

Blue Shield of California Promise Health Plan

Update for Network Providers

To: Medi-Cal Network Participants

From: Steven Chin 
Director, Provider Network Services

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

The Department of Health Care Services (DHCS) issued Medi-Cal bulletins during 2019 with updates on several topics. We are sharing these updates with you to ensure you are aware of the information, and you can apply the information to your practice or facility operations, where appropriate.

Please review each brief summary. For your convenience, we are including a link to the corresponding update posted by DHCS at their website.

1. Guide for Diabetes Prevention Providers New to Medi-Cal

On June 07, 2019, DHCS published a Guide for Diabetes Prevention for Providers who are new to Medi-Cal.

Dietitians, registered nurses, diabetes educators, exercise specialists and other diabetes prevention professionals may be enrolling in Medi-Cal for the first time in connection with the Diabetes Prevention Program (DPP). The Guide for Diabetes Prevention Providers New to Medi-Cal is designed to help individuals navigate Medi-Cal, including enrolling as a Medi-Cal DPP provider, determining a recipient's Medi-Cal eligibility, learning to submit a claim for reimbursement of services and more.

Information in the guide is organized in the general order in which providers will need it, as they progress from DPP enrollment to reimbursement by Medi-Cal for services rendered. [Review the update.](#)

2. Reimbursement Update for Electrocardiography Procedure Codes

Effective for dates of processing on or after April 22, 2019, proportional set-component logic will be applied for some electrocardiography (ECG/EKG) CPT procedure codes. [Review the update.](#)

3. 2019 HPE Income Eligibility Guidelines

The Hospital Presumptive Eligibility (HPE) program income eligibility guidelines have been updated for 2019 and are now available for download on the Hospital Presumptive Eligibility (HPE) Program page of the Medi-Cal website. [Review the update.](#)

4. Medi-Cal Benefit Rebinyn Billable Under New HCPCS Code

Effective for dates of service on or after April 1, 2019, blood factor Rebinyn is billable under HCPCS code J7203 (Injection Factor IX, [antihemophilic factor, recombinant], glycopegylated, [Rebinyn], 1 IU). [Review the update.](#)

5. Pharmacist Services: New Family PACT Benefit

Effective for dates of service on or after April 1, 2019, pharmacist services are reimbursable as a Family Planning, Access, Care and Treatment (Family PACT) Program benefit. [Review the update.](#)

6. Clotting Factors: Non-capitated Service Added to Select Managed Care Plans

Effective retroactively for dates of service on or after December 1, 2017, emicizumab-kxwh (Hemlibra), a clotting factor disorder treatment, is a non-capitated service for Managed Care Plans (MCPs) except for the following Health Care Plans (HCPs):

- Cal MediConnect
- Program of All-Inclusive Care for the Elderly (PACE)
- Senior Care Action Network (SCAN)

[Review the update.](#)

7. Hydroxyprogesterone Caproate Dosage Administration Policy Update

Effective for dates of service on or after July 1, 2019, HCPCS code J1726 (injection, hydroxyprogesterone caproate, [Makena], 10 mg) may be prescribed with an auto-injector at an increased dose of 275 mg/ml. [Review the update.](#)

8. CCS Capitated for Managed Care Plans in Certain Counties

Effective for dates of service on or after July 1, 2019, California Children's Services (CCS) is a capitated service for recipients receiving health care services through a Medi-Cal Managed Care Plan (MCP) in Orange County. Also, effective for dates of service on or after January 1, 2019, CCS is a capitated service in Del Norte, Humboldt, Lake, Lassen, Mendocino, Modoc, Shasta, Siskiyou, Sonoma and Trinity counties. [Review the update.](#)

9. Updates to Physician-Administered Drugs and List of Contract Drugs

Per DHCS bulletin dated July 2, 2019, effective for dates of service on or after July 1, 2019, QVAR RediHaler 10.6 grams (beclomethasone dipropionate HFA) is on the Medi-Cal Contract Drugs List with a restriction to NDC labeler code 59310 (Teva Respiratory, LLC) only.

- NDC 59310-302-40
- NDC 59310-304-80

[Review the update.](#)

10. Correction to Descriptions for Two DPP Core Maintenance Session Codes

In June 2019, the new *Diabetes Prevention Program* (DPP) Part 2 provider manual section was released, which listed incorrect month numbers in the descriptions for HCPCS codes G9877 and G9883. The corrected descriptions are stated in the update. [Review the update.](#)

11. Proposed Updates to APR-DRG Reimbursement Method for Fiscal Year 2019 – 2020

For state fiscal year 2019 – 2020, the Department of Health Care Services (DHCS) proposed updates to the all patient refined diagnosis-related group (APR-DRG) reimbursement method for general acute inpatient hospital services provided by the following:

- Private hospitals and non-designated public hospitals in California
- Out-of-state (border and non-border hospitals)
- Medicare-designated critical access hospitals

[Review the update.](#)

12. Telehealth Policy Update for Medi-Cal and Family PACT Programs

Effective for dates of service on or after July 1, 2019, telehealth policy is updated pursuant to Assembly Bill 415 (Logue, Chapter 547, Statutes of 2011), known as the Telehealth Advancement Act of 2011.

[Review the update.](#)

13. Extended End Date for Proposition 56 Supplemental Payments

Effective for dates of service on or after July 1, 2019, the Department of Health Care Services (DHCS) has extended the end date to December 31, 2021, for supplemental payments allocated under the California Healthcare, Research and Prevention Tobacco Tax Act of 2016 (Proposition 56). [Review the update.](#)

14. HCPCS Code J0604 Is No Longer a Medi-Cal Benefit

Effective for dates of service on or after September 1, 2019, HCPCS code J0604 (cinacalcet, oral, 1 mg, [for ESRD on dialysis]) is no longer a Medi-Cal benefit. Cinacalcet, however, is still available to Medi-Cal recipients as a Medi-Cal pharmacy benefit. [Review the update.](#)

15. Updated Policy for Bendamustine HCl

Effective for dates of service on or after July 1, 2019, an ICD-10-CM diagnosis code is no longer required for HCPCS codes J9033 (injection, bendamustine HCl [Treanda], 1 mg) and J9034 (injection, bendamustine HCl [Bendeka], 1 mg). An approved Treatment Authorization Request (TAR) is required for reimbursement. [Review the update.](#)

16. Clarification of Skilled Nursing and Intermediate Care Facilities Services

On September 3, 2019, DHCS provided a clarification of Skilled Nursing Facilities and Intermediate Care Facilities Services. [Review the update.](#)

All Medi-Cal bulletins are available at the Medi-Cal.ca.gov website.

If you have questions about applying the benefit to Blue Shield of California Promise Health Plan members, please call our Provider Customer Care Department at (800) 468-9935.

TBSP10703 (1/20)