



C A L I F O R N I A D E P A R T M E N T O F

Mental Health

1600 9th Street, Sacramento, CA 95814
(916) 654-2309

July 16, 2009

DMH INFORMATION NOTICE NO.: 09-12

TO: LOCAL MENTAL HEALTH DIRECTORS
LOCAL MENTAL HEALTH PROGRAM CHIEFS
LOCAL MENTAL HEALTH ADMINISTRATORS
COUNTY ADMINISTRATIVE OFFICERS
CHAIRPERSONS, LOCAL MENTAL HEALTH BOARDS

SUBJECT: FISCAL YEAR 2009-10 STATE MAXIMUM ALLOWANCES FOR
SHORT-DOYLE/MEDI-CAL SERVICES

SUPERSEDES: DMH INFORMATION NOTICE 09-11

DATE: July 16, 2009

REFERENCE: FISCAL YEAR 2009-10 STATE MAXIMUM RATE ALLOWANCES
FOR SHORT-DOYLE/MEDI-CAL SERVICES

This letter transmits the revised Fiscal Year (FY) 2009-10 State Maximum Allowances (SMAs) for Short-Doyle/Medi-Cal (SD/MC) services as required by Welfare & Institutions Code (W&I) Section 5720(a) and (b). These SMA's will apply to all SD/MC eligible services by service function, for the time period of July 1, 2009 through June 30, 2010.

The previous DMH Information Notice 09-11 was sent in error. We apologize for the inconvenience this may have caused you. Enclosed is the revised reimbursement rate schedule of SMAs. The revised rates reflect the continued elimination of the Home Health Market Basket Cost of Living Adjustment (COLA) for eligible services rendered for FY 2009-10 for Day and Outpatient Services.

Please be advised that Hospital Administrative Day rate is set annually by the Department of Health Care Services (DHCS), covering the period of August 1, 2009, through July 31, 2010, and only the rate for the period of July 1, 2009, through July 31, 2009, is reflected in the enclosed Revised SMAs rate schedule.

Once DMH receives notification from DHCS of the new Hospital Administrative Day rate, a revision of this DMH Information Notice and revised SMAs rate table will be released and Published and will be made available to download through the DMH Internet Website.

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Should you have any questions or need additional information, please contact Marilyn Abero at (916) 653-8799.

Sincerely,

A handwritten signature in black ink, appearing to read 'S. Mayberg', with a large, stylized flourish at the end.

STEPHEN W. MAYBERG, Ph.D.
Director

Enclosure

Revised July 16, 2009

**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	\$94.54
Urgent Care			25-29	Client Hour	\$94.54
Day Treatment Intensive					
Half Day			81-84	Client 1/2 Day	\$144.13
Full Day			85-89	Client Full Day	\$202.43
Day Rehabilitation					
Half Day			91-94	Client 1/2 Day	\$84.08
Full Day			95-99	Client Full Day	\$131.24
C. OUTPATIENT SERVICES	15	12, 18			
Case Management, Brokerage			01-09	Staff Minute	\$2.02
Mental Health Services			10-19	Staff Minute	\$2.61
			30-59	Staff Minute	\$2.61
Medication Support			60-69	Staff Minute	\$4.82
Crisis Intervention			70-79	Staff Minute	\$3.88

