

CONTRACTOR/CCO NAME: PacificSource Community Solutions (Columbia Gorge)  
 REPORTING PERIOD: 1/1/2021 - 12/31/2021

Enter the per-member-per-month (PMPM) dollar amount you paid clinics participating in the Patient Centered Primary Care Home (PCPCH) program. If the PMPMs vary for a given tier, you may enter a range. Otherwise, enter a single dollar amount. In the "Average PMPM" column, enter the average PMPM payment for each tier, weighted by enrollment. If you paid one "Tier 1" clinic \$9.50 PMPM and another "Tier 1" clinic \$10.00 PMPM, and the first clinic had three times the number of members attributed as compared to the second clinic, then the average weighted PMPM would be \$9.625. ( $\$9.50 \times 0.75 + \$10.00 \times 0.25 = \$9.625$ ). The weighting may be calculated using number of members or number of member months.

**Evaluation Criteria for this worksheet:** Response required for each highlighted cell, even if there are no current clinics in your service area at that tier level. Non response in a highlighted cell will not be approved.

PCPCH Tier	Number of contracted clinics	PMPM (or range) dollar amount	Average PMPM dollar amount	If applicable, note any deviations and rationale from required payment per tier (e.g. no payments to tier 1 clinics because there are none in CCO service area).
Tier 1 clinics	-	\$ 0.50	\$ -	No payments to Tier 1 clinics because there are none in the CCO service area.
Tier 2 clinics	-	\$ 1.01	\$ -	No payments to Tier 2 clinics because there are none in the CCO service area.
Tier 3 clinics	2	\$2.01 / \$6.00	\$ 2.01	
Tier 4 clinics	5	\$3.02 / \$9.00	\$ 11.55	
Tier 5 clinics	5	\$4.02 / \$12.00	\$ 15.01	

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Brief description of the five largest, defined by dollars spent, VBPs implemented (e.g. condition-specific (asthma) population-base payment)	Most Advanced LAN Category in the VBP (4 > 3 > 2C)	Additional LAN categories within arrangement	Brief description of providers & services involved	Please describe if and how these models take into account: - racial and ethnic disparities; & - individuals with complex health care needs
Providence Hood River Memorial Hospital	2C	1A	Inpatient and outpatient hospital services, hospital with upside and downside risk	
Central Oregon IPA	4A	1A, 2A, 3B	Multi-specialty IPA, PCP capitation, budget based model, upside and downside risk, quality incentives	
Mid-Columbia Center for Living CMHP	3B	1A, 2A	CMHP, capitated services tied to quality metrics and incentives	
Advantage Dental	4A		DCO, capitated services tied to quality metrics and incentives	Capitation payments are made for every member in the CCO population who has CCO dental benefits, assigned to Advantage Dental. Capitation rate categories are set by the Oregon Health Authority based on a number of factors including age, health needs and risk status.
Capitol Dental	4A	1A, 3B	DCO, capitated services tied to quality metrics and incentives	Capitation payments are made for every member in the CCO population who has CCO dental benefits, assigned to Capitol Dental. Capitation rate categories are set by the Oregon Health Authority based on a number of factors including age, health needs and risk status.









