

## Contract Summary Form

OC Expediter Requisition #:1787881

Model Contract for Day Treatment Intensive Services for Adult Medi-Cal Beneficiaries

Three Respondents:

1. The Regents of the University of California on behalf of UCI Medical Center
2. CHCM, Inc. dba College Hospital Costa Mesa
3. Wel-Mor Psychology Group, Inc.

### SUMMARY OF SIGNIFICANT CHANGES

1. Term: October 1, 2026 through June 30, 2028
2. Allocated Budget: \$1,750,000, \$750,000 for October 1, 2026, through June 30, 2027, \$1,000,000 for July 1, 2027, through June 30, 2028.
3. No Respondent submitted exceptions to the Model Contract.

### SUBCONTRACTORS

This contract, due to the nature of the services, could require the addition of subcontractors. In order to add subcontractor(s) to the contract, the provider/contractor must seek express consent from the department. Should the addition of a subcontractor impact the scope of work and/or contract amount, the department will bring the item back to the Board of Supervisors for approval.

**One Respondent proposed utilizing subcontractors or pass through to other providers.**

**Below is the Respondent and their proposed subcontractor**

|                                                                                                     |                                         |                                 |                                                                |
|-----------------------------------------------------------------------------------------------------|-----------------------------------------|---------------------------------|----------------------------------------------------------------|
| Respondent:<br>The Regents of the<br>University of<br>California on behalf of<br>UCI Medical Center | Subcontractor Name:<br>Amae Health Inc. | Service(s)<br>Clinical Services | Amount<br>Unknown-<br>pending<br>selection and<br>negotiations |
|-----------------------------------------------------------------------------------------------------|-----------------------------------------|---------------------------------|----------------------------------------------------------------|

### CONTRACT OPERATING EXPENSES

Payment structure for this contract is a Fee-for-Service paid at a negotiated rate. Below are the proposed rates per Respondents. HCA intends to negotiate the final rates:

| Respondent | Full Date Rate | Half Day Rate |
|------------|----------------|---------------|
|------------|----------------|---------------|

|                                                                             |                                                                                                                                                                        |                                                         |
|-----------------------------------------------------------------------------|------------------------------------------------------------------------------------------------------------------------------------------------------------------------|---------------------------------------------------------|
| The Regents of the University of California on behalf of UCI Medical Center | \$900/day (minimum 4 hours face-to-face DTI service). This rate reflects all required DTI service components and is consistent with DHCS Medi-Cal SMHS rate structures | \$650/day (minimum 3 hours of face-to-face DTI service) |
| CHCM, Inc. dba College Hospital Costa Mesa                                  | \$524.21/day Medicare Allowable                                                                                                                                        | \$400.10/day Medicare Allowable                         |
| Wel-Mor Psychology Group, Inc.                                              | \$1,400/day                                                                                                                                                            | \$1,000/day                                             |