

**May 5, 2026**

**Medi-Cal**

**Important Provider Notice: #546**

**Subject: Changes to Requirements for Codes Z6208, Z6308, Z6414, S0197, and G0108 – Effective January 1, 2023**

Partnership HealthPlan of California has different requirements for codes Z6208, Z6308, Z6414, S0197, and G0108 than the Department of Health Care Services (DHCS). Effective for dates of service on and after January 1, 2023, these codes will have the following limitations:

- Z6208, Z6308, Z6414 – limited to 80 units per 10 months; when limit is exceeded, a Treatment Authorization Request (TAR) is required
- S0197 – limited to 80 units per 10 months
- G0108 – limited to 16 units per 12 months; when limit is exceeded, a TAR is required
  - This code is also not reimbursable when billed on the same day, for the same member, as codes 97802 – 97804

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