

# HOOD RIVER COUNTY ADMINISTRATION



DAVID MERIWETHER, COUNTY ADMINISTRATOR

601 State Street • Hood River, OR 97031 • (541) 386-3970 • FAX (541) 386-9392

## BOARD OF COMMISSIONERS

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### ATTACHMENT 5 – CCO LETTER OF INTENT TO APPLY RFA #3402

1. What is Applicant's Legal Entity name, Oregon headquarters location, and key contact person?

Hood River County, 601 State Street, Hood River, OR 97031, David Meriwether, County Administrator

2. What is the Applicant's desired service area by county or zip code?

Hood River County

3. Who are the Applicant's key potential Affiliates or sponsoring organizations, if known?

Pacific Source

GOHBI

Local Mental Health Providers

Local Hospital

Local Medical Care Providers

Hood River County Health Department

Local Federally Qualified Health Center

Dental Providers

4. What is the Applicant's desired member capacity? If the Applicant desires to have no limit on capacity, so state.

Hood River County does not desire any limit on capacity.

5. Does the Applicant, or an Affiliate or intended subcontractor of the Applicant, have a contract with the Oregon Health Authority as a Medicaid managed care organization (MCO)? If so, does Applicant expect that contract to be terminated immediately before the effective date of Applicant's CCO Contract?

Hood River County does not currently have a contract with Oregon Health Authority as a Medicaid managed care organization.

6. Is the Applicant, or an Affiliate or intended subcontractor of the Applicant, licensed or expected to be licensed as an insurer (including health care service contractor) with the Oregon Insurance Division?

Hood River County does not expect to be licensed as an insurer, however our potential affiliate Pacific Source is currently licensed as such and would expect to continue.

7. Does the Applicant, or an Affiliate or an intended subcontractor of the Applicant, have or expect to have a contract as a Medicare Advantage Plan with the Center for Medicare and Medicaid Services (CMS)?

Hood River County does not expect to be have a contract as a Medicare Advantage Plan, however our potential affiliate Pacific Source is currently contracted as such and would expect to continue.

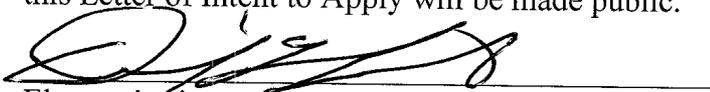
8. Attachment 3 describes four possible Application timelines in 2012. Which due date does the Applicant elect for submitting its Technical and Financial Applications? Choose one pair:

Hood River County would expect to apply in the August1/August8 – November 1, 2012 timeframe.

9. Does the Applicant intend to submit a Medicare Notice of Intent to Apply to CMS? If so, please provide a copy to OHA.

Hood River County does not intend to submit a Medicare Notice of Intent to Apply to CMS.

The Applicant acknowledges that this Letter of Intent is non-binding, except that OHA will consider this Letter of Intent will remain in effect and OHA may rely on it until the Applicant changes or withdraws it in accordance with the RFA. The Applicant will submit its Technical and Financial Applications on the dates set forth in this Letter of Intent to Apply, unless Applicant submits to OHA changes to this Letter of Intent to Apply. The Applicant understands this Letter of Intent to Apply will be made public.



Electronic signature

Authorized representative of the Applicant (may be Applicant's sponsor if Applicant is not yet formed)