

Network Provider Update

To: Medi-Cal network participants

March 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 **February 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. Justice-Involved (JI) Reentry Initiative: Laboratory and Radiology Services
2. New Temporary Medi-Cal Benefit Identification Document
3. Medi-Cal Minor Consent Services
4. Update: The Number of Required Antepartum Visits to Bill for Global Obstetric Care Has Changed
5. Patient Notification Policy Update for Primary Care Providers in the EWC Program
6. Influenza A and B Virus Language Update
7. CPT Code 59412 Now a Medi-Cal Benefit
8. Provider Manual Revisions [cal child bil \(2\)](#); [cms comp \(1\)](#); [correct \(8\)](#); [genetic \(11, 16\)](#); [inject drug r \(6, 10\)](#); [inject drug t \(5, 6\)](#); [modif app \(33\)](#); [new gate \(5\)](#); [remit adv \(1, 3\)](#)

For information about the above changes, please refer to: [Medi-Cal Update - General Medicine February 2025 Bulletin 608](#)

Clinics and Hospitals

9. New Alternative Payment Methodology Program for FQHC Providers

For information about the above changes, please refer to: [Medi-Cal Update - Clinics and Hospitals February 2025 Bulletin 605](#)

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 Services Department at **(800) 468-9935** from 6 a.m. to 6:30 p.m., Monday through Friday.