

**PARTNERSHIP HEALTHPLAN OF CALIFORNIA  
MEDI-CAL PROVIDER MANUAL  
CLAIMS DEPARTMENT**

**III.E.2 Modifiers Used with Procedure Codes**

A list of modifiers used with procedure codes when billing Partnership can be found in the Medi-Cal Provider Manual. Please click on the following link to see the complete list of modifiers allowed and required on procedure codes when billing Partnership. If the link does not work, please copy and paste the link in a new window.

[https://mcweb.apps.prd.cammis.medi-cal.ca.gov/assets/3946F47A-8266-4E14-988A-E7B085C96A88/modifused.pdf?access\\_token=6UyVkRRfByXTZEWh8j8QaYyIPyP5ULO](https://mcweb.apps.prd.cammis.medi-cal.ca.gov/assets/3946F47A-8266-4E14-988A-E7B085C96A88/modifused.pdf?access_token=6UyVkRRfByXTZEWh8j8QaYyIPyP5ULO)

Below are codes with modifiers that are specific to Partnership:

Service or Procedure	Codes or Code Ranges	Required Modifiers	Allowable Modifiers
Biosimilar Injections	Q5101	ZA	-
	Q5102	ZB	
	Q5102	ZC	