

OREGON HEALTH PLAN

FCHP Non-Contracted DRG Hospital Reimbursement Rates

Effective Date: October 1, 2005

Hospital Name	Inpatient Per-Diem In-area rates	Inpatient Per-Diem out-of-area rates	Outpatient Cost-to- Charge Ratio
Adventist Medical Center	\$1,171	\$1,171	20%
Albany General Hospital	\$1,132	\$1,132	27%
Bay Area Hospital	\$1,268	\$1,268	22%
Good Samaritan Regional Medical Center	\$1,132	\$1,132	23%
Kaiser Foundation Hospitals	\$1,171	\$1,171	29%
Legacy Emanuel Hosp & Health Center	\$1,171	\$1,964	46%
Legacy Good Samaritan Hospital	\$1,171	\$1,171	46%
Legacy Meridian Park Hospital	\$1,171	\$1,171	45%
Legacy Mt Hood Medical Center	\$1,171	\$1,171	41%
Mckenzie-Willamette Regional Medical Ctr	\$1,140	\$1,140	30%
Mercy Medical Center	\$1,140	\$1,140	19%
Merle West Medical Center	\$1,100	\$1,100	25%
OHSU Hospital	\$1,171	\$1,870	20%
Physicians Hospital LLC	\$1,171	\$1,171	17%
Providence Medford Medical Center	\$1,100	\$1,100	33%
Providence Milwaukie Hospital	\$1,171	\$1,171	30%
Providence Portland Medical	\$1,171	\$1,171	26%
Providence St Vincent Medical Center	\$1,171	\$1,171	25%
Rogue Valley Medical Center	\$1,100	\$1,391	38%
Sacred Heart Medical Center	\$1,140	\$1,716	30%
Salem Hospital	\$1,171	\$1,171	40%
St Charles Medical Center	\$1,140	\$1,140	30%
Three Rivers Community Hospital	\$1,100	\$1,100	27%
Tuality Community Hospital	\$1,171	\$1,171	25%
Willamette Falls Community Hospital	\$1,171	\$1,171	25%
Willamette Valley Medical Center	\$1,171	\$1,171	20%
Out of State - contiguous	N/A	\$1,732	29%
Out of State - non-contiguous	N/A	\$1,732	29%

* Outliers and all pass through payments (DSH, IME, DME, Capitol, etc) are incorporated in the statewide average Per Diem value listed above.