays a variable profit margin to the Coordinated Care Organizations (CCOs) based on their Flexible Services spending and success in controlling overall cost growth. In addition, CCOs are expected to maintain quality metric performances.

OHA established a statewide pool of PBR funds based on historical Flexible Services spending and then allocates those funds to CCO capitation rates through the PBR formula. The PBR formula contains limits to ensure that the impact on the capitation rates remains within actuarially sound limits.

PBR FORMULA

The PBR formula allocates a statewide pool of funds to CCOs based on the following factors. Actual results of the PBR calculation are shown in the next section.

- Flexible services spending: CCOs’ individual Flexible Services expenditures for 2025 were reviewed and approved by OHA. Non-approved Flexible Services expenditures claimed by CCOs were not considered directly in the 2027 PBR allocation.
 - OHA bifurcated CCO contributions into a "base tranche" up to 3.0% of capitation rates and an "excess tranche" over 3.0% of capitation rates and gave half-weighting to the excess tranche. This approach reduces distortion of the PBR allocation to Flexible Services levels that are likely to exceed PBR maximums.
- Risk-adjusted rate of growth (RAROG): A [memo](#) summarizing the 2025 RAROG results can be found at OHA’s [CCO financial website](#). The resulting CCOs’ rates of growth are incorporated into the PBR calculation as follows:
 - First, a three-year average of RAROG is calculated by CCO.

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- Next, a RAROG factor is calculated for each CCO. That factor is 1.0 at the statewide three-year average RAROG, 1.5 for average RAROG 3.4% lower than the statewide average, and 0.5 for average RAROG 3.4% higher than the statewide average.
- Finally, that factor is applied against the CCO's approved Flexible Services spending to determine a CCO's "eligibility dollars", which are the basis for allocating the statewide PBR pool.
- Quality scaling factor: To ensure that pursuit of PBR does not result in a dilution of quality, CCOs are expected to maintain quality metrics captured through OHA's quality pool program. CCOs' PBR quality scores are the same as for their 2025 quality pool program distribution, except that metrics which did not decline in 2025 are deemed to pass under the PBR formula.

To help ensure that PBR results remain actuarially sound, the following limits are placed on PBR for any individual CCO:

- A maximum return on investment of 100% (i.e. doubling the Flexible Services investment) over two years
- PBR will not account for more than a 3% margin within capitation rates

The statewide pool amount of approximately \$67 million (\$64.4 million after quality scaling) was established as a budgetary decision made by the state in light of several considerations, including:

- Staying within budget neutrality parameters committed to in the 1115 waiver
- Available budget authorized by the state legislature, assessed against the actuarial soundness requirements for building capitation rates
- The appropriateness of statewide average return on investment, as well as by CCO.
- The reasonableness of the resulting margins within the CCOs' capitation rates

Once PBR dollar amounts are calculated by CCO, they are applied to CCO capitation rates as a uniform percentage of expected capitation payments across all rate groups, using projected 2027 enrollment figures provided by the state and adapted by Mercer for the 2027 capitation rates. The results of this calculation can be seen below.

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PBR CALCULATIONS

The following table contains details of the 2027 PBR calculation by CCO.

CCO	Approved 2025 FS Expenditures	FS Base Tranche	FS Excess Tranche	2025 Quality Score Modifier	RAROG 2024 to 2025	RAROG 2023 to 2024	RAROG 2022 to 2023	Rate of Growth Avg	Rate of Growth Scaling Factor	FS Allocation Dollars	Percent of FS Allocation	Final 2027 PBR Dollars	PBR to FS Ratio
Advanced Health, LLC	\$1,357,936	\$1,357,936	\$0	90%	1.68%	0.90%	-3.81%	-0.44%	1.50	\$2,036,905	3.83%	\$2,310,546	170.15%
AllCare CCO	\$5,748,877	\$5,748,877	\$0	90%	5.15%	-1.69%	14.39%	5.75%	0.89	\$5,096,668	9.59%	\$5,781,362	100.57%
Cascade Health Alliance, LLC	\$1,921,321	\$1,921,321	\$0	100%	-0.81%	12.17%	12.42%	7.74%	0.59	\$1,139,278	2.14%	\$1,435,922	74.74%
Columbia-Pacific CCO, LLC	\$1,369,123	\$1,369,123	\$0	90%	4.23%	1.79%	18.05%	7.79%	0.59	\$801,784	1.51%	\$909,496	66.43%
Eastern Oregon Coordinated Care Org., LLC	\$1,063,686	\$1,063,686	\$0	90%	4.87%	0.57%	6.77%	4.04%	1.14	\$1,210,391	2.28%	\$1,372,997	129.08%
Health Share of Oregon	\$17,351,578	\$17,351,578	\$0	100%	0.36%	7.92%	7.44%	5.18%	0.97	\$16,827,821	31.66%	\$21,209,440	122.23%
InterCommunity Health Network, Inc.	\$3,038,516	\$3,038,516	\$0	100%	8.15%	0.76%	6.46%	5.08%	0.99	\$2,993,223	5.63%	\$3,772,597	124.16%
Jackson County CCO, LLC	\$4,311,022	\$4,311,022	\$0	90%	1.84%	3.64%	14.60%	6.55%	0.77	\$3,315,022	6.24%	\$3,760,367	87.23%
PacificSource Community Solutions (Central)	\$5,683,497	\$5,683,497	\$0	90%	4.80%	-0.88%	8.27%	3.99%	1.14	\$6,504,464	12.24%	\$7,378,283	129.82%
PacificSource Community Solutions (Gorge)	\$1,346,244	\$1,346,244	\$0	100%	10.05%	-7.53%	5.51%	2.40%	1.38	\$1,856,756	3.49%	\$2,340,217	173.83%
PacificSource Community Solutions (Marion and Polk)	\$2,757,106	\$2,757,106	\$0	100%	-1.00%	7.85%	6.60%	4.41%	1.08	\$2,986,355	5.62%	\$3,763,941	136.52%
Trillium Community Health Plan, Inc. (Southwest)	\$1,293,091	\$1,293,091	\$0	90%	-1.03%	-0.75%	16.70%	4.66%	1.05	\$1,353,175	2.55%	\$1,534,963	118.70%
Trillium Community Health Plan, Inc. (Tri-County)	\$1,322,936	\$1,322,936	\$0	100%	10.88%	-3.88%	12.30%	6.17%	0.82	\$1,090,283	2.05%	\$1,374,170	103.87%
Umpqua Health Alliance	\$5,254,293	\$5,254,293	\$0	100%	2.26%	7.85%	14.34%	8.04%	0.55	\$2,886,284	5.43%	\$3,637,813	69.24%
Yamhill Community Care	\$2,573,611	\$2,573,611	\$0	100%	1.75%	0.17%	9.39%	3.69%	1.19	\$3,060,186	5.76%	\$3,856,995	149.87%
Total	\$56,392,838	\$56,392,838	\$0	96%	2.32%	3.96%	8.75%	4.98%	0.94	\$53,158,595	100.00%	\$64,439,110	114.27%

CERTIFICATION

We prepared the foregoing calculation of 2027 Performance Based Reward (PBR) results for Mercer, which is intended for the use in developing 2027 CCO capitation rates. This report is not intended for the reliance of other parties, nor for other purposes. Other parties receiving this work may wish to perform or commission independent studies.

In preparing this analysis, we relied upon data provided by CCOs in their cost growth template and Exhibit L financial reports. We also relied upon CCOs' Flexible Services spending as reported by CCOs and reviewed by OHA's Flexible Services team. In developing concurrent risk scores under the CDPS+MRx v7.3 model, with Oregon-specific disease weights for adults and CDPS+MRx disease weights for children and disabled population, we relied upon data extracted from OHA's HAL (MMIS) database. We also relied upon 2025 outcomes of OHA's Quality Pool program. In relying on this information, we assessed reasonability where possible and are comfortable using the data as provided. The enclosed calculations depend on the integrity of this information. To the extent that any of this information is inaccurate or incomplete, the calculations would be affected accordingly.

As part of preparing PBR calculations, we separately calculated and published 2025 Risk Adjusted Rate of Growth (RAROG) findings. A [memo](#) summarizing the results can be found at OHA's [CCO financial website](#).

These calculations follow Standards of Practice issued by the Actuarial Standards Board and were prepared by the following OAFA team members, who are the actuaries responsible for this report. Nancy Li, ASA, MAAA and Sam Smith, ASA, MAAA prepared the RAROG and PBR analyses, and Will Clark-Shim, FSA, MAAA and Lewis Backus, ASA, MAAA reviewed these analyses. They are Members of the American Academy of Actuaries and meet the qualification standards to render the opinion herein.

Appendix L: Separate Payment Term PMPM Estimates

CY27 CCO Rate Certification

Appendix L: Separate Payment Term PMPM Estimates — DRG

Rate Cell	CY27 Total	CY27 MMs	CY27 PMPM
ABAD & OAA	\$ 101,821,435	635,242	\$ 160.29
ACA 19-34	\$ 99,480,071	2,584,834	\$ 38.49
ACA 35-44	\$ 79,552,001	1,379,913	\$ 57.65
ACA 45-54	\$ 86,329,366	996,292	\$ 86.65
ACA 55-64	\$ 97,032,497	916,954	\$ 105.82
BBM 19-34	\$ 227,143	5,902	\$ 38.49
BBM 35-44	\$ 204,448	3,546	\$ 57.65
BBM 45-54	\$ 181,054	2,089	\$ 86.65
BBM 55-64	\$ 123,814	1,170	\$ 105.82
BCCP	\$ 191,312	686	\$ 278.68
CHILD 00-01	\$ 119,000,207	270,676	\$ 439.64
CHILD 01-05	\$ 25,864,333	1,284,424	\$ 20.14
CHILD 06-18	\$ 55,034,331	3,305,236	\$ 16.65
DUAL-MEDS	\$ 183,694,634	929,174	\$ 197.70
FOSTER	\$ 5,369,763	153,448	\$ 34.99
PCR	\$ 89,898,782	1,000,132	\$ 89.89
PWO	\$ 65,283,365	173,488	\$ 376.30
YSHCN	\$ 1,711,447	44,469	\$ 38.49
Total	\$ 1,011,000,000	13,687,677	\$ 73.86

CY27 CCO Rate Certification

Appendix L: Separate Payment Term PMPM Estimates — Rural A&B

Rate Cell	CY27 Total	CY27 MMs	CY27 PMPM
ABAD & OAA	\$ 15,934,840	635,242	\$ 25.08
ACA 19-34	\$ 21,844,478	2,584,834	\$ 8.45
ACA 35-44	\$ 17,468,544	1,379,913	\$ 12.66
ACA 45-54	\$ 18,254,946	996,292	\$ 18.32
ACA 55-64	\$ 22,211,255	916,954	\$ 24.22
BBM 19-34	\$ 49,877	5,902	\$ 8.45
BBM 35-44	\$ 44,894	3,546	\$ 12.66
BBM 45-54	\$ 38,285	2,089	\$ 18.32
BBM 55-64	\$ 28,342	1,170	\$ 24.22
BCCP	\$ 49,908	686	\$ 72.70
CHILD 00-01	\$ 5,174,378	270,676	\$ 19.12
CHILD 01-05	\$ 9,944,854	1,284,424	\$ 7.74
CHILD 06-18	\$ 21,794,598	3,305,236	\$ 6.59
DUAL-MEDS	\$ 30,792,089	929,174	\$ 33.14
FOSTER	\$ 1,622,721	153,448	\$ 10.58
PCR	\$ 18,061,953	1,000,132	\$ 18.06
PWO	\$ 6,308,227	173,488	\$ 36.36
YSHCN	\$ 375,811	44,469	\$ 8.45
Total	\$ 190,000,000	13,687,677	\$ 13.88

CY27 CCO Rate Certification

Appendix L: Separate Payment Term PMPM Estimates — PAMC

Rate Cell	CY27 Total	CY27 MMs	CY27 PMPM
ABAD & OAA	\$ 120,410,702	635,242	\$ 189.55
ACA 19-34	\$ 95,940,992	2,584,834	\$ 37.12
ACA 35-44	\$ 76,721,878	1,379,913	\$ 55.60
ACA 45-54	\$ 72,087,904	996,292	\$ 72.36
ACA 55-64	\$ 78,166,940	916,954	\$ 85.25
BBM 19-34	\$ 219,062	5,902	\$ 37.12
BBM 35-44	\$ 197,174	3,546	\$ 55.60
BBM 45-54	\$ 151,186	2,089	\$ 72.36
BBM 55-64	\$ 99,741	1,170	\$ 85.25
BCCP	\$ 101,096	686	\$ 147.26
CHILD 00-01	\$ 97,708,962	270,676	\$ 360.98
CHILD 01-05	\$ 62,667,951	1,284,424	\$ 48.79
CHILD 06-18	\$ 112,731,092	3,305,236	\$ 34.11
DUAL-MEDS	\$ 134,209,926	929,174	\$ 144.44
FOSTER	\$ 11,771,299	153,448	\$ 76.71
PCR	\$ 65,874,388	1,000,132	\$ 65.87
PWO	\$ 45,177,147	173,488	\$ 260.40
YSHCN	\$ 1,650,561	44,469	\$ 37.12
Total	\$ 975,888,000	13,687,677	\$ 71.30

CY27 CCO Rate Certification
Appendix L: Separate Payment Term PMPM Estimates — Government-O

Rate Cell			
ABAD & OAA			
ACA 19–34			
ACA 35–44			
ACA 45–54			
ACA 55–64			
BBM 19–34			
BBM 35–44			
BBM 45–54			
BBM 55–64			
BCCP			
CHILD 00–01			
CHILD 01–05			
CHILD 06–18			
DUAL-MEDS			
FOSTER			
PCR			
PWO			
YSHCN			
Total			

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CY27 CCO Rate Certification

Appendix L: Separate Payment Term PMPM Estimates — Private GEMT

Rate Cell			
ABAD & OAA			
ACA 19–34			
ACA 35–44			
ACA 45–54			
ACA 55–64			
BBM 19–34			
BBM 35–44			
BBM 45–54			
BBM 55–64			
BCCP			
CHILD 00–01			
CHILD 01–05			
CHILD 06–18			
DUAL-MEDS			
FOSTER			
PCR			
PWO			
YSHCN			
Total			

DRAFT - TO BE POPULATED

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