

FISCAL YEAR 2005-06
SHORT-DOYLE/MEDI-CAL
MAXIMUM REIMBURSEMENT RATES
July 1, 2005 through June 30, 2006

| 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 | \$952.86 |
| Hospital Administrative Day | | | 07, 08, 09 | 19 | Client Day | 7/1/05 - 7/31/05 \$236.82 8/1/05 - 6/30/06 \$299.80 |
| Psychiatric Health Facility (PHF) | | | 05 | 20-29 | Client Day | \$521.82 |
| Adult Crisis Residential | | | 05 | 40-49 | Client Day | \$294.25 |
| Adult Residential | | | 05 | 65-79 | Client Day | \$143.53 |
| B. DAY SERVICES | | | 10 | 12, 18 | | |
| Crisis Stabilization | | | | | | |
| Emergency Room | | 20-24 | | | Client Hour | \$91.34 |
| Urgent Care | | 25-29 | | | Client Hour | \$91.34 |
| Day Treatment Intensive | | | | | | |
| Half Day | | 81-84 | | | Client 1/2 Day | \$139.26 |
| Full Day | | 85-89 | | | Client Full Day | \$195.58 |
| Day Rehabilitation | | | | | | |
| Half Day | | 91-94 | Client 1/2 Day | \$81.24 | | |
| Full Day | | 95-99 | Client Full Day | \$126.80 | | |
| C. OUTPATIENT SERVICES | 15 | 12, 18 | | | | |
| Case Management, Brokerage | | | | 01-09 | Staff Minute | \$1.95 |
| Mental Health Services | | | | 10-19 | Staff Minute | \$2.52 |
| | | | | 30-59 | Staff Minute | \$2.52 |
| Medication Support | | | | 60-69 | Staff Minute | \$4.66 |
| Crisis Intervention | | | | 70-79 | Staff Minute | \$3.75 |