

**Oregon Health Plan Medicaid Demonstration
 Coordinated Care Organization Capitation Rates
 January 2019 through December 2019**

InterCommunity Health Network, Inc., abn:InterCommunity Health Network-Coordinated Care Organization Northwest

	Base Case Rate	Base HRA Adjustment	Hospital Provider Tax Allowance	Administrative Allowance	Managed Care Tax	Case Rate
Maternity Case Rate:						
Case Rate w/o Admin	\$10,569.05	\$1,506.59	\$442.63	\$1,101.24	\$207.40	\$13,826.92
Admin %						7.96%
Managed Care Tax %						1.50%

**Oregon Health Plan Medicaid Demonstration
 Coordinated Care Organization Capitation Rates
 CCO-A: Physical Health, Mental Health, and Dental Services
 January 2019 through December 2019**

Plan: InterCommunity Health Network, Inc., abn:InterCommunity Health Network-Coordinated Care Organization Region: Northwest Rate Group: Temporary Assistance to Needy Families - Adults
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Capitation Rate

Base Services Rate	\$456.34
Base HRA Adjustment	\$38.19
Hospital Provider Tax Allowance	\$15.53
Administrative Allowance	\$44.58
Managed Care Tax	\$8.45
Health Insurance Provider Fee	\$0.00
Total Services with Admin, HRA, and HIPF	\$563.09

Services Admin %	7.9%
Managed Care Tax %	1.5%

Rate Components with Risk Corridor			
Applied Behavioral Analysis		Hepatitis C DAA Drugs	
Rate:	\$0.00	Rate:	\$3.76
Admin:	\$0.00	Admin:	\$0.37
Total:	\$0.00	Total:	\$4.13

**Oregon Health Plan Medicaid Demonstration
 Coordinated Care Organization Capitation Rates
 CCO-A: Physical Health, Mental Health, and Dental Services
 January 2019 through December 2019**

Plan: InterCommunity Health Network, Inc., abn:InterCommunity Health Network-Coordinated Care Organization Region: Northwest Rate Group: Poverty Level Medical - Adults

Capitation Rate

Base Services Rate	\$387.70
Base HRA Adjustment	\$13.90
Hospital Provider Tax Allowance	\$13.40
Administrative Allowance	\$37.88
Managed Care Tax	\$6.90
Health Insurance Provider Fee	\$0.00
Total Services with Admin, HRA, and HIPF	\$459.77

Services Admin %	8.2%
Managed Care Tax %	1.5%

Rate Components with Risk Corridor			
Applied Behavioral Analysis		Hepatitis C DAA Drugs	
Rate:	\$0.00	Rate:	\$0.00
Admin:	\$0.00	Admin:	\$0.00
Total:	\$0.00	Total:	\$0.00

**Oregon Health Plan Medicaid Demonstration
 Coordinated Care Organization Capitation Rates
 CCO-A: Physical Health, Mental Health, and Dental Services
 January 2019 through December 2019**

Plan: InterCommunity Health Network, Inc., abn:InterCommunity Health Network-Coordinated Care Organization Region: Northwest Rate Group: Children 0-1 (CHIP, PLMC, TANF Children)

Capitation Rate

Base Services Rate	\$572.81
Base HRA Adjustment	\$96.05
Hospital Provider Tax Allowance	\$23.58
Administrative Allowance	\$55.96
Managed Care Tax	\$11.40
Health Insurance Provider Fee	\$0.00
Total Services with Admin, HRA, and HIPF	\$759.80

Services Admin %	7.4%
Managed Care Tax %	1.5%

Rate Components with Risk Corridor			
Applied Behavioral Analysis		Hepatitis C DAA Drugs	
Rate:	\$0.00	Rate:	\$0.00
Admin:	\$0.00	Admin:	\$0.00
Total:	\$0.00	Total:	\$0.00

**Oregon Health Plan Medicaid Demonstration
 Coordinated Care Organization Capitation Rates
 CCO-A: Physical Health, Mental Health, and Dental Services
 January 2019 through December 2019**

Plan: InterCommunity Health Network, Inc., abn:InterCommunity Health Network-Coordinated Care Organization Region: Northwest Rate Group: Children 1-5 (CHIP, PLMC, TANF Children)

Capitation Rate

Base Services Rate	\$143.92
Base HRA Adjustment	\$7.87
Hospital Provider Tax Allowance	\$4.34
Administrative Allowance	\$14.06
Managed Care Tax	\$2.59
Health Insurance Provider Fee	\$0.00
Total Services with Admin, HRA, and HIPF	\$172.79

Services Admin %	8.1%
Managed Care Tax %	1.5%

Rate Components with Risk Corridor			
Applied Behavioral Analysis		Hepatitis C DAA Drugs	
Rate:	\$0.82	Rate:	\$0.00
Admin:	\$0.08	Admin:	\$0.00
Total:	\$0.90	Total:	\$0.00

**Oregon Health Plan Medicaid Demonstration
 Coordinated Care Organization Capitation Rates
 CCO-A: Physical Health, Mental Health, and Dental Services
 January 2019 through December 2019**

Plan: InterCommunity Health Network, Inc., abn:InterCommunity Health Network-Coordinated Care Organization Region: Northwest Rate Group: Children 6-18 (CHIP, PLMC, TANF Children)
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Capitation Rate

Base Services Rate	\$186.47
Base HRA Adjustment	\$8.62
Hospital Provider Tax Allowance	\$4.54
Administrative Allowance	\$18.22
Managed Care Tax	\$3.32
Health Insurance Provider Fee	\$0.00
Total Services with Admin, HRA, and HIPF	\$221.16

Services Admin %	8.2%
Managed Care Tax %	1.5%

Rate Components with Risk Corridor			
Applied Behavioral Analysis		Hepatitis C DAA Drugs	
Rate:	\$0.43	Rate:	\$0.00
Admin:	\$0.04	Admin:	\$0.00
Total:	\$0.48	Total:	\$0.00

**Oregon Health Plan Medicaid Demonstration
 Coordinated Care Organization Capitation Rates
 CCO-A: Physical Health, Mental Health, and Dental Services
 January 2019 through December 2019**

Plan: InterCommunity Health Network, Inc., abn:InterCommunity Health Network-Coordinated Care Organization Region: Northwest Rate Group: Medicare/Medicaid Dual Eligible
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Capitation Rate

Base Services Rate	\$256.34
Base HRA Adjustment	\$13.52
Hospital Provider Tax Allowance	\$5.58
Administrative Allowance	\$25.04
Managed Care Tax	\$4.58
Health Insurance Provider Fee	\$0.00
Total Services with Admin, HRA, and HIPF	\$305.06

Services Admin %	8.2%
Managed Care Tax %	1.5%

Rate Components with Risk Corridor			
Applied Behavioral Analysis		Hepatitis C DAA Drugs	
Rate:	\$0.00	Rate:	\$0.00
Admin:	\$0.00	Admin:	\$0.00
Total:	\$0.00	Total:	\$0.00

**Oregon Health Plan Medicaid Demonstration
 Coordinated Care Organization Capitation Rates
 CCO-A: Physical Health, Mental Health, and Dental Services
 January 2019 through December 2019**

Plan: InterCommunity Health Network, Inc., abn:InterCommunity Health Network-Coordinated Care Organization Region: Northwest Rate Group: ABAD and OAA

Capitation Rate

Base Services Rate	\$1,200.16
Base HRA Adjustment	\$109.80
Hospital Provider Tax Allowance	\$43.55
Administrative Allowance	\$117.25
Managed Care Tax	\$22.40
Health Insurance Provider Fee	\$0.00
Total Services with Admin, HRA, and HIPF	\$1,493.17

Services Admin %	7.9%
Managed Care Tax %	1.5%

Rate Components with Risk Corridor			
Applied Behavioral Analysis		Hepatitis C DAA Drugs	
Rate:	\$6.42	Rate:	\$40.05
Admin:	\$0.63	Admin:	\$3.91
Total:	\$7.05	Total:	\$43.96

**Oregon Health Plan Medicaid Demonstration
 Coordinated Care Organization Capitation Rates
 CCO-A: Physical Health, Mental Health, and Dental Services
 January 2019 through December 2019**

Plan: InterCommunity Health Network, Inc., abn:InterCommunity Health Network-Coordinated Care Organization Region: Northwest Rate Group: Foster Children (CAF)
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Capitation Rate

Base Services Rate	\$419.36
Base HRA Adjustment	\$9.99
Hospital Provider Tax Allowance	\$7.84
Administrative Allowance	\$40.97
Managed Care Tax	\$7.28
Health Insurance Provider Fee	\$0.00
Total Services with Admin, HRA, and HIPF	\$485.43

Services Admin %	8.4%
Managed Care Tax %	1.5%

Rate Components with Risk Corridor			
Applied Behavioral Analysis		Hepatitis C DAA Drugs	
Rate:	\$1.09	Rate:	\$0.00
Admin:	\$0.11	Admin:	\$0.00
Total:	\$1.20	Total:	\$0.00

**Oregon Health Plan Medicaid Demonstration
 Coordinated Care Organization Capitation Rates
 CCO-A: Physical Health, Mental Health, and Dental Services
 January 2019 through December 2019**

Plan: InterCommunity Health Network, Inc., abn:InterCommunity Health Network-Coordinated Care Organization Region: Northwest Rate Group: ACA Ages 19-44

Capitation Rate

Base Services Rate	\$389.91
Base HRA Adjustment	\$33.45
Hospital Provider Tax Allowance	\$13.16
Administrative Allowance	\$38.09
Managed Care Tax	\$7.23
Health Insurance Provider Fee	\$0.00
Total Services with Admin, HRA, and HIPF	\$481.84

Services Admin %	7.9%
Managed Care Tax %	1.5%

Rate Components with Risk Corridor			
Applied Behavioral Analysis		Hepatitis C DAA Drugs	
Rate:	\$0.00	Rate:	\$0.00
Admin:	\$0.00	Admin:	\$0.00
Total:	\$0.00	Total:	\$0.00

**Oregon Health Plan Medicaid Demonstration
 Coordinated Care Organization Capitation Rates
 CCO-A: Physical Health, Mental Health, and Dental Services
 January 2019 through December 2019**

Plan: InterCommunity Health Network, Inc., abn:InterCommunity Health Network-Coordinated Care Organization Region: Northwest Rate Group: ACA Ages 45-54

Capitation Rate

Base Services Rate	\$735.38
Base HRA Adjustment	\$74.21
Hospital Provider Tax Allowance	\$25.79
Administrative Allowance	\$71.84
Managed Care Tax	\$13.82
Health Insurance Provider Fee	\$0.00
Total Services with Admin, HRA, and HIPF	\$921.03

Services Admin %	7.8%
Managed Care Tax %	1.5%

Rate Components with Risk Corridor			
Applied Behavioral Analysis		Hepatitis C DAA Drugs	
Rate:	\$0.00	Rate:	\$18.16
Admin:	\$0.00	Admin:	\$1.77
Total:	\$0.00	Total:	\$19.93

**Oregon Health Plan Medicaid Demonstration
 Coordinated Care Organization Capitation Rates
 CCO-A: Physical Health, Mental Health, and Dental Services
 January 2019 through December 2019**

Plan: InterCommunity Health Network, Inc., abn:InterCommunity Health Network-Coordinated Care Organization Region: Northwest Rate Group: ACA Ages 55-64

Capitation Rate

Base Services Rate	\$763.98
Base HRA Adjustment	\$84.11
Hospital Provider Tax Allowance	\$28.30
Administrative Allowance	\$74.64
Managed Care Tax	\$14.48
Health Insurance Provider Fee	\$0.00
Total Services with Admin, HRA, and HIPF	\$965.51

Services Admin %	7.7%
Managed Care Tax %	1.5%

Rate Components with Risk Corridor			
Applied Behavioral Analysis		Hepatitis C DAA Drugs	
Rate:	\$0.00	Rate:	\$29.34
Admin:	\$0.00	Admin:	\$2.87
Total:	\$0.00	Total:	\$32.21

**Oregon Health Plan Medicaid Demonstration
 Coordinated Care Organization Capitation Rates
 CCO-A: Physical Health, Mental Health, and Dental Services
 January 2019 through December 2019**

Plan: InterCommunity Health Network, Inc., abn:InterCommunity Health Network-Coordinated Care Organization Region: Northwest Rate Group: Breast and Cervical Cancer Program

Capitation Rate

Base Services Rate	\$1,514.88
Base HRA Adjustment	\$431.96
Hospital Provider Tax Allowance	\$55.55
Administrative Allowance	\$148.00
Managed Care Tax	\$32.75
Health Insurance Provider Fee	\$0.00
Total Services with Admin, HRA, and HIPF	\$2,183.13

Services Admin %	6.8%
Managed Care Tax %	1.5%

Rate Components with Risk Corridor			
Applied Behavioral Analysis		Hepatitis C DAA Drugs	
Rate:	\$0.00	Rate:	\$40.05
Admin:	\$0.00	Admin:	\$3.91
Total:	\$0.00	Total:	\$43.96

**Oregon Health Plan Medicaid Demonstration
 Coordinated Care Organization Capitation Rates
 CCO-B: Physical Health and Mental Health Services
 January 2019 through December 2019**

Plan: InterCommunity Health Network, Inc., abn:InterCommunity Health Network-Coordinated Care Organization Region: Northwest Rate Group: Temporary Assistance to Needy Families - Adults
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Capitation Rate

Base Services Rate	\$433.22
Base HRA Adjustment	\$38.19
Hospital Provider Tax Allowance	\$15.53
Administrative Allowance	\$42.32
Managed Care Tax	\$8.06
Health Insurance Provider Fee	\$0.00
Total Services with Admin, HRA, and HIPF	\$537.32

Services Admin %	7.9%
Managed Care Tax %	1.5%

Rate Components with Risk Corridor			
Applied Behavioral Analysis		Hepatitis C DAA Drugs	
Rate:	\$0.00	Rate:	\$3.76
Admin:	\$0.00	Admin:	\$0.37
Total:	\$0.00	Total:	\$4.13

**Oregon Health Plan Medicaid Demonstration
 Coordinated Care Organization Capitation Rates
 CCO-B: Physical Health and Mental Health Services
 January 2019 through December 2019**

Plan: InterCommunity Health Network, Inc., abn:InterCommunity Health Network-Coordinated Care Organization Region: Northwest Rate Group: Poverty Level Medical - Adults

Capitation Rate

Base Services Rate	\$367.37
Base HRA Adjustment	\$13.90
Hospital Provider Tax Allowance	\$13.40
Administrative Allowance	\$35.89
Managed Care Tax	\$6.56
Health Insurance Provider Fee	\$0.00
Total Services with Admin, HRA, and HIPF	\$437.12

Services Admin %	8.2%
Managed Care Tax %	1.5%

Rate Components with Risk Corridor			
Applied Behavioral Analysis		Hepatitis C DAA Drugs	
Rate:	\$0.00	Rate:	\$0.00
Admin:	\$0.00	Admin:	\$0.00
Total:	\$0.00	Total:	\$0.00

**Oregon Health Plan Medicaid Demonstration
 Coordinated Care Organization Capitation Rates
 CCO-B: Physical Health and Mental Health Services
 January 2019 through December 2019**

Plan: InterCommunity Health Network, Inc., abn:InterCommunity Health Network-Coordinated Care Organization Region: Northwest Rate Group: Children 0-1 (CHIP, PLMC, TANF Children)

Capitation Rate

Base Services Rate	\$571.42
Base HRA Adjustment	\$96.05
Hospital Provider Tax Allowance	\$23.58
Administrative Allowance	\$55.83
Managed Care Tax	\$11.37
Health Insurance Provider Fee	\$0.00
Total Services with Admin, HRA, and HIPF	\$758.26

Services Admin %	7.4%
Managed Care Tax %	1.5%

Rate Components with Risk Corridor			
Applied Behavioral Analysis		Hepatitis C DAA Drugs	
Rate:	\$0.00	Rate:	\$0.00
Admin:	\$0.00	Admin:	\$0.00
Total:	\$0.00	Total:	\$0.00

**Oregon Health Plan Medicaid Demonstration
 Coordinated Care Organization Capitation Rates
 CCO-B: Physical Health and Mental Health Services
 January 2019 through December 2019**

Plan: InterCommunity Health Network, Inc., abn:InterCommunity Health Network-Coordinated Care Organization Region: Northwest Rate Group: Children 1-5 (CHIP, PLMC, TANF Children)

Capitation Rate

Base Services Rate	\$121.02
Base HRA Adjustment	\$7.87
Hospital Provider Tax Allowance	\$4.34
Administrative Allowance	\$11.82
Managed Care Tax	\$2.21
Health Insurance Provider Fee	\$0.00
Total Services with Admin, HRA, and HIPF	\$147.26

Services Admin %	8.0%
Managed Care Tax %	1.5%

Rate Components with Risk Corridor			
Applied Behavioral Analysis		Hepatitis C DAA Drugs	
Rate:	\$0.82	Rate:	\$0.00
Admin:	\$0.08	Admin:	\$0.00
Total:	\$0.90	Total:	\$0.00

**Oregon Health Plan Medicaid Demonstration
 Coordinated Care Organization Capitation Rates
 CCO-B: Physical Health and Mental Health Services
 January 2019 through December 2019**

Plan: InterCommunity Health Network, Inc., abn:InterCommunity Health Network-Coordinated Care Organization Region: Northwest Rate Group: Children 6-18 (CHIP, PLMC, TANF Children)
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Capitation Rate

Base Services Rate	\$160.28
Base HRA Adjustment	\$8.62
Hospital Provider Tax Allowance	\$4.54
Administrative Allowance	\$15.66
Managed Care Tax	\$2.88
Health Insurance Provider Fee	\$0.00
Total Services with Admin, HRA, and HIPF	\$191.98

Services Admin %	8.2%
Managed Care Tax %	1.5%

Rate Components with Risk Corridor			
Applied Behavioral Analysis		Hepatitis C DAA Drugs	
Rate:	\$0.43	Rate:	\$0.00
Admin:	\$0.04	Admin:	\$0.00
Total:	\$0.48	Total:	\$0.00

**Oregon Health Plan Medicaid Demonstration
 Coordinated Care Organization Capitation Rates
 CCO-B: Physical Health and Mental Health Services
 January 2019 through December 2019**

Plan: InterCommunity Health Network, Inc., abn:InterCommunity Health Network-Coordinated Care Organization Region: Northwest Rate Group: Medicare/Medicaid Dual Eligible
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Capitation Rate

Base Services Rate	\$231.74
Base HRA Adjustment	\$13.52
Hospital Provider Tax Allowance	\$5.58
Administrative Allowance	\$22.64
Managed Care Tax	\$4.16
Health Insurance Provider Fee	\$0.00
Total Services with Admin, HRA, and HIPF	\$277.64

Services Admin %	8.2%
Managed Care Tax %	1.5%

Rate Components with Risk Corridor			
Applied Behavioral Analysis		Hepatitis C DAA Drugs	
Rate:	\$0.00	Rate:	\$0.00
Admin:	\$0.00	Admin:	\$0.00
Total:	\$0.00	Total:	\$0.00

**Oregon Health Plan Medicaid Demonstration
 Coordinated Care Organization Capitation Rates
 CCO-B: Physical Health and Mental Health Services
 January 2019 through December 2019**

Plan: InterCommunity Health Network, Inc., abn:InterCommunity Health Network-Coordinated Care Organization Region: Northwest Rate Group: ABAD and OAA

Capitation Rate

Base Services Rate	\$1,174.68
Base HRA Adjustment	\$109.80
Hospital Provider Tax Allowance	\$43.55
Administrative Allowance	\$114.76
Managed Care Tax	\$21.97
Health Insurance Provider Fee	\$0.00
Total Services with Admin, HRA, and HIPF	\$1,464.76

Services Admin %	7.8%
Managed Care Tax %	1.5%

Rate Components with Risk Corridor			
Applied Behavioral Analysis		Hepatitis C DAA Drugs	
Rate:	\$6.42	Rate:	\$40.05
Admin:	\$0.63	Admin:	\$3.91
Total:	\$7.05	Total:	\$43.96

**Oregon Health Plan Medicaid Demonstration
 Coordinated Care Organization Capitation Rates
 CCO-B: Physical Health and Mental Health Services
 January 2019 through December 2019**

Plan: InterCommunity Health Network, Inc., abn:InterCommunity Health Network-Coordinated Care Organization Region: Northwest Rate Group: Foster Children (CAF)
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Capitation Rate

Base Services Rate	\$391.48
Base HRA Adjustment	\$9.99
Hospital Provider Tax Allowance	\$7.84
Administrative Allowance	\$38.25
Managed Care Tax	\$6.82
Health Insurance Provider Fee	\$0.00
Total Services with Admin, HRA, and HIPF	\$454.37

Services Admin %	8.4%
Managed Care Tax %	1.5%

Rate Components with Risk Corridor			
Applied Behavioral Analysis		Hepatitis C DAA Drugs	
Rate:	\$1.09	Rate:	\$0.00
Admin:	\$0.11	Admin:	\$0.00
Total:	\$1.20	Total:	\$0.00

**Oregon Health Plan Medicaid Demonstration
 Coordinated Care Organization Capitation Rates
 CCO-B: Physical Health and Mental Health Services
 January 2019 through December 2019**

Plan: InterCommunity Health Network, Inc., abn:InterCommunity Health Network-Coordinated Care Organization Region: Northwest Rate Group: ACA Ages 19-44

Capitation Rate

Base Services Rate	\$368.78
Base HRA Adjustment	\$33.45
Hospital Provider Tax Allowance	\$13.16
Administrative Allowance	\$36.03
Managed Care Tax	\$6.87
Health Insurance Provider Fee	\$0.00
Total Services with Admin, HRA, and HIPF	\$458.29

Services Admin %	7.9%
Managed Care Tax %	1.5%

Rate Components with Risk Corridor			
Applied Behavioral Analysis		Hepatitis C DAA Drugs	
Rate:	\$0.00	Rate:	\$0.00
Admin:	\$0.00	Admin:	\$0.00
Total:	\$0.00	Total:	\$0.00

**Oregon Health Plan Medicaid Demonstration
 Coordinated Care Organization Capitation Rates
 CCO-B: Physical Health and Mental Health Services
 January 2019 through December 2019**

Plan: InterCommunity Health Network, Inc., abn:InterCommunity Health Network-Coordinated Care Organization Region: Northwest Rate Group: ACA Ages 45-54

Capitation Rate

Base Services Rate	\$706.50
Base HRA Adjustment	\$74.21
Hospital Provider Tax Allowance	\$25.79
Administrative Allowance	\$69.02
Managed Care Tax	\$13.33
Health Insurance Provider Fee	\$0.00
Total Services with Admin, HRA, and HIPF	\$888.84

Services Admin %	7.8%
Managed Care Tax %	1.5%

Rate Components with Risk Corridor			
Applied Behavioral Analysis		Hepatitis C DAA Drugs	
Rate:	\$0.00	Rate:	\$18.16
Admin:	\$0.00	Admin:	\$1.77
Total:	\$0.00	Total:	\$19.93

**Oregon Health Plan Medicaid Demonstration
 Coordinated Care Organization Capitation Rates
 CCO-B: Physical Health and Mental Health Services
 January 2019 through December 2019**

Plan: InterCommunity Health Network, Inc., abn:InterCommunity Health Network-Coordinated Care Organization Region: Northwest Rate Group: ACA Ages 55-64

Capitation Rate

Base Services Rate	\$734.44
Base HRA Adjustment	\$84.11
Hospital Provider Tax Allowance	\$28.30
Administrative Allowance	\$71.75
Managed Care Tax	\$13.99
Health Insurance Provider Fee	\$0.00
Total Services with Admin, HRA, and HIPF	\$932.59

Services Admin %	7.7%
Managed Care Tax %	1.5%

Rate Components with Risk Corridor			
Applied Behavioral Analysis		Hepatitis C DAA Drugs	
Rate:	\$0.00	Rate:	\$29.34
Admin:	\$0.00	Admin:	\$2.87
Total:	\$0.00	Total:	\$32.21

**Oregon Health Plan Medicaid Demonstration
 Coordinated Care Organization Capitation Rates
 CCO-B: Physical Health and Mental Health Services
 January 2019 through December 2019**

Plan: InterCommunity Health Network, Inc., abn:InterCommunity Health Network-Coordinated Care Organization Region: Northwest Rate Group: Breast and Cervical Cancer Program

Capitation Rate

Base Services Rate	\$1,492.01
Base HRA Adjustment	\$431.96
Hospital Provider Tax Allowance	\$55.55
Administrative Allowance	\$145.76
Managed Care Tax	\$32.36
Health Insurance Provider Fee	\$0.00
Total Services with Admin, HRA, and HIPF	\$2,157.65

Services Admin %	6.8%
Managed Care Tax %	1.5%

Rate Components with Risk Corridor			
Applied Behavioral Analysis		Hepatitis C DAA Drugs	
Rate:	\$0.00	Rate:	\$40.05
Admin:	\$0.00	Admin:	\$3.91
Total:	\$0.00	Total:	\$43.96

Oregon Health Plan Medicaid Demonstration
Coordinated Care Organization Capitation Rates
CCO-E: Mental Health Services Only
January 2019 through December 2019

Plan: InterCommunity Health Network, Inc., abn:InterCommunity Health Network-Coordinated Care Organization Region: Northwest Rate Group: Temporary Assistance to Needy Families - Adults
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Capitation Rate

Base Services Rate	\$40.97
Base HRA Adjustment	\$1.76
Hospital Provider Tax Allowance	\$0.17
Administrative Allowance	\$4.00
Managed Care Tax	\$0.71
Health Insurance Provider Fee	\$0.00
Total Services with Admin, HRA, and HIPF	\$47.61

Services Admin %	8.4%
Managed Care Tax %	1.5%

Rate Components with Risk Corridor	
Applied Behavioral Analysis	
Rate:	\$0.00
Admin:	\$0.00
Total:	\$0.00

**Oregon Health Plan Medicaid Demonstration
 Coordinated Care Organization Capitation Rates
 CCO-E: Mental Health Services Only
 January 2019 through December 2019**

Plan: InterCommunity Health Network, Inc., abn:InterCommunity Health Network-Coordinated Care Organization Region: Northwest Rate Group: Poverty Level Medical - Adults

Capitation Rate

Base Services Rate	\$19.40
Base HRA Adjustment	\$0.01
Hospital Provider Tax Allowance	\$0.00
Administrative Allowance	\$1.90
Managed Care Tax	\$0.32
Health Insurance Provider Fee	\$0.00
Total Services with Admin, HRA, and HIPF	\$21.64

Services Admin %	8.8%
Managed Care Tax %	1.5%

Rate Components with Risk Corridor	
Applied Behavioral Analysis	
Rate:	\$0.00
Admin:	\$0.00
Total:	\$0.00

**Oregon Health Plan Medicaid Demonstration
 Coordinated Care Organization Capitation Rates
 CCO-E: Mental Health Services Only
 January 2019 through December 2019**

Plan: InterCommunity Health Network, Inc., abn:InterCommunity Health Network-Coordinated Care Organization Region: Northwest Rate Group: Children 0-1 (CHIP, PLMC, TANF Children)

Capitation Rate

Base Services Rate	\$9.30
Base HRA Adjustment	\$0.00
Hospital Provider Tax Allowance	\$0.00
Administrative Allowance	\$0.91
Managed Care Tax	\$0.16
Health Insurance Provider Fee	\$0.00
Total Services with Admin, HRA, and HIPF	\$10.36

Services Admin %	8.8%
Managed Care Tax %	1.5%

Rate Components with Risk Corridor	
Applied Behavioral Analysis	
Rate:	\$0.00
Admin:	\$0.00
Total:	\$0.00

**Oregon Health Plan Medicaid Demonstration
 Coordinated Care Organization Capitation Rates
 CCO-E: Mental Health Services Only
 January 2019 through December 2019**

Plan: InterCommunity Health Network, Inc., abn:InterCommunity Health Network-Coordinated Care Organization Region: Northwest Rate Group: Children 1-5 (CHIP, PLMC, TANF Children)

Capitation Rate

Base Services Rate	\$12.57
Base HRA Adjustment	\$0.02
Hospital Provider Tax Allowance	\$0.00
Administrative Allowance	\$1.23
Managed Care Tax	\$0.21
Health Insurance Provider Fee	\$0.00
Total Services with Admin, HRA, and HIPF	\$14.03

Services Admin %	8.8%
Managed Care Tax %	1.5%

Rate Components with Risk Corridor	
Applied Behavioral Analysis	
Rate:	\$0.82
Admin:	\$0.08
Total:	\$0.90

**Oregon Health Plan Medicaid Demonstration
 Coordinated Care Organization Capitation Rates
 CCO-E: Mental Health Services Only
 January 2019 through December 2019**

Plan: InterCommunity Health Network, Inc., abn:InterCommunity Health Network-Coordinated Care Organization Region: Northwest Rate Group: Children 6-18 (CHIP, PLMC, TANF Children)
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Capitation Rate

Base Services Rate	\$36.07
Base HRA Adjustment	\$1.99
Hospital Provider Tax Allowance	\$0.20
Administrative Allowance	\$3.52
Managed Care Tax	\$0.64
Health Insurance Provider Fee	\$0.00
Total Services with Admin, HRA, and HIPF	\$42.42

Services Admin %	8.3%
Managed Care Tax %	1.5%

Rate Components with Risk Corridor	
Applied Behavioral Analysis	
Rate:	\$0.43
Admin:	\$0.04
Total:	\$0.48

**Oregon Health Plan Medicaid Demonstration
 Coordinated Care Organization Capitation Rates
 CCO-E: Mental Health Services Only
 January 2019 through December 2019**

Plan: InterCommunity Health Network, Inc., abn:InterCommunity Health Network-Coordinated Care Organization Region: Northwest Rate Group: Medicare/Medicaid Dual Eligible
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Capitation Rate

Base Services Rate	\$92.58
Base HRA Adjustment	\$0.15
Hospital Provider Tax Allowance	\$0.02
Administrative Allowance	\$9.04
Managed Care Tax	\$1.55
Health Insurance Provider Fee	\$0.00
Total Services with Admin, HRA, and HIPF	\$103.35

Services Admin %	8.8%
Managed Care Tax %	1.5%

Rate Components with Risk Corridor	
Applied Behavioral Analysis	
Rate:	\$0.00
Admin:	\$0.00
Total:	\$0.00

**Oregon Health Plan Medicaid Demonstration
 Coordinated Care Organization Capitation Rates
 CCO-E: Mental Health Services Only
 January 2019 through December 2019**

Plan: InterCommunity Health Network, Inc., abn:InterCommunity Health Network-Coordinated Care Organization Region: Northwest Rate Group: ABAD and OAA

Capitation Rate

Base Services Rate	\$162.29
Base HRA Adjustment	\$6.92
Hospital Provider Tax Allowance	\$0.88
Administrative Allowance	\$15.85
Managed Care Tax	\$2.83
Health Insurance Provider Fee	\$0.00
Total Services with Admin, HRA, and HIPF	\$188.78

Services Admin %	8.4%
Managed Care Tax %	1.5%

Rate Components with Risk Corridor	
Applied Behavioral Analysis	
Rate:	\$6.42
Admin:	\$0.63
Total:	\$7.05

**Oregon Health Plan Medicaid Demonstration
 Coordinated Care Organization Capitation Rates
 CCO-E: Mental Health Services Only
 January 2019 through December 2019**

Plan: InterCommunity Health Network, Inc., abn:InterCommunity Health Network-Coordinated Care Organization Region: Northwest Rate Group: Foster Children (CAF)
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Capitation Rate

Base Services Rate	\$211.92
Base HRA Adjustment	\$5.72
Hospital Provider Tax Allowance	\$1.02
Administrative Allowance	\$20.70
Managed Care Tax	\$3.65
Health Insurance Provider Fee	\$0.00
Total Services with Admin, HRA, and HIPF	\$243.01

Services Admin %	8.5%
Managed Care Tax %	1.5%

Rate Components with Risk Corridor	
Applied Behavioral Analysis	
Rate:	\$1.09
Admin:	\$0.11
Total:	\$1.20

**Oregon Health Plan Medicaid Demonstration
 Coordinated Care Organization Capitation Rates
 CCO-E: Mental Health Services Only
 January 2019 through December 2019**

Plan: InterCommunity Health Network, Inc., abn:InterCommunity Health Network-Coordinated Care Organization Region: Northwest Rate Group: ACA Ages 19-44

Capitation Rate

Base Services Rate	\$46.84
Base HRA Adjustment	\$2.92
Hospital Provider Tax Allowance	\$0.29
Administrative Allowance	\$4.58
Managed Care Tax	\$0.83
Health Insurance Provider Fee	\$0.00
Total Services with Admin, HRA, and HIPF	\$55.46

Services Admin %	8.3%
Managed Care Tax %	1.5%

Rate Components with Risk Corridor	
Applied Behavioral Analysis	
Rate:	\$0.00
Admin:	\$0.00
Total:	\$0.00

Oregon Health Plan Medicaid Demonstration
Coordinated Care Organization Capitation Rates
CCO-E: Mental Health Services Only
January 2019 through December 2019

Plan: InterCommunity Health Network, Inc., abn:InterCommunity Health Network-Coordinated Care Organization Region: Northwest Rate Group: ACA Ages 45-54

Capitation Rate

Base Services Rate	\$58.91
Base HRA Adjustment	\$2.11
Hospital Provider Tax Allowance	\$0.20
Administrative Allowance	\$5.76
Managed Care Tax	\$1.02
Health Insurance Provider Fee	\$0.00
Total Services with Admin, HRA, and HIPF	\$67.99

Services Admin %	8.5%
Managed Care Tax %	1.5%

Rate Components with Risk Corridor	
Applied Behavioral Analysis	
Rate:	\$0.00
Admin:	\$0.00
Total:	\$0.00

**Oregon Health Plan Medicaid Demonstration
 Coordinated Care Organization Capitation Rates
 CCO-E: Mental Health Services Only
 January 2019 through December 2019**

Plan: InterCommunity Health Network, Inc., abn:InterCommunity Health Network-Coordinated Care Organization Region: Northwest Rate Group: ACA Ages 55-64

Capitation Rate

Base Services Rate	\$52.38
Base HRA Adjustment	\$1.50
Hospital Provider Tax Allowance	\$0.14
Administrative Allowance	\$5.12
Managed Care Tax	\$0.90
Health Insurance Provider Fee	\$0.00
Total Services with Admin, HRA, and HIPF	\$60.04

Services Admin %	8.5%
Managed Care Tax %	1.5%

Rate Components with Risk Corridor	
Applied Behavioral Analysis	
Rate:	\$0.00
Admin:	\$0.00
Total:	\$0.00

**Oregon Health Plan Medicaid Demonstration
 Coordinated Care Organization Capitation Rates
 CCO-E: Mental Health Services Only
 January 2019 through December 2019**

Plan: InterCommunity Health Network, Inc., abn:InterCommunity Health Network-Coordinated Care Organization Region: Northwest Rate Group: Breast and Cervical Cancer Program

Capitation Rate

Base Services Rate	\$120.69
Base HRA Adjustment	\$0.00
Hospital Provider Tax Allowance	\$0.00
Administrative Allowance	\$11.79
Managed Care Tax	\$2.02
Health Insurance Provider Fee	\$0.00
Total Services with Admin, HRA, and HIPF	\$134.49

Services Admin %	8.8%
Managed Care Tax %	1.5%

Rate Components with Risk Corridor	
Applied Behavioral Analysis	
Rate:	\$0.00
Admin:	\$0.00
Total:	\$0.00

Oregon Health Plan Medicaid Demonstration
Coordinated Care Organization Capitation Rates
CCO-F: Dental Services Only
January 2019 through December 2019

Plan: InterCommunity Health Network, Inc., abn:InterCommunity Health Network-Coordinated Care Organization Region: Northwest Rate Group: Temporary Assistance to Needy Families - Adults
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Capitation Rate

Base Services Rate	\$33.36
Base HRA Adjustment	\$0.00
Hospital Provider Tax Allowance	\$0.00
Administrative Allowance	\$3.26
Managed Care Tax	\$0.56
Health Insurance Provider Fee	\$0.00
Total Services with Admin, HRA, and HIPF	\$37.18

Services Admin %	8.8%
Managed Care Tax %	1.5%

Oregon Health Plan Medicaid Demonstration
Coordinated Care Organization Capitation Rates
CCO-F: Dental Services Only
January 2019 through December 2019

Plan: InterCommunity Health Network, Inc., abn:InterCommunity Health Network-Coordinated Care Organization Region: Northwest Rate Group: Poverty Level Medical - Adults

Capitation Rate

Base Services Rate	\$23.77
Base HRA Adjustment	\$0.00
Hospital Provider Tax Allowance	\$0.00
Administrative Allowance	\$2.32
Managed Care Tax	\$0.40
Health Insurance Provider Fee	\$0.00
Total Services with Admin, HRA, and HIPF	\$26.48
Services Admin %	8.8%
Managed Care Tax %	1.5%

Oregon Health Plan Medicaid Demonstration
Coordinated Care Organization Capitation Rates
CCO-F: Dental Services Only
January 2019 through December 2019

Plan: InterCommunity Health Network, Inc., abn:InterCommunity Health Network-Coordinated Care Organization Region: Northwest Rate Group: Children 0-1 (CHIP, PLMC, TANF Children)

Capitation Rate

Base Services Rate	\$4.43
Base HRA Adjustment	\$0.00
Hospital Provider Tax Allowance	\$0.00
Administrative Allowance	\$0.43
Managed Care Tax	\$0.07
Health Insurance Provider Fee	\$0.00
Total Services with Admin, HRA, and HIPF	\$4.93
Services Admin %	8.8%
Managed Care Tax %	1.5%

Oregon Health Plan Medicaid Demonstration
Coordinated Care Organization Capitation Rates
CCO-F: Dental Services Only
January 2019 through December 2019

Plan: InterCommunity Health Network, Inc., abn:InterCommunity Health Network-Coordinated Care Organization Region: Northwest Rate Group: Children 1-5 (CHIP, PLMC, TANF Children)

Capitation Rate

Base Services Rate	\$23.97
Base HRA Adjustment	\$0.00
Hospital Provider Tax Allowance	\$0.00
Administrative Allowance	\$2.34
Managed Care Tax	\$0.40
Health Insurance Provider Fee	\$0.00
Total Services with Admin, HRA, and HIPF	\$26.71

Services Admin %	8.8%
Managed Care Tax %	1.5%

**Oregon Health Plan Medicaid Demonstration
 Coordinated Care Organization Capitation Rates
 CCO-F: Dental Services Only
 January 2019 through December 2019**

Plan: InterCommunity Health Network, Inc., abn:InterCommunity Health Network-Coordinated Care Organization Region: Northwest Rate Group: Children 6-18 (CHIP, PLMC, TANF Children)
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Capitation Rate

Base Services Rate	\$27.24
Base HRA Adjustment	\$0.00
Hospital Provider Tax Allowance	\$0.00
Administrative Allowance	\$2.66
Managed Care Tax	\$0.46
Health Insurance Provider Fee	\$0.00
Total Services with Admin, HRA, and HIPF	\$30.36

Services Admin %	8.8%
Managed Care Tax %	1.5%

**Oregon Health Plan Medicaid Demonstration
 Coordinated Care Organization Capitation Rates
 CCO-F: Dental Services Only
 January 2019 through December 2019**

Plan: InterCommunity Health Network, Inc., abn:InterCommunity Health Network-Coordinated Care Organization Region: Northwest Rate Group: Medicare/Medicaid Dual Eligible
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Capitation Rate

Base Services Rate	\$78.35
Base HRA Adjustment	\$0.00
Hospital Provider Tax Allowance	\$0.00
Administrative Allowance	\$7.65
Managed Care Tax	\$1.31
Health Insurance Provider Fee	\$0.00
Total Services with Admin, HRA, and HIPF	\$87.31

Services Admin %	8.8%
Managed Care Tax %	1.5%

Oregon Health Plan Medicaid Demonstration
Coordinated Care Organization Capitation Rates
CCO-F: Dental Services Only
January 2019 through December 2019

Plan: InterCommunity Health Network, Inc., abn:InterCommunity Health Network-Coordinated Care Organization Region: Northwest Rate Group: ABAD and OAA

Capitation Rate

Base Services Rate	\$73.52
Base HRA Adjustment	\$0.00
Hospital Provider Tax Allowance	\$0.00
Administrative Allowance	\$7.18
Managed Care Tax	\$1.23
Health Insurance Provider Fee	\$0.00
Total Services with Admin, HRA, and HIPF	\$81.94

Services Admin %	8.8%
Managed Care Tax %	1.5%

Oregon Health Plan Medicaid Demonstration
Coordinated Care Organization Capitation Rates
CCO-F: Dental Services Only
January 2019 through December 2019

Plan: InterCommunity Health Network, Inc., abn:InterCommunity Health Network-Coordinated Care Organization Region: Northwest Rate Group: Foster Children (CAF)
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Capitation Rate

Base Services Rate	\$30.60
Base HRA Adjustment	\$0.00
Hospital Provider Tax Allowance	\$0.00
Administrative Allowance	\$2.99
Managed Care Tax	\$0.51
Health Insurance Provider Fee	\$0.00
Total Services with Admin, HRA, and HIPF	\$34.10

Services Admin %	8.8%
Managed Care Tax %	1.5%

**Oregon Health Plan Medicaid Demonstration
 Coordinated Care Organization Capitation Rates
 CCO-F: Dental Services Only
 January 2019 through December 2019**

Plan: InterCommunity Health Network, Inc., abn:InterCommunity Health Network-Coordinated Care Organization Region: Northwest Rate Group: ACA Ages 19-44

Capitation Rate

Base Services Rate	\$30.88
Base HRA Adjustment	\$0.00
Hospital Provider Tax Allowance	\$0.00
Administrative Allowance	\$3.02
Managed Care Tax	\$0.52
Health Insurance Provider Fee	\$0.00
Total Services with Admin, HRA, and HIPF	\$34.42

Services Admin %	8.8%
Managed Care Tax %	1.5%

**Oregon Health Plan Medicaid Demonstration
 Coordinated Care Organization Capitation Rates
 CCO-F: Dental Services Only
 January 2019 through December 2019**

Plan: InterCommunity Health Network, Inc., abn:InterCommunity Health Network-Coordinated Care Organization Region: Northwest Rate Group: ACA Ages 45-54

Capitation Rate

Base Services Rate	\$45.77
Base HRA Adjustment	\$0.00
Hospital Provider Tax Allowance	\$0.00
Administrative Allowance	\$4.47
Managed Care Tax	\$0.77
Health Insurance Provider Fee	\$0.00
Total Services with Admin, HRA, and HIPF	\$51.01

Services Admin %	8.8%
Managed Care Tax %	1.5%

Oregon Health Plan Medicaid Demonstration
Coordinated Care Organization Capitation Rates
CCO-F: Dental Services Only
January 2019 through December 2019

Plan: InterCommunity Health Network, Inc., abn:InterCommunity Health Network-Coordinated Care Organization Region: Northwest Rate Group: ACA Ages 55-64

Capitation Rate

Base Services Rate	\$44.12
Base HRA Adjustment	\$0.00
Hospital Provider Tax Allowance	\$0.00
Administrative Allowance	\$4.31
Managed Care Tax	\$0.74
Health Insurance Provider Fee	\$0.00
Total Services with Admin, HRA, and HIPF	\$49.17

Services Admin %	8.8%
Managed Care Tax %	1.5%

Oregon Health Plan Medicaid Demonstration
Coordinated Care Organization Capitation Rates
CCO-F: Dental Services Only
January 2019 through December 2019

Plan: InterCommunity Health Network, Inc., abn:InterCommunity Health Network-Coordinated Care Organization Region: Northwest Rate Group: Breast and Cervical Cancer Program

Capitation Rate

Base Services Rate	\$70.91
Base HRA Adjustment	\$0.00
Hospital Provider Tax Allowance	\$0.00
Administrative Allowance	\$6.93
Managed Care Tax	\$1.19
Health Insurance Provider Fee	\$0.00
Total Services with Admin, HRA, and HIPF	\$79.02
Services Admin %	8.8%
Managed Care Tax %	1.5%

**Oregon Health Plan Medicaid Demonstration
 Coordinated Care Organization Capitation Rates
 CCO-G: Mental Health and Dental Services Only
 January 2019 through December 2019**

Plan: InterCommunity Health Network, Inc., abn:InterCommunity Health Network-Coordinated Care Organization Region: Northwest Rate Group: Temporary Assistance to Needy Families - Adults
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Capitation Rate

Base Services Rate	\$64.09
Base HRA Adjustment	\$1.76
Hospital Provider Tax Allowance	\$0.17
Administrative Allowance	\$6.26
Managed Care Tax	\$1.10
Health Insurance Provider Fee	\$0.00
Total Services with Admin, HRA, and HIPF	\$73.38

Services Admin %	8.5%
Managed Care Tax %	1.5%

Rate Components with Risk Corridor	
Applied Behavioral Analysis	
Rate:	\$0.00
Admin:	\$0.00
Total:	\$0.00

**Oregon Health Plan Medicaid Demonstration
 Coordinated Care Organization Capitation Rates
 CCO-G: Mental Health and Dental Services Only
 January 2019 through December 2019**

Plan: InterCommunity Health Network, Inc., abn:InterCommunity Health Network-Coordinated Care Organization Region: Northwest Rate Group: Poverty Level Medical - Adults

Capitation Rate

Base Services Rate	\$39.73
Base HRA Adjustment	\$0.01
Hospital Provider Tax Allowance	\$0.00
Administrative Allowance	\$3.88
Managed Care Tax	\$0.66
Health Insurance Provider Fee	\$0.00
Total Services with Admin, HRA, and HIPF	\$44.29

Services Admin %	8.8%
Managed Care Tax %	1.5%

Rate Components with Risk Corridor	
Applied Behavioral Analysis	
Rate:	\$0.00
Admin:	\$0.00
Total:	\$0.00

**Oregon Health Plan Medicaid Demonstration
 Coordinated Care Organization Capitation Rates
 CCO-G: Mental Health and Dental Services Only
 January 2019 through December 2019**

Plan: InterCommunity Health Network, Inc., abn:InterCommunity Health Network-Coordinated Care Organization Region: Northwest Rate Group: Children 0-1 (CHIP, PLMC, TANF Children)

Capitation Rate

Base Services Rate	\$10.68
Base HRA Adjustment	\$0.00
Hospital Provider Tax Allowance	\$0.00
Administrative Allowance	\$1.04
Managed Care Tax	\$0.18
Health Insurance Provider Fee	\$0.00
Total Services with Admin, HRA, and HIPF	\$11.90

Services Admin %	8.8%
Managed Care Tax %	1.5%

Rate Components with Risk Corridor	
Applied Behavioral Analysis	
Rate:	\$0.00
Admin:	\$0.00
Total:	\$0.00

**Oregon Health Plan Medicaid Demonstration
 Coordinated Care Organization Capitation Rates
 CCO-G: Mental Health and Dental Services Only
 January 2019 through December 2019**

Plan: InterCommunity Health Network, Inc., abn:InterCommunity Health Network-Coordinated Care Organization Region: Northwest Rate Group: Children 1-5 (CHIP, PLMC, TANF Children)

Capitation Rate

Base Services Rate	\$35.48
Base HRA Adjustment	\$0.02
Hospital Provider Tax Allowance	\$0.00
Administrative Allowance	\$3.47
Managed Care Tax	\$0.59
Health Insurance Provider Fee	\$0.00
Total Services with Admin, HRA, and HIPF	\$39.55

Services Admin %	8.8%
Managed Care Tax %	1.5%

Rate Components with Risk Corridor	
Applied Behavioral Analysis	
Rate:	\$0.82
Admin:	\$0.08
Total:	\$0.90

**Oregon Health Plan Medicaid Demonstration
 Coordinated Care Organization Capitation Rates
 CCO-G: Mental Health and Dental Services Only
 January 2019 through December 2019**

Plan: InterCommunity Health Network, Inc., abn:InterCommunity Health Network-Coordinated Care Organization Region: Northwest Rate Group: Children 6-18 (CHIP, PLMC, TANF Children)
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Capitation Rate

Base Services Rate	\$62.26
Base HRA Adjustment	\$1.99
Hospital Provider Tax Allowance	\$0.20
Administrative Allowance	\$6.08
Managed Care Tax	\$1.07
Health Insurance Provider Fee	\$0.00
Total Services with Admin, HRA, and HIPF	\$71.60

Services Admin %	8.5%
Managed Care Tax %	1.5%

Rate Components with Risk Corridor	
Applied Behavioral Analysis	
Rate:	\$0.43
Admin:	\$0.04
Total:	\$0.48

**Oregon Health Plan Medicaid Demonstration
 Coordinated Care Organization Capitation Rates
 CCO-G: Mental Health and Dental Services Only
 January 2019 through December 2019**

Plan: InterCommunity Health Network, Inc., abn:InterCommunity Health Network-Coordinated Care Organization Region: Northwest Rate Group: Medicare/Medicaid Dual Eligible
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Capitation Rate

Base Services Rate	\$117.19
Base HRA Adjustment	\$0.15
Hospital Provider Tax Allowance	\$0.02
Administrative Allowance	\$11.45
Managed Care Tax	\$1.96
Health Insurance Provider Fee	\$0.00
Total Services with Admin, HRA, and HIPF	\$130.77

Services Admin %	8.8%
Managed Care Tax %	1.5%

Rate Components with Risk Corridor	
Applied Behavioral Analysis	
Rate:	\$0.00
Admin:	\$0.00
Total:	\$0.00

**Oregon Health Plan Medicaid Demonstration
 Coordinated Care Organization Capitation Rates
 CCO-G: Mental Health and Dental Services Only
 January 2019 through December 2019**

Plan: InterCommunity Health Network, Inc., abn:InterCommunity Health Network-Coordinated Care Organization Region: Northwest Rate Group: ABAD and OAA

Capitation Rate

Base Services Rate	\$187.78
Base HRA Adjustment	\$6.92
Hospital Provider Tax Allowance	\$0.88
Administrative Allowance	\$18.34
Managed Care Tax	\$3.26
Health Insurance Provider Fee	\$0.00
Total Services with Admin, HRA, and HIPF	\$217.18

Services Admin %	8.4%
Managed Care Tax %	1.5%

Rate Components with Risk Corridor	
Applied Behavioral Analysis	
Rate:	\$6.42
Admin:	\$0.63
Total:	\$7.05

**Oregon Health Plan Medicaid Demonstration
 Coordinated Care Organization Capitation Rates
 CCO-G: Mental Health and Dental Services Only
 January 2019 through December 2019**

Plan: InterCommunity Health Network, Inc., abn:InterCommunity Health Network-Coordinated Care Organization Region: Northwest Rate Group: Foster Children (CAF)
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Capitation Rate

Base Services Rate	\$239.80
Base HRA Adjustment	\$5.72
Hospital Provider Tax Allowance	\$1.02
Administrative Allowance	\$23.43
Managed Care Tax	\$4.11
Health Insurance Provider Fee	\$0.00
Total Services with Admin, HRA, and HIPF	\$274.08

Services Admin %	8.5%
Managed Care Tax %	1.5%

Rate Components with Risk Corridor	
Applied Behavioral Analysis	
Rate:	\$1.09
Admin:	\$0.11
Total:	\$1.20

**Oregon Health Plan Medicaid Demonstration
 Coordinated Care Organization Capitation Rates
 CCO-G: Mental Health and Dental Services Only
 January 2019 through December 2019**

Plan: InterCommunity Health Network, Inc., abn:InterCommunity Health Network-Coordinated Care Organization Region: Northwest Rate Group: ACA Ages 19-44

Capitation Rate

Base Services Rate	\$67.98
Base HRA Adjustment	\$2.92
Hospital Provider Tax Allowance	\$0.29
Administrative Allowance	\$6.64
Managed Care Tax	\$1.19
Health Insurance Provider Fee	\$0.00
Total Services with Admin, HRA, and HIPF	\$79.01

Services Admin %	8.4%
Managed Care Tax %	1.5%

Rate Components with Risk Corridor	
Applied Behavioral Analysis	
Rate:	\$0.00
Admin:	\$0.00
Total:	\$0.00

**Oregon Health Plan Medicaid Demonstration
 Coordinated Care Organization Capitation Rates
 CCO-G: Mental Health and Dental Services Only
 January 2019 through December 2019**

Plan: InterCommunity Health Network, Inc., abn:InterCommunity Health Network-Coordinated Care Organization Region: Northwest Rate Group: ACA Ages 45-54

Capitation Rate

Base Services Rate	\$87.80
Base HRA Adjustment	\$2.11
Hospital Provider Tax Allowance	\$0.20
Administrative Allowance	\$8.58
Managed Care Tax	\$1.50
Health Insurance Provider Fee	\$0.00
Total Services with Admin, HRA, and HIPF	\$100.18

Services Admin %	8.6%
Managed Care Tax %	1.5%

Rate Components with Risk Corridor	
Applied Behavioral Analysis	
Rate:	\$0.00
Admin:	\$0.00
Total:	\$0.00

**Oregon Health Plan Medicaid Demonstration
 Coordinated Care Organization Capitation Rates
 CCO-G: Mental Health and Dental Services Only
 January 2019 through December 2019**

Plan: InterCommunity Health Network, Inc., abn:InterCommunity Health Network-Coordinated Care Organization Region: Northwest Rate Group: ACA Ages 55-64

Capitation Rate

Base Services Rate	\$81.93
Base HRA Adjustment	\$1.50
Hospital Provider Tax Allowance	\$0.14
Administrative Allowance	\$8.00
Managed Care Tax	\$1.39
Health Insurance Provider Fee	\$0.00
Total Services with Admin, HRA, and HIPF	\$92.96

Services Admin %	8.6%
Managed Care Tax %	1.5%

Rate Components with Risk Corridor	
Applied Behavioral Analysis	
Rate:	\$0.00
Admin:	\$0.00
Total:	\$0.00

**Oregon Health Plan Medicaid Demonstration
 Coordinated Care Organization Capitation Rates
 CCO-G: Mental Health and Dental Services Only
 January 2019 through December 2019**

Plan: InterCommunity Health Network, Inc., abn:InterCommunity Health Network-Coordinated Care Organization Region: Northwest Rate Group: Breast and Cervical Cancer Program

Capitation Rate

Base Services Rate	\$143.56
Base HRA Adjustment	\$0.00
Hospital Provider Tax Allowance	\$0.00
Administrative Allowance	\$14.02
Managed Care Tax	\$2.40
Health Insurance Provider Fee	\$0.00
Total Services with Admin, HRA, and HIPF	\$159.98

Services Admin %	8.8%
Managed Care Tax %	1.5%

Rate Components with Risk Corridor	
Applied Behavioral Analysis	
Rate:	\$0.00
Admin:	\$0.00
Total:	\$0.00