BOARD OF SUPERVISORS, COUNTY OF LAKE, STATE OF CALIFORNIA

RESOLUTION	

RESOLUTION AUTHORIZING LAKE COUNTY BEHAVIORAL HEALTH SERVICES RATE ADJUSTMENT FOR SUBSTANCE USE DISORDER SERVICES

RECITALS

WHEREAS, the State of California – Health and Human Services Agency Department of Health Care Services ("DHCS") issued MHSUDS Information Notice No. 19-036 on August 14, 2019 regarding an update to the reimbursement rates for Drug Medi-Cal (DMC) services effective July 1, 2019 through June 30, 2020; and

WHEREAS, Lake County Behavioral Health Services (LCBHS) operates as a DMC Organized Delivery System (ODS) for Substance Use Disorder services and is subject to periodic DMC reimbursement rate adjustments.

NOW THEREFORE BE IT RESOLVED THAT:

Lake County Behavioral Health Services Substance Use Disorder Services Rates:

Non Perinatal DMC	Unit of Service (UOS)	FY 2019-20 UOS Rate
Description		
Narcotic Treatment Program	Daily	\$13.93
(NTP) - Methadone		
NTP - Individual Counseling	One 10-minute Increment	\$15.74
NTP - Group Counseling	One 10-minute Increment	\$3.36
Intensive Outpatient	Face-to-Face Visit	\$71.78
Treatment		
Naltrexone (*)	Face-to-Face Visit	\$19.06
Residential - for EPSDT	Daily	\$110.42
Beneficiaries		
Outpatient Drug Free (ODF)	Face-to-Face Visit (Per	\$78.69
Individual Counseling	Person)	
ODF Group Counseling	Face-to-Face Visit (Per	\$30.22
	Person)	

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Perinatal DMCDescription	Unit of Service (UOS)	FY 2019-20 UOS Rate**
NTP - Methadone	Daily	\$15.00
NTP - Individual Counseling	One 10-minute Increment	\$23.39
NTP - Group Counseling	One 10-minute Increment	\$5.37
Intensive Outpatient	Face-to-Face Visit	\$89.71
Treatment		
Perinatal Residential	Daily	\$110.42
ODF Individual Counseling	Face-to-Face Visit (Per	\$116.97
	Person)	
ODF Group Counseling	Face-to-Face Visit (Per	\$48.36
	Person)	

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		ted by the Board of Supervisors of the County
of Lake at a re	gular meeting thereof on thed	ay of2020, by the following
vote:		
AYES:		
NOES:		
ABSENT OR	NOT VOTING:	
		COLDIENTORY
ATTEST:	Clerk of the Board of Supervisors	COUNTY OF LAKE
	By:	
	Deputy	Chair, Board of Supervisors
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APPROVED .	AS TO FORM:	
Anita L. Gra		
County Couns	sel 1/1 p	
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By:	1 12 8 1 / 1 \= 1	