

**FISCAL YEAR 2004-05**  
**SHORT-DOYLE/MEDI-CAL**  
**MAXIMUM REIMBURSEMENT RATES**  
July 1, 2004 through June 30, 2005

SERVICE FUNCTION	MODE OF SERVICE CODE		SERVICE FUNCTION CODE	TIME BASE	SHORT-DOYLE/MEDI-CAL MAXIMUM ALLOWANCE
	CR/DC Code	SD/MC Claiming Code			
<b>A. 24-HOUR SERVICES</b>	<b>05</b>				
Hospital Inpatient		<b>07, 08, 09</b>	10-18	Client Day	\$913.58
Hospital Administrative Day		<b>07, 08, 09</b>	19	Client Day	<b>7/1/04 - 7/31/04</b> \$236.82 <b>8/1/04 - 6/30/05</b> \$236.82
Psychiatric Health Facility (PHF)		<b>05</b>	20-29	Client Day	\$505.15
Adult Crisis Residential		<b>05</b>	40-49	Client Day	\$284.85
Adult Residential		<b>05</b>	65-79	Client Day	\$138.94
<b>B. DAY SERVICES</b>	<b>10</b>	<b>12, 18</b>			
Crisis Stabilization					
Emergency Room			20-24	Client Hour	\$88.42
Urgent Care			25-29	Client Hour	\$88.42
Day Treatment Intensive					
Half Day			81-84	Client 1/2 Day	\$134.81
Full Day			85-89	Client Full Day	\$189.33
Day Rehabilitation					
Half Day			91-94	Client 1/2 Day	\$78.64
Full Day			95-99	Client Full Day	\$122.75
<b>C. OUTPATIENT SERVICES</b>	<b>15</b>	<b>12, 18</b>			
Case Management, Brokerage			01-09	Staff Minute	\$1.89
Mental Health Services			10-19	Staff Minute	\$2.44
			30-59	Staff Minute	\$2.44
Medication Support			60-69	Staff Minute	\$4.51
Crisis Intervention			70-79	Staff Minute	\$3.63