



4665 Business Center Drive
Fairfield, California 94534

January 13, 2026

Medi-Cal

Important Provider Notice #532

Subject: Changes to Requirements for Code J0875 (Dalbavancin, 5mg) – Effective July 1, 2025

Partnership HealthPlan of California has different requirements for code J0875, Dalbavancin, 5mg, than the Department of Health Care Services (DHCS). Effective for dates of service on and after July 1, 2025, treatment authorization request (TAR) requirements have been removed from this code, but the service is limited to a maximum 300 units total per every 30 days.

For further information regarding this, please contact the Partnership Claims Department at **(707) 863-4130** or **(855) 798-8757**.