

State of California—Health and Human Services Agency Department of Health Care Services



DATE: June 29, 2009

MMCD All Plan Letter 09-012

TO:

ALL MEDI-CAL MANAGED CARE HEALTH PLANS

SUBJECT:

2009-10 RATES FOR NON-CONTRACTED HOSPITAL EMERGENCY

INPATIENT SERVICES

This All Plan Letter (APL) serves to provide Medi-Cal managed care plans updated rates for non-contracted hospital emergency general acute care inpatient services as provided in APL 08-008.

For purposes of this letter, "non-contracted" means a general acute care hospital, including hospitals that contract with the Department of Health Care Services (DHCS) under the Medi-Cal Selective Provider Contracting Program (SPCP), that does not have in effect a contract for general acute care inpatient services with a Medi-Cal managed care health plan.

The average regional per diem SPCP contract rates in the following table are derived from unweighted average SPCP contract per diem rates that are publicly available on June 1 of each year and trended forward based on the annual increases in the regional average SPCP contract rates, as published in the CMAC Annual Report to the Legislature. As required by Government Code Section 6254(q) and SPCP contract terms, SPCP rates are confidential for 4 years and managed care plans or their contractors cannot require or compel an SPCP hospital to disclose or otherwise reveal its confidential SPCP rate information.

Rogers Amendment rates for the 2009-10 rate period are as follows:

Rogers Amendment CMAC Regional Average Rates for Non-Contracted Hospital Emergency Inpatient Services Rate Period: 7/1/09 to 6/30/10			
	Avera	Average	
	Non Tertiary	Tertiary	
Other	\$1,508	\$1,980	
San Francisco / Bay Area	\$1,797	\$2,893	
Southern California	\$1,340	\$2,086	

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Other = All California counties other than those listed below

<u>San Francisco / Bay Area</u> = Counties of Alameda, Contra Costa, Marin, Napa, San Francisco, San Mateo, Santa Clara, Santa Cruz, Solano and Sonoma

<u>Southern California</u> = Counties of Los Angeles, Orange, Riverside, San Bernardino and Ventura

W&I Code section 14166.245 defines a tertiary hospital as a Children's Hospital specified in W&I Code section 10727, or as a hospital that has been designated as a Level I or Level II trauma center by the Emergency Medical Services Authority established pursuant to Health and Safety Code section 1797.1.

If you have questions about the information in this letter, please contact Stuart Busby, Chief of the Policy and Financial Management Branch, at (916) 449-5000 or via email at Stuart.Busby@dhcs.ca.gov.

Sincerely,

Tanya Homman, Acting-Chief

Medi-Cal Managed Care Division