

Oregon Health Authority Medicaid Fee-for-Service Comprehensive Primary Care + Payment Model

1. Care Management Fee

Care management payments will be made to practices for all FFS Oregon Health Plan members with a primary care visit in the prior 18 months who are enrolled as Attributed Members.

Per-Member-Per-Month (PMPM) payment rates for Track 1 clinics recognized under Oregon 2017 Patient Centered Primary Care Home criteria by 3/31/17:

- PCPCH Tier 1: \$2
- PCPCH Tier 2: \$4
- PCPCH Tier 3: \$6
- PCPCH Tier 4: \$8
- PCPCH Tier 5-star: \$10

Per-Member-Per-Month (PMPM) payment rates for more advanced primary care homes that applied to be Track 2:

- PCPCH Tier 3: \$9
- PCPCH Tier 4: \$12
- PCPCH Tier 5 STAR: \$18

Only Tier 3, 4, and 5 (5 STAR) PCPCHs recognized under 2017 PCPCH criteria can participate in Track 2.

2. Value-Based Payment

The Value-Based Payment model for Track 2 practices will be available in advance of practices signing the terms and conditions for participation in Year 2018. This payment will be an alternative to visit-based reimbursements, and allow Track 2 practices the flexibility to deliver traditional face-to-face care outside of an office visit.

3. Performance-Based Incentive Payments

Annual performance-based incentive payments will begin in Q4 2017 to be paid prospectively at 50% of eligible PMPM. After the close of each program year, the incentive amount earned based on performance will be calculated, and OHA will make additional payments or recoup payments, if necessary.

	Utilization (PMPM)	Quality (PMPM)	Total (PMPM)
Track 1 clinics	\$1.00	\$1.00	\$2.00
Track 2 clinics	\$2.00	\$2.00	\$4.00

[CMS CPC+ Payment Methodologies](#) document