Summary of DHCS Medi-Cal Provider Bulletins – October 2026

The Department of Health Care Services (DHCS) issued Medi-Cal bulletins during **October 2026** 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. 2026 HCPCS Quarter 4 Update
2. Justice-Involved (JI) Reentry Initiative: New Aid Codes for Members with UIS Coming Soon
3. EWC Program Policy Updates: New Covered Procedure Codes and ICD-10-CM Diagnosis Codes
4. Reimbursement Rates Updated for Select Radiation Treatment Delivery Codes
5. Update to the Medi-Cal List of Contracted Incontinence Creams and Washes
6. Billing Policy Clarification for Medi-Cal Enrolled Licensed PTs Who Supervise CHWs
7. CPT Code 90616 Is a Medi-Cal Benefit
8. Family PACT HCPCS Code Rate Update for 2026 Quarter 3
9. Required Modifier and Minimum Age Updated for CPT Code 90683
10. Reminder: Obstetrical Providers Encouraged to Use E&M Codes with Modifier TH
11. Self-Collected Specimen Policy Clarification
12. One-Time Timeliness Waiver for LMFT and Psychological Associate Services Delivered by an RHC or FQHC
13. Provider Manual Revisions
    a) just inv (11, 14, 26); non spec mental (4, 12, 25, 28–45); prev (2, 5, 6, 8–11)

For information about the above changes, please refer to: Medi-Cal Update - General Medicine| October 2026| Bulletin 628

Additional 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 long-term care (LTC) with ownership change, when DHCS publishes updated rates, Blue Shield Promise considers both the current and former NPI to price claims according to the LTC rate on file.
- 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.