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: CR/DC Code	MODE OF SERVICE CODE: SD/MC Claiming Code	SERVICE FUNCTION CODE	TIME BASE	SHORT-DOYLE/ MEDI-CAL MAXIMUM ALLOWANCE
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