



Medi-Cal Rx Phase I, Wave III – Frequently Asked Questions (FAQs)

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Introduction

The following Frequently Asked Questions (FAQs) document provides additional guidance and clarification regarding Phase I, Wave III (P1/W3) for Medi-Cal Rx.

General Information

1. When does the reinstatement of prior authorizations (PAs) for the first wave of 11 therapeutic classes go live?

P1/W3 went into effect on September 16, 2022.

2. Will the 11 drug classes reinstated in P1/W3 require a PA for beneficiaries already on a prior drug therapy?

Reinstatement of PAs for these 11 drug classes will begin ONLY for beneficiaries who are starting a new drug therapy. A “new-start” is defined as a new therapy or medication not previously prescribed to the beneficiary during the 15-month lookback period. Paid claims data and historical PAs will be used for grandfathering. When prescribing a new-start medication in one of these drug classes, providers may refer to the [Medi-Cal Rx Contract Drugs Lists](#) and the [Medi-Cal Rx Approved National Drug Code \(NDC\) List](#) for additional information. Medi-Cal Rx product-specific coverage criteria for enteral nutrition products and medical supplies products have not changed or been waived. PA requirements remain in place for products that do not have either an approved PA or a historical paid claim on file. Please note that the lookback for Continuous Glucose Monitoring (CGM) Systems and Disposable Insulin Delivery Devices (DIDD) is 90 days or less on claim date of service or the presence of a historical PA to determine if the beneficiary is new to therapy.

3. Will existing prescriptions for drugs in the 11 Standard Therapeutic Classes (STCs) continue to be grandfathered?

Yes, the transition policy will remain in effect until it is retired in Phase III.

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4. Does P1/W3 affect enteral nutrition or medical supplies?

No, Medi-Cal Rx product-specific coverage criteria for enteral nutrition products and medical supply products have not changed or been waived. PA requirements remain in place for products that do not have either an approved PA or a historical paid claim on file.

Note: The lookback for Continuous Glucose Monitoring (CGM) Systems and Disposable Insulin Delivery Devices (DIDD) is 90 days or less on claim date of service or the presence of a historical PA to determine if the beneficiary is new to therapy.

5. What is the rationale for the selection of the 11 STCs impacted by P1/W3?

Selection of the 11 STCs for P1/W3 is based on aggregate analyses that support system-level design. Department of Health Care Services' (DHCS) desire is to ensure that PA volume and adjudication turnaround time (TAT) are both manageable and sustainable over time.

6. What PA requirements will remain in place during P1/W3?

All existing PA requirements will remain in place for drugs/products that do not have either an approved PA or a historical paid claim on file.

7. With the exemption of PA requirements for new-starts for beneficiaries 21 years of age and under, what claim edits could cause rejection?

Existing system edits such as quantity limits, age limits, brand medically necessary, and pharmacy drug benefit exclusions will continue to apply consistent with Medi-Cal Rx policies.

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8. Does the reinstatement of P1/W3 affect California Children's Services (CCS)/Genetically Handicapped Persons Program (GHPP) beneficiaries 21 years of age and under?

No, P1/W3 reinstatement should not have any impact on beneficiaries 21 years of age and under. However, coverage considerations for certain drugs/products may continue to require a PA for CCS/GHPP beneficiaries.

Drug Classes

9. Which 11 drug classes are being reinstated?

- Diuretics
- Antilipemic agents (including statins and Omega-3 fatty acids)
- Hypoglycemics and glucagon
- Antihypertensives
- Coronary vasodilators (nitrates and pulmonary arterial hypertension agents)
- Cardiovascular agents (including antiarrhythmics and inotropes)
- Anticoagulants and antiplatelets
- Niacin, Vitamin B, and Vitamin C products

10. Where can I find more information about drugs that are impacted in P1/W3?

DHCS has leveraged the existing [Medi-Cal Rx Approved National Drug Code \(NDC\) List](#) to identify each drug that has a PA requirement. The following abbreviations will be found alongside each drug to indicate whether the PA requirement status is in effect as of January 1, 2022 ("AOO"); P1/W3; or not in effect ("N/A"). This list will be updated monthly with the appropriate phase/wave until completion of the reinstatement process.

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11. Will all new-starts for all diuretics and hypertensives require a PA or only those not covered?

Diuretics and antihypertensive drugs listed on the [Medi-Cal Rx Contract Drugs List \(CDL\)](#) will continue to be available without a PA. Drugs from those categories which are not listed on the CDL will need a PA if the prescription is a new-start. Refer to the [Medi-Cal Rx Approved National Drug Code \(NDC\) List](#) to identify the specific NDCs within the 11 impacted therapeutic classes that require a PA.

12. Will the 14-day emergency override still be applicable during P1/W3?

Yes, refer to the *Emergency Fills* section of the [Medi-Cal Rx Provider Manual](#) for more information.

13. For the 71 drug classes that will be reinstated in Phase II (P2), will there be notice of the drug classes to be reinstated? Is there an update on P2?

At this time, our priority is to ensure a smooth implementation of P1/W3 on September 16, 2022. Magellan Medicaid Administration, Inc. (MMA) will be working with DHCS and external stakeholders to evaluate and assess this phase prior to discussing implementation of P2.

Resources

14. How can I learn more about P1/W3?

In addition to the resources linked within this FAQ, Medi-Cal Rx offers a Medi-Cal Rx Reinstatement Webinar, which is available on the [Education & Outreach](#) page of the [Medi-Cal Rx Web Portal](#). The link for the webinar recording can be accessed here: <https://www.youtube.com/watch?v=cVDAhFENBss>.

15. How can I obtain assistance with questions about P1/W3?

You can call the Medi-Cal Rx Customer Service Center (CSC) at 1-800-977-2273, which is available 24 hours a day, 7 days a week, 365 days per year.

Providers can also seek assistance via the Medi-Cal Rx Education & Outreach team by emailing MediCalEducationOutreach@magellanhealth.com.

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