



Date: 3/20/2019

Medi-Cal

Important Provider Notice: #337

Subject: TAR Requirement Added to Code A9604 – Effective 5/1/19

Effective for Dates of Service on or after May 1, 2019, Partnership HealthPlan of California (PHC) will require providers get an approved Treatment Authorization Request (TAR) for procedure code A9604 (Sm 153 Lexidronam).

For additional information relating to PHC's TAR requirements, please visit the PHC Website at www.partnershiphp.org or contact the PHC Health Services Department at (800) 863-4155.