



COUNTY OF LOS ANGELES

# Public Health



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## Substance Abuse Prevention and Control

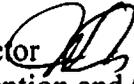
**John Viernes, Jr.**  
Director  
1000 South Fremont Avenue  
Building A-9 East, Third Floor  
Alhambra, CA 91803  
TEL (626) 299-4193 • FAX (626) 458-7637

[www.publichealth.lacounty.gov](http://www.publichealth.lacounty.gov)

**SAPC BULLETIN NO. 13-01-DMC**

June 28, 2013

**TO:** Los Angeles County Drug/Medi-Cal  
Contract Treatment Providers

**FROM:** John Viernes, Jr., Director   
Substance Abuse Prevention and Control

**SUBJECT: REVISED DRUG/MEDI-CAL RATES**

This is to provide you with a copy of the State's **Proposed Drug/Medi-Cal Rates for Fiscal Year (FY): 2013-2014 (Attachment I)**.

Based on the revised State cap rates minus allowable County Administrative fees, the maximum contract rates will be as follows:

Service Function	Perinatal	Non-Perinatal
Narcotic Treatment Program		
Methadone - 365 days	\$11.43	\$10.45
Counseling: Individual	\$18.81	\$13.13
Counseling: Group	\$6.28	\$2.97
Outpatient Drug Free		
Individual	\$93.17	\$65.09
Group	\$56.02	\$26.45
Day Care Habilitative	\$71.45	\$55.93
Naltrexone	N/A	\$17.16
Perinatal Residential	\$87.95	N/A

Los Angeles County Drug/Medi-Cal  
Contract Treatment Providers  
June 28, 2013  
Page 2

In addition, I have attached a list of estimated Drug/Medi-Cal slot costs for FY 2013-2014 (Attachment II).

If you have any questions or need additional information, please let me know or you may call Michael Kerr at (626) 299-4129.

JV:ko

**Attachments**

c: Leo Busa  
Dorothy de Leon  
Tony Hill  
Michael A. Kerr



TOBY DOUGLAS  
Director

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



EDMUND G. BROWN JR.  
Governor

May 30, 2013

## ATTACHMENT 1

County Alcohol and Drug Program Administrators  
Director's Advisory Council  
DMC Certified Providers  
DMC Direct Contract Providers  
Strategic Local Government Services, LLC

### PROPOSED DRUG MEDI-CAL RATES FOR FISCAL YEAR 2013-2014

#### PURPOSE

This bulletin transmits the proposed Fiscal Year (FY) 2013-2014 reimbursement rates for Drug Medi-Cal (DMC) services. The proposed rates and subsequent claim payments are contingent upon legislative action and approval of the FY 2013-2014 Budget Act. The rates will be effective July 1, 2013 through June 30, 2014.

While counties and direct contract providers may submit DMC claims based on the proposed FY 2013-2014 rates, the Department of Health Care Services (DHCS) may not be able to issue payments for any services provided in FY 2013-2014 until the Budget Act is signed.

#### DISCUSSION

Each year, the State develops new reimbursement rates for DMC services. These rates are developed in accordance with the Welfare and Institutions Code, Sections 14021.51, 14021.6 and 14021.9. For FY 2013-2014, the cumulative growth in the Implicit Price Deflator used to develop the proposed rates was 8.7 percent, as reported by the Department of Finance.

These rates reflect the analysis of costs for the non-NTP dosing DMC treatment modalities. Costs are determined through the annual cost report settlement process.

The Exhibit displays the proposed reimbursement rates for FY 2013-2014.

May 30, 2013  
Page 2

REFERENCES

Sections 14021.51, 14021.6 and 14021.9, Welfare and Institutions Code  
Sections 51516.1, Title 22, California Code of Regulations

HISTORY

Section 51516.1, Title 22, California Code of Regulations

QUESTIONS/MAINTENANCE

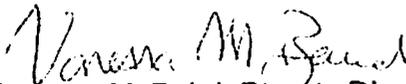
Questions regarding the DMC rates may be directed to Jim Jacobson at  
(916) 445-5539 or [Jim.Jacobson@dhcs.ca.gov](mailto:Jim.Jacobson@dhcs.ca.gov).

This publication of DMC rates is also available on the DHCS website at:  
<http://www.dhcs.ca.gov/formsandpubs/Pages/ADPBulletinsLtrs.aspx>

EXHIBIT

Exhibit: Proposed Drug Medi-Cal Rates for Fiscal Year 2013-2014

Sincerely,

  
Vanessa M. Baird, Deputy Director  
Mental Health and Substance Use Disorder Services

cc: Marjorie McKisson, Assistant Division Chief  
Drug Medi-Cal Division  
California Department of Health Care Services  
1700 K Street, 4<sup>th</sup> Floor  
Sacramento, CA 95811

Department of Health Care Services  
Mental Health and Substance Use Disorder Services  
Drug Medi-Cal Division

Exhibit

Proposed Drug Medi-Cal Rates For Fiscal Year 2013-14

Regular DMC

Description	Unit of Service (UOS)	FY 2013-14 UOS Rate****
Narcotic Treatment Program (NTP) - Methadone	Daily	\$11.49 \$1.04 (*)
NTP - Individual Counseling (**)	One 10-minute Increment	\$14.46 \$1.33 (*)
NTP - Group Counseling (**)	One 10-minute Increment	\$3.27 \$0.30 (*)
Day Care Rehabilitative (DCR)	Face-to-Face Visit	\$62.15
Naltrexone (NAL) (***)	Face-to-Face Visit	\$19.07
Outpatient Drug Free (ODF) Individual Counseling	Face-to-Face Visit (Per Person)	\$72.32
ODF Group Counseling	Face-to-Face Visit (Per Person)	\$29.39

Perinatal DMC

Description	Unit of Service (UOS)	FY 2013-14 UOS Rate****
Narcotic Treatment Program (NTP) - Methadone	Daily	\$12.57 \$1.14 (*)
NTP - Individual Counseling (**)	One 10-minute Increment	\$20.70 \$1.89 (*)
NTP - Group Counseling (**)	One 10-minute Increment	\$6.91 \$0.63 (*)
Day Care Rehabilitative (DCR)	Face-to-Face Visit	\$79.39
Perinatal Residential (RES)	Daily	\$97.72
Outpatient Drug Free (ODF) Individual Counseling	Face-to-Face Visit (Per Person)	\$103.52
ODF Group Counseling	Face-to-Face Visit (Per Person)	\$62.24

- \* Denotes the administrative costs which are included within the rate.
- \*\* Drug Medi-Cal reimburses NTP providers for up to 200 minutes of counseling per calendar month, per beneficiary under methadone service only (CCR Title 22 Sec 51516.1(h)(2). Counseling is individual and/or group.
- \*\*\* From FY 2002-03 through FY 2008-09, Naltrexone was frozen at \$21.19 (the FY 1999-2000 approved rate). Counties and service providers have not provided, submitted claims, nor reported cost for this service since FY 1997-98. For FY 2009-10, the \$21.19 frozen rate was reduced by 10 percent to \$19.07. Therefore, \$19.07 is used as the developed rate.
- \*\*\*\* FY 2009-2010 rates were adjusted by the cumulative growth in the Implicit Price Deflator, in accordance with Welfare & Institutions Code Section 14021.9. The 8.7 percent combined deflator is 2.4 percent for the change from FY 2009-10 to FY 2010-11, plus 2.8 percent for the change from FY 2010-11 to FY 2011-12, plus 1.6 percent for the change from FY 2011-12 to FY 2012-13, plus 1.9 percent for the change from FY 2012-13 to FY 2013-14.

**FISCAL YEAR 2013-2014 DRUG/MEDI-CAL ANNUAL SLOT COST  
(ESTIMATED)**

**NON-PERINATAL**

1. NTP:           Methadone:       (dosing: \$10.45 a day X 365 days) + (counseling: \$13.13 per 10-minute increment X 20 increments per month X 12 months) = \$6,965.45
2. DCH:                               \$55.93 per visit X 3 visits per week X 52 weeks = \$8,725.08
3. Naltrexone:                       \$17.16 a day X 365 days = \$6,263.40
4. ODF:                               (12 individual sessions X \$65.08) + (92 group sessions X \$26.45) = \$3,214.36

**PERINATAL**

1. PNPT:           Methadone:       (dosing: \$11.43 a day X 365 days) + (counseling: \$18.81 per 10-minute increment X 20 increments per month X 12 months) = \$8,686.35
2. DCHP:                               \$71.45 a visit X 3 visits per week X 52 weeks = \$11,146.20
3. RPH:                               \$87.95 a day X 365 days = \$32,101.75
4. ODFP:                               (12 individual sessions X \$93.16) + (92 group sessions X \$56.02) = \$6,271.76

JV:ko

Department of Health Care Services  
Mental Health and Substance Use Disorder Services  
Drug Medi-Cal Division

Exhibit

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Naltrexone (NAL) (***)	Face-to-Face Visit	\$19.07	\$17.16
Outpatient Drug Free (ODF) Individual Counseling	Face-to-Face Visit (Per Person)	\$72.32	\$65.09
ODF Group Counseling	Face-to-Face Visit (Per Person)	\$29.39	\$26.45

Perinatal DMC

Description	Unit of Service (UOS)	FY 2013-14 UOS Rate****	
Narcotic Treatment Program (NTP) - Methadone	Daily	\$12.57 \$1.14 (*)	\$11.43
NTP - Individual Counseling (**)	One 10-minute Increment	\$20.70 \$1.89 (*)	\$18.81
NTP - Group Counseling (**)	One 10-minute Increment	\$6.91 \$0.63 (*)	\$6.28
Day Care Rehabilitative (DCR)	Face-to-Face Visit	\$79.39	\$71.45
Perinatal Residential (RES)	Daily	\$97.72	\$87.95
Outpatient Drug Free (ODF) Individual Counseling	Face-to-Face Visit (Per Person)	\$103.52	\$93.17
ODF Group Counseling	Face-to-Face Visit (Per Person)	\$62.24	\$56.02

\* Denotes the administrative costs which are included within the rate.

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