

## **Attachment B:**

# **Schedule of SUD Provider's Amended Billing Rates**

**Bay Area Community Resources**  
**Contract # 74-439**  
**FY 19-20**

Type of Service Unit	Program	Service Unit Quantity and Type		Reimbursement Rate Per Service Unit (Jul - Mar)	Reimbursement Rate Per Service Unit (Apr - Jun)
<b>Prevention Services</b>					
Prevention - NNA	Discovering the Reality of Our Community	1,325	Staff Hours	\$ 100.20	\$ 150.30
Prevention - NNA	Monument Corridor Anti Drug and Alcohol Coalition	1,100	Staff Hours	\$ 71.63	\$ 107.44
Prevention - NNA	West County Alcohol Marijuana and Prescription Drug Prevention Coalition	1,260	Staff Hours	\$ 62.68	\$ 94.02

**Bi-Bett  
Contract # 74-174  
FY 19-20**

Level of Care	Program	Service Unit Quantity & Type		Unduplicated Clients	Reimbursement Rate Per Service Unit (Jul - Mar)	Reimbursement Rate Per Service Unit (Apr - Jun)
<b>Outpatient Services</b>						
Level 1 Outpatient Counseling - AB 109	A Chance for Freedom Central	292	15 Minutes	9	\$ 52.90	\$ 79.35
Level 1 Outpatient Counseling - DMC	A Chance for Freedom Central	2,100	15 Minutes	57	\$ 52.90	\$ 79.35
Level 1 Case Management - DMC	A Chance for Freedom Central	288	15 Minutes	9	\$ 20.54	\$ 30.81
Level 1 Recovery Support - DMC	A Chance for Freedom Central	288	15 Minutes	9	\$ 20.54	\$ 30.81
Level 1 Services for Uninsured & Non-Admits - NNA	A Chance for Freedom Central	2,100	15 Minutes	57	\$ 52.90	\$ 79.35
Level 2.1 Intensive Outpatient Counseling - DMC	A Chance for Freedom Central	720	15 Minutes	24	\$ 34.10	\$ 51.15
Level 2.1 IOP Services for Uninsured and Non-Admits -	A Chance for Freedom Central	135	15 Minutes	5	\$ 34.10	\$ 51.15
<b>Residential Treatment Services</b>						
Level 3.1 Residential Services - AB 109	Diablo Valley Ranch	630	Bed Days	18	\$ 117.84	\$ 235.68
	East County Center for Women	41	Bed Days	1	\$ 117.84	\$ 235.68
	Ozanam Center	14	Bed Days	1	\$ 117.87	\$ 235.74
	Ozanam Crystal Palace	83	Bed Days	2	\$ 117.84	\$ 235.68
	Ozanam Emerald City	97	Bed Days	3	\$ 117.84	\$ 235.68
	Ozanam Rainbow Village	14	Bed Days	1	\$ 117.87	\$ 235.74
	Pueblos Del Sol	111	Bed Days	3	\$ 61.45	\$ 122.90
Level 3.1 Residential Services - DMC	Diablo Valley Ranch	7,300	Bed Days	97	\$ 117.84	\$ 235.68
	East County Center for Women	3,285	Bed Days	44	\$ 117.84	\$ 235.68
	Ozanam Center	1,095	Bed Days	15	\$ 117.84	\$ 235.68
	Ozanam Crystal Palace	863	Bed Days	12	\$ 117.84	\$ 235.68
	Ozanam Emerald City	1,095	Bed Days	15	\$ 117.84	\$ 235.68
	Ozanam Rainbow Village	1,095	Bed Days	15	\$ 117.84	\$ 235.68
	Pueblos Del Sol					
	Wollam - 22 Davi	617	Bed Days	8	\$ 117.84	\$ 235.68
	Wollam - 24 Davi	240	Bed Days	3	\$ 117.84	\$ 235.68
	Wollam - 32 Davi	1,585	Bed Days	21	\$ 117.84	\$ 235.68
	Wollam - 34 Davi	113	Bed Days	2	\$ 117.84	\$ 235.68
	Wollam Perinatal - 22 Davi	1,095	Bed Days	15	\$ 117.84	\$ 235.68
	Wollam Perinatal - 24 Davi	730	Bed Days	10	\$ 117.84	\$ 235.68
	Wollam Perinatal - 32 Davi	365	Bed Days	5	\$ 117.84	\$ 235.68
Wollam Perinatal - 34 Davi	730	Bed Days	10	\$ 117.84	\$ 235.68	
	Diablo Valley Ranch	3,893	15 Minutes	97	\$ 20.54	\$ 30.81
	Ozanam Center	442	15 Minutes	13	\$ 20.56	\$ 30.84
	Ozanam Crystal Palace	442	15 Minutes	13	\$ 20.56	\$ 30.84

**Bi-Bett  
Contract # 74-174  
FY 19-20**

Level of Care	Program	Service Unit Quantity & Type		Unduplicated Clients	Reimbursement Rate	Reimbursement Rate
					Per Service Unit (Jul - Mar)	Per Service Unit (Apr - Jun)
Level 3.1 Case Management - DMC	Ozanam Emerald City	442	15 Minutes	13	\$ 20.56	\$ 30.84
	Ozanam Rainbow Village	442	15 Minutes	13	\$ 20.56	\$ 30.84
	Wollam - 22 Davi	256	15 Minutes	8	\$ 20.54	\$ 30.81
	Wollam - 24 Davi	96	15 Minutes	3	\$ 20.54	\$ 30.81
	Wollam - 32 Davi	672	15 Minutes	21	\$ 20.54	\$ 30.81
	Wollam - 34 Davi	32	15 Minutes	1	\$ 20.56	\$ 30.84
Level 3.1 Recovery Support - DMC	Diablo Valley Ranch	1,600	15 Minutes	50	\$ 20.54	\$ 30.81
	East County Center for Women	320	15 Minutes	1	\$ 20.54	\$ 30.81
	Ozanam Center	221	15 Minutes	7	\$ 20.54	\$ 30.81
	Ozanam Crystal Palace	221	15 Minutes	7	\$ 20.54	\$ 30.81
	Ozanam Emerald City	221	15 Minutes	7	\$ 20.54	\$ 30.81
	Ozanam Rainbow Village	221	15 Minutes	7	\$ 20.54	\$ 30.81
	Wollam - 22 Davi	96	15 Minutes	3	\$ 20.54	\$ 30.81
	Wollam - 24 Davi	32	15 Minutes	1	\$ 20.53	\$ 30.80
	Wollam - 32 Davi	224	15 Minutes	7	\$ 20.54	\$ 30.81
Wollam - 34 Davi	11	15 Minutes	1	\$ 20.64	\$ 30.96	
Level 3.1 Services for Uninsured and Non-Admits - NNA	Diablo Valley Ranch	1,236	Bed Days	16	\$ 117.84	\$ 235.68
	East County Center for Women	900	Bed Days	12	\$ 117.84	\$ 235.68
	Ozanam Center	90	Bed Days	1	\$ 117.84	\$ 235.68
	Ozanam Crystal Palace	185	Bed Days	3	\$ 117.84	\$ 235.68
	Ozanam Emerald City	185	Bed Days	3	\$ 117.84	\$ 235.68
	Ozanam Rainbow Village	90	Bed Days	1	\$ 117.84	\$ 235.68
	Wollam - 22 Davi	183	Bed Days	2	\$ 117.84	\$ 235.68
	Wollam - 24 Davi	183	Bed Days	2	\$ 117.84	\$ 235.68
	Wollam - 32 Davi	183	Bed Days	2	\$ 117.84	\$ 235.68
	Wollam - 34 Davi	181	Bed Days	2	\$ 118.13	\$ 236.26
	Wollam Perinatal - 22 Davi	90	Bed Days	1	\$ 117.84	\$ 235.68
Wollam Perinatal - 34 Davi	90	Bed Days	1	\$ 117.84	\$ 235.68	
Level 3.1 Residential Services - NNA	Pueblos del Sol	4,140	Bed Days	26	\$ 61.44	\$ 122.88
	Diablo Valley Ranch	1,630	Bed Days	18	\$ 46.89	\$ 93.78
	East County Center for Women	326	Bed Days	1	\$ 53.89	\$ 107.78
	Ozanam Center	109	Bed Days	1	\$ 46.90	\$ 93.80
	Ozanam Crystal Palace	146	Bed Days	2	\$ 46.89	\$ 93.78
	Ozanam Emerald City	192	Bed Days	3	\$ 46.89	\$ 93.78

**Bi-Bett  
Contract # 74-174  
FY 19-20**

Level of Care	Program	Service Unit Quantity & Type		Unduplicated Clients	Reimbursement Rate Per Service Unit (Jul - Mar)	Reimbursement Rate Per Service Unit (Apr - Jun)
Level 3.1 Room & Board - AB109	Ozanam Rainbow Village	109	Bed Days	1	\$ 46.90	\$ 93.80
	Pueblos del Sol	111	Bed Days	3	\$ 28.56	\$ 57.12
	Wollam - 22 Davi	17	Bed Days		\$ 53.89	\$ 107.78
	Wollam - 24 Davi	40	Bed Days		\$ 53.89	\$ 107.78
	Wollam - 32 Davi	85	Bed Days		\$ 53.89	\$ 107.78
	Wollam - 34 Davi	13	Bed Days		\$ 53.89	\$ 107.78
	Wollam Perinatal - 22 Davi	95	Bed Days		\$ 82.19	\$ 164.38
	Wollam Perinatal - 24 Davi	30	Bed Days		\$ 82.19	\$ 164.38
	Wollam Perinatal - 32 Davi	65	Bed Days		\$ 82.19	\$ 164.38
	Wollam Perinatal - 34 Davi	30	Bed Days	3	\$ 82.19	\$ 164.38
Level 3.1 Room & Board - NNA	Diablo Valley Ranch	6,300	Bed Days	97	\$ 46.89	\$ 93.78
	East County Center for Women	3,000	Bed Days	44	\$ 53.89	\$ 107.78
	Ozanam Center	1,000	Bed Days	15	\$ 46.89	\$ 93.78
	Ozanam Crystal Palace	800	Bed Days	12	\$ 46.89	\$ 93.78
	Ozanam Emerald City	1,000	Bed Days	15	\$ 46.89	\$ 93.78
	Ozanam Rainbow Village	1,000	Bed Days	15	\$ 46.89	\$ 93.78
	Pueblos Del Sol	3,500	Bed Days	55	\$ 28.56	\$ 57.12
	Wollam - 22 Davi	600	Bed Days	8	\$ 53.89	\$ 107.78
	Wollam - 24 Davi	200	Bed Days	3	\$ 53.89	\$ 107.78
	Wollam - 32 Davi	1,500	Bed Days	21	\$ 53.89	\$ 107.78
	Wollam - 34 Davi	100	Bed Days	2	\$ 53.89	\$ 107.78
	Wollam Perinatal - 22 Davi	1,000	Bed Days	15	\$ 82.19	\$ 164.38
	Wollam Perinatal - 24 Davi	700	Bed Days	10	\$ 82.19	\$ 164.38
	Wollam Perinatal - 32 Davi	300	Bed Days	5	\$ 82.19	\$ 164.38
Wollam Perinatal - 34 Davi	700	Bed Days	10	\$ 82.19	\$ 164.38	
Level 3.1 Room & Board - Uninsured & Non-Admits - NNA	Diablo Valley Ranch	1,236	Bed Days	16	\$ 46.89	\$ 93.78
	East County Center for Women	900	Bed Days	12	\$ 53.89	\$ 107.78
	Ozanam Center	90	Bed Days	1	\$ 46.90	\$ 93.80
	Ozanam Crystal Palace	185	Bed Days	3	\$ 46.89	\$ 93.78
	Ozanam Emerald City	185	Bed Days	3	\$ 46.89	\$ 93.78
	Ozanam Rainbow Village	90	Bed Days	1	\$ 46.90	\$ 93.80
	Wollam - 22 Davi	183	Bed Days	2	\$ 53.89	\$ 107.78
	Wollam - 24 Davi	183	Bed Days	2	\$ 53.89	\$ 107.78
	Wollam - 32 Davi	183	Bed Days	2	\$ 53.89	\$ 107.78

**Bi-Bett**  
**Contract # 74-174**  
**FY 19-20**

Level of Care	Program	Service Unit Quantity & Type		Unduplicated Clients	Reimbursement Rate Per Service Unit (Jul - Mar)	Reimbursement Rate Per Service Unit (Apr - Jun)
	Wollam - 34 Davi	181	Bed Days	2	\$ 53.89	\$ 107.78
	Wollam Perinatal - 22 Davi	90	Bed Days	1	\$ 82.20	\$ 164.40
	Wollam Perinatal - 34 Davi	90	Bed Days	1	\$ 82.20	\$ 164.40
<b>Residential Detoxification Services</b>						
Level 3.2 Withdrawal Management - AB109	East County Center for Women	28	Bed Days	11	\$ 164.73	\$ 329.46
	Ozanam Center	28	Bed Days	11	\$ 164.73	\$ 329.46
Level 3.2 Withdrawal Management - DMC	East County Center for Women	340	Bed Days	52	\$ 164.73	\$ 329.46
	Pueblos del Sol					
	Ozanam Center	340	Bed Days	62	\$ 164.72	\$ 329.44
Level 3.2 Case Management - DMC	East County Womens	954	15 Minutes	30	\$ 20.54	\$ 30.81
Level 3.2 Withdrawal Management - NNA	Pueblos Del Sol	2,920	Bed Days	531	\$ 72.41	\$ 144.82
	Southern Solano Alcohol Council	816	Bed Days	443	\$ 72.42	\$ 144.84
Level 3.2 WM Services to uninsured and non-admits - NNA	East County Center for Women	80	Bed Days	45	\$ 164.74	\$ 329.48
	Ozanam Center	80	Bed Days	15	\$ 164.74	\$ 329.48
Level 3.2 Room & Board - AB109	East County Center for Women	28	Bed Days	11	\$ 65.88	\$ 131.76
	Ozanam Center	28	Bed Days	11	\$ 59.80	\$ 119.60
Level 3.2 Room & Board - NNA	East County Center for Women	340	Bed Days	52	\$ 66.06	\$ 132.12
	Ozanam Center	340	Bed Days	62	\$ 59.80	\$ 119.60
	Pueblos Del Sol	2,920	Bed Days	530	\$ 32.59	\$ 65.18
	Southern Solano Alcohol Council	816	Bed Days	443	\$ 32.58	\$ 65.16
Level 3.2 Room & Board - Services to uninsured and non-admits NNA	East County Center for Women	80	Bed Days	45	\$ 66.06	\$ 132.12
	Ozanam Center	80	Bed Days	15	\$ 59.80	\$ 119.60
<b>Transitional Housing</b>						
Transitional Housing	Uilkema House	190	Bed Days	2	\$ 47.74	

**Community Health for Asian Americans**

**Contract #: 74-054-24**

**FY 19-20**

<b>Type of Service Unit</b>	<b>Program</b>	<b>Service Unit Quantity and Type</b>		<b>Reimbursement Rate Per Service Unit (Jul - Mar)</b>	<b>Reimbursement Rate Per Service Unit (Apr - Jun)</b>
Prevention	Environmental Prevention	1,085	Staff Hours	\$ 72.62	108.93

**Center for Human Development**  
**Contract #: 24-259 Amendment 1**  
**FY 19-20**

Type of Service Unit	Program	Service Unit Quantity and Type		Reimbursement Rate Per Service Unit (Jul - Mar)	Reimbursement Rate Per Service Unit (Apr - Jun)
Prevention	Lamorinda Alcohol Access Policy	550	Staff Hours	\$ 85.46	\$ 128.19
Prevention	Project Success	4,704	Staff Hours	\$ 103.21	\$ 154.82
Prevention	Youth Development-FNL/CL	915	Staff Hours	\$ 94.87	\$ 142.31



**Discovery Counseling Center of the San Ramon Valley**

**Contract #: 24-535**

**Fiscal Year 19-20**

<b>Type of Service Unit</b>	<b>Program</b>	<b>Service Unit Quantity and Type</b>	<b>Reimbursement Rate Per Service Unit (Jul - Mar)</b>	<b>Reimbursement Rate Per Service Unit (Apr - Jun)</b>
Prevention	AOD Prevention Team - ADAPT	820 Staff Hours	\$ 66.04	\$ 99.06

**HealthRIGHT 360**

**Contract # 74-596**

**FY 19-20 Fee Schedule**

Type of Service Unit	Program	Service Unit Quantity and Type		Reimbursement Rate Per Service Unit (Jul - Mar)	Reimbursement Rate Per Service Unit (Apr - Jun)
Residential Treatment	815 Haight Level 3.5 Treatment - DMC	3031	Bed Days	\$ 135.57	\$ 271.14
Residential Treatment	815 Haight Level 3.5 Room & Board - DMC	2490	Bed Days	\$ 68.01	\$ 136.02
Residential Treatment	815 Haight Level 3.5 Room & Board - DMC (AB-109 Funded)	537	Bed Days	\$ 68.01	\$ 136.02
Residential Treatment	815 Haight Level 3.5 Treatment - Uninsured	537	Bed Days	\$ 135.57	\$ 271.14
Residential Treatment	815 Haight Level 3.5 Room & Board - Uninsured	537	Bed Days	\$ 68.01	\$ 136.02
Residential Treatment	815 Haight Level 3.5 Treatment - AB 109	537	Bed Days	\$ 135.57	\$ 271.14
Residential Treatment	815 Haight Level 3.5 Room & Board - AB 109	537	Bed Days	\$ 68.01	\$ 136.02

**LATINO COMISSION**  
**Contract # 74-600-0**  
**FY 19-20 Fee Schedule**

Type of Service Unit	Program	Service Unit Quantity and Type		Reimbursement Rate Per Service Unit (Jul - Mar)	Reimbursement Rate Per Service Unit (Apr - Jun)
Residential Treatment	Casa Aviva Level 3.1 Treatment - DMC	560	Bed Days	\$ 114.31	\$ 228.62
Residential Treatment	Casa Aviva Level 3.1 Room & Board - DMC	400	Bed Days	\$ 79.49	\$ 158.98
Residential Treatment	Casa Aviva Level 3.1 Room & Board - DMC (AB-109 Funded)	80	Bed Days	\$ 79.49	\$ 158.98
Residential Treatment	Casa Aviva Level 3.1 Case Management	84	15 Minute Unit	\$ 17.96	\$ 26.94
Residential Treatment	Casa Aviva Level 3.1 Recovery Services	42	15 Minute Unit	\$ 17.96	\$ 26.94
Residential Treatment	Casa Aviva Level 3.1 Treatment - Uninsured	80	Bed Days	\$ 114.31	\$ 228.62
Residential Treatment	Casa Aviva Level 3.1 Room & Board - Uninsured	80	Bed Days	\$ 79.49	\$ 158.98
Residential Treatment	Casa Aviva Level 3.1 Treatment - AB 109	80	Bed Days	\$ 114.31	\$ 228.62
Residential Treatment	Casa Aviva Level 3.1 Room & Board - AB 109	80	Bed Days	\$ 79.49	\$ 158.98
Residential Treatment	Casa Maria Level 3.1 Treatment - DMC	560	Bed Days	\$ 107.82	\$ 215.64
Residential Treatment	Casa Maria Level 3.1 Room & Board - DMC	400	Bed Days	\$ 60.67	\$ 121.34
Residential Treatment	Casa Maria Level 3.1 Room & Board - DMC (AB-109 Funded)	80	Bed Days	\$ 60.67	\$ 121.34
Residential Treatment	Casa Maria Level 3.1 Case Management	84	15 Minute Unit	\$ 13.01	\$ 19.52
Residential Treatment	Casa Maria Level 3.1 Recovery Services	42	15 Minute Unit	\$ 13.01	\$ 19.52
Residential Treatment	Casa Maria Level 3.1 Treatment - Uninsured	80	Bed Days	\$ 107.82	\$ 215.64
Residential Treatment	Casa Maria Level 3.1 Room & Board - Uninsured	80	Bed Days	\$ 60.67	\$ 121.34
Residential Treatment	Casa Maria Level 3.1 Treatment - AB 109	80	Bed Days	\$ 107.82	\$ 215.64
Residential Treatment	Casa Maria Level 3.1 Room & Board - AB 109	80	Bed Days	\$ 60.67	\$ 121.34

**REACH Project, Inc.**  
**Contract # 24-243 Amendment 1**  
**FY 19-20**

Type of Service Unit	Program	Service Unit Quantity and Type		Reimbursement Rate Per Service Unit (Jul - Mar)	Reimbursement Rate Per Service Unit (Apr - Jun)
Outpatient Treatment	Antioch Adult Recovery Services	260	15 Minute Unit	\$ 21.35	\$ 32.03
Outpatient Treatment	Antioch Level 1.0 Adult Case Management	500	15 Minute Unit	\$ 20.54	\$ 30.81
Outpatient Treatment	Antioch Level 1.0 Adult Outpatient Counseling AB 109	100	15 Minute Unit	\$ 52.90	\$ 79.35
Outpatient Treatment	Antioch Level 1.0 Adult Outpatient Counseling DMC	4,200	15 Minute Unit	\$ 52.90	\$ 79.35
Outpatient Treatment	Antioch Level 1.0 Adult Outpatient Counseling Uninsured	100	15 Minute Unit	\$ 52.90	\$ 79.35
Outpatient Treatment	Antioch Level 1.0 Youth Case Management	200	15 Minute Unit	\$ 20.54	\$ 30.81
Outpatient Treatment	Antioch Level 1.0 Youth Outpatient Counseling DMC	1,700	15 Minute Unit	\$ 52.90	\$ 79.35
Outpatient Treatment	Antioch Level 1.0 Youth Outpatient Counseling Uninsured	268	15 Minute Unit	\$ 52.90	\$ 79.35
Outpatient Treatment	Antioch Level 2.1 Adult Case Management	429	15 Minute Unit	\$ 21.88	\$ 32.82
Outpatient Treatment	Antioch Level 2.1 Adult Outpatient Counseling AB 109	50	15 Minute Unit	\$ 33.11	\$ 49.67
Outpatient Treatment	Antioch Level 2.1 Adult Outpatient Counseling DMC	1,200	15 Minute Unit	\$ 33.11	\$ 49.67
Outpatient Treatment	Antioch Level 2.1 Adult Outpatient Counseling Uninsured	50	15 Minute Unit	\$ 33.11	\$ 49.67
Outpatient Treatment	Antioch Level 2.1 Youth Case Management	100	15 Minute Unit	\$ 28.76	\$ 43.14
Outpatient Treatment	Antioch Level 2.1 Youth Outpatient Counseling DMC	200	15 Minute Unit	\$ 34.10	\$ 51.15
Outpatient Treatment	Antioch Level 2.1 Youth Outpatient Counseling Uninsured	50	15 Minute Unit	\$ 34.10	\$ 51.15
Outpatient Treatment	Antioch Youth Recovery Services	50	15 Minute Unit	\$ 25.68	\$ 38.52
Outpatient Treatment	Brentwood Adult Recovery Services	100	15 Minute Unit	\$ 21.35	\$ 32.03
Outpatient Treatment	Brentwood Level 1.0 Adult Case Management	100	15 Minute Unit	\$ 20.54	\$ 30.81

**REACH Project, Inc.**

**Contract # 24-243 Amendment 1**

**FY 19-20**

Type of Service Unit	Program	Service Unit Quantity and Type		Reimbursement Rate Per Service Unit (Jul - Mar)	Reimbursement Rate Per Service Unit (Apr - Jun)
Outpatient Treatment	Brentwood Level 1.0 Adult Outpatient Counseling AB 109	100	15 Minute Unit	\$ 52.90	\$ 79.35
Outpatient Treatment	Brentwood Level 1.0 Adult Outpatient Counseling DMC	2,775	15 Minute Unit	\$ 52.90	\$ 79.35
Outpatient Treatment	Brentwood Level 1.0 Adult Outpatient Counseling Uninsured	100	15 Minute Unit	\$ 52.90	\$ 79.35
Outpatient Treatment	Brentwood Level 1.0 Youth Case Management	100	15 Minute Unit	\$ 20.53	\$ 30.80
Outpatient Treatment	Brentwood Level 1.0 Youth Outpatient Counseling DMC	734	15 Minute Unit	\$ 52.90	\$ 79.35
Outpatient Treatment	Brentwood Level 1.0 Youth Outpatient Counseling Uninsured	100	15 Minute Unit	\$ 52.90	\$ 79.35
Outpatient Treatment	Brentwood Level 2.1 Adult Case Management	50	15 Minute Unit	\$ 21.88	\$ 32.82
Outpatient Treatment	Brentwood Level 2.1 Adult Outpatient Counseling AB 109	50	15 Minute Unit	\$ 33.11	\$ 49.67
Outpatient Treatment	Brentwood Level 2.1 Adult Outpatient Counseling DMC	800	15 Minute Unit	\$ 33.11	\$ 49.67
Outpatient Treatment	Brentwood Level 2.1 Adult Outpatient Counseling Uninsured	50	15 Minute Unit	\$ 33.11	\$ 49.67
Outpatient Treatment	Brentwood Level 2.1 Youth Case Management	50	15 Minute Unit	\$ 28.76	\$ 43.14
Outpatient Treatment	Brentwood Level 2.1 Youth Outpatient Counseling DMC	100	15 Minute Unit	\$ 34.10	\$ 51.15
Outpatient Treatment	Brentwood Level 2.1 Youth Outpatient Counseling Uninsured	20	15 Minute Unit	\$ 34.10	\$ 51.15
Outpatient Treatment	Brentwood Youth Recovery Services	50	15 Minute Unit	\$ 25.68	\$ 38.52
Outpatient Treatment	Oakley Level 1.0 Adult Outpatient Counseling DMC	420	15 Minute Unit	\$ 52.90	\$ 79.35
Outpatient Treatment	Oakley Level 1.0 Youth Case Management	40	15 Minute Unit	\$ 25.68	\$ 38.52

**REACH Project, Inc.**

**Contract # 24-243 Amendment 1**

**FY 19-20**

Type of Service Unit	Program	Service Unit Quantity and Type		Reimbursement Rate Per Service Unit (Jul - Mar)	Reimbursement Rate Per Service Unit (Apr - Jun)
Outpatient Treatment	Oakley Level 1.0 Youth Outpatient Counseling DMC	420	15 Minute Unit	\$ 52.90	\$ 79.35
Outpatient Treatment	Oakley Level 1.0 Youth Outpatient Counseling Uninsured	40	15 Minute Unit	\$ 52.90	\$ 79.35
Outpatient Treatment	Oakley Youth Recovery Services	80	15 Minute Unit	\$ 25.68	\$ 38.52
Outpatient Treatment	Orrin Allen Youth Facility	1,200	15 Minute Unit	\$ 50.00	\$ 75.00
Outpatient Treatment	Pittsburg Project Achieve	1,800	15 Minute Unit	\$ 52.71	\$ 79.07
Outpatient Treatment	Pittsburg Project Achieve	514	15 Minute Unit	\$ 52.71	\$ 79.07
Prevention Services	Positive Action - NNA	2,180	Staff Hour	\$ 90.19	\$ 135.29

**Ujima Family Recovery**

**Contract # 24-429**

**FY 19-20**

**Contract Fee Schedule**

Type of Service Unit	Program	Service Unit Quantity and Type	Reimbursement Rate Per Service Unit (Jul - Mar)	Reimbursement Rate Per Service Unit (Apr - Jun)
Outpatient Treatment	Ujima Central Child Care	2,080	\$ 27.50	\$ 41.25
Outpatient Treatment	Ujima Central Level 1.0 Outpatient Counseling AB 109	96	\$ 17.05	\$ 25.58
Outpatient Treatment	Ujima Central Level 1.0 Outpatient Counseling Case Management	555	\$ 16.20	\$ 24.30
Outpatient Treatment	Ujima Central Level 1.0 Outpatient Counseling DMC	4,371	\$ 17.05	\$ 25.58
Outpatient Treatment	Ujima Central Level 1.0 Outpatient Counseling Uninsured	259	\$ 17.05	\$ 25.58
Outpatient Treatment	Ujima Central Level 2.1 Intensive Outpatient Counseling AB 109	83	\$ 18.32	\$ 27.48
Outpatient Treatment	Ujima Central Level 2.1 Intensive Outpatient Counseling Case Management	2,773	\$ 16.20	\$ 24.30
Outpatient Treatment	Ujima Central Level 2.1 Intensive Outpatient Counseling DMC	14,331	\$ 18.32	\$ 27.48
Outpatient Treatment	Ujima Central Level 2.1 Intensive Outpatient Counseling Uninsured	221	\$ 18.32	\$ 27.48
Outpatient Treatment	Ujima Central Recovery Services	3,328	\$ 16.20	\$ 24.30
Outpatient Treatment	Ujima East Child Care	2,080	\$ 27.50	\$ 41.25
Outpatient Treatment	Ujima East Level 1.0 Outpatient Counseling AB 109	96	\$ 16.88	\$ 25.32
Outpatient Treatment	Ujima East Level 1.0 Outpatient Counseling Case Management	555	\$ 15.96	\$ 23.94
Outpatient Treatment	Ujima East Level 1.0 Outpatient Counseling DMC	4,371	\$ 16.88	\$ 25.32
Outpatient Treatment	Ujima East Level 1.0 Outpatient Counseling Uninsured	259	\$ 16.88	\$ 25.32
Outpatient Treatment	Ujima East Level 2.1 Intensive Outpatient Counseling AB 109	83	\$ 18.10	\$ 27.15
Outpatient Treatment	Ujima East Level 2.1 Intensive Outpatient Counseling Case Management	2,773	\$ 15.96	\$ 23.94
Outpatient Treatment	Ujima East Level 2.1 Intensive Outpatient Counseling DMC	14,331	\$ 18.10	\$ 27.15
Outpatient Treatment	Ujima East Level 2.1 Intensive Outpatient Counseling Uninsured	221	\$ 18.10	\$ 27.15
Outpatient Treatment	Ujima East Level Recovery Services	3,328	\$ 15.96	\$ 23.94
Outpatient Treatment	Ujima West Child Care	2,080	\$ 27.50	\$ 41.25
Outpatient Treatment	Ujima West Level 1.0 Outpatient Counseling AB 109	96	\$ 16.56	\$ 24.84
Outpatient Treatment	Ujima West Level 1.0 Outpatient Counseling Case Management	555	\$ 15.49	\$ 23.24
Outpatient Treatment	Ujima West Level 1.0 Outpatient Counseling DMC	4,371	\$ 16.56	\$ 24.84
Outpatient Treatment	Ujima West Level 1.0 Outpatient Counseling Uninsured	259	\$ 16.56	\$ 24.84
Outpatient Treatment	Ujima West Level 2.1 Intensive Outpatient Counseling AB 109	83	\$ 17.67	\$ 26.51
Outpatient Treatment	Ujima West Level 2.1 Intensive Outpatient Counseling Case Management	2,773	\$ 15.49	\$ 23.24
Outpatient Treatment	Ujima West Level 2.1 Intensive Outpatient Counseling DMC	14,331	\$ 17.67	\$ 26.51
Outpatient Treatment	Ujima West Level 2.1 Intensive Outpatient Counseling Uninsured	221	\$ 17.67	\$ 26.51

**Ujima Family Recovery**

**Contract # 24-429**

**FY 19-20**

**Contract Fee Schedule**

Type of Service Unit	Program	Service Unit Quantity and Type	Reimbursement Rate Per Service Unit (Jul - Mar)	Reimbursement Rate Per Service Unit (Apr - Jun)
Outpatient Treatment	Ujima West Recovery Services	3,328	\$ 15.49	\$ 23.24
Residential Treatment	La Casa 904 Level 3.1 Treatment - DMC	2,747	\$ 105.61	\$ 211.22
Residential Treatment	La Casa 904 Level 3.1 Room & Board - DMC	2,394	\$ 79.68	\$ 159.36
Residential Treatment	La Casa 904 Level 3.1 Room & Board - DMC (AB 109 Funded)	353	\$ 79.68	\$ 159.36
Residential Treatment	La Casa 904 Level 3.1 Case Management - DMC	2,729	\$ 15.91	\$ 23.87
Residential Treatment	La Casa 904 Recovery Support - DMC	2,729	\$ 15.91	\$ 23.87
Residential Treatment	La Casa 904 Level 3.1 Treatment - Uninsured	550	\$ 105.61	\$ 211.22
Residential Treatment	La Casa 904 Level 3.1 Room & Board - Uninsured	550	\$ 79.68	\$ 159.36
Residential Treatment	La Casa 904 Level 3.1 Treatment - AB 109	353	\$ 105.61	\$ 211.22
Residential Treatment	La Casa 904 Level 3.1 Room & Board - AB 109	353	\$ 79.68	\$ 159.36
Residential Treatment	La Casa 919 Level 3.1 Treatment - DMC	589	\$ 102.32	\$ 204.64
Residential Treatment	La Casa 919 Level 3.1 Room & Board - DMC	559	\$ 80.79	\$ 161.58
Residential Treatment	La Casa 919 Level 3.1 Room & Board - DMC (AB 109 Funded)	30	\$ 80.79	\$ 161.58
Residential Treatment	La Casa 919 Level 3.1 Case Management - DMC	599	\$ 28.45	\$ 42.68
Residential Treatment	La Casa 919 Recovery Support - DMC	599	\$ 21.77	\$ 32.66
Residential Treatment	La Casa 919 Level 3.1 Treatment - Uninsured	111	\$ 102.32	\$ 204.64
Residential Treatment	La Casa 919 Level 3.1 Room & Board - Uninsured	111	\$ 80.79	\$ 161.58
Residential Treatment	La Casa 919 Level 3.1 Treatment - AB 109	30	\$ 102.32	\$ 204.64
Residential Treatment	La Casa 919 Level 3.1 Room & Board - AB 109	30	\$ 80.79	\$ 161.58
Residential Treatment	Rectory Level 3.1 Treatment - DMC	3,491	\$ 111.68	\$ 223.36
Residential Treatment	Rectory Level 3.1 Room & Board - DMC	3,396	\$ 86.44	\$ 172.88
Residential Treatment	Rectory Level 3.1 Room & Board - DMC (AB 109 Funded)	95	\$ 86.44	\$ 172.88
Residential Treatment	Rectory Level 3.1 Case Management - DMC	3,328	\$ 17.40	\$ 26.10
Residential Treatment	Rectory Recovery Support - DMC	3,328	\$ 17.40	\$ 26.10
Residential Treatment	Rectory Level 3.1 Treatment - Uninsured	64	\$ 111.68	\$ 223.36
Residential Treatment	Rectory Level 3.1 Room & Board - Uninsured	64	\$ 86.44	\$ 172.88
Residential Treatment	Rectory Level 3.1 Treatment - AB 109	95	\$ 111.68	\$ 223.36
Residential Treatment	Rectory Level 3.1 Room & Board - AB 109	95	\$ 86.44	\$ 172.88



**WestCare**  
**Contract # 74-610**  
**FY 19-20 Fee Schedule**

Type of Service Unit	Program	Service Unit Quantity and Type		Reimbursement Rate Per Service Unit (Jul - Mar)	Reimbursement Rate Per Service Unit (Apr - Jun)
Residential Treatment	WestCare Level 3.1 Treatment - DMC	2103	Bed Days	\$ 200.04	\$ 400.08
Residential Treatment	WestCare Level 3.1 Room & Board - DMC	2103	Bed Days	\$ 79.27	\$ 158.54
Residential Treatment	WestCare Level 3.1 Treatment - Uninsured	1000	Bed Days	\$ 200.04	\$ 400.08
Residential Treatment	WestCare Level 3.1 Room & Board - Uninsured	1000	Bed Days	\$ 79.27	\$ 158.54
Residential Treatment	WestCare Level 3.2 Treatment - DMC	1920	Bed Days	\$ 174.30	\$ 348.60
Residential Treatment	WestCare Level 3.2 Room & Board - DMC	1920	Bed Days	\$ 75.65	\$ 151.30
Residential Treatment	WestCare Level 3.2 Treatment - Uninsured	1000	Bed Days	\$ 174.30	\$ 348.60
Residential Treatment	WestCare Level 3.2 Room & Board - Uninsured	1000	Bed Days	\$ 75.65	\$ 151.30
Residential Treatment	WestCare Level 3.5 Treatment - DMC	678	Bed Days	\$ 268.90	\$ 537.80
Residential Treatment	WestCare Level 3.5 Room & Board - DMC	678	Bed Days	\$ 69.34	\$ 138.68
Residential Treatment	WestCare Level 3.5 Treatment - Uninsured	600	Bed Days	\$ 268.90	\$ 537.80
Residential Treatment	WestCare Level 3.5 Room & Board - Uninsured	600	Bed Days	\$ 69.34	\$ 138.68
Start-Up Costs (to be spent by 3/31/20)					