Oregon Health Plan Medicaid Demonstration
Coordinated Care Organization Capitation Rates
January 2015 through December 2015

Plan: Jackson County CCO, LLC, abn: Jackson Care Connect
Region: Southwest

		Base Case Rate	Base HRA Adjustment	Hospital Provider Tax Allowance	Administrative Allowance	HRA Administrative Allowance	Case Rate
Maternity Case Rate:							
	Case Rate w/o Admin	$ 8,412.79	$ 1,880.67	$ 342.17	$ 731.55	$ 38.38	$ 11,405.55
	Admin %						6.41%
	HRA Admin %						0.34%
	Non Benefit %*						9.41%

*Non Benefit % includes Hospital Provider Tax, HIF, and Administrative Allowances

		Base Case Rate	Administrative Allowance	Case Rate
Bariatric Case Rate:				
Non-Dual	Medicaid Only	$ 13,369.77	$ 1,162.59	$ 14,532.36
	Admin %			8.00%
Dual	Dual Eligibles	$ 1,638.15	$ 142.45	$ 1,780.60
	Admin %			8.00%

Oregon Health Plan Medicaid Demonstration

Coordinated Care Organization Capitation Rates

CCO-A: Physical Health, Mental Health, and Dental Services

January 2015 through December 2015

Plan: Jackson County CCO, LLC, abn: Jackson Care Connect
Region: Southwest

	Base Rate	Base HRA Adjustment	Hospital Provider Tax Allowance	Administrative Allowance	HRA Administrative Allowance	Health Insurers Fee	SNRG Rate
Special Needs Rate Group:							
Rate w/o Admin	$ 914.02	$ 75.35	$ 31.72	$ 110.85	$ 1.54	$ -	$ 1,133.47
Admin %							9.78%
HRA Admin %							0.14%
Non Benefit %*							12.58%

*Non Benefit % includes Hospital Provider Tax, HIF, and Administrative Allowances

Oregon Health Plan Medicaid Demonstration

Coordinated Care Organization Capitation Rates

CCO-A: Physical Health, Mental Health, and Dental Services

January 2015 through December 2015

Plan: Jackson County CCO, LLC, abn: Jackson Care Connect

Region: Southwest

Rate Group: **Temporary Assistance to Needy Families - Adults**

	Capitation Rate
Base Services Rate	$347.02
Base HRA Adjustment	$44.45
Hospital Provider Tax Allowance	$11.01
Administrative Allowance	$39.46
HRA Administrative Allowance	$0.91
Health Insurers Fee	$0.00
Total Services with Admin, HRA, and HIF	$442.84

Services Admin %	*8.9%*
HRA Admin %	*0.2%*
Non Benefit %*	*11.4%*

*Non Benefit % includes Hospital Provider Tax, HIF, and Administrative Allowances

Oregon Health Plan Medicaid Demonstration

Coordinated Care Organization Capitation Rates

CCO-A: Physical Health, Mental Health, and Dental Services

January 2015 through December 2015

Plan: Jackson County CCO, LLC, abn: Jackson Care Connect

Region: Southwest

Rate Group: **Poverty Level Medical - Adults**

	Capitation Rate
Base Services Rate	$393.82
Base HRA Adjustment	$38.60
Hospital Provider Tax Allowance	$13.57
Administrative Allowance	$47.65
HRA Administrative Allowance	$0.79
Health Insurers Fee	$0.00
Total Services with Admin, HRA, and HIF	$494.42

Services Admin %	*9.6%*
HRA Admin %	*0.2%*
Non Benefit %*	*12.4%*

*Non Benefit % includes Hospital Provider Tax, HIF, and Administrative Allowances

Oregon Health Plan Medicaid Demonstration

Coordinated Care Organization Capitation Rates

CCO-A: Physical Health, Mental Health, and Dental Services

January 2015 through December 2015

Plan: Jackson County CCO, LLC, abn: Jackson Care Connect

Region: Southwest

Rate Group: **Children 0-1 (CHIP, PLMC, TANF Children)**

	Capitation Rate
Base Services Rate	$480.84
Base HRA Adjustment	$113.03
Hospital Provider Tax Allowance	$21.62
Administrative Allowance	$59.59
HRA Administrative Allowance	$2.31
Health Insurers Fee	$0.00
Total Services with Admin, HRA, and HIF	$677.38

Services Admin %	*8.8%*
HRA Admin %	*0.3%*
Non Benefit %*	*12.0%*

*Non Benefit % includes Hospital Provider Tax, HIF, and Administrative Allowances

Oregon Health Plan Medicaid Demonstration

Coordinated Care Organization Capitation Rates

CCO-A: Physical Health, Mental Health, and Dental Services

January 2015 through December 2015

Plan: Jackson County CCO, LLC, abn: Jackson Care Connect

Region: Southwest

Rate Group: **Children 1-5 (CHIP, PLMC, TANF Children)**

	Capitation Rate
Base Services Rate	$116.32
Base HRA Adjustment	$7.29
Hospital Provider Tax Allowance	$3.11
Administrative Allowance	$13.02
HRA Administrative Allowance	$0.15
Health Insurers Fee	$0.00
Total Services with Admin, HRA, and HIF	$139.90

Services Admin %	*9.3%*
HRA Admin %	*0.1%*
Non Benefit %*	*11.5%*

*Non Benefit % includes Hospital Provider Tax, HIF, and Administrative Allowances

Oregon Health Plan Medicaid Demonstration

Coordinated Care Organization Capitation Rates

CCO-A: Physical Health, Mental Health, and Dental Services

January 2015 through December 2015

Plan: Jackson County CCO, LLC, abn: Jackson Care Connect

Region: Southwest

Rate Group: **Children 6-18 (CHIP, PLMC, TANF Children)**

	Capitation Rate
Base Services Rate	$137.32
Base HRA Adjustment	$8.19
Hospital Provider Tax Allowance	$3.39
Administrative Allowance	$15.31
HRA Administrative Allowance	$0.17
Health Insurers Fee	$0.00
Total Services with Admin, HRA, and HIF	$164.39

Services Admin %	*9.3%*
HRA Admin %	*0.1%*
Non Benefit %*	*11.4%*

*Non Benefit % includes Hospital Provider Tax, HIF, and Administrative Allowances

Oregon Health Plan Medicaid Demonstration

Coordinated Care Organization Capitation Rates

CCO-A: Physical Health, Mental Health, and Dental Services

January 2015 through December 2015

Plan: Jackson County CCO, LLC, abn: Jackson Care Connect

Region: Southwest

Rate Group: **ABAD with Medicare**

	Capitation Rate
Base Services Rate	$212.51
Base HRA Adjustment	$5.61
Hospital Provider Tax Allowance	$4.17
Administrative Allowance	$23.99
HRA Administrative Allowance	$0.11
Health Insurers Fee	$0.00
Total Services with Admin, HRA, and HIF	$246.40

Services Admin %	*9.7%*
HRA Admin %	*0.0%*
Non Benefit %*	*11.4%*

*Non Benefit % includes Hospital Provider Tax, HIF, and Administrative Allowances

Oregon Health Plan Medicaid Demonstration

Coordinated Care Organization Capitation Rates

CCO-A: Physical Health, Mental Health, and Dental Services

January 2015 through December 2015

Plan: Jackson County CCO, LLC, abn: Jackson Care Connect

Region: Southwest

Rate Group: **ABAD without Medicare**

	Capitation Rate
Base Services Rate	$983.41
Base HRA Adjustment	$139.61
Hospital Provider Tax Allowance	$33.22
Administrative Allowance	$112.73
HRA Administrative Allowance	$2.85
Health Insurers Fee	$0.00
Total Services with Admin, HRA, and HIF	$1,271.83

Services Admin %	*8.9%*
HRA Admin %	*0.2%*
Non Benefit %*	*11.5%*

*Non Benefit % includes Hospital Provider Tax, HIF, and Administrative Allowances

Oregon Health Plan Medicaid Demonstration

Coordinated Care Organization Capitation Rates

CCO-A: Physical Health, Mental Health, and Dental Services

January 2015 through December 2015

Plan: Jackson County CCO, LLC, abn: Jackson Care Connect

Region: Southwest

Rate Group: **OAA with Medicare**

	Capitation Rate
Base Services Rate	$212.51
Base HRA Adjustment	$5.61
Hospital Provider Tax Allowance	$4.17
Administrative Allowance	$23.99
HRA Administrative Allowance	$0.11
Health Insurers Fee	$0.00
Total Services with Admin, HRA, and HIF	$246.40

Services Admin %	*9.7%*
HRA Admin %	*0.0%*
Non Benefit %*	*11.4%*

*Non Benefit % includes Hospital Provider Tax, HIF, and Administrative Allowances

Oregon Health Plan Medicaid Demonstration

Coordinated Care Organization Capitation Rates

CCO-A: Physical Health, Mental Health, and Dental Services

January 2015 through December 2015

Plan: Jackson County CCO, LLC, abn: Jackson Care Connect

Region: Southwest

Rate Group: **OAA without Medicare**

	Capitation Rate
Base Services Rate	$983.41
Base HRA Adjustment	$139.61
Hospital Provider Tax Allowance	$33.22
Administrative Allowance	$112.73
HRA Administrative Allowance	$2.85
Health Insurers Fee	$0.00
Total Services with Admin, HRA, and HIF	$1,271.83

Services Admin %	*8.9%*
HRA Admin %	*0.2%*
Non Benefit %*	*11.5%*

*Non Benefit % includes Hospital Provider Tax, HIF, and Administrative Allowances

Oregon Health Plan Medicaid Demonstration

Coordinated Care Organization Capitation Rates

CCO-A: Physical Health, Mental Health, and Dental Services

January 2015 through December 2015

Plan: Jackson County CCO, LLC, abn: Jackson Care Connect

Region: Southwest

Rate Group: **Foster Children (CAF)**

	Capitation Rate
Base Services Rate	$448.61
Base HRA Adjustment	$25.42
Hospital Provider Tax Allowance	$7.06
Administrative Allowance	$54.72
HRA Administrative Allowance	$0.52
Health Insurers Fee	$0.00
Total Services with Admin, HRA, and HIF	$536.33

Services Admin %	*10.2%*
HRA Admin %	*0.1%*
Non Benefit %*	*11.5%*

*Non Benefit % includes Hospital Provider Tax, HIF, and Administrative Allowances

Oregon Health Plan Medicaid Demonstration

Coordinated Care Organization Capitation Rates

CCO-A: Physical Health, Mental Health, and Dental Services

January 2015 through December 2015

Plan: Jackson County CCO, LLC, abn: Jackson Care Connect

Region: Southwest

Rate Group: **ACA Ages 19-44**

	Capitation Rate
Base Services Rate	$305.48
Base HRA Adjustment	$32.95
Hospital Provider Tax Allowance	$10.11
Administrative Allowance	$37.94
HRA Administrative Allowance	$0.67
Health Insurers Fee	$0.00
Total Services with Admin, HRA, and HIF	$387.16

Services Admin %	*9.8%*
HRA Admin %	*0.2%*
Non Benefit %*	*12.4%*

*Non Benefit % includes Hospital Provider Tax, HIF, and Administrative Allowances

Oregon Health Plan Medicaid Demonstration

Coordinated Care Organization Capitation Rates

CCO-A: Physical Health, Mental Health, and Dental Services

January 2015 through December 2015

Plan: Jackson County CCO, LLC, abn: Jackson Care Connect

Region: Southwest

Rate Group: **ACA Ages 45-54**

	Capitation Rate
Base Services Rate	$477.26
Base HRA Adjustment	$61.27
Hospital Provider Tax Allowance	$16.64
Administrative Allowance	$59.95
HRA Administrative Allowance	$1.25
Health Insurers Fee	$0.00
Total Services with Admin, HRA, and HIF	$616.37

Services Admin %	*9.7%*
HRA Admin %	*0.2%*
Non Benefit %*	*12.4%*

*Non Benefit % includes Hospital Provider Tax, HIF, and Administrative Allowances

Oregon Health Plan Medicaid Demonstration

Coordinated Care Organization Capitation Rates

CCO-A: Physical Health, Mental Health, and Dental Services

January 2015 through December 2015

Plan: Jackson County CCO, LLC, abn: Jackson Care Connect

Region: Southwest

Rate Group: **ACA Ages 55-64**

	Capitation Rate
Base Services Rate	$576.98
Base HRA Adjustment	$66.67
Hospital Provider Tax Allowance	$19.30
Administrative Allowance	$72.65
HRA Administrative Allowance	$1.36
Health Insurers Fee	$0.00
Total Services with Admin, HRA, and HIF	$736.97

Services Admin %	*9.9%*
HRA Admin %	*0.2%*
Non Benefit %*	*12.5%*

*Non Benefit % includes Hospital Provider Tax, HIF, and Administrative Allowances

Oregon Health Plan Medicaid Demonstration
Coordinated Care Organization Capitation Rates
January 2015 through December 2015

Plan: Jackson County CCO, LLC, abn: Jackson Care Connect
Region: Southwest

		Base Case Rate	Base HRA Adjustment	Hospital Provider Tax Allowance	Administrative Allowance	HRA Administrative Allowance	Case Rate
Maternity Case Rate:							
	Case Rate w/o Admin	$ 8,412.79	$ 1,880.67	$ 342.17	$ 731.55	$ 38.38	$ 11,405.55
	Admin %						6.41%
	HRA Admin %						0.34%
	Non Benefit %*						9.41%

*Non Benefit % includes Hospital Provider Tax, HIF, and Administrative Allowances

		Base Case Rate	Administrative Allowance	Case Rate
Bariatric Case Rate:				
Non-Dual	Medicaid Only	$ 13,369.77	$ 1,162.59	$ 14,532.36
	Admin %			8.00%
Dual	Dual Eligibles	$ 1,638.15	$ 142.45	$ 1,780.60
	Admin %			8.00%

Oregon Health Plan Medicaid Demonstration

Coordinated Care Organization Capitation Rates

CCO-B: Physical Health and Mental Health Services

January 2015 through December 2015

Plan: Jackson County CCO, LLC, abn: Jackson Care Connect
Region: Southwest

	Base Rate	Base HRA Adjustment	Hospital Provider Tax Allowance	Administrative Allowance	HRA Administrative Allowance	Health Insurers Fee	SNRG Rate
Special Needs Rate Group:							
Rate w/o Admin	$ 891.21	$ 75.35	$ 31.72	$ 108.87	$ 1.54	$ -	$ 1,108.68
Admin %							9.82%
HRA Admin %							0.14%
Non Benefit %*							12.68%

*Non Benefit % includes Hospital Provider Tax, HIF, and Administrative Allowances

Oregon Health Plan Medicaid Demonstration

Coordinated Care Organization Capitation Rates
CCO-B: Physical Health and Mental Health Services
January 2015 through December 2015

Plan: Jackson County CCO, LLC, abn: Jackson Care Connect

Region: Southwest

Rate Group: **Temporary Assistance to Needy Families - Adults**

	Capitation Rate
Base Services Rate	$323.04
Base HRA Adjustment	$44.45
Hospital Provider Tax Allowance	$11.01
Administrative Allowance	$37.37
HRA Administrative Allowance	$0.91
Health Insurers Fee	$0.00
Total Services with Admin, HRA, and HIF	$416.78

Services Admin %	*9.0%*
HRA Admin %	*0.2%*
Non Benefit %*	*11.6%*

*Non Benefit % includes Hospital Provider Tax, HIF, and Administrative Allowances

Oregon Health Plan Medicaid Demonstration

Coordinated Care Organization Capitation Rates

CCO-B: Physical Health and Mental Health Services

January 2015 through December 2015

Plan: Jackson County CCO, LLC, abn: Jackson Care Connect

Region: Southwest

Rate Group: **Poverty Level Medical - Adults**

	Capitation Rate
Base Services Rate	$364.85
Base HRA Adjustment	$38.60
Hospital Provider Tax Allowance	$13.57
Administrative Allowance	$45.13
HRA Administrative Allowance	$0.79
Health Insurers Fee	$0.00
Total Services with Admin, HRA, and HIF	$462.94

Services Admin %	*9.7%*
HRA Admin %	*0.2%*
Non Benefit %*	*12.7%*

*Non Benefit % includes Hospital Provider Tax, HIF, and Administrative Allowances

Oregon Health Plan Medicaid Demonstration

Coordinated Care Organization Capitation Rates
CCO-B: Physical Health and Mental Health Services
January 2015 through December 2015

Plan: Jackson County CCO, LLC, abn: Jackson Care Connect

Region: Southwest

Rate Group: **Children 0-1 (CHIP, PLMC, TANF Children)**

	Capitation Rate
Base Services Rate	$480.50
Base HRA Adjustment	$113.03
Hospital Provider Tax Allowance	$21.62
Administrative Allowance	$59.56
HRA Administrative Allowance	$2.31
Health Insurers Fee	$0.00
Total Services with Admin, HRA, and HIF	$677.01

Services Admin %	*8.8%*
HRA Admin %	*0.3%*
Non Benefit %*	*12.0%*

*Non Benefit % includes Hospital Provider Tax, HIF, and Administrative Allowances

Oregon Health Plan Medicaid Demonstration

Coordinated Care Organization Capitation Rates
CCO-B: Physical Health and Mental Health Services
January 2015 through December 2015

Plan: Jackson County CCO, LLC, abn: Jackson Care Connect

Region: Southwest

Rate Group: **Children 1-5 (CHIP, PLMC, TANF Children)**

	Capitation Rate
Base Services Rate	$99.37
Base HRA Adjustment	$7.29
Hospital Provider Tax Allowance	$3.11
Administrative Allowance	$11.55
HRA Administrative Allowance	$0.15
Health Insurers Fee	$0.00
Total Services with Admin, HRA, and HIF	$121.47

Services Admin %	*9.5%*
HRA Admin %	*0.1%*
Non Benefit %*	*12.1%*

*Non Benefit % includes Hospital Provider Tax, HIF, and Administrative Allowances

Oregon Health Plan Medicaid Demonstration

Coordinated Care Organization Capitation Rates
CCO-B: Physical Health and Mental Health Services
January 2015 through December 2015

Plan:	Jackson County CCO, LLC, abn: Jackson Care Connect
Region:	Southwest
Rate Group:	**Children 6-18 (CHIP, PLMC, TANF Children)**

	Capitation Rate
Base Services Rate	$115.39
Base HRA Adjustment	$8.19
Hospital Provider Tax Allowance	$3.39
Administrative Allowance	$13.40
HRA Administrative Allowance	$0.17
Health Insurers Fee	$0.00
Total Services with Admin, HRA, and HIF	$140.55

Services Admin %	*9.5%*
HRA Admin %	*0.1%*
Non Benefit %*	*12.0%*

*Non Benefit % includes Hospital Provider Tax, HIF, and Administrative Allowances

Oregon Health Plan Medicaid Demonstration

Coordinated Care Organization Capitation Rates

CCO-B: Physical Health and Mental Health Services

January 2015 through December 2015

Plan: Jackson County CCO, LLC, abn: Jackson Care Connect

Region: Southwest

Rate Group: **ABAD with Medicare**

	Capitation Rate
Base Services Rate	$194.70
Base HRA Adjustment	$5.61
Hospital Provider Tax Allowance	$4.17
Administrative Allowance	$22.44
HRA Administrative Allowance	$0.11
Health Insurers Fee	$0.00
Total Services with Admin, HRA, and HIF	$227.04

Services Admin %	*9.9%*
HRA Admin %	*0.1%*
Non Benefit %*	*11.7%*

*Non Benefit % includes Hospital Provider Tax, HIF, and Administrative Allowances

Oregon Health Plan Medicaid Demonstration

Coordinated Care Organization Capitation Rates

CCO-B: Physical Health and Mental Health Services

January 2015 through December 2015

Plan: Jackson County CCO, LLC, abn: Jackson Care Connect

Region: Southwest

Rate Group: **ABAD without Medicare**

	Capitation Rate
Base Services Rate	$961.01
Base HRA Adjustment	$139.61
Hospital Provider Tax Allowance	$33.22
Administrative Allowance	$110.78
HRA Administrative Allowance	$2.85
Health Insurers Fee	$0.00
Total Services with Admin, HRA, and HIF	$1,247.48

Services Admin %	*8.9%*
HRA Admin %	*0.2%*
Non Benefit %*	*11.5%*

*Non Benefit % includes Hospital Provider Tax, HIF, and Administrative Allowances

Oregon Health Plan Medicaid Demonstration

Coordinated Care Organization Capitation Rates

CCO-B: Physical Health and Mental Health Services

January 2015 through December 2015

Plan:	Jackson County CCO, LLC, abn: Jackson Care Connect
Region:	Southwest
Rate Group:	**OAA with Medicare**

	Capitation Rate
Base Services Rate	$194.70
Base HRA Adjustment	$5.61
Hospital Provider Tax Allowance	$4.17
Administrative Allowance	$22.44
HRA Administrative Allowance	$0.11
Health Insurers Fee	$0.00
Total Services with Admin, HRA, and HIF	$227.04

Services Admin %	*9.9%*
HRA Admin %	*0.1%*
Non Benefit %*	*11.7%*

*Non Benefit % includes Hospital Provider Tax, HIF, and Administrative Allowances

Oregon Health Plan Medicaid Demonstration

Coordinated Care Organization Capitation Rates

CCO-B: Physical Health and Mental Health Services

January 2015 through December 2015

Plan:	Jackson County CCO, LLC, abn: Jackson Care Connect
Region:	Southwest
Rate Group:	**OAA without Medicare**

	Capitation Rate
Base Services Rate	$961.01
Base HRA Adjustment	$139.61
Hospital Provider Tax Allowance	$33.22
Administrative Allowance	$110.78
HRA Administrative Allowance	$2.85
Health Insurers Fee	$0.00
Total Services with Admin, HRA, and HIF	$1,247.48

Services Admin %	*8.9%*
HRA Admin %	*0.2%*
Non Benefit %*	*11.5%*

*Non Benefit % includes Hospital Provider Tax, HIF, and Administrative Allowances

Oregon Health Plan Medicaid Demonstration

Coordinated Care Organization Capitation Rates

CCO-B: Physical Health and Mental Health Services

January 2015 through December 2015

Plan: Jackson County CCO, LLC, abn: Jackson Care Connect

Region: Southwest

Rate Group: **Foster Children (CAF)**

	Capitation Rate
Base Services Rate	$426.46
Base HRA Adjustment	$25.42
Hospital Provider Tax Allowance	$7.06
Administrative Allowance	$52.79
HRA Administrative Allowance	$0.52
Health Insurers Fee	$0.00
Total Services with Admin, HRA, and HIF	$512.26

Services Admin %	*10.3%*
HRA Admin %	*0.1%*
Non Benefit %*	*11.7%*

*Non Benefit % includes Hospital Provider Tax, HIF, and Administrative Allowances

Oregon Health Plan Medicaid Demonstration

Coordinated Care Organization Capitation Rates
CCO-B: Physical Health and Mental Health Services
January 2015 through December 2015

Plan: Jackson County CCO, LLC, abn: Jackson Care Connect

Region: Southwest
Rate Group: **ACA Ages 19-44**

	Capitation Rate
Base Services Rate	$280.74
Base HRA Adjustment	$32.95
Hospital Provider Tax Allowance	$10.11
Administrative Allowance	$35.79
HRA Administrative Allowance	$0.67
Health Insurers Fee	$0.00
Total Services with Admin, HRA, and HIF	$360.26

Services Admin %	*9.9%*
HRA Admin %	*0.2%*
Non Benefit %*	*12.7%*

*Non Benefit % includes Hospital Provider Tax, HIF, and Administrative Allowances

Oregon Health Plan Medicaid Demonstration

Coordinated Care Organization Capitation Rates

CCO-B: Physical Health and Mental Health Services

January 2015 through December 2015

Plan: Jackson County CCO, LLC, abn: Jackson Care Connect

Region: Southwest

Rate Group: **ACA Ages 45-54**

	Capitation Rate
Base Services Rate	$451.10
Base HRA Adjustment	$61.27
Hospital Provider Tax Allowance	$16.64
Administrative Allowance	$57.67
HRA Administrative Allowance	$1.25
Health Insurers Fee	$0.00
Total Services with Admin, HRA, and HIF	$587.93

Services Admin %	*9.8%*
HRA Admin %	*0.2%*
Non Benefit %*	*12.6%*

*Non Benefit % includes Hospital Provider Tax, HIF, and Administrative Allowances

Oregon Health Plan Medicaid Demonstration

Coordinated Care Organization Capitation Rates

CCO-B: Physical Health and Mental Health Services

January 2015 through December 2015

Plan: Jackson County CCO, LLC, abn: Jackson Care Connect

Region: Southwest

Rate Group: **ACA Ages 55-64**

	Capitation Rate
Base Services Rate	$549.68
Base HRA Adjustment	$66.67
Hospital Provider Tax Allowance	$19.30
Administrative Allowance	$70.28
HRA Administrative Allowance	$1.36
Health Insurers Fee	$0.00
Total Services with Admin, HRA, and HIF	$707.30

Services Admin %	*9.9%*
HRA Admin %	*0.2%*
Non Benefit %*	*12.7%*

*Non Benefit % includes Hospital Provider Tax, HIF, and Administrative Allowances

Oregon Health Plan Medicaid Demonstration

Coordinated Care Organization Capitation Rates

CCO-E: Mental Health Services Only

January 2015 through December 2015

Plan: Jackson County CCO, LLC, abn: Jackson Care Connect

Region: Southwest

Rate Group: **Temporary Assistance to Needy Families - Adults**

	Capitation Rate
Base Services Rate	$39.26
Base HRA Adjustment	$1.07
Hospital Provider Tax Allowance	$0.00
Administrative Allowance	$4.36
HRA Administrative Allowance	$0.02
Health Insurers Fee	$0.00
Total Services with Admin, HRA, and HIF	$44.72

Services Admin %	*9.7%*
HRA Admin %	*0.0%*
Non Benefit %*	*9.7%*

*Non Benefit % includes Hospital Provider Tax, HIF, and Administrative Allowances

Oregon Health Plan Medicaid Demonstration

Coordinated Care Organization Capitation Rates

CCO-E: Mental Health Services Only

January 2015 through December 2015

Plan: Jackson County CCO, LLC, abn: Jackson Care Connect

Region: Southwest

Rate Group: **Poverty Level Medical - Adults**

	Capitation Rate
Base Services Rate	$16.32
Base HRA Adjustment	$0.28
Hospital Provider Tax Allowance	$0.00
Administrative Allowance	$1.90
HRA Administrative Allowance	$0.01
Health Insurers Fee	$0.00
Total Services with Admin, HRA, and HIF	$18.51
Services Admin %	*10.3%*
HRA Admin %	*0.0%*
Non Benefit %*	*10.3%*

*Non Benefit % includes Hospital Provider Tax, HIF, and Administrative Allowances

Oregon Health Plan Medicaid Demonstration

Coordinated Care Organization Capitation Rates
CCO-E: Mental Health Services Only
January 2015 through December 2015

Plan: Jackson County CCO, LLC, abn: Jackson Care Connect

Region: Southwest

Rate Group: **Children 0-1 (CHIP, PLMC, TANF Children)**

	Capitation Rate
Base Services Rate	$1.67
Base HRA Adjustment	$0.00
Hospital Provider Tax Allowance	$0.00
Administrative Allowance	$0.18
HRA Administrative Allowance	$0.00
Health Insurers Fee	$0.00
Total Services with Admin, HRA, and HIF	$1.86

Services Admin %	*9.8%*
HRA Admin %	*0.0%*
Non Benefit %*	*9.8%*

*Non Benefit % includes Hospital Provider Tax, HIF, and Administrative Allowances

Oregon Health Plan Medicaid Demonstration

Coordinated Care Organization Capitation Rates
CCO-E: Mental Health Services Only
January 2015 through December 2015

Plan: Jackson County CCO, LLC, abn: Jackson Care Connect

Region: Southwest

Rate Group: **Children 1-5 (CHIP, PLMC, TANF Children)**

	Capitation Rate
Base Services Rate	$12.59
Base HRA Adjustment	$0.10
Hospital Provider Tax Allowance	$0.00
Administrative Allowance	$1.45
HRA Administrative Allowance	$0.00
Health Insurers Fee	$0.00
Total Services with Admin, HRA, and HIF	$14.14
Services Admin %	*10.3%*
HRA Admin %	*0.0%*
Non Benefit %*	*10.3%*

*Non Benefit % includes Hospital Provider Tax, HIF, and Administrative Allowances

Oregon Health Plan Medicaid Demonstration

Coordinated Care Organization Capitation Rates

CCO-E: Mental Health Services Only

January 2015 through December 2015

Plan: Jackson County CCO, LLC, abn: Jackson Care Connect

Region: Southwest

Rate Group: **Children 6-18 (CHIP, PLMC, TANF Children)**

	Capitation Rate
Base Services Rate	$31.10
Base HRA Adjustment	$0.39
Hospital Provider Tax Allowance	$0.00
Administrative Allowance	$3.60
HRA Administrative Allowance	$0.01
Health Insurers Fee	$0.00
Total Services with Admin, HRA, and HIF	$35.09
Services Admin %	*10.3%*
HRA Admin %	*0.0%*
Non Benefit %*	*10.3%*

*Non Benefit % includes Hospital Provider Tax, HIF, and Administrative Allowances

Oregon Health Plan Medicaid Demonstration

Coordinated Care Organization Capitation Rates
CCO-E: Mental Health Services Only
January 2015 through December 2015

Plan: Jackson County CCO, LLC, abn: Jackson Care Connect

Region: Southwest

Rate Group: **ABAD with Medicare**

	Capitation Rate
Base Services Rate	$89.89
Base HRA Adjustment	$0.29
Hospital Provider Tax Allowance	$0.00
Administrative Allowance	$9.44
HRA Administrative Allowance	$0.01
Health Insurers Fee	$0.00
Total Services with Admin, HRA, and HIF	$99.62

Services Admin %	*9.5%*
HRA Admin %	*0.0%*
Non Benefit %*	*9.5%*

*Non Benefit % includes Hospital Provider Tax, HIF, and Administrative Allowances

Oregon Health Plan Medicaid Demonstration

Coordinated Care Organization Capitation Rates
CCO-E: Mental Health Services Only
January 2015 through December 2015

Plan: Jackson County CCO, LLC, abn: Jackson Care Connect

Region: Southwest

Rate Group: **ABAD without Medicare**

	Capitation Rate
Base Services Rate	$162.18
Base HRA Adjustment	$7.73
Hospital Provider Tax Allowance	$0.00
Administrative Allowance	$17.84
HRA Administrative Allowance	$0.16
Health Insurers Fee	$0.00
Total Services with Admin, HRA, and HIF	$187.90

Services Admin %	*9.5%*
HRA Admin %	*0.1%*
Non Benefit %*	*9.5%*

*Non Benefit % includes Hospital Provider Tax, HIF, and Administrative Allowances

Oregon Health Plan Medicaid Demonstration

Coordinated Care Organization Capitation Rates
CCO-E: Mental Health Services Only
January 2015 through December 2015

Plan: Jackson County CCO, LLC, abn: Jackson Care Connect

Region: Southwest

Rate Group: **OAA with Medicare**

	Capitation Rate
Base Services Rate	$89.89
Base HRA Adjustment	$0.29
Hospital Provider Tax Allowance	$0.00
Administrative Allowance	$9.44
HRA Administrative Allowance	$0.01
Health Insurers Fee	$0.00
Total Services with Admin, HRA, and HIF	$99.62

Services Admin %	*9.5%*
HRA Admin %	*0.0%*
Non Benefit %*	*9.5%*

*Non Benefit % includes Hospital Provider Tax, HIF, and Administrative Allowances

Oregon Health Plan Medicaid Demonstration

Coordinated Care Organization Capitation Rates
CCO-E: Mental Health Services Only
January 2015 through December 2015

Plan: Jackson County CCO, LLC, abn: Jackson Care Connect

Region: Southwest

Rate Group: **OAA without Medicare**

	Capitation Rate
Base Services Rate	$162.18
Base HRA Adjustment	$7.73
Hospital Provider Tax Allowance	$0.00
Administrative Allowance	$17.84
HRA Administrative Allowance	$0.16
Health Insurers Fee	$0.00
Total Services with Admin, HRA, and HIF	$187.90

Services Admin %	*9.5%*
HRA Admin %	*0.1%*
Non Benefit %*	*9.5%*

*Non Benefit % includes Hospital Provider Tax, HIF, and Administrative Allowances

Oregon Health Plan Medicaid Demonstration

Coordinated Care Organization Capitation Rates
CCO-E: Mental Health Services Only
January 2015 through December 2015

Plan: Jackson County CCO, LLC, abn: Jackson Care Connect

Region: Southwest

Rate Group: **Foster Children (CAF)**

	Capitation Rate
Base Services Rate	$245.76
Base HRA Adjustment	$2.46
Hospital Provider Tax Allowance	$0.00
Administrative Allowance	$30.38
HRA Administrative Allowance	$0.05
Health Insurers Fee	$0.00
Total Services with Admin, HRA, and HIF	$278.65
Services Admin %	*10.9%*
HRA Admin %	*0.0%*
Non Benefit %*	*10.9%*

*Non Benefit % includes Hospital Provider Tax, HIF, and Administrative Allowances

Oregon Health Plan Medicaid Demonstration

Coordinated Care Organization Capitation Rates

CCO-E: Mental Health Services Only

January 2015 through December 2015

Plan: Jackson County CCO, LLC, abn: Jackson Care Connect

Region: Southwest

Rate Group: **ACA Ages 19-44**

	Capitation Rate
Base Services Rate	$41.99
Base HRA Adjustment	$1.30
Hospital Provider Tax Allowance	$0.00
Administrative Allowance	$4.96
HRA Administrative Allowance	$0.03
Health Insurers Fee	$0.00
Total Services with Admin, HRA, and HIF	$48.27
Services Admin %	*10.3%*
HRA Admin %	*0.1%*
Non Benefit %*	*10.3%*

*Non Benefit % includes Hospital Provider Tax, HIF, and Administrative Allowances

Oregon Health Plan Medicaid Demonstration

Coordinated Care Organization Capitation Rates

CCO-E: Mental Health Services Only

January 2015 through December 2015

Plan: Jackson County CCO, LLC, abn: Jackson Care Connect

Region: Southwest

Rate Group: **ACA Ages 45-54**

	Capitation Rate
Base Services Rate	$50.68
Base HRA Adjustment	$2.09
Hospital Provider Tax Allowance	$0.00
Administrative Allowance	$5.96
HRA Administrative Allowance	$0.04
Health Insurers Fee	$0.00
Total Services with Admin, HRA, and HIF	$58.78
Services Admin %	*10.1%*
HRA Admin %	*0.1%*
Non Benefit %*	*10.1%*

*Non Benefit % includes Hospital Provider Tax, HIF, and Administrative Allowances

Oregon Health Plan Medicaid Demonstration

Coordinated Care Organization Capitation Rates

CCO-E: Mental Health Services Only

January 2015 through December 2015

Plan: Jackson County CCO, LLC, abn: Jackson Care Connect

Region: Southwest

Rate Group: **ACA Ages 55-64**

	Capitation Rate
Base Services Rate	$53.51
Base HRA Adjustment	$0.80
Hospital Provider Tax Allowance	$0.00
Administrative Allowance	$6.20
HRA Administrative Allowance	$0.02
Health Insurers Fee	$0.00
Total Services with Admin, HRA, and HIF	$60.53
Services Admin %	*10.2%*
HRA Admin %	*0.0%*
Non Benefit %*	*10.2%*

*Non Benefit % includes Hospital Provider Tax, HIF, and Administrative Allowances

Oregon Health Plan Medicaid Demonstration

Coordinated Care Organization Capitation Rates

CCO-F: Dental Services Only

January 2015 through December 2015

Plan: Jackson County CCO, LLC, abn: Jackson Care Connect

Region: Southwest

Rate Group: **Temporary Assistance to Needy Families - Adults**

	Capitation Rate
Base Services Rate	$31.11
Base HRA Adjustment	$0.00
Hospital Provider Tax Allowance	$0.00
Administrative Allowance	$2.71
HRA Administrative Allowance	$0.00
Health Insurers Fee	$0.00
Total Services with Admin, HRA, and HIF	$33.81

Services Admin %	*8.0%*
HRA Admin %	*0.0%*
Non Benefit %*	*8.0%*

*Non Benefit % includes Hospital Provider Tax, HIF, and Administrative Allowances

Oregon Health Plan Medicaid Demonstration

Coordinated Care Organization Capitation Rates

CCO-F: Dental Services Only

January 2015 through December 2015

Plan: Jackson County CCO, LLC, abn: Jackson Care Connect

Region: Southwest

Rate Group: **Poverty Level Medical - Adults**

	Capitation Rate
Base Services Rate	$32.24
Base HRA Adjustment	$0.00
Hospital Provider Tax Allowance	$0.00
Administrative Allowance	$2.80
HRA Administrative Allowance	$0.00
Health Insurers Fee	$0.00
Total Services with Admin, HRA, and HIF	$35.04

Services Admin %	*8.0%*
HRA Admin %	*0.0%*
Non Benefit %*	*8.0%*

*Non Benefit % includes Hospital Provider Tax, HIF, and Administrative Allowances

Oregon Health Plan Medicaid Demonstration

Coordinated Care Organization Capitation Rates

CCO-F: Dental Services Only

January 2015 through December 2015

Plan: Jackson County CCO, LLC, abn: Jackson Care Connect

Region: Southwest

Rate Group: **Children 0-1 (CHIP, PLMC, TANF Children)**

	Capitation Rate
Base Services Rate	$1.03
Base HRA Adjustment	$0.00
Hospital Provider Tax Allowance	$0.00
Administrative Allowance	$0.09
HRA Administrative Allowance	$0.00
Health Insurers Fee	$0.00
Total Services with Admin, HRA, and HIF	$1.12

Services Admin %	*8.0%*
HRA Admin %	*0.0%*
Non Benefit %*	*8.0%*

*Non Benefit % includes Hospital Provider Tax, HIF, and Administrative Allowances

Oregon Health Plan Medicaid Demonstration

Coordinated Care Organization Capitation Rates

CCO-F: Dental Services Only

January 2015 through December 2015

Plan: Jackson County CCO, LLC, abn: Jackson Care Connect

Region: Southwest

Rate Group: **Children 1-5 (CHIP, PLMC, TANF Children)**

	Capitation Rate
Base Services Rate	$17.43
Base HRA Adjustment	$0.00
Hospital Provider Tax Allowance	$0.00
Administrative Allowance	$1.52
HRA Administrative Allowance	$0.00
Health Insurers Fee	$0.00
Total Services with Admin, HRA, and HIF	$18.94

Services Admin %	*8.0%*
HRA Admin %	*0.0%*
Non Benefit %*	*8.0%*

*Non Benefit % includes Hospital Provider Tax, HIF, and Administrative Allowances

Oregon Health Plan Medicaid Demonstration

Coordinated Care Organization Capitation Rates

CCO-F: Dental Services Only

January 2015 through December 2015

Plan:	Jackson County CCO, LLC, abn: Jackson Care Connect
Region:	Southwest
Rate Group:	**Children 6-18 (CHIP, PLMC, TANF Children)**

	Capitation Rate
Base Services Rate	$22.67
Base HRA Adjustment	$0.00
Hospital Provider Tax Allowance	$0.00
Administrative Allowance	$1.97
HRA Administrative Allowance	$0.00
Health Insurers Fee	$0.00
Total Services with Admin, HRA, and HIF	$24.64

Services Admin %	*8.0%*
HRA Admin %	*0.0%*
Non Benefit %*	*8.0%*

*Non Benefit % includes Hospital Provider Tax, HIF, and Administrative Allowances

Oregon Health Plan Medicaid Demonstration

Coordinated Care Organization Capitation Rates

CCO-F: Dental Services Only

January 2015 through December 2015

Plan:	Jackson County CCO, LLC, abn: Jackson Care Connect
Region:	Southwest
Rate Group:	**ABAD with Medicare**

	Capitation Rate
Base Services Rate	$63.81
Base HRA Adjustment	$0.00
Hospital Provider Tax Allowance	$0.00
Administrative Allowance	$5.55
HRA Administrative Allowance	$0.00
Health Insurers Fee	$0.00
Total Services with Admin, HRA, and HIF	$69.36

Services Admin %	*8.0%*
HRA Admin %	*0.0%*
Non Benefit %*	*8.0%*

*Non Benefit % includes Hospital Provider Tax, HIF, and Administrative Allowances

Oregon Health Plan Medicaid Demonstration

Coordinated Care Organization Capitation Rates

CCO-F: Dental Services Only

January 2015 through December 2015

Plan: Jackson County CCO, LLC, abn: Jackson Care Connect

Region: Southwest

Rate Group: **ABAD without Medicare**

	Capitation Rate
Base Services Rate	$57.43
Base HRA Adjustment	$0.00
Hospital Provider Tax Allowance	$0.00
Administrative Allowance	$4.99
HRA Administrative Allowance	$0.00
Health Insurers Fee	$0.00
Total Services with Admin, HRA, and HIF	$62.42

Services Admin %	*8.0%*
HRA Admin %	*0.0%*
Non Benefit %*	*8.0%*

*Non Benefit % includes Hospital Provider Tax, HIF, and Administrative Allowances

Oregon Health Plan Medicaid Demonstration

Coordinated Care Organization Capitation Rates

CCO-F: Dental Services Only

January 2015 through December 2015

Plan:	Jackson County CCO, LLC, abn: Jackson Care Connect
Region:	Southwest
Rate Group:	**OAA with Medicare**

	Capitation Rate
Base Services Rate	$63.81
Base HRA Adjustment	$0.00
Hospital Provider Tax Allowance	$0.00
Administrative Allowance	$5.55
HRA Administrative Allowance	$0.00
Health Insurers Fee	$0.00
Total Services with Admin, HRA, and HIF	$69.36

Services Admin %	*8.0%*
HRA Admin %	*0.0%*
Non Benefit %*	*8.0%*

*Non Benefit % includes Hospital Provider Tax, HIF, and Administrative Allowances

Oregon Health Plan Medicaid Demonstration

Coordinated Care Organization Capitation Rates

CCO-F: Dental Services Only

January 2015 through December 2015

Plan:	Jackson County CCO, LLC, abn: Jackson Care Connect
Region:	Southwest
Rate Group:	**OAA without Medicare**

	Capitation Rate
Base Services Rate	$57.43
Base HRA Adjustment	$0.00
Hospital Provider Tax Allowance	$0.00
Administrative Allowance	$4.99
HRA Administrative Allowance	$0.00
Health Insurers Fee	$0.00
Total Services with Admin, HRA, and HIF	$62.42

Services Admin %	*8.0%*
HRA Admin %	*0.0%*
Non Benefit %*	*8.0%*

*Non Benefit % includes Hospital Provider Tax, HIF, and Administrative Allowances

Oregon Health Plan Medicaid Demonstration

Coordinated Care Organization Capitation Rates

CCO-F: Dental Services Only

January 2015 through December 2015

Plan: Jackson County CCO, LLC, abn: Jackson Care Connect

Region: Southwest

Rate Group: **Foster Children (CAF)**

	Capitation Rate
Base Services Rate	$24.55
Base HRA Adjustment	$0.00
Hospital Provider Tax Allowance	$0.00
Administrative Allowance	$2.13
HRA Administrative Allowance	$0.00
Health Insurers Fee	$0.00
Total Services with Admin, HRA, and HIF	$26.68

Services Admin %	*8.0%*
HRA Admin %	*0.0%*
Non Benefit %*	*8.0%*

*Non Benefit % includes Hospital Provider Tax, HIF, and Administrative Allowances

Oregon Health Plan Medicaid Demonstration

Coordinated Care Organization Capitation Rates

CCO-F: Dental Services Only

January 2015 through December 2015

Plan:	Jackson County CCO, LLC, abn: Jackson Care Connect
Region:	Southwest
Rate Group:	**ACA Ages 19-44**

	Capitation Rate
Base Services Rate	$35.79
Base HRA Adjustment	$0.00
Hospital Provider Tax Allowance	$0.00
Administrative Allowance	$3.11
HRA Administrative Allowance	$0.00
Health Insurers Fee	$0.00
Total Services with Admin, HRA, and HIF	$38.90

Services Admin %	*8.0%*
HRA Admin %	*0.0%*
Non Benefit %*	*8.0%*

*Non Benefit % includes Hospital Provider Tax, HIF, and Administrative Allowances

Oregon Health Plan Medicaid Demonstration

Coordinated Care Organization Capitation Rates

CCO-F: Dental Services Only

January 2015 through December 2015

Plan:	Jackson County CCO, LLC, abn: Jackson Care Connect
Region:	Southwest
Rate Group:	**ACA Ages 45-54**

	Capitation Rate
Base Services Rate	$40.01
Base HRA Adjustment	$0.00
Hospital Provider Tax Allowance	$0.00
Administrative Allowance	$3.48
HRA Administrative Allowance	$0.00
Health Insurers Fee	$0.00
Total Services with Admin, HRA, and HIF	$43.49

Services Admin %	*8.0%*
HRA Admin %	*0.0%*
Non Benefit %*	*8.0%*

*Non Benefit % includes Hospital Provider Tax, HIF, and Administrative Allowances

Oregon Health Plan Medicaid Demonstration

Coordinated Care Organization Capitation Rates

CCO-F: Dental Services Only

January 2015 through December 2015

Plan:	Jackson County CCO, LLC, abn: Jackson Care Connect
Region:	Southwest
Rate Group:	**ACA Ages 55-64**

	Capitation Rate
Base Services Rate	$44.11
Base HRA Adjustment	$0.00
Hospital Provider Tax Allowance	$0.00
Administrative Allowance	$3.84
HRA Administrative Allowance	$0.00
Health Insurers Fee	$0.00
Total Services with Admin, HRA, and HIF	$47.94

Services Admin %	*8.0%*
HRA Admin %	*0.0%*
Non Benefit %*	*8.0%*

*Non Benefit % includes Hospital Provider Tax, HIF, and Administrative Allowances

Oregon Health Plan Medicaid Demonstration

Coordinated Care Organization Capitation Rates
CCO-G: Mental Health and Dental Services Only
January 2015 through December 2015

Plan: Jackson County CCO, LLC, abn: Jackson Care Connect

Region: Southwest

Rate Group: **Temporary Assistance to Needy Families - Adults**

	Capitation Rate
Base Services Rate	$63.24
Base HRA Adjustment	$1.07
Hospital Provider Tax Allowance	$0.00
Administrative Allowance	$6.44
HRA Administrative Allowance	$0.02
Health Insurers Fee	$0.00
Total Services with Admin, HRA, and HIF	$70.78

Services Admin %	*9.1%*
HRA Admin %	*0.0%*
Non Benefit %*	*9.1%*

*Non Benefit % includes Hospital Provider Tax, HIF, and Administrative Allowances

Oregon Health Plan Medicaid Demonstration

Coordinated Care Organization Capitation Rates
CCO-G: Mental Health and Dental Services Only
January 2015 through December 2015

Plan: Jackson County CCO, LLC, abn: Jackson Care Connect

Region: Southwest

Rate Group: **Poverty Level Medical - Adults**

	Capitation Rate
Base Services Rate	$45.29
Base HRA Adjustment	$0.28
Hospital Provider Tax Allowance	$0.00
Administrative Allowance	$4.42
HRA Administrative Allowance	$0.01
Health Insurers Fee	$0.00
Total Services with Admin, HRA, and HIF	$50.00

Services Admin %	*8.8%*
HRA Admin %	*0.0%*
Non Benefit %*	*8.8%*

*Non Benefit % includes Hospital Provider Tax, HIF, and Administrative Allowances

Oregon Health Plan Medicaid Demonstration

Coordinated Care Organization Capitation Rates
CCO-G: Mental Health and Dental Services Only
January 2015 through December 2015

Plan: Jackson County CCO, LLC, abn: Jackson Care Connect

Region: Southwest

Rate Group: **Children 0-1 (CHIP, PLMC, TANF Children)**

	Capitation Rate
Base Services Rate	$2.01
Base HRA Adjustment	$0.00
Hospital Provider Tax Allowance	$0.00
Administrative Allowance	$0.21
HRA Administrative Allowance	$0.00
Health Insurers Fee	$0.00
Total Services with Admin, HRA, and HIF	$2.22

Services Admin %	*9.5%*
HRA Admin %	*0.0%*
Non Benefit %*	*9.5%*

*Non Benefit % includes Hospital Provider Tax, HIF, and Administrative Allowances

Oregon Health Plan Medicaid Demonstration

Coordinated Care Organization Capitation Rates
CCO-G: Mental Health and Dental Services Only
January 2015 through December 2015

Plan: Jackson County CCO, LLC, abn: Jackson Care Connect

Region: Southwest

Rate Group: **Children 1-5 (CHIP, PLMC, TANF Children)**

	Capitation Rate
Base Services Rate	$29.54
Base HRA Adjustment	$0.10
Hospital Provider Tax Allowance	$0.00
Administrative Allowance	$2.92
HRA Administrative Allowance	$0.00
Health Insurers Fee	$0.00
Total Services with Admin, HRA, and HIF	$32.56

Services Admin %	*9.0%*
HRA Admin %	*0.0%*
Non Benefit %*	*9.0%*

*Non Benefit % includes Hospital Provider Tax, HIF, and Administrative Allowances

Oregon Health Plan Medicaid Demonstration

Coordinated Care Organization Capitation Rates
CCO-G: Mental Health and Dental Services Only
January 2015 through December 2015

Plan: Jackson County CCO, LLC, abn: Jackson Care Connect

Region: Southwest

Rate Group: **Children 6-18 (CHIP, PLMC, TANF Children)**

	Capitation Rate
Base Services Rate	$53.03
Base HRA Adjustment	$0.39
Hospital Provider Tax Allowance	$0.00
Administrative Allowance	$5.50
HRA Administrative Allowance	$0.01
Health Insurers Fee	$0.00
Total Services with Admin, HRA, and HIF	$58.93

Services Admin %	*9.3%*
HRA Admin %	*0.0%*
Non Benefit %*	*9.3%*

*Non Benefit % includes Hospital Provider Tax, HIF, and Administrative Allowances

Oregon Health Plan Medicaid Demonstration

Coordinated Care Organization Capitation Rates
CCO-G: Mental Health and Dental Services Only
January 2015 through December 2015

Plan: Jackson County CCO, LLC, abn: Jackson Care Connect

Region: Southwest

Rate Group: **ABAD with Medicare**

	Capitation Rate
Base Services Rate	$107.70
Base HRA Adjustment	$0.29
Hospital Provider Tax Allowance	$0.00
Administrative Allowance	$10.99
HRA Administrative Allowance	$0.01
Health Insurers Fee	$0.00
Total Services with Admin, HRA, and HIF	$118.99

Services Admin %	*9.2%*
HRA Admin %	*0.0%*
Non Benefit %*	*9.2%*

*Non Benefit % includes Hospital Provider Tax, HIF, and Administrative Allowances

Oregon Health Plan Medicaid Demonstration

Coordinated Care Organization Capitation Rates
CCO-G: Mental Health and Dental Services Only
January 2015 through December 2015

Plan:	Jackson County CCO, LLC, abn: Jackson Care Connect
Region:	Southwest
Rate Group:	**ABAD without Medicare**

	Capitation Rate
Base Services Rate	$184.58
Base HRA Adjustment	$7.73
Hospital Provider Tax Allowance	$0.00
Administrative Allowance	$19.79
HRA Administrative Allowance	$0.16
Health Insurers Fee	$0.00
Total Services with Admin, HRA, and HIF	$212.25

Services Admin %	*9.3%*
HRA Admin %	*0.1%*
Non Benefit %*	*9.3%*

*Non Benefit % includes Hospital Provider Tax, HIF, and Administrative Allowances

Oregon Health Plan Medicaid Demonstration

Coordinated Care Organization Capitation Rates
CCO-G: Mental Health and Dental Services Only
January 2015 through December 2015

Plan: Jackson County CCO, LLC, abn: Jackson Care Connect

Region: Southwest

Rate Group: **OAA with Medicare**

	Capitation Rate
Base Services Rate	$107.70
Base HRA Adjustment	$0.29
Hospital Provider Tax Allowance	$0.00
Administrative Allowance	$10.99
HRA Administrative Allowance	$0.01
Health Insurers Fee	$0.00
Total Services with Admin, HRA, and HIF	$118.99

Services Admin %	*9.2%*
HRA Admin %	*0.0%*
Non Benefit %*	*9.2%*

*Non Benefit % includes Hospital Provider Tax, HIF, and Administrative Allowances

Oregon Health Plan Medicaid Demonstration

Coordinated Care Organization Capitation Rates
CCO-G: Mental Health and Dental Services Only
January 2015 through December 2015

Plan:	Jackson County CCO, LLC, abn: Jackson Care Connect
Region:	Southwest
Rate Group:	**OAA without Medicare**

	Capitation Rate
Base Services Rate	$184.58
Base HRA Adjustment	$7.73
Hospital Provider Tax Allowance	$0.00
Administrative Allowance	$19.79
HRA Administrative Allowance	$0.16
Health Insurers Fee	$0.00
Total Services with Admin, HRA, and HIF	$212.25

Services Admin %	*9.3%*
HRA Admin %	*0.1%*
Non Benefit %*	*9.3%*

*Non Benefit % includes Hospital Provider Tax, HIF, and Administrative Allowances

Oregon Health Plan Medicaid Demonstration

Coordinated Care Organization Capitation Rates
CCO-G: Mental Health and Dental Services Only
January 2015 through December 2015

Plan: Jackson County CCO, LLC, abn: Jackson Care Connect

Region: Southwest

Rate Group: **Foster Children (CAF)**

	Capitation Rate
Base Services Rate	$267.91
Base HRA Adjustment	$2.46
Hospital Provider Tax Allowance	$0.00
Administrative Allowance	$32.31
HRA Administrative Allowance	$0.05
Health Insurers Fee	$0.00
Total Services with Admin, HRA, and HIF	$302.72

Services Admin %	*10.7%*
HRA Admin %	*0.0%*
Non Benefit %*	*10.7%*

*Non Benefit % includes Hospital Provider Tax, HIF, and Administrative Allowances

Oregon Health Plan Medicaid Demonstration

Coordinated Care Organization Capitation Rates
CCO-G: Mental Health and Dental Services Only
January 2015 through December 2015

Plan: Jackson County CCO, LLC, abn: Jackson Care Connect

Region: Southwest
Rate Group: **ACA Ages 19-44**

	Capitation Rate
Base Services Rate	$66.73
Base HRA Adjustment	$1.30
Hospital Provider Tax Allowance	$0.00
Administrative Allowance	$7.11
HRA Administrative Allowance	$0.03
Health Insurers Fee	$0.00
Total Services with Admin, HRA, and HIF	$75.17

Services Admin %	*9.5%*
HRA Admin %	*0.0%*
Non Benefit %*	*9.5%*

*Non Benefit % includes Hospital Provider Tax, HIF, and Administrative Allowances

Oregon Health Plan Medicaid Demonstration

Coordinated Care Organization Capitation Rates
CCO-G: Mental Health and Dental Services Only
January 2015 through December 2015

Plan: Jackson County CCO, LLC, abn: Jackson Care Connect

Region: Southwest
Rate Group: **ACA Ages 45-54**

	Capitation Rate
Base Services Rate	$76.85
Base HRA Adjustment	$2.09
Hospital Provider Tax Allowance	$0.00
Administrative Allowance	$8.24
HRA Administrative Allowance	$0.04
Health Insurers Fee	$0.00
Total Services with Admin, HRA, and HIF	$87.22

Services Admin %	*9.4%*
HRA Admin %	*0.0%*
Non Benefit %*	*9.4%*

*Non Benefit % includes Hospital Provider Tax, HIF, and Administrative Allowances

Oregon Health Plan Medicaid Demonstration

Coordinated Care Organization Capitation Rates
CCO-G: Mental Health and Dental Services Only
January 2015 through December 2015

Plan: Jackson County CCO, LLC, abn: Jackson Care Connect

Region: Southwest
Rate Group: **ACA Ages 55-64**

	Capitation Rate
Base Services Rate	$80.81
Base HRA Adjustment	$0.80
Hospital Provider Tax Allowance	$0.00
Administrative Allowance	$8.58
HRA Administrative Allowance	$0.02
Health Insurers Fee	$0.00
Total Services with Admin, HRA, and HIF	$90.20

Services Admin %	*9.5%*
HRA Admin %	*0.0%*
Non Benefit %*	*9.5%*

*Non Benefit % includes Hospital Provider Tax, HIF, and Administrative Allowances