

## Network Provider Update

To: Medi-Cal network participants

September 2024

From: Melinda Kjer  
Director, Provider Network Management

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

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The Department of Health Care Services (DHCS) issued Medi-Cal bulletins during **August 2024** 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. 2024 HCPCS Quarter 3 Update
2. PLA Code 0330U Benefit Status Change
3. Maximum Dispensing Quantity of Select Contraceptives Increased
4. List of Contracted Incontinence Creams and Washes Update
5. List of Contracted Incontinence Absorbent Products Update
6. Clinical Laboratory or Laboratory Services Rates Update
7. Reimbursement Rate Change for HCPCS Code J7307
8. Medi-Cal In-Person Training Event-October

For information about the above changes, please refer to: [Medi-Cal Update - General Medicine| August 2024| Bulletin 602](#)

#### **Durable Medical Equipment and Medical Supplies**

9. Assistive Robotic Arm Device Now a Medi-Cal Benefit

For information about the above changes, please refer to: [Medi-Cal Update - Durable Medical Equipment and Medical Supplies| August 2024| Bulletin 587](#)

#### **Pharmacy**

10. Vaccines for Children Now a Medi-Cal Benefit

For information about the above changes, please refer to: [Medi-Cal Update - Pharmacy| August 2024| Bulletin 1057](#)

**Reminders:**

- Providers should bill using valid Medi-Cal codes and following Medi-Cal guidelines for modifiers. Please visit the [dhcs.ca.gov](https://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.

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.