CALIFORNIA DEPARTMENT OF
Mental Health

1600 9th Street, Sacramento, CA 95814
(916) 654-3551

May 19, 1999

DMH INFORMATION NOTICE NO.: 99-08

TO: LOCAL MENTAL HEALTH DIRECTORS
LOCAL MENTAL HEALTH PROGRAM CHIEFS
LOCAL MENTAL HEALTH ADMINISTRATORS
COUNTY ADMINISTRATIVE OFFICERS
CHAIRPERSONS, LOCAL MENTAL HEALTH BOARDS

SUBJECT: INSTRUCTIONS FOR REPORTING RATES NEGOTIATED FOR PSYCHIATRIC INPATIENT HOSPITAL SERVICES CONTRACTS

REFERENCE: Sections 1820.110, 1820.115, 1810.375(c), and 1810.430, Title 9, California Code of Regulations; Section 5778(o), Welfare and Institutions Code; supersedes DMH Information Notice 98-08.

EXPIRES: June 30, 2000

The purpose of this letter is to apprise Mental Health Plans (MHPs) in each county of the current list of Fee-For-Service/Medi-Cal (FFS/MC) hospitals with which MHPs will need to contract in Fiscal Year 1999-2000. Also, as required by Section 1810.375(c) of Title 9, California Code of Regulations (CCR), MHPs must report the rates they have negotiated with FFS/MC hospital to the Department of Mental Health (DMH) by June 1 of each year. DMH relies on the information from the negotiated rates reported by MHPs to establish non-negotiated FFS/MC hospital rates according to Title 9, Section 1820.115. Timely submission of negotiated rate information by MHPs assists DMH in establishing non-negotiated rates expeditiously, so that non-negotiated rate FFS/MC hospitals can be notified of their rates by the beginning of the new fiscal year.

According to Title 9, CCR, Section 1810.430(a), MHPs are required to contract with Disproportionate Share Hospital (DSH) and traditional hospital providers that meet provider selection criteria as defined in the regulations, unless DMH grants the MHP an exemption from contracting. DSH providers serve a disproportionate share of low-income people as determined annually by the Department of Health Services in accordance with Welfare and Institutions Code, Section 14105.98. Traditional hospitals are defined in regulation as accounting for five percent or $20,000, whichever is more of the total FFS/MC psychiatric inpatient hospital payments for the MHP's beneficiaries. The process for requesting an exemption from contracting is described in

Title 9, CCR, Section 1810.430(c). The enclosed table provides a listing of both DSH and traditional providers for your county, based on Fiscal Year (FY) 1997-98 payment data.

The following information on negotiated FFS/MC hospital rates will be needed:

1) Name of facility
2) Facility address or provider number
3) Negotiated rate for any of the following accommodation codes that will be used:

CODE	DESCRIPTION
097	Psychiatric Acute (Adolescent and Child)
114	Room and Board - Private, Psychiatric
124	Room and Board - Semi-Private 2 Bed, Psychiatric
134	Room and Board - Semi-Private 3 or 4 Bed, Psychiatric
154	Room and Board - Ward (Medical or General), Psychiatric
204	Intensive Care, Psychiatric

The rate for code 098, Administrative Day, is established by DMH in accordance with the regulations and need not be reported by MHPs.

In the event that the MHP has negotiated the rate but not entered into a contract by June 1, 1999, please report the negotiated rate. If negotiations are incomplete, please report the status of negotiations by June 1, 1999 and provide updates as applicable. We will not be changing the rates for non-negotiated rate facilities, if we receive information after June 11, 1999 that negotiated rates were modified when contracts are finalized or subsequently amended.

Please send the negotiated rate information to John Lessley, Managed Care Implementation, Department of Mental Health, 1600 9th Street, Room 100, Sacramento, California 95814, or fax this information to (916) 654-5591. If you should have any questions or need additional information, please phone John Lessley at (916) 654-3535.

Sincerely,

GARY M. PETTIGREW
Deputy Director
Systems of Care

Enclosure

cc: California Mental Health Planning Council
Chief, Technical Assistance and Training

HOSPITALS WHICH COUNTY MHPs MUST CONTRACT WITH OR NEGOTIATE RATES
FISCAL YEAR 1999-2000

DATA SOURCE: FEE FOR SERVICE MEDI-CAL INPATIENT CONSOLIDATION PAID CLAIMS
CLAIMS FOR TREATMENT FROM 7/1/97 THROUGH 6/30/98
FILE 34 CLAIM TYPE 3
CLAIMS FILES PROCESSED 970701 THROUGH 990401
BY BENEFICIARY COUNTY AND PROVIDER NUMBER

BENEFICIARY COUNTY	PROVIDER NAME	PROVIDER NUMBER	CITY	FY 97-8 DOLLARS	FY 97-8 DAYS	FY 97-8 CLIENTS	FY 98-9 DSH	NEG RATE	CON-TRACT
ALAMEDA	ALTA BATES HOSP	HSM00305F	BERKELEY	$1,649,277	3,715	362		Y	P
5%=$164,843	WASHINGTON HOSP	HSM00195F	FREMONT	$762,205	1,663	172		Y	P
	BHC WALNUT CREEK HOSP	HSM04052G	WALNUT CREEK	$334,172	719	80			P
	EDEN HOSP	HSM00488F	CASTRO VALLEY	$196,930	420	50		Y	P
ALPINE	No hospitals meet threshold								
5%=<$20,000									
AMADOR	No hospitals meet threshold								
5%=<$20,000									
BUTTE	CHARTER BEHAVIORAL	HSM34098G	ROSEVILLE	$158,623	390	35			P
5%=$21,525	SUTTER CENTER FOR	HSM34096H	SACRAMENTO	$116,055	289	33			P
	BHC HERITAGE OAKS HOSP	HSM34104G	SACRAMENTO	$91,083	231	13			P
CALAVERAS	TUOLUMNE GENERAL HOSP	HSM00325F	SONORA	$61,620	103	12	Y		P
5%=<$20,000	SUTTER CENTER FOR	HSM34096H	SACRAMENTO	$24,900	60	4			P
	BHC SIERRA VISTA HOSP	HSM34087G	SACRAMENTO	$21,580	52	4			P
COLUSA	CHARTER BEHAVIORAL	HSM34098G	ROSEVILLE	$28,050	66	4			P
5%=<$20,000									
CONTRA COSTA	BHC WALNUT CREEK HOSP	HSM04052G	WALNUT CREEK	$521,881	1,102	90		Y	P
5%=$72,740	ALTA BATES HOSP	HSM00305F	BERKELEY	$421,124	902	79			P
	CALIFORNIA SPECIALTY	HSM30182I	VALLEJO	$292,858	652	34			P
	TELECARE/SOLANO PARK	HSM34141F	FAIRFIELD	$108,709	240	23	Y		P
DEL NORTE	ROSS GENERAL HOSP	HSM00134G	KENTFIELD	$26,492	59	6			P
5%=<$20,000									
EL DORADO	BHC SIERRA VISTA HOSP	HSM34087G	SACRAMENTO	$24,998	62	4			P
5%=<$20,000									
FRESNO	FRESNO COMM HOSP	HSM00060F	FRESNO	$660,953	1,742	160		Y	P
5%=$59,858	CEDAR VISTA HOSP	HSM34091G	FRESNO	$444,572	1,068	85		Y	P
GLENN	No hospitals meet threshold								
5%=<$20,000									
HUMBOLDT	No hospitals meet threshold								
5%=<$20,000									
IMPERIAL	TENET HEALTHSYSTEM	HSM30243H	PALM SPRINGS	$115,302	286	31			P
5%=<$20,000	SHARP MEMORIAL HOSP	HSM30100F	SAN DIEGO	$90,608	239	26			P
	GROSSMONT HOSP	HSM30026G	LA MESA	$45,973	122	9			P
INYO	TUOLUMNE GENERAL HOSP	HSM00325F	SONORA	$68,820	115	8	Y		P
5%=<$20,000									
KERN	GOOD SAMARITAN HOSP	HSM30257G	BAKERSFIELD	$372,501	865	138	Y	Y	P
5%=$40,966	BAKERSFIELD MEMORIAL HOS	HSM30036F	BAKERSFIELD	$298,835	664	105		Y	P
KINGS	FRESNO COMM HOSP	HSM00060F	FRESNO	$122,401	308	46			P
5%=<$20,000	CEDAR VISTA HOSP	HSM34091G	FRESNO	$63,600	159	18			P
LAKE	ST HELENA HOSP	HSM00013F	DEER PARK	$234,754	472	57			P
5%=<$20,000	CALIFORNIA SPECIALTY	HSM30182I	VALLEJO	$40,248	95	5			P
LASSEN	CALIFORNIA SPECIALTY	HSM30182I	VALLEJO	$20,626	49	4			P
5%=<$20,000									
LOS ANGELES	MISSION COMM HOSP	HSM30704F	PANORAMA CITY	$4,498,235	10,174	877	Y	Y	P
5%=$2,772,324	BHC ALHAMBRA HOSP	HSM34032G	ROSEMEAD	$3,713,558	8,756	672	Y	Y	P
	VAN NUYS HOSP	HSM34050F	VAN NUYS	$3,473,527	7,839	460	Y	Y	P
	LOS ANGELES METROPOLITAN	HSM30644F	LOS ANGELES	$3,422,493	7,756	655	Y	Y	P
	COLLEGE HOSP COSTA MESA	HSM30543K	COSTA MESA	$2,973,733	7,681	697	Y		P
	ST FRANCIS MED CTR	HSM30104F	LYNWOOD	$2,928,201	6,699	709	Y	Y	P
	WHITE MEMORIAL MED CTR	HSM30103F	LOS ANGELES	$2,492,838	5,631	654	Y	Y	P
	BELLFLOWER DOCTORS HOSP	HSM30531H	BELLFLOWER	$2,468,489	5,615	609	Y	Y	P
	ROBERT F KENNEDY MED CTR	HSM30420G	HAWTHORNE	$2,100,841	4,784	521	Y	Y	P
	PACIFICA OF THE VALLEY	HSM30378H	SUN VALLEY	$1,764,698	4,026	396	Y	Y	P
	NORTHRIDGE HOSP MED CTR	HSM30299I	VAN NUYS	$1,515,150	3,459	514	Y	Y	P
	DANIEL FREEMAN MARINA	HSM30559G	MARINA DL REY	$1,411,119	3,312	247	Y	Y	P
	HEALTHSMART PACIFIC INC	HSM30277G	LONG BEACH	$1,077,010	2,511	283	Y	Y	P
	NEUROPSYCHIATRIC UCLA	HSM34009F	LOS ANGELES	$481,741	1,173	83	Y	Y	P
	ST MARY MEDICAL CENTER	HSM30191G	LONG BEACH	$44,234	109	11	Y	Y	P
MADERA	FRESNO COMM HOSP	HSM00060F	FRESNO	$162,686	409	46			P
5%=<$20,000	CEDAR VISTA HOSP	HSM34091G	FRESNO	$26,300	65	9			P
MARIN	MARIN GENERAL HOSP	HSM00360G	GREENBRAE	$1,045,169	2,201	146		Y	P
5%=$98,338	ALTA BATES HOSP	HSM00305F	BERKELEY	$568,448	1,313	99			P
	ST LUKES HOSP	HSM00055F	SAN FRANCISCO	$128,071	315	14			P

Each county's 5% or $20,000 threshold is shown below county name; if <$20,000, then $20,000 is the threshold
DSH=Disproportionate Share Hospital; NEG RATE=If Yes (Y), MHP must negotiate rate with hospital
P=Permission required from DMH not to contract

HOSPITALS WHICH COUNTY MHPs MUST CONTRACT WITH OR NEGOTIATE RATES
FISCAL YEAR 1999-2000

BENEFICIARY COUNTY	PROVIDER NAME	PROVIDER NUMBER	CITY	FY 97-8 DOLLARS	FY 97-8 DAYS	FY 97-8 CLIENTS	FY 98-9 DSH	NEG RATE	CON-TRACT
MARIPOSA 5%=<$20,000	No hospitals meet threshold								
MENDOCINO 5%=<$20,000	CALIFORNIA SPECIALTY	HSM30182I	VALLEJO	$81,985	178	11			P
	ST MARY'S MEDICAL CENTER	HSM00457G	SAN FRANCISCO	$47,475	98	8			P
	ROSS GENERAL HOSP	HSM00134G	KENTFIELD	$40,500	81	10			P
MERCED 5%=<$20,000	No hospitals meet threshold								
MODOC 5%=<$20,000	WOODLAND HEALTHCARE	HSM00127G	WOODLAND	$24,400	40	1			P
MONO 5%=<$20,000	No hospitals meet threshold								
MONTEREY 5%=<$20,000	COMMUNITY HOSP MONTEREY	HSM00145F	MONTEREY	$110,395	238	59		Y	P
	ST MARY'S MEDICAL CENTER	HSM00457G	SAN FRANCISCO	$32,175	65	5			P
	CHARTER BEHAVIORAL HLTH	HSM34119H	SAN JOSE	$25,300	55	9			P
NAPA 5%=$23,249	ST HELENA HOSP	HSM00013F	DEER PARK	$276,457	578	53		Y	P
	CALIFORNIA SPECIALTY	HSM30182I	VALLEJO	$76,983	174	15			P
	TELECARE/SOLANO PARK	HSM34141F	FAIRFIELD	$72,321	159	14			P
NEVADA 5%=<$20,000	CHARTER BEHAVIORAL	HSM34098G	ROSEVILLE	$92,918	219	21			P
ORANGE 5%=$178,559	UNIVERSITY OF CA IRVINE	HSM30348G	ORANGE	$947,792	2,365	200	Y	Y	P
	UWMC HOSPITAL CORP	HSM30594I	ANAHEIM	$845,084	2,286	199	Y	Y	P
	COLLEGE HOSP COSTA MESA	HSM30543K	COSTA MESA	$620,332	1,684	158	Y	Y	P
	HUNTINGTON BEACH HOSP	HSM30526F	HUNTINGTON BH	$345,297	1,019	75	Y	Y	P
	ST JOSEPH HOSP	HSM30069F	ORANGE	$327,376	885	88		Y	P
	COLLEGE HOSPITAL	HSM34055G	CERRITOS	$234,393	633	28			P
PLACER 5%=$20,097	CHARTER BEHAVIORAL	HSM34098G	ROSEVILLE	$247,692	620	46		Y	P
	CALIFORNIA SPECIALTY	HSM30182I	VALLEJO	$56,730	122	5			P
	SUTTER CENTER FOR	HSM34096H	SACRAMENTO	$24,274	62	9			P
PLUMAS 5%=<$20,000	No hospitals meet threshold								
RIVERSIDE 5%=$120,967	CHARTER BEHAVIORAL HLTH	HSM34060G	CORONA	$663,697	1,633	250		Y	P
	HEMET VALLEY DIST HOSP	HSM30390F	HEMET	$482,729	1,182	161		Y	P
	CHARTER BEHAVIORAL	HSM34099H	CATHEDRAL CTY	$372,980	968	105		Y	P
	TENET HEALTHSYSTEM	HSM30243H	PALM SPRINGS	$339,883	830	144		Y	P
	LOMA LINDA UNIVERSITY	HSM34093G	REDLANDS	$205,275	494	98	Y		P
SACRAMENTO 5%=$85,416	BHC HERITAGE OAKS HOSP	HSM34104G	SACRAMENTO	$634,095	1,535	119		Y	P
	BHC SIERRA VISTA HOSP	HSM34087G	SACRAMENTO	$372,255	898	51		Y	P
	SUTTER CENTER FOR	HSM34096H	SACRAMENTO	$317,475	765	81		Y	P
SAN BENITO 5%=<$20,000	DOMINICAN SANTA CRUZ HOS	HSM00242F	SANTA CRUZ	$61,120	80	7	Y		P
SAN BERNARDINO 5%=$102,209 $102,209	VICTOR VALLEY COMM HOSP	HSM30517F	VICTORVILLE	$456,782	1,088	282		Y	P
	LOMA LINDA UNIVERSITY	HSM34093G	REDLANDS	$439,506	1,072	194	Y	Y	P
	SAN BERNARDINO COMM HOSP	HSM30089F	SN BERNRDNO	$356,464	842	223	Y	Y	P
	SAN ANTONIO COMM HOSP	HSM30099F	UPLAND	$258,428	614	151		Y	P
	CANYON RIDGE HOSP	HSM34111G	CHINO	$120,576	295	59		Y	P
SAN DIEGO 5%=$466,744	VILLA VIEW COMM HOSP	HSM30447G	SAN DIEGO	$1,407,339	3,932	352	Y	Y	P
	SHARP MEMORIAL HOSP	HSM30100F	SAN DIEGO	$1,171,257	3,319	328		Y	P
	GROSSMONT HOSP	HSM30026G	LA MESA	$1,100,340	3,134	283		Y	P
	UC SAN DIEGO MED CTR	HSM30025F	SAN DIEGO	$1,051,568	2,899	260	Y	Y	P
	MERCY HOSP & MED CTR	HSM30077F	SAN DIEGO	$1,007,240	2,888	314	Y	Y	P
	PARADISE VALLEY HOSP	HSM30024F	NATIONAL CITY	$742,892	2,000	265	Y	Y	P
	CALIFORNIA PSYCH MGMT SV	HSM34139F	CHULA VISTA	$607,955	1,647	158		Y	P
	PALOMAR MEDICAL CTR	HSM30115F	ESCONDIDO	$494,693	1,390	189		Y	P
SAN FRANCISCO 5%=$260,169 $260,169	ST LUKES HOSP	HSM00055F	SAN FRANCISCO	$2,120,174	5,227	379	Y	Y	P
	ST MARY'S MEDICAL CENTER	HSM00457G	SAN FRANCISCO	$1,538,831	3,745	260		Y	P
	ST FRANCIS MEM HOSP	HSM00152F	SAN FRANCISCO	$532,729	1,283	169		Y	P
	CALIFORNIA PACIFIC MED	HSM00047G	SAN FRANCISCO	$480,558	1,217	125		Y	P
	UCSF/LANGLEY PORTER	HSM04020F	SAN FRANCISCO	$324,359	735	59	Y	Y	P
SAN JOAQUIN 5%=<$20,000	No hospitals meet threshold								
SAN LUIS OBISPO 5%=<$20,000	No hospitals meet threshold								
SANTA BARBARA 5%=<$20,000	BHC VISTA DEL MAR HOSP	HSM34077G	VENTURA	$35,899	80	9			P
SANTA CLARA 5%=$51,495	CHARTER BEHAVIORAL HLTH	HSM34119H	SAN JOSE	$653,603	1,444	160		Y	P
	UCSF STANFORD HLTH CARE	HSM00441G	PALO ALTO	$106,405	247	31		Y	P
	BHC FREMONT HOSP	HSM34110G	FREMONT	$62,309	134	21			P
SANTA CRUZ 5%=$49,146	DOMINICAN SANTA CRUZ HOS	HSM00242F	SANTA CRUZ	$925,932	1,392	121		Y	P

Each county's 5% or $20,000 threshold is shown below county name; if <$20,000, then $20,000 is the threshold
DSH=Disproportionate Share Hospital; NEG RATE=If Yes (Y), MHP must negotiate rate with hospital
P=Permission required from DMH not to contract

HOSPITALS WHICH COUNTY MHPs MUST CONTRACT WITH OR NEGOTIATE RATES
FISCAL YEAR 1999-2000

BENEFICIARY COUNTY	PROVIDER NAME	PROVIDER NUMBER	CITY	FY 97-8 DOLLARS	FY 97-8 DAYS	FY 97-8 CLIENTS	FY 98-9 DSH	NEG RATE	CON-TRACT
SHASTA	ALTA BATES HOSP	HSM00305F	BERKELEY	$75,940	171	5			P
5%=<$20,000	CALIFORNIA SPECIALTY	HSM30182I	VALLEJO	$68,355	147	5			P
SIERRA	No hospitals meet threshold								
5%=<$20,000									
SISKIYOU	WOODLAND HEALTHCARE	HSM00127G	WOODLAND	$65,718	110	22			P
5%=<$20,000									
SOLANO	TELECARE/SOLANO PARK	HSM34141F	FAIRFIELD	$173,298	382	44	Y	Y	P
5%=<$20,000	ST HELENA HOSP	HSM00013F	DEER PARK	$25,750	52	8			P
SONOMA	SUTTER SONOMA MEDICAL CT	HSM00291G	SANTA ROSA	$1,380,099	2,870	310	Y	Y	P
5%=$86,258	ROSS GENERAL HOSP	HSM00134G	KENTFIELD	$155,843	314	26			P
STANISLAUS	TUOLUMNE GENERAL HOSP	HSM00325F	SONORA	$34,200	57	6	Y		P
5%=<$20,000	BHC SIERRA VISTA HOSP	HSM34087G	SACRAMENTO	$20,335	49	2			P
SUTTER/YUBA	CALIFORNIA SPECIALTY	HSM30182I	VALLEJO	$72,879	177	13			P
5%=<$20,000	SUTTER CENTER FOR	HSM34096H	SACRAMENTO	$54,884	134	17			P
	CHARTER BEHAVIORAL	HSM34098G	ROSEVILLE	$52,488	128	12			P
TEHAMA	No hospitals meet threshold								
5%=<$20,000									
TRINITY	No hospitals meet threshold								
5%=<$20,000									
TULARE	FRESNO COMM HOSP	HSM00060F	FRESNO	$535,442	1,349	112			P
5%=$35,639	CEDAR VISTA HOSP	HSM34091G	FRESNO	$116,599	283	28			P
TUOLUMNE	TUOLUMNE GENERAL HOSP	HSM00325F	SONORA	$603,151	1,020	117	Y	Y	P
5%=$30,199									
VENTURA	SIMI VALLEY HOSP & HLTH	HSM30236F	SIMI VALLEY	$349,805	660	90		Y	P
5%=$45,291	BHC VISTA DEL MAR HOSP	HSM34077G	VENTURA	$222,704	569	59		Y	P
	ANACAPA HOSP	HSM34106F	PORT HUENEME	$110,773	271	30		Y	P
YOLO	WOODLAND HEALTHCARE	HSM00127G	WOODLAND	$415,100	684	73		Y	P
5%=$30,815	BHC SIERRA VISTA HOSP	HSM34087G	SACRAMENTO	$92,480	250	12			P

Each county's 5% or $20,000 threshold is shown below county name; if <$20,000, then $20,000 is the threshold
DSH=Disproportionate Share Hospital; NEG RATE=If Yes (Y), MHP must negotiate rate with hospital
P=Permission required from DMH not to contract