

Network Provider Update

To: Medi-Cal network participants

December 2024

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 **November 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. Correction: EWC Core Program Performance Indicators Table
2. CPT Code 87521: New CLIA-Waived Test
3. Minimum Age Requirement Adjusted for Respiratory Syncytial Virus Vaccine
4. JYNNEOS Vaccine Reimbursement
5. Policy Update for CPT Code 90661
6. Age Requirement Removed from Remote Physiologic Monitoring Codes
7. Use of the Rates Table for Physician-Administered Drugs
8. Provider Manual Revisions: [chw prev](#) [cpe process](#) [immun cd](#) [inject drug b](#) [inject drug g](#) [presum bill tar and non cd0](#) [tar and non cd9](#)

For information about the above changes, please refer to: [Medi-Cal Update - General Medicine| November 2024| Bulletin 605](#)

Durable Medical Equipment and Medical Supplies

9. 2024-2025 FFS Updates to List of Contracted Tracheostomy Supplies

For information about the above change, please refer to: [Medi-Cal Update - Durable Medical Equipment and Medical Supplies| November 2024| Bulletin 590](#)

Medi-Cal Programs & Eligibility

10. November 2024 Updates to CARC and RARC codes in the RAD Repository
11. 2025 Whole Child Model Transition
12. Medi-Cal Suspended and Ineligible Provider List is Updated

For information about the above changes, please refer to: [Medi-Cal Update - Medi-Cal Program & Eligibility| November 2024| Bulletin 28](#)

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) 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.

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.