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Title 22@ Social Security

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Division 3@ Health Care Services

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Subdivision 1@ California Medical Assistance Program

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Chapter 3@ Health Care Services

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Article 7@ Payment for Services and Supplies

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Section 51516.1@ Reimbursement Rates for Drug Medi-Cal Substance Abuse Program Services

51516.1 Reimbursement Rates for Drug Medi-Cal Substance Abuse Program Services

(a)

Reimbursement for Naltrexone treatment, outpatient drug free treatment, day care rehabilitative, and perinatal residential treatment services shall be based on the lowest of the following: (1) The provider's usual and customary charge to the general public for the same or similar services; (2) The provider's allowable cost of providing the services, as specified in Section 11818 of the Health and Safety Code; or (3) The statewide maximum allowances (SMAs) for Fiscal Years 2003-2004, 2004-2005, 2005-2006, 2006-2007, 2007-2008, 2008-2009, 2009-2010, 2010-2011, 2011-2012, 2012-2013, and 2013-2014 which the Department shall establish in accordance with Sections 14021.6 and 14021.9(c) of the Welfare and Institutions Code. The SMAs for the following Drug Medi-Cal substance abuse program services for Fiscal Year 2003-2004 are:

Function	Maximum Allowance	Non-Perinatal Unit of Service	Maximum Allowance
Perinatal Unit of Service	Naltrexone services, per face-to-face visit	\$21.19	N/A
Outpatient drug free treatment services, face-to-face individual counseling session, per person	\$70.25	\$106.08	
Outpatient drug free treatment services, face-to-face group counseling session, per person	\$32.33	\$53.22	
Day care rehabilitative, per face-to-face visit	\$67.85	\$74.44	
Perinatal residential treatment services, per day	N/A	\$76.18	

The SMAs for the following Drug Medi-Cal substance abuse program

services for Fiscal Year 2004-2005 are: Service FunctionMaximum Allowance
 Non-Perinatal Unit of ServiceMaximum Allowance Perinatal Unit of Service
 Naltrexone services, per face-to-face visit\$21.19N/A Outpatient drug free
 treatment services, face-to-face individual counseling session, per
 person\$63.90\$106.08 Outpatient drug free treatment services, face-to-face group
 counseling session, per person\$30.60\$46.97 Day care rehabilitative, per
 face-to-face visit\$67.93\$75.99 Perinatal residential treatment services, per
 dayN/A\$76.18 The SMAs for the following Drug Medi-Cal substance abuse program
 services for Fiscal Year 2005-2006 are: Service FunctionMaximum Allowance
 Non-Perinatal Unit of ServiceMaximum Allowance Perinatal Unit of Service
 Naltrexone services, per face-to-face visit\$21.19N/A Outpatient drug free
 treatment services, face-to-face individual counseling session, per
 person\$64.16\$106.08 Outpatient drug free treatment services, face-to-face group
 counseling session, per person\$30.85\$48.16 Service FunctionMaximum
 Allowance Non-Perinatal Unit of ServiceMaximum Allowance Perinatal Unit of
 Service Day care rehabilitative, per face-to-face visit\$67.98\$77.27 Perinatal
 residential treatment services, per dayN/A\$77.46 The SMAs for the following Drug
 Medi-Cal substance abuse program services for Fiscal Year 2006-2007 are: Service
 FunctionMaximum Allowance Non-Perinatal Unit of ServiceMaximum Allowance
 Perinatal Unit of Service Naltrexone services, per face-to-face visit\$21.19N/A
 Outpatient drug free treatment services, face-to-face individual counseling session,
 per person\$64.16\$106.08 Outpatient drug free treatment services, face-to-face
 group counseling session, per person\$30.85\$48.16 Naltrexone services, per
 face-to-face visit\$19.07N/A Outpatient drug free treatment services, face-to-face
 individual counseling session, per person\$66.53\$95.23 Outpatient drug free
 treatment services, face-to-face group counseling session, per person\$28.27\$57.26

Day care rehabilitative, per face-to-face visit\$61.05\$73.04 Perinatal residential treatment services, per dayN/A\$89.90 The SMAs for the following Drug Medi-Cal substance abuse program services for Fiscal Year 2007-2008 are: Service FunctionMaximum Allowance Non-Perinatal Unit of ServiceMaximum Allowance Perinatal Unit of Service Naltrexone services, per face-to-face visit\$21.19N/A Naltrexone services, per face-to-face visit\$21.19N/A Outpatient drug free treatment services, face-to-face individual counseling session, per person\$74.79\$106.08 Outpatient drug free treatment services, face-to-face group counseling session, per person\$31.56\$63.62 Day care rehabilitative, per face-to-face visit\$67.55\$79.92 Perinatal residential treatment services, per dayN/A\$96.81 The SMAs for the following Drug Medi-Cal substance abuse program services for Fiscal Year 2008-2009 are: Service FunctionMaximum Allowance Non-Perinatal Unit of ServiceMaximum Allowance Perinatal Unit of Service Naltrexone services, per face-to-face visit\$21.19N/A Outpatient drug free treatment services, face-to-face individual counseling session, per person\$74.99\$106.08 Outpatient drug free treatment services, face-to-face group counseling session, per person\$31.45\$63.62 Day care rehabilitative, per face-to-face visit\$67.96\$82.90 Perinatal residential treatment services, per dayN/A\$95.21 The SMAs for the following Drug Medi-Cal substance abuse program services for Fiscal Year 2009-2010 are: Service FunctionMaximum Allowance Non-Perinatal Unit of ServiceMaximum Allowance Perinatal Unit of Service Naltrexone services, per face-to-face visit\$19.07N/A Outpatient drug free treatment services, face-to-face individual counseling session, per person\$66.53\$95.23 Outpatient drug free treatment services, face-to-face group counseling session, per person\$28.27\$57.26 Day care rehabilitative, per face-to-face visit\$61.05\$73.04 Perinatal residential treatment services, per

dayN/A\$89.90 The SMAs for the following Drug Medi-Cal substance abuse program services for Fiscal Year 2010-2011 are: Service FunctionMaximum Allowance Non-Perinatal Unit of ServiceMaximum Allowance Perinatal Unit of Service Naltrexone services, per face-to-face visit\$19.07N/A Outpatient drug free treatment services, face-to-face individual counseling session, per person\$67.53\$96.66 Outpatient drug free treatment services, face-to-face group counseling session, per person\$28.69\$55.95 Day care rehabilitative, per face-to-face visit\$61.97\$74.14 Perinatal residential treatment Services, per dayN/A\$91.25 The SMAs for the following Drug Medi-Cal substance abuse program services for Fiscal Year 2011-2012 are: Service FunctionMaximum Allowance Non-Perinatal Unit of ServiceMaximum Allowance Perinatal Unit of Service Naltrexone services, per face-to-face visit\$19.07N/A Outpatient drug free treatment services, face-to-face individual counseling session, per person\$69.59\$99.61 Outpatient drug free treatment services, face-to-face group counseling session, per person\$29.57\$53.80 Day care rehabilitative, per face-to-face visit\$63.86\$76.40 Perinatal residential treatment Services, per dayN/A\$92.45 The SMAs for the following Drug Medi-Cal substance use disorder services for Fiscal Year 2012-2013 are: Service FunctionMaximum Allowance Non-Perinatal Unit of ServiceMaximum Allowance Perinatal Unit of Service Naltrexone services, per face-to-face visit\$19.07N/A Outpatient drug free treatment services, face-to-face individual counseling session, per person\$71.25\$101.99 Outpatient drug free treatment services, face-to-face group counseling session, per person\$30.28\$61.33 Day care rehabilitative, per face-to-face visit\$65.38\$78.23 Perinatal residential treatment Services, per dayN/A\$96.28 The SMAs for the following Drug Medi-Cal substance use disorder services for Fiscal Year 2013-2014 are: Service FunctionMaximum Allowance

Non-Perinatal Unit of Service Maximum Allowance Perinatal Unit of Service

Naltrexone services, per face-to-face visit \$19.07 N/A Outpatient drug free treatment services, face-to-face individual counseling session, per person \$72.32 \$103.52 Outpatient drug free treatment services, face-to-face group counseling session, per person \$29.39 \$62.24 Day care rehabilitative, (July 1, 2013 to December 31, 2013) per face-to-face visit \$62.15 \$79.39 Intensive Outpatient Treatment, (January 1, 2014 to June 30, 2014) Per face-to-face visit \$62.15 \$79.39

Perinatal residential treatment services, per day N/A \$97.72 (A) The SMA for counseling sessions for outpatient drug free treatment services shall be prorated annually as follows:

1. The SMA for an individual counseling session shall be prorated annually using the percentage computed by dividing the total actual time for all counseling sessions by the total time which would have been spent if all counseling sessions were 50 minutes in duration. This percentage (not to exceed 100 percent) shall be applied to the SMA to determine the maximum reimbursement rate. For example: $\text{Total Session Time} / (50 \text{ minutes} \times \text{Number of Sessions}) \times \text{SMA} = \text{Prorated SMA}$.
2. The SMA for a group counseling session shall be prorated annually using the percentage computed by dividing the total actual time for all counseling sessions by the total time which would have been spent if all counseling sessions were 90 minutes in duration. This percentage (not to exceed 100 percent) shall be applied to the SMA per person to determine the maximum reimbursement rate. For example: $\text{Total Session Time} / (90 \text{ minutes} \times \text{Number of Sessions}) \times \text{SMA} = \text{Prorated SMA}$.
3. To qualify as a group counseling session there shall be at least one Medi-Cal beneficiary in a group of no less than four and no more than ten individuals.

(1)

The provider's usual and customary charge to the general public for the same or similar

services;

(2)

The provider's allowable cost of providing the services, as specified in Section 11818 of the Health and Safety Code; or

(3)

The statewide maximum allowances (SMAs) for Fiscal Years 2003-2004, 2004-2005, 2005-2006, 2006-2007, 2007-2008, 2008-2009, 2009-2010, 2010-2011, 2011-2012, 2012-2013, and 2013-2014 which the Department shall establish in accordance with Sections 14021.6 and 14021.9(c) of the Welfare and Institutions Code. The SMAs for the following Drug Medi-Cal substance abuse program services for Fiscal Year 2003-2004 are:

Service Function	Maximum Allowance Non-Perinatal Unit of Service	Maximum Allowance Perinatal Unit of Service
Naltrexone services, per face-to-face visit	\$21.19	N/A
Outpatient drug free treatment services, face-to-face individual counseling session, per person	\$70.25	\$106.08
Outpatient drug free treatment services, face-to-face group counseling session, per person	\$32.33	\$53.22
Day care rehabilitative, per face-to-face visit	\$67.85	\$74.44
Perinatal residential treatment services, per day	N/A	\$76.18

The SMAs for the following Drug Medi-Cal substance abuse program services for Fiscal Year 2004-2005 are:

Service Function	Maximum Allowance Non-Perinatal Unit of Service	Maximum Allowance Perinatal Unit of Service
Naltrexone services, per face-to-face visit	\$21.19	N/A
Outpatient drug free treatment services, face-to-face individual counseling session, per person	\$63.90	\$106.08
Outpatient drug free treatment services, face-to-face group counseling session, per person	\$30.60	\$46.97
Day care rehabilitative, per face-to-face visit	\$67.93	\$75.99
Perinatal residential treatment services, per day	N/A	\$76.18

The SMAs for the following Drug Medi-Cal substance abuse program services for Fiscal Year 2005-2006 are:

Service Function	Maximum Allowance Non-Perinatal Unit of Service	Maximum Allowance Perinatal Unit of Service
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Unit of Service Naltrexone services, per face-to-face visit\$21.19N/A Outpatient drug free treatment services, face-to-face individual counseling session, per person\$64.16\$106.08 Outpatient drug free treatment services, face-to-face group counseling session, per person\$30.85\$48.16 Service FunctionMaximum Allowance

Non-Perinatal Unit of ServiceMaximum Allowance Perinatal Unit of Service Day care rehabilitative, per face-to-face visit\$67.98\$77.27 Perinatal residential treatment services, per dayN/A\$77.46 The SMAs for the following Drug Medi-Cal substance abuse program services for Fiscal Year 2006-2007 are: Service FunctionMaximum Allowance

Non-Perinatal Unit of ServiceMaximum Allowance Perinatal Unit of Service Naltrexone services, per face-to-face visit\$21.19N/A Outpatient drug free treatment services, face-to-face individual counseling session, per person\$64.16\$106.08 Outpatient drug free treatment services, face-to-face group counseling session, per person\$30.85\$48.16

Naltrexone services, per face-to-face visit\$19.07N/A Outpatient drug free treatment services, face-to-face individual counseling session, per person\$66.53\$95.23 Outpatient drug free treatment services, face-to-face group counseling session, per person\$28.27\$57.26 Day care rehabilitative, per face-to-face visit\$61.05\$73.04

Perinatal residential treatment services, per dayN/A\$89.90 The SMAs for the following Drug Medi-Cal substance abuse program services for Fiscal Year 2007-2008 are:

Service FunctionMaximum Allowance Non-Perinatal Unit of ServiceMaximum Allowance

Perinatal Unit of Service Naltrexone services, per face-to-face visit\$21.19N/A

Naltrexone services, per face-to-face visit\$21.19N/A Outpatient drug free treatment services, face-to-face individual counseling session, per person\$74.79\$106.08

Outpatient drug free treatment services, face-to-face group counseling session, per person\$31.56\$63.62 Day care rehabilitative, per face-to-face visit\$67.55\$79.92

Perinatal residential treatment services, per dayN/A\$96.81 The SMAs for the following Drug Medi-Cal substance abuse program services for Fiscal Year 2008-2009 are:

Service FunctionMaximum Allowance Non-Perinatal Unit of ServiceMaximum Allowance
 Perinatal Unit of Service Naltrexone services, per face-to-face visit\$21.19N/A
 Outpatient drug free treatment services, face-to-face individual counseling session, per
 person\$74.99\$106.08 Outpatient drug free treatment services, face-to-face group
 counseling session, per person\$31.45\$63.62 Day care rehabilitative, per face-to-face
 visit\$67.96\$82.90 Perinatal residential treatment services, per dayN/A\$95.21 The
 SMAs for the following Drug Medi-Cal substance abuse program services for Fiscal Year
 2009-2010 are: Service FunctionMaximum Allowance Non-Perinatal Unit of

ServiceMaximum Allowance Perinatal Unit of Service Naltrexone services, per
 face-to-face visit\$19.07N/A Outpatient drug free treatment services, face-to-face
 individual counseling session, per person\$66.53\$95.23 Outpatient drug free treatment
 services, face-to-face group counseling session, per person\$28.27\$57.26 Day care
 rehabilitative, per face-to-face visit\$61.05\$73.04 Perinatal residential treatment
 services, per dayN/A\$89.90 The SMAs for the following Drug Medi-Cal substance abuse
 program services for Fiscal Year 2010-2011 are: Service FunctionMaximum Allowance
 Non-Perinatal Unit of ServiceMaximum Allowance Perinatal Unit of Service Naltrexone
 services, per face-to-face visit\$19.07N/A Outpatient drug free treatment services,
 face-to-face individual counseling session, per person\$67.53\$96.66 Outpatient drug
 free treatment services, face-to-face group counseling session, per person\$28.69\$55.95
 Day care rehabilitative, per face-to-face visit\$61.97\$74.14 Perinatal residential
 treatment Services, per dayN/A\$91.25 The SMAs for the following Drug Medi-Cal
 substance abuse program services for Fiscal Year 2011-2012 are: Service

FunctionMaximum Allowance Non-Perinatal Unit of ServiceMaximum Allowance Perinatal
 Unit of Service Naltrexone services, per face-to-face visit\$19.07N/A Outpatient drug
 free treatment services, face-to-face individual counseling session, per
 person\$69.59\$99.61 Outpatient drug free treatment services, face-to-face group

counseling session, per person\$29.57\$53.80 Day care rehabilitative, per face-to-face visit\$63.86\$76.40 Perinatal residential treatment Services, per dayN/A\$92.45 The SMAs for the following Drug Medi-Cal substance use disorder services for Fiscal Year 2012-2013 are:

Service Function	Maximum Allowance Non-Perinatal Unit of Service	Maximum Allowance Perinatal Unit of Service
Naltrexone services, per face-to-face visit	\$19.07	N/A
Outpatient drug free treatment services, face-to-face individual counseling session, per person	\$71.25	\$101.99
Outpatient drug free treatment services, face-to-face group counseling session, per person	\$30.28	\$61.33
Day care rehabilitative, per face-to-face visit	\$65.38	\$78.23
Perinatal residential treatment Services, per day	N/A	\$96.28

The SMAs for the following Drug Medi-Cal substance use disorder services for Fiscal Year 2013-2014 are:

Service Function	Maximum Allowance Non-Perinatal Unit of Service	Maximum Allowance Perinatal Unit of Service
Naltrexone services, per face-to-face visit	\$19.07	N/A
Outpatient drug free treatment services, face-to-face individual counseling session, per person	\$72.32	\$103.52
Outpatient drug free treatment services, face-to-face group counseling session, per person	\$29.39	\$62.24
Day care rehabilitative, (July 1, 2013 to December 31, 2013) per face-to-face visit	\$62.15	\$79.39
Intensive Outpatient Treatment, (January 1, 2014 to June 30, 2014) Per face-to-face visit	\$62.15	\$79.39
Perinatal residential treatment services, per day	N/A	\$97.72

(A) The SMA for counseling sessions for outpatient drug free treatment services shall be prorated annually as follows:

1. The SMA for an individual counseling session shall be prorated annually using the percentage computed by dividing the total actual time for all counseling sessions by the total time which would have been spent if all counseling sessions were 50 minutes in duration. This percentage (not to exceed 100 percent) shall be applied to the SMA to determine the maximum reimbursement rate. For example: $\text{Total Session Time} / (50 \text{ minutes} \times \text{Number of Sessions}) \times \text{SMA} = \text{Prorated SMA}$.
2. The SMA for a group counseling session shall be prorated annually using the

percentage computed by dividing the total actual time for all counseling sessions by the total time which would have been spent if all counseling sessions were 90 minutes in duration. This percentage (not to exceed 100 percent) shall be applied to the SMA per person to determine the maximum reimbursement rate. For example: $\text{Total Session Time} / (90 \text{ minutes} \times \text{Number of Sessions}) \times \text{SMA} = \text{Prorated SMA}$. 3. To qualify as a group counseling session there shall be at least one Medi-Cal beneficiary in a group of no less than four and no more than ten individuals.

(A)

The SMA for counseling sessions for outpatient drug free treatment services shall be prorated annually as follows: 1. The SMA for an individual counseling session shall be prorated annually using the percentage computed by dividing the total actual time for all counseling sessions by the total time which would have been spent if all counseling sessions were 50 minutes in duration. This percentage (not to exceed 100 percent) shall be applied to the SMA to determine the maximum reimbursement rate. For example: $\text{Total Session Time} / (50 \text{ minutes} \times \text{Number of Sessions}) \times \text{SMA} = \text{Prorated SMA}$. 2. The SMA for a group counseling session shall be prorated annually using the percentage computed by dividing the total actual time for all counseling sessions by the total time which would have been spent if all counseling sessions were 90 minutes in duration. This percentage (not to exceed 100 percent) shall be applied to the SMA per person to determine the maximum reimbursement rate. For example: $\text{Total Session Time} / (90 \text{ minutes} \times \text{Number of Sessions}) \times \text{SMA} = \text{Prorated SMA}$. 3. To qualify as a group counseling session there shall be at least one Medi-Cal beneficiary in a group of no less than four and no more than ten individuals.

1.

The SMA for an individual counseling session shall be prorated annually using the percentage computed by dividing the total actual time for all counseling sessions by the total time which would have been spent if all counseling sessions were 50 minutes in duration. This percentage (not to

exceed 100 percent) shall be applied to the SMA to determine the maximum reimbursement rate.

For example: $\text{Total Session Time} / (50 \text{ minutes} \times \text{Number of Sessions}) \times \text{SMA} = \text{Prorated SMA}$.

2.

The SMA for a group counseling session shall be prorated annually using the percentage computed by dividing the total actual time for all counseling sessions by the total time which would have been spent if all counseling sessions were 90 minutes in duration. This percentage (not to exceed 100 percent) shall be applied to the SMA per person to determine the maximum reimbursement rate. For example: $\text{Total Session Time} / (90 \text{ minutes} \times \text{Number of Sessions}) \times \text{SMA} = \text{Prorated SMA}$.

3.

To qualify as a group counseling session there shall be at least one Medi-Cal beneficiary in a group of no less than four and no more than ten individuals.

(b)

Reimbursement for narcotic treatment program services shall be limited to the lower of the following: (1) A uniform statewide reimbursement (USR) rate; or (2) The provider's usual and customary charge to the general public for the same or similar services.

(1)

A uniform statewide reimbursement (USR) rate; or

(2)

The provider's usual and customary charge to the general public for the same or similar services.

(c)

The USR rate for the narcotic treatment program daily dosing service shall be based on the following: (1) A per capita rate for each beneficiary receiving narcotic replacement therapy dosing, core, and lab work services: (A) The narcotic replacement therapy dosing fee for methadone or LAAM shall include ingredient

costs for an average daily dose of methadone or an average dose of LAAM dispensed to Medi-Cal beneficiaries; (B) Where available, core and lab work services shall be based on and not exceed, for individual services or in the aggregate, outpatient rates for the same or similar service under the Medi-Cal fee-for-service program.

(1)

A per capita rate for each beneficiary receiving narcotic replacement therapy dosing, core, and lab work services:(A) The narcotic replacement therapy dosing fee for methadone or LAAM shall include ingredient costs for an average daily dose of methadone or an average dose of LAAM dispensed to Medi-Cal beneficiaries; (B) Where available, core and lab work services shall be based on and not exceed, for individual services or in the aggregate, outpatient rates for the same or similar service under the Medi-Cal fee-for-service program.

(A)

The narcotic replacement therapy dosing fee for methadone or LAAM shall include ingredient costs for an average daily dose of methadone or an average dose of LAAM dispensed to Medi-Cal beneficiaries;

(B)

Where available, core and lab work services shall be based on and not exceed, for individual services or in the aggregate, outpatient rates for the same or similar service under the Medi-Cal fee-for-service program.

(d)

For the narcotic treatment program daily dosing service, the USR rate shall consist of Core, laboratory work, and dosing which are described below:(1) Core consists of a physical exam, a test/analysis for drug determination, intake assessment, initial treatment plan, and physician supervision. (2) Laboratory work consists of a

tuberculin skin test, a serological test for syphilis, drug screening (urinalysis), and pregnancy tests for female LAAM beneficiaries. (3) Dosing consists of an ingredient and dosing fee.

(1)

Core consists of a physical exam, a test/analysis for drug determination, intake assessment, initial treatment plan, and physician supervision.

(2)

Laboratory work consists of a tuberculin skin test, a serological test for syphilis, drug screening (urinalysis), and pregnancy tests for female LAAM beneficiaries.

(3)

Dosing consists of an ingredient and dosing fee.

(e)

The USR rate for the narcotic treatment program daily dosing service shall be prorated to a daily rate per beneficiary if the beneficiary receives less than a full month of services. The daily rate shall be based on: (1) The annual rate per beneficiary; and (2) A 365-day year.

(1)

The annual rate per beneficiary; and

(2)

A 365-day year.

(f)

The USR rate for the narcotic treatment program Individual Counseling service shall be based on the Outpatient Drug Free Individual Counseling service SMA, and is billable per ten-minute increment of counseling.

(g)

The USR rate for the narcotic treatment program Group Counseling service shall be

based on the Outpatient Drug Free Group Counseling service SMA, and is billable per ten-minute increment of counseling.

(h)

Reimbursement for narcotic treatment program daily dosing services shall not be provided for services not rendered to or received by a beneficiary.

(i)

For narcotic treatment program services, the Fiscal Year 2003-2004 USR rate for each service component shall be as follows: Fiscal Year 2003-2004 Rates for USR Components by Type of Medication with Administrative Costs Shown in Parentheses

Narcotic Treatment Service Components		Methadone Non-Perinatal		Methadone Perinatal		LAAM Non-Perinatal		Daily		Monthly		Dose		Monthly		Core, Laboratory Work,	

Dosing	(\$0.88)	\$291.39	(\$0.98)	\$327.28	(\$2.07)	\$293.93	Narcotic Treatment Counseling Narcotic Treatment Counseling is delivered in 10 minute increments										
Individual	\$14.05	\$21.22	\$14.05	(\$1.29)	(\$1.94)	(\$1.29)	Group	\$3.59	\$5.91	\$3.59	(\$0.33)	(\$0.54)	(\$0.33)	For narcotic treatment program services, the Fiscal Year			

2004-2005 USR rate for each service component shall be as follows: Fiscal Year 2004-2005 Rates for USR Components by Type of Medication with Administrative Costs Shown in Parentheses Narcotic Treatment Service Components

Methadone Non-Perinatal		Methadone Perinatal		LAAM Non-Perinatal		Daily		Monthly		Dose		Monthly		Core, Laboratory Work,	

and Dosing	(\$0.86)	\$285.61	(\$0.98)	\$326.98	(\$2.04)	\$290.29	Narcotic Treatment Counseling Narcotic Treatment Counseling is delivered in 10 minute increments										
Individual	\$12.78	\$21.22	\$12.78	(\$1.17)	(\$1.94)	(\$1.17)	Group	\$3.40	\$5.22	\$3.40	(\$0.31)	(\$0.48)	(\$0.31)	For narcotic treatment program services, the Fiscal Year			

2005-2006 USR rate for each service component shall be as follows: Fiscal Year

2005-2006 Rates for USR Components by Type of Medication with Administrative Costs Shown in Parentheses Narcotic Treatment Service Components

	Methadone	Non-Perinatal Methadone	Perinatal LAAM	Non-Perinatal
Daily	Monthly	Daily	Monthly	Dose
Monthly	Core, Laboratory Work,	\$9.64	\$11.84	\$22.33
and Dosing	(\$0.88)	\$293.22	(\$1.08)	\$360.13
	(\$2.04)	\$290.29		

Narcotic Treatment Counseling Narcotic Treatment Counseling is delivered in 10 minute increments

	Individual	\$13.03	\$21.22	\$13.03	(\$1.19)	(\$1.94)	(\$1.19)	Group	\$3.64	\$6.29	\$3.64

(\$0.33)(\$0.58)(\$0.33) For narcotic treatment program services, the Fiscal Year

2006-2007 USR rate for each service component shall be as follows: Fiscal Year

2006-2007 Rates for USR Components by Type of Medication with Administrative Costs Shown in Parentheses Narcotic Treatment Service Components

	Methadone	Non-Perinatal Methadone	Perinatal	Daily <th>Monthly <th>Daily <th>Monthly <th>Core,</th> </th></th></th>	Monthly <th>Daily <th>Monthly <th>Core,</th> </th></th>	Daily <th>Monthly <th>Core,</th> </th>	Monthly <th>Core,</th>	Core,
Laboratory Work,	\$9.64	\$11.84						
and Dosing	(\$0.88)	\$293.22	(\$1.08)	\$360.13				

Narcotic Treatment Counseling Narcotic Treatment Counseling is delivered in 10 minute increments Individual \$13.03 \$21.22 (\$1.19) (\$1.94) Group \$3.64 \$6.29 (\$0.33) (\$0.58) For narcotic treatment program services, the Fiscal Year

2007-2008 USR rate for each service component shall be as follows: Fiscal Year

2007-2008 Rates for USR Components by Type of Medication with Administrative Costs Shown in Parentheses Narcotic Treatment Service Components

	Methadone	Non-Perinatal Methadone	Perinatal	Daily <th>Monthly <th>Daily <th>Monthly <th>Core,</th> </th></th></th>	Monthly <th>Daily <th>Monthly <th>Core,</th> </th></th>	Daily <th>Monthly <th>Core,</th> </th>	Monthly <th>Core,</th>	Core,
Laboratory Work,	\$11.20	\$12.15						
and Dosing	(\$1.02)	\$340.67	(\$1.11)	\$369.56				

Narcotic Treatment Counseling Narcotic Treatment Counseling is delivered in 10 minute increments Individual \$14.96 \$21.22 (\$1.37) (\$1.94) Group \$3.51 \$7.07 (\$0.32) (\$0.65) For narcotic treatment program services, the Fiscal Year

2008-2009 USR rate for each service component shall be as follows: Fiscal Year

2008-2009 Rates for USR Components by Type of Medication with Administrative

Costs Shown in Parentheses Narcotic Treatment Service Components

Methadone Non-Perinatal Methadone Perinatal Daily Daily Core, Laboratory
Work,\$12.44\$13.38 and Dosing(\$1.14)(\$1.22) Narcotic Treatment
CounselingNarcotic Treatment Counseling is delivered in 10 minute increments
Individual\$15.00\$21.22 (\$1.37)(\$1.94) Group\$3.49\$7.07 (\$0.32)(\$0.65) For
narcotic treatment program services, the Fiscal Year 2009-2010 USR rate for each
service component shall be as follows: Fiscal Year 2009-2010 Rates for USR
Components by Type of Medication with Administrative Costs Shown in Parentheses

 Narcotic Treatment Service Components Methadone Non-Perinatal Methadone
Perinatal Daily Daily Core, Laboratory Work,\$11.34\$12.21 and
Dosing(\$1.03)(\$1.11) Narcotic Treatment CounselingNarcotic Treatment
Counseling is delivered in 10 minute increments Individual\$13.30\$19.04
(\$1.22)(\$1.74) Group\$3.14\$6.36 (\$0.29)(\$0.58) For narcotic treatment program
services, the Fiscal Year 2010-2011 USR rate for each service component shall be
as follows: Fiscal Year 2010-2011 Rates for USR Components by Type of Medication
with Administrative Costs Shown in Parentheses Narcotic Treatment Service
ComponentsMethadone Non-PerinatalMethadone Perinatal DailyDaily Core,
Laboratory Work,\$11.51\$12.39 and Dosing(\$1.05)(\$1.13) Narcotic Treatment
Counseling Narcotic Treatment Counseling is delivered in 10 minute increments
Individual\$13.50\$19.33 (\$1.24)(\$1.77) Group\$3.19\$6.22 (\$0.29)(\$0.57) For
narcotic treatment program services, the Fiscal Year 2011-2012 USR rate for each
service component shall be as follows: Fiscal Year 2011-2012 Rates for USR
Components by Type of Medication with Administrative Costs Shown in Parentheses

 Narcotic Treatment Service Components Methadone Non-Perinatal Methadone
Perinatal DailyDaily Core, Laboratory Work,\$11.86\$12.77 and
Dosing(\$1.08)(\$1.16) Narcotic Treatment CounselingNarcotic Treatment

Counseling is delivered in 10 minute increments Individual\$13.91\$19.92
 (\$1.28)(\$1.82) Group\$3.28\$5.98 (\$0.30)(\$0.54) For narcotic treatment program
 services, the Fiscal Year 2012-2013 USR rate for each service component shall be
 as follows: Fiscal Year 2012-2013 Rates for USR Components by Type of Medication
 with Administrative Costs Shown in Parentheses Narcotic Treatment Service
 Components Methadone Non-Perinatal Methadone Perinatal Daily Daily Core,
 Laboratory Work,\$11.97\$13.05 and Dosing(\$1.09)(\$1.19) Narcotic Treatment
 CounselingNarcotic Treatment Counseling is delivered in 10 minute increments
 Individual\$14.24\$20.39 (\$1.31)(\$1.86) Group\$3.36\$6.81 (\$0.31)(\$0.62) For
 narcotic treatment program services, the Fiscal Year 2013-2014 USR rate for each
 service component shall be as follows:Fiscal Year 2013-2014 Rates for USR
 Components by Type of Medication with Administrative Costs Shown in Parentheses
 Narcotic Treatment Service ComponentsMethadone Non-PerinatalMethadone
 Perinatal DailyDaily Core, Laboratory Work,\$11.49\$12.57 and
 Dosing(\$1.04)(\$1.14) Narcotic Treatment CounselingNarcotic Treatment
 Counseling is delivered in 10 minute increments Individual\$14.46\$20.70
 (\$1.33)(\$1.89) Group\$3.27\$6.91 (\$0.30)(\$0.63) The USR rates include
 administrative costs for the county or the Department when the Department
 assumes the role of the county as described in Section 51341.1(f). Provider
 reimbursement shall be adjusted to reimburse the county or the Department for
 administrative costs.

(j)

For narcotic treatment program services, counseling sessions shall be individual
 and/or group counseling that meets the requirements of Section 10345, Title 9,
 CCR, and Section 51341.1(b)(11) and/or (b)(12), Title 22, CCR, and (1) Each
 beneficiary shall be provided a minimum of fifty (50) minutes of counseling per

calendar month. Any waiver of the fifty (50) minute minimum for counseling shall be in accordance with Section 10345, Title 9, CCR. (2) The Department shall reimburse a provider for up to a maximum of 200 minutes of counseling per calendar month, per beneficiary. (3) Notwithstanding paragraph (2), and effective for a date of service on or after January 1, 2014, the Department shall reimburse a provider for up to a maximum of 200 minutes of counseling per calendar month, per beneficiary. The Department shall reimburse a provider for additional counseling exceeding the maximum 200 minutes in a calendar month, per beneficiary, when such level of service is deemed medically necessary in accordance with Section 51341.1. (4) A provider shall claim reimbursement for counseling in 10-minute increments.

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Notwithstanding paragraph (2), and effective for a date of service on or after January 1, 2014, the Department shall reimburse a provider for up to a maximum of 200 minutes of counseling per calendar month, per beneficiary. The Department shall reimburse a provider for additional counseling exceeding the maximum 200 minutes in a calendar month, per beneficiary, when such level of service is deemed medically necessary in accordance with Section 51341.1.

(4)

A provider shall claim reimbursement for counseling in 10-minute increments.