

Network Provider Update

To: Medi-Cal network participants

February 2025

From: Melinda Kjer
Director, Provider Network Management

Subject: Summary of Department of Health Care Services Medi-Cal Provider Bulletins

The Department of Health Care Services (DHCS) issued Medi-Cal bulletins during **January 2025** with updates on the below topics. We are sharing this update with you to ensure you are aware of the information, and you can apply the information to your practice or facility operations, where appropriate.

General Medicine

1. 2025 HCPCS Quarter 1 Update
2. Update: Change in Procedure for Infants Enrolled Through the Newborn Gateway
3. HCPCS Code J0911 is a Medi-Cal Benefit
4. Update to Palliative Care CPT Codes 99490 and 99491
5. ICD-10-CM Codes No Longer Required for Select Abortion Codes
6. Update for Select Transcranial Magnetic Stimulation CPT Codes
7. Provider Manual Revisions: [chemo drug a \(15, 16\)](#); [chemo drug t-z \(16, 17\)](#); [eval \(7-48\)](#); [inject drug r \(3-33\)](#); [modif used \(23\)](#); [path micro \(6\)](#); [tar comp \(6\)](#)

For information about the above changes, please refer to: [Medi-Cal Update - General Medicine | January 2025 | Bulletin 607](#)

Durable Medical Equipment and Medical Supplies

8. Select Durable Medical Equipment Codes Are Medi-Cal Benefits

For information about the above changes, please refer to: [Medi-Cal Update - Durable Medical Equipment and Medical Supplies | January 2025 | Bulletin 592](#)

Orthotics and Prosthetics

9. HCPCS Codes E0691 and E0694 Now a Medi-Cal Benefit

For information about the above changes, please refer to: [Medi-Cal Update - Orthotics and Prosthetics | January 2025 | Bulletin 592](#)

Reminders:

- Providers should bill using valid Medi-Cal codes and following Medi-Cal guidelines for modifiers. Please visit the dhcs.ca.gov website for detailed billing and rate information.
- Clinical Laboratory Improvement Act (CLIA) certification number (10-digit code) is required in box 23 of CMS-1500 claim form.
- Laboratories should regularly monitor the [CMS website](#) for new CLIA regulatory requirements.
- Blue Shield Promise requires the JW modifier (indicator of single dose container drug waste) when submitting drug claims.
- For billing and diagnostic purposes, Pediatric Autoimmune Neuropsychiatric Disorder Associated with Streptococcal Infections (PANDAS) shall be coded as other and Pediatric Acute-onset Neuropsychiatric Syndrome (PANS) shall be coded as autoimmune encephalitis until the American Medical Association and the federal Centers for Medicare and Medicaid Services create and assign a specific code or codes. At this time, DHCS recommends using these diagnosis codes:
 - PANDAS: D89.89, which is used for "other specified disorders involving the immune mechanism, not elsewhere classified"
 - PANS: D89.9, which is used for "disorder involving the immune mechanism, unspecified"

If you have questions about applying a benefit to Blue Shield of California Promise Health Plan members, please call our Provider Customer Service Department at **(800) 468-9935** from 6 a.m. to 6:30 p.m., Monday through Friday.