

Oregon Health Plan - Medicaid
 January 2023 through December 2023
 Coordinated Care Organization Capitation and Maternity Case Rates

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

Rate Group **Maternity Case Rate (Maternity)**
 Contract # 161760
 Region Northwest

Rate Components	CCOA	CCOB	CCOE	CCOF	CCOG
Base Services Rate	\$12,810.94	\$12,810.94	\$0.00	\$0.00	\$0.00
Administrative Allowance	\$1,463.09	\$1,463.09	\$0.00	\$0.00	\$0.00
Managed Care Tax	\$291.30	\$291.30	\$0.00	\$0.00	\$0.00
Total Capitation Rate	\$14,565.33	\$14,565.33	\$0.00	\$0.00	\$0.00
Services Admin %	10.05%	10.05%	0.00%	0.00%	0.00%
Managed Care Tax %	2.00%	2.00%	0.00%	0.00%	0.00%

Rate Components for Risk Corridors	CCOA	CCOB	CCOE	CCOF	CCOG
Hep C Rate	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00
Hep C Admin	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00
Hep C Total	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00
Handicapping Malocclusion Rate	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00
Behavioral Health Directed Payment	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00

Numbers may not add due to rounding.

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

Rate Group **MAGI Parent or Other Caretaker Relative (PCR)**
 Contract # 161760
 Region Northwest

Rate Components	CCOA	CCOB	CCOE	CCOF	CCOG
Base Services Rate	\$514.85	\$493.23	\$120.91	\$31.33	\$142.54
Administrative Allowance	\$63.06	\$60.41	\$14.81	\$3.84	\$17.46
Managed Care Tax	\$11.79	\$11.30	\$2.77	\$0.72	\$3.26
Total Capitation Rate	\$589.70	\$564.94	\$138.49	\$35.89	\$163.26
Services Admin %	10.69%	10.69%	10.69%	10.70%	10.69%
Managed Care Tax %	2.00%	2.00%	2.00%	2.01%	2.00%

Rate Components for Risk Corridors	CCOA	CCOB	CCOE	CCOF	CCOG
Hep C Rate	\$2.60	\$2.60	\$0.00	\$0.00	\$0.00
Hep C Admin	\$0.31	\$0.31	\$0.00	\$0.00	\$0.00
Hep C Total	\$2.91	\$2.91	\$0.00	\$0.00	\$0.00
Handicapping Malocclusion Rate	\$0.09	\$0.00	\$0.00	\$0.09	\$0.09
Behavioral Health Directed Payment	\$20.23	\$20.23	\$20.23	\$0.00	\$20.23

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

Rate Group **MAGI Pregnant Woman (PWO)**
 Contract # 161760
 Region Northwest

Rate Components	CCOA	CCOB	CCOE	CCOF	CCOG
Base Services Rate	\$481.80	\$461.94	\$103.22	\$24.71	\$123.08
Administrative Allowance	\$56.00	\$53.69	\$12.00	\$2.87	\$14.31
Managed Care Tax	\$10.98	\$10.53	\$2.35	\$0.57	\$2.80
Total Capitation Rate	\$548.78	\$526.16	\$117.57	\$28.15	\$140.19
Services Admin %	10.20%	10.20%	10.21%	10.20%	10.21%
Managed Care Tax %	2.00%	2.00%	2.00%	2.02%	2.00%

Rate Components for Risk Corridors	CCOA	CCOB	CCOE	CCOF	CCOG
Hep C Rate	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00
Hep C Admin	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00
Hep C Total	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00
Handicapping Malocclusion Rate	\$0.49	\$0.00	\$0.00	\$0.49	\$0.49
Behavioral Health Directed Payment	\$28.21	\$28.21	\$28.21	\$0.00	\$28.21

Numbers may not add due to rounding.

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

Rate Group **Children age 0 (CHIP, PCR, PWO) (CHILD 00-01)**
 Contract # 161760
 Region Northwest

Rate Components	CCOA	CCOB	CCOE	CCOF	CCOG
Base Services Rate	\$784.12	\$781.68	\$10.33	\$4.86	\$12.77
Administrative Allowance	\$91.14	\$90.86	\$1.20	\$0.57	\$1.48
Managed Care Tax	\$17.86	\$17.81	\$0.24	\$0.11	\$0.29
Total Capitation Rate	\$893.12	\$890.35	\$11.77	\$5.54	\$14.54
Services Admin %	10.20%	10.20%	10.20%	10.29%	10.18%
Managed Care Tax %	2.00%	2.00%	2.04%	1.99%	1.99%

Rate Components for Risk Corridors	CCOA	CCOB	CCOE	CCOF	CCOG
Hep C Rate	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00
Hep C Admin	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00
Hep C Total	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00
Handicapping Malocclusion Rate	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00
Behavioral Health Directed Payment	\$0.03	\$0.03	\$0.03	\$0.00	\$0.03

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

Rate Group **Children age 1-5 (CHIP, PCR, PWO) (CHILD 01-05)**
 Contract # 161760
 Region Northwest

Rate Components	CCOA	CCOB	CCOE	CCOF	CCOG
Base Services Rate	\$181.85	\$156.46	\$27.05	\$27.97	\$52.44
Administrative Allowance	\$21.14	\$18.19	\$3.14	\$3.25	\$6.09
Managed Care Tax	\$4.14	\$3.57	\$0.62	\$0.63	\$1.20
Total Capitation Rate	\$207.13	\$178.22	\$30.81	\$31.85	\$59.73
Services Admin %	10.21%	10.21%	10.19%	10.20%	10.20%
Managed Care Tax %	2.00%	2.00%	2.01%	1.98%	2.01%

Rate Components for Risk Corridors	CCOA	CCOB	CCOE	CCOF	CCOG
Hep C Rate	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00
Hep C Admin	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00
Hep C Total	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00
Handicapping Malocclusion Rate	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00
Behavioral Health Directed Payment	\$2.20	\$2.20	\$2.20	\$0.00	\$2.20

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

Rate Group **Children age 6-18 (CHIP, PCR, PWO) (CHILD 06-18)**
 Contract # 161760
 Region Northwest

Rate Components	CCOA	CCOB	CCOE	CCOF	CCOG
Base Services Rate	\$229.99	\$200.58	\$71.39	\$32.22	\$100.80
Administrative Allowance	\$26.73	\$23.31	\$8.30	\$3.75	\$11.72
Managed Care Tax	\$5.24	\$4.57	\$1.62	\$0.73	\$2.29
Total Capitation Rate	\$261.96	\$228.46	\$81.31	\$36.70	\$114.81
Services Admin %	10.20%	10.20%	10.21%	10.22%	10.21%
Managed Care Tax %	2.00%	2.00%	1.99%	1.99%	1.99%

Rate Components for Risk Corridors	CCOA	CCOB	CCOE	CCOF	CCOG
Hep C Rate	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00
Hep C Admin	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00
Hep C Total	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00
Handicapping Malocclusion Rate	\$3.08	\$0.00	\$0.00	\$3.08	\$3.08
Behavioral Health Directed Payment	\$12.57	\$12.57	\$12.57	\$0.00	\$12.57

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

Rate Group **Medicare/Medicaid Dual Eligible (DUAL-MEDS)**
 Contract # 161760
 Region Northwest

Rate Components	CCOA	CCOB	CCOE	CCOF	CCOG
Base Services Rate	\$272.20	\$249.32	\$109.75	\$71.85	\$132.62
Administrative Allowance	\$31.64	\$28.98	\$12.76	\$8.35	\$15.42
Managed Care Tax	\$6.20	\$5.68	\$2.49	\$1.64	\$3.02
Total Capitation Rate	\$310.04	\$283.98	\$125.00	\$81.84	\$151.06
Services Admin %	10.21%	10.20%	10.21%	10.20%	10.21%
Managed Care Tax %	2.00%	2.00%	1.99%	2.00%	2.00%

Rate Components for Risk Corridors	CCOA	CCOB	CCOE	CCOF	CCOG
Hep C Rate	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00
Hep C Admin	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00
Hep C Total	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00
Handicapping Malocclusion Rate	\$0.01	\$0.00	\$0.00	\$0.01	\$0.01
Behavioral Health Directed Payment	\$10.22	\$10.22	\$10.22	\$0.00	\$10.22

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

Rate Group **Aid to the Blind And Disabled & Old age Assistance (not Medicare eligible) (ABAD & OAA)**
 Contract # 161760
 Region Northwest

Rate Components	CCOA	CCOB	CCOE	CCOF	CCOG
Base Services Rate	\$1,373.08	\$1,348.20	\$246.76	\$67.59	\$271.64
Administrative Allowance	\$159.60	\$156.70	\$28.68	\$7.86	\$31.57
Managed Care Tax	\$31.27	\$30.71	\$5.63	\$1.54	\$6.19
Total Capitation Rate	\$1,563.95	\$1,535.61	\$281.07	\$76.99	\$309.40
Services Admin %	10.20%	10.20%	10.20%	10.21%	10.20%
Managed Care Tax %	2.00%	2.00%	2.00%	2.00%	2.00%

Rate Components for Risk Corridors	CCOA	CCOB	CCOE	CCOF	CCOG
Hep C Rate	\$9.80	\$9.80	\$0.00	\$0.00	\$0.00
Hep C Admin	\$1.12	\$1.12	\$0.00	\$0.00	\$0.00
Hep C Total	\$10.92	\$10.92	\$0.00	\$0.00	\$0.00
Handicapping Malocclusion Rate	\$0.73	\$0.00	\$0.00	\$0.73	\$0.73
Behavioral Health Directed Payment	\$23.92	\$23.92	\$23.92	\$0.00	\$23.92

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Rate Group **Foster Children (FOSTER)**
 Contract # 161760
 Region Northwest

Rate Components	CCOA	CCOB	CCOE	CCOF	CCOG
Base Services Rate	\$548.71	\$517.90	\$310.35	\$35.14	\$341.15
Administrative Allowance	\$63.78	\$60.20	\$36.07	\$4.08	\$39.65
Managed Care Tax	\$12.50	\$11.80	\$7.07	\$0.80	\$7.78
Total Capitation Rate	\$624.99	\$589.90	\$353.49	\$40.02	\$388.58
Services Admin %	10.20%	10.21%	10.20%	10.19%	10.20%
Managed Care Tax %	2.00%	2.00%	2.00%	2.00%	2.00%

Rate Components for Risk Corridors	CCOA	CCOB	CCOE	CCOF	CCOG
Hep C Rate	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00
Hep C Admin	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00
Hep C Total	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00
Handicapping Malocclusion Rate	\$2.35	\$0.00	\$0.00	\$2.35	\$2.35
Behavioral Health Directed Payment	\$74.20	\$74.20	\$74.20	\$0.00	\$74.20

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

Rate Group **MAGI Affordable Care Act age 19-44 (ACA 19-44)**
 Contract # 161760
 Region Northwest

Rate Components	CCOA	CCOB	CCOE	CCOF	CCOG
Base Services Rate	\$452.35	\$433.26	\$130.77	\$25.93	\$149.86
Administrative Allowance	\$55.40	\$53.06	\$16.02	\$3.18	\$18.35
Managed Care Tax	\$10.36	\$9.93	\$2.99	\$0.59	\$3.44
Total Capitation Rate	\$518.11	\$496.25	\$149.78	\$29.70	\$171.65
Services Admin %	10.69%	10.69%	10.70%	10.71%	10.69%
Managed Care Tax %	2.00%	2.00%	2.00%	1.99%	2.00%

Rate Components for Risk Corridors	CCOA	CCOB	CCOE	CCOF	CCOG
Hep C Rate	\$3.91	\$3.91	\$0.00	\$0.00	\$0.00
Hep C Admin	\$0.47	\$0.47	\$0.00	\$0.00	\$0.00
Hep C Total	\$4.38	\$4.38	\$0.00	\$0.00	\$0.00
Handicapping Malocclusion Rate	\$0.44	\$0.00	\$0.00	\$0.44	\$0.44
Behavioral Health Directed Payment	\$24.01	\$24.01	\$24.01	\$0.00	\$24.01

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

Rate Group **MAGI Affordable Care Act age 45-54 (ACA 45-54)**
 Contract # 161760
 Region Northwest

Rate Components	CCOA	CCOB	CCOE	CCOF	CCOG
Base Services Rate	\$779.12	\$755.79	\$118.30	\$34.47	\$141.63
Administrative Allowance	\$95.42	\$92.56	\$14.49	\$4.22	\$17.35
Managed Care Tax	\$17.85	\$17.32	\$2.71	\$0.79	\$3.24
Total Capitation Rate	\$892.39	\$865.67	\$135.50	\$39.48	\$162.22
Services Admin %	10.69%	10.69%	10.69%	10.69%	10.70%
Managed Care Tax %	2.00%	2.00%	2.00%	2.00%	2.00%

Rate Components for Risk Corridors	CCOA	CCOB	CCOE	CCOF	CCOG
Hep C Rate	\$10.18	\$10.18	\$0.00	\$0.00	\$0.00
Hep C Admin	\$1.23	\$1.23	\$0.00	\$0.00	\$0.00
Hep C Total	\$11.41	\$11.41	\$0.00	\$0.00	\$0.00
Handicapping Malocclusion Rate	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00
Behavioral Health Directed Payment	\$20.07	\$20.07	\$20.07	\$0.00	\$20.07

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Rate Group **MAGI Affordable Care Act age 55-64 (ACA 55-64)**
 Contract # 161760
 Region Northwest

Rate Components	CCOA	CCOB	CCOE	CCOF	CCOG
Base Services Rate	\$902.17	\$877.59	\$85.13	\$37.69	\$109.71
Administrative Allowance	\$110.49	\$107.48	\$10.43	\$4.62	\$13.44
Managed Care Tax	\$20.67	\$20.10	\$1.95	\$0.86	\$2.52
Total Capitation Rate	\$1,033.33	\$1,005.17	\$97.51	\$43.17	\$125.67
Services Admin %	10.69%	10.69%	10.70%	10.70%	10.69%
Managed Care Tax %	2.00%	2.00%	2.00%	1.99%	2.01%

Rate Components for Risk Corridors	CCOA	CCOB	CCOE	CCOF	CCOG
Hep C Rate	\$13.00	\$13.00	\$0.00	\$0.00	\$0.00
Hep C Admin	\$1.57	\$1.57	\$0.00	\$0.00	\$0.00
Hep C Total	\$14.57	\$14.57	\$0.00	\$0.00	\$0.00
Handicapping Malocclusion Rate	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00
Behavioral Health Directed Payment	\$12.32	\$12.32	\$12.32	\$0.00	\$12.32

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Oregon Health Plan - Medicaid
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InterCommunity Health Network, Inc., abn:InterCommunity Health Network-Coordinated Care Organization

Rate Group **Breast and Cervical Cancer Program (BCCP)**
 Contract # 161760
 Region Northwest

Rate Components	CCOA	CCOB	CCOE	CCOF	CCOG
Base Services Rate	\$1,373.08	\$1,348.20	\$246.76	\$67.59	\$271.64
Administrative Allowance	\$159.60	\$156.70	\$28.68	\$7.86	\$31.57
Managed Care Tax	\$31.27	\$30.71	\$5.63	\$1.54	\$6.19
Total Capitation Rate	\$1,563.95	\$1,535.61	\$281.07	\$76.99	\$309.40
Services Admin %	10.20%	10.20%	10.20%	10.21%	10.20%
Managed Care Tax %	2.00%	2.00%	2.00%	2.00%	2.00%

Rate Components for Risk Corridors	CCOA	CCOB	CCOE	CCOF	CCOG
Hep C Rate	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00
Hep C Admin	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00
Hep C Total	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00
Handicapping Malocclusion Rate	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00
Behavioral Health Directed Payment	\$35.13	\$35.13	\$35.13	\$0.00	\$35.13

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

Rate Group **Bridge to the Bridge age 19-44 (BRIDGE 19-44)**
 Contract # 161760
 Region Northwest

Rate Components	CCOA	CCOB	CCOE	CCOF	CCOG
Base Services Rate	\$452.35	\$433.26	\$130.77	\$25.93	\$149.86
Administrative Allowance	\$55.40	\$53.06	\$16.02	\$3.18	\$18.35
Managed Care Tax	\$10.36	\$9.93	\$2.99	\$0.59	\$3.44
Total Capitation Rate	\$518.11	\$496.25	\$149.78	\$29.70	\$171.65
Services Admin %	10.69%	10.69%	10.70%	10.71%	10.69%
Managed Care Tax %	2.00%	2.00%	2.00%	1.99%	2.00%

Rate Components for Risk Corridors	CCOA	CCOB	CCOE	CCOF	CCOG
Hep C Rate	\$3.91	\$3.91	\$0.00	\$0.00	\$0.00
Hep C Admin	\$0.47	\$0.47	\$0.00	\$0.00	\$0.00
Hep C Total	\$4.38	\$4.38	\$0.00	\$0.00	\$0.00
Handicapping Malocclusion Rate	\$0.44	\$0.00	\$0.00	\$0.44	\$0.44
Behavioral Health Directed Payment	\$24.01	\$24.01	\$24.01	\$0.00	\$24.01

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Rate Group **Bridge to the Bridge age 45-54 (BRIDGE 45-54)**
 Contract # 161760
 Region Northwest

Rate Components	CCOA	CCOB	CCOE	CCOF	CCOG
Base Services Rate	\$779.12	\$755.79	\$118.30	\$34.47	\$141.63
Administrative Allowance	\$95.42	\$92.56	\$14.49	\$4.22	\$17.35
Managed Care Tax	\$17.85	\$17.32	\$2.71	\$0.79	\$3.24
Total Capitation Rate	\$892.39	\$865.67	\$135.50	\$39.48	\$162.22
Services Admin %	10.69%	10.69%	10.69%	10.69%	10.70%
Managed Care Tax %	2.00%	2.00%	2.00%	2.00%	2.00%

Rate Components for Risk Corridors	CCOA	CCOB	CCOE	CCOF	CCOG
Hep C Rate	\$10.18	\$10.18	\$0.00	\$0.00	\$0.00
Hep C Admin	\$1.23	\$1.23	\$0.00	\$0.00	\$0.00
Hep C Total	\$11.41	\$11.41	\$0.00	\$0.00	\$0.00
Handicapping Malocclusion Rate	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00
Behavioral Health Directed Payment	\$20.07	\$20.07	\$20.07	\$0.00	\$20.07

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Rate Group **Bridge to the Bridge age 55-64 (BRIDGE 55-64)**
 Contract # 161760
 Region Northwest

Rate Components	CCOA	CCOB	CCOE	CCOF	CCOG
Base Services Rate	\$902.17	\$877.59	\$85.13	\$37.69	\$109.71
Administrative Allowance	\$110.49	\$107.48	\$10.43	\$4.62	\$13.44
Managed Care Tax	\$20.67	\$20.10	\$1.95	\$0.86	\$2.52
Total Capitation Rate	\$1,033.33	\$1,005.17	\$97.51	\$43.17	\$125.67
Services Admin %	10.69%	10.69%	10.70%	10.70%	10.69%
Managed Care Tax %	2.00%	2.00%	2.00%	1.99%	2.01%

Rate Components for Risk Corridors	CCOA	CCOB	CCOE	CCOF	CCOG
Hep C Rate	\$13.00	\$13.00	\$0.00	\$0.00	\$0.00
Hep C Admin	\$1.57	\$1.57	\$0.00	\$0.00	\$0.00
Hep C Total	\$14.57	\$14.57	\$0.00	\$0.00	\$0.00
Handicapping Malocclusion Rate	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00
Behavioral Health Directed Payment	\$12.32	\$12.32	\$12.32	\$0.00	\$12.32

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

Rate Group **HOP Maternity Case Rate (HOP Maternity)**
 Contract # 161760
 Region Northwest

Rate Components	CCOA	CCOB	CCOE	CCOF	CCOG
Base Services Rate	\$12,616.86	\$12,616.86	\$0.00	\$0.00	\$0.00
Administrative Allowance	\$1,440.92	\$1,440.92	\$0.00	\$0.00	\$0.00
Managed Care Tax	\$286.89	\$286.89	\$0.00	\$0.00	\$0.00
Total Capitation Rate	\$14,344.67	\$14,344.67	\$0.00	\$0.00	\$0.00
Services Admin %	10.25%	10.25%	0.00%	0.00%	0.00%
Managed Care Tax %	2.00%	2.00%	0.00%	0.00%	0.00%

Rate Components for Risk Corridors	CCOA	CCOB	CCOE	CCOF	CCOG
Hep C Rate	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00
Hep C Admin	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00
Hep C Total	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00
Handicapping Malocclusion Rate	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00
Behavioral Health Directed Payment	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00

Numbers may not add due to rounding.
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InterCommunity Health Network, Inc., abn:InterCommunity Health Network-Coordinated Care Organization

Rate Group **HOP MAGI Parent or Other Caretaker Relative (HOP PCR)**
 Contract # 161760
 Region Northwest

Rate Components	CCOA	CCOB	CCOE	CCOF	CCOG
Base Services Rate	\$54.01	\$53.76	\$0.22	\$0.24	\$0.48
Administrative Allowance	\$6.51	\$6.48	\$0.03	\$0.03	\$0.06
Managed Care Tax	\$1.24	\$1.23	\$0.01	\$0.01	\$0.01
Total Capitation Rate	\$61.76	\$61.47	\$0.26	\$0.28	\$0.55
Services Admin %	10.76%	10.76%	12.00%	11.11%	11.11%
Managed Care Tax %	2.01%	2.00%	3.85%	3.57%	1.82%

Rate Components for Risk Corridors	CCOA	CCOB	CCOE	CCOF	CCOG
Hep C Rate	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00
Hep C Admin	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00
Hep C Total	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00
Handicapping Malocclusion Rate	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00
Behavioral Health Directed Payment	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00

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

Rate Group **HOP MAGI Pregnant Woman (HOP PWO)**
 Contract # 161760
 Region Northwest

Rate Components	CCOA	CCOB	CCOE	CCOF	CCOG
Base Services Rate	\$449.14	\$430.62	\$96.10	\$23.00	\$114.57
Administrative Allowance	\$51.29	\$49.18	\$10.97	\$2.63	\$13.09
Managed Care Tax	\$10.21	\$9.79	\$2.18	\$0.52	\$2.61
Total Capitation Rate	\$510.64	\$489.59	\$109.25	\$26.15	\$130.27
Services Admin %	10.25%	10.25%	10.25%	10.26%	10.25%
Managed Care Tax %	2.00%	2.00%	2.00%	1.99%	2.00%

Rate Components for Risk Corridors	CCOA	CCOB	CCOE	CCOF	CCOG
Hep C Rate	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00
Hep C Admin	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00
Hep C Total	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00
Handicapping Malocclusion Rate	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00
Behavioral Health Directed Payment	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00

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

Rate Group **HOP MAGI Postpartum 0-365 Days (HOP PP)**
 Contract # 161760
 Region Northwest

Rate Components	CCOA	CCOB	CCOE	CCOF	CCOG
Base Services Rate	\$26.34	\$26.34	\$0.22	\$0.00	\$0.22
Administrative Allowance	\$3.01	\$3.01	\$0.02	\$0.00	\$0.02
Managed Care Tax	\$0.60	\$0.60	\$0.00	\$0.00	\$0.00
Total Capitation Rate	\$29.95	\$29.95	\$0.24	\$0.00	\$0.24
Services Admin %	10.26%	10.26%	8.33%	0.00%	8.33%
Managed Care Tax %	2.00%	2.00%	0.00%	0.00%	0.00%

Rate Components for Risk Corridors	CCOA	CCOB	CCOE	CCOF	CCOG
Hep C Rate	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00
Hep C Admin	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00
Hep C Total	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00
Handicapping Malocclusion Rate	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00
Behavioral Health Directed Payment	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00

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Rate Group **HOP Children age 0 (CHIP, PCR, PWO) (HOP 00-01)**
 Contract # 161760
 Region Northwest

Rate Components	CCOA	CCOB	CCOE	CCOF	CCOG
Base Services Rate	\$13.61	\$13.61	\$0.71	\$0.00	\$0.71
Administrative Allowance	\$1.55	\$1.55	\$0.08	\$0.00	\$0.08
Managed Care Tax	\$0.31	\$0.31	\$0.02	\$0.00	\$0.02
Total Capitation Rate	\$15.47	\$15.47	\$0.81	\$0.00	\$0.81
Services Admin %	10.22%	10.22%	10.13%	0.00%	10.13%
Managed Care Tax %	2.00%	2.00%	2.47%	0.00%	2.47%

Rate Components for Risk Corridors	CCOA	CCOB	CCOE	CCOF	CCOG
Hep C Rate	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00
Hep C Admin	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00
Hep C Total	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00
Handicapping Malocclusion Rate	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00
Behavioral Health Directed Payment	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00

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

Rate Group **HOP Children age 1-5 (CHIP, PCR, PWO) (HOP 01-05)**
 Contract # 161760
 Region Northwest

Rate Components	CCOA	CCOB	CCOE	CCOF	CCOG
Base Services Rate	\$13.61	\$13.61	\$0.71	\$0.00	\$0.71
Administrative Allowance	\$1.55	\$1.55	\$0.08	\$0.00	\$0.08
Managed Care Tax	\$0.31	\$0.31	\$0.02	\$0.00	\$0.02
Total Capitation Rate	\$15.47	\$15.47	\$0.81	\$0.00	\$0.81
Services Admin %	10.22%	10.22%	10.13%	0.00%	10.13%
Managed Care Tax %	2.00%	2.00%	2.47%	0.00%	2.47%

Rate Components for Risk Corridors	CCOA	CCOB	CCOE	CCOF	CCOG
Hep C Rate	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00
Hep C Admin	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00
Hep C Total	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00
Handicapping Malocclusion Rate	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00
Behavioral Health Directed Payment	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00

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

Rate Group **HOP Children age 6-18 (CHIP, PCR, PWO) (HOP 06-18)**
 Contract # 161760
 Region Northwest

Rate Components	CCOA	CCOB	CCOE	CCOF	CCOG
Base Services Rate	\$13.61	\$13.61	\$0.71	\$0.00	\$0.71
Administrative Allowance	\$1.55	\$1.55	\$0.08	\$0.00	\$0.08
Managed Care Tax	\$0.31	\$0.31	\$0.02	\$0.00	\$0.02
Total Capitation Rate	\$15.47	\$15.47	\$0.81	\$0.00	\$0.81
Services Admin %	10.22%	10.22%	10.13%	0.00%	10.13%
Managed Care Tax %	2.00%	2.00%	2.47%	0.00%	2.47%

Rate Components for Risk Corridors	CCOA	CCOB	CCOE	CCOF	CCOG
Hep C Rate	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00
Hep C Admin	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00
Hep C Total	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00
Handicapping Malocclusion Rate	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00
Behavioral Health Directed Payment	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00

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

Rate Group **HOP Old Age Assistance (HOP OAA)**
 Contract # 161760
 Region Northwest

Rate Components	CCOA	CCOB	CCOE	CCOF	CCOG
Base Services Rate	\$339.42	\$339.42	\$0.41	\$0.22	\$0.41
Administrative Allowance	\$38.76	\$38.76	\$0.05	\$0.03	\$0.05
Managed Care Tax	\$7.72	\$7.72	\$0.01	\$0.00	\$0.01
Total Capitation Rate	\$385.90	\$385.90	\$0.47	\$0.25	\$0.47
Services Admin %	10.25%	10.25%	10.87%	12.00%	10.87%
Managed Care Tax %	2.00%	2.00%	2.13%	0.00%	2.13%

Rate Components for Risk Corridors	CCOA	CCOB	CCOE	CCOF	CCOG
Hep C Rate	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00
Hep C Admin	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00
Hep C Total	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00
Handicapping Malocclusion Rate	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00
Behavioral Health Directed Payment	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00

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

Rate Group **HOP MAGI age 19-44 (HOP 19-44)**
 Contract # 161760
 Region Northwest

Rate Components	CCOA	CCOB	CCOE	CCOF	CCOG
Base Services Rate	\$54.84	\$54.81	\$0.25	\$0.04	\$0.29
Administrative Allowance	\$6.60	\$6.60	\$0.03	\$0.00	\$0.03
Managed Care Tax	\$1.25	\$1.25	\$0.01	\$0.00	\$0.01
Total Capitation Rate	\$62.69	\$62.66	\$0.29	\$0.04	\$0.33
Services Admin %	10.74%	10.75%	10.71%	0.00%	9.38%
Managed Care Tax %	1.99%	1.99%	3.45%	0.00%	3.03%

Rate Components for Risk Corridors	CCOA	CCOB	CCOE	CCOF	CCOG
Hep C Rate	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00
Hep C Admin	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00
Hep C Total	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00
Handicapping Malocclusion Rate	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00
Behavioral Health Directed Payment	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00

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

Rate Group **HOP MAGI age 55-64 (HOP 55-64)**
 Contract # 161760
 Region Northwest

Rate Components	CCOA	CCOB	CCOE	CCOF	CCOG
Base Services Rate	\$222.78	\$222.78	\$0.20	\$0.00	\$0.20
Administrative Allowance	\$26.83	\$26.83	\$0.02	\$0.00	\$0.02
Managed Care Tax	\$5.09	\$5.09	\$0.00	\$0.00	\$0.00
Total Capitation Rate	\$254.70	\$254.70	\$0.22	\$0.00	\$0.22
Services Admin %	10.75%	10.75%	9.09%	0.00%	9.09%
Managed Care Tax %	2.00%	2.00%	0.00%	0.00%	0.00%

Rate Components for Risk Corridors	CCOA	CCOB	CCOE	CCOF	CCOG
Hep C Rate	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00
Hep C Admin	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00
Hep C Total	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00
Handicapping Malocclusion Rate	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00
Behavioral Health Directed Payment	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00

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