

OREGON HEALTH PLAN

FCHP Non-Contracted DRG Hospital Reimbursement Rates

Effective Date: October 1, 2005

Revised as of 12/23/05

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	19%
Albany General Hospital	\$1,132	\$1,132	25%
Bay Area Hospital	\$1,268	\$1,268	20%
Good Samaritan Regional Medical Center	\$1,132	\$1,132	22%
Kaiser Foundation Hospitals	\$1,171	\$1,171	26%
Legacy Emanuel Hosp & Health Center	\$1,171	\$1,964	43%
Legacy Good Samaritan Hospital	\$1,171	\$1,171	42%
Legacy Meridian Park Hospital	\$1,171	\$1,171	42%
Legacy Mt Hood Medical Center	\$1,171	\$1,171	38%
Mckenzie-Willamette Regional Medical Ctr	\$1,140	\$1,140	28%
Mercy Medical Center	\$1,140	\$1,140	17%
Merle West Medical Center	\$1,100	\$1,100	23%
OHSU Hospital	\$1,171	\$1,870	18%
Physicians Hospital LLC	\$1,171	\$1,171	16%
Providence Medford Medical Center	\$1,100	\$1,100	30%
Providence Milwaukie Hospital	\$1,171	\$1,171	28%
Providence Portland Medical	\$1,171	\$1,171	24%
Providence St Vincent Medical Center	\$1,171	\$1,171	23%
Rogue Valley Medical Center	\$1,100	\$1,391	35%
Sacred Heart Medical Center	\$1,140	\$1,716	28%
Salem Hospital	\$1,171	\$1,171	37%
St Charles Medical Center	\$1,140	\$1,140	28%
Three Rivers Community Hospital	\$1,100	\$1,100	25%
Tuality Community Hospital	\$1,171	\$1,171	23%
Willamette Falls Community Hospital	\$1,171	\$1,171	23%
Willamette Valley Medical Center	\$1,171	\$1,171	18%
Out of State - contiguous	N/A	\$1,732	26%
Out of State - non-contiguous	N/A	\$1,732	26%

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