

**FISCAL YEAR 2009-10
STATE MAXIMUM ALLOWANCES
SHORT-DOYLE/MEDI-CAL
REIMBURSEMENT RATES**

July 1, 2009 through June 30, 2010

SERVICE FUNCTION	MODE OF SERVICE CODE		SERVICE FUNCTION CODE	TIME BASE	SHORT-DOYLE/MEDI-CAL MAXIMUM ALLOWANCE
	CR/DC Code	SD/MC Claiming Code			
A. 24-HOUR SERVICES	05				
Hospital Inpatient		07, 08, 09	10-18	Client Day	\$1,129.78
Hospital Administrative Day		07, 08, 09	19	Client Day	7/1/09 - 7/31/09 \$351.26 8/1/09 - 6/30/10 pending DHCS
Psychiatric Health Facility (PHF)		05	20-29	Client Day	\$585.30
Adult Crisis Residential		05	40-49	Client Day	\$330.05
Adult Residential		05	65-79	Client Day	\$160.99
B. DAY SERVICES	10	12, 18			
Crisis Stabilization					
Emergency Room			20-24	Client Hour	\$96.92
Urgent Care			25-29	Client Hour	\$96.92
Day Treatment Intensive					
Half Day			81-84	Client 1/2 Day	\$147.76
Full Day			85-89	Client Full Day	\$207.53
Day Rehabilitation					
Half Day			91-94	Client 1/2 Day	\$86.20
Full Day			95-99	Client Full Day	\$134.55
C. OUTPATIENT SERVICES	15	12, 18			
Case Management, Brokerage			01-09	Staff Minute	\$2.07
Mental Health Services			10-19	Staff Minute	\$2.68
			30-59	Staff Minute	\$2.68
Medication Support			60-69	Staff Minute	\$4.94
Crisis Intervention			70-79	Staff Minute	\$3.98