

Summary of DHCS Medi-Cal Provider Bulletins – September 2025

The Department of Health Care Services (DHCS) issued Medi-Cal bulletins during **September 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: Billing Clarification for CHW Services
2. Third Quarter Family PACT HCPCS Code Rate Updates
3. Policy Update for HCPCS Code J3490 for FPACT and Medi-Cal Family Planning Programs
4. Cell and Gene Therapy HCPCS Code J3392 New Effective Date
5. Update: Contracted Medi-Cal Fee-for-Service Tracheostomy Supplies
6. CPT Code 90382 Is Reimbursable for Billing Enflonsia
7. Relocation of Select Policy in Evaluation and Management
8. Select Ultraviolet Light Therapy Codes Rate Update
9. Provider Manual Revisions
 - a. [abort \(1\)](#); [bht \(3, 6\)](#); [cel gen acc \(1-6\)](#); [cel gen over \(1-6\)](#); [hospice \(1-14,15-17\)](#); [immun \(42-44\)](#); [inject cd list \(2\)](#); [just inv \(18\)](#); [physician ndc \(1\)](#); [preg per \(1, 2\)](#); [preg per cd \(1\)](#); [presum bill \(13\)](#)

For information about the above changes, please refer to: [Medi-Cal Update - General Medicine| August 2025| Bulletin 615](#)

Community-Based Adult Services

10. 2025 FQHC and RHC Medicare Economic Index Percentage Increase

For information about the above changes, please refer to: [Medi-Cal Update - Community-Based Adult Services| September 2025| Bulletin 612](#)

Pharmacy

11. Contracted Advanced Wound Care Supplies in the List of Billing Codes, Units and Quantity Limits Has Been Updated

For information about the above changes, please refer to: [Medi-Cal Update - Pharmacy| September 2025| Bulletin 1070](#)

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.

blueshieldca.com/promise

- 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.