60-Day Countdown: Upcoming Changes to Medi-Cal Rx

November 1, 2025

Background

As previously announced in the alert titled *90-Day Countdown: Upcoming Changes to Medi-Cal Rx* and pursuant to the enacted 2025-26 State Budget, the Department of Health Care Services (DHCS) is implementing a series of Medi-Cal Rx policy updates over the coming months to reduce pharmacy spending, improve program integrity, and ensure continued, equitable access to quality pharmacy benefits and services.

What Pharmacy Providers and Prescribers Need to Know

Effective January 1, 2026, Medi-Cal Rx will implement the following policy updates:

GLP-1 Drugs

- GLP-1 drugs used for weight loss and weight loss-related indications will be excluded from Medi-Cal Rx coverage for all Medi-Cal members. DHCS issued letters in late October directly to all Medi-Cal members, regardless of whether they are currently receiving GLP-1 drugs, to inform them of the change in coverage.
- **Note:** Medi-Cal Rx will continue to cover GLP-1 drugs that are indicated for type 2 diabetes or other non-weight loss-related indications using a clinically appropriate *International Classification of Diseases – 10th Revision* (ICD-10) diagnosis code.

Over-the-Counter (OTC) COVID-19 Antigen Tests

- OTC COVID-19 antigen tests will require a prior authorization (PA) request for all Medi-Cal members unless written by a California Children's Services (CCS) Paneled Provider for a pediatric member younger than 21 years of age (refer to the *Now Available: CCS Panel Authority Policy Exclusions on the Medi-Cal Rx Approved NDC List* alert for more information). Pharmacy claims for these tests may be approved on a case-by-case basis with medical justification demonstrating the need for suspected COVID-19 exposure or infection. Providers must include the following information with the PA request:
  - ICD-10 diagnosis code
  - Signs and symptoms exhibited
  - Date of most recent COVID-19 test taken
  - Documentation of medical necessity, such as recent exposure, active signs and symptoms, previous diagnosis, or suspected ongoing infection

- **Note:** PAs are only approved for a one-time override and cannot be renewed. A new PA request will be required for each pharmacy claim for an OTC COVID-19 antigen test. Additionally, approvals are limited to up to four tests per month, per Medi-Cal member. It is important to remind Medi-Cal members that there may be additional alternative COVID-19 testing coverage options available through their pharmacy provider, prescriber, or Medi-Cal managed care plan (MCP). Additional information regarding OTC COVID-19 antigen test coverage will be provided in the updated *Medi-Cal Rx Provider Manual* after January 1, 2026.

Continuing Care

- Certain drugs and products that are currently paying as continuing care exceptions will no longer be covered without an approved PA demonstrating medical necessity. This policy will apply to all Medi-Cal members. The following drugs and products will be impacted:
  - Chlorpromazine 25 mg/ml and 50 mg/2 ml ampules and vials
  - Fluphenazine 2.5 mg/ml vial
  - Haloperidol deconate 50 mg/ml and 100 mg/ml ampules
  - Haloperidol lactate 5 mg/ml ampules, vials, and syringes
  - Timolol 0.25% and 0.5% gel-solution
  - Timolol maleate 0.25% and 0.5% eye solution
  - Bimatoprost 0.03% eye drops
  - Adhansia XR (methylphenidate) 25 mg, 35 mg, 45 mg, 55 mg, 70 mg, and 85 mg capsules
- **Note:** Approval of select noncovered drugs as a paid benefit will first require use of a therapeutic alternative drug listed on the *Medi-Cal Rx Covered Drugs List* (CDL).

As this policy change may result in benefit coverage changes for some Medi-Cal members, DHCS issued letters in late October directly to only those Medi-Cal members who have been receiving one or more of these medications, as identified from a claim within the last 100 days.

Coverage Policies for Select OTC Products

Note: The following OTC coverage policy updates will not impact members when the prescription is written by a CCS Paneled Provider under the CCS Panel Authority policy.

- **Select OTC Products**
  - Coverage policies for select OTC products for Medi-Cal members 21 years of age and older under Medi-Cal Rx will be updated as follows:
    - Multivitamin combination products will no longer be covered.
    - Certain single-ingredient vitamins and dry eye products will require a PA request demonstrating medical necessity.
    - First- and second-generation antihistamines coverage are restricted to generic formulations.
    - Single-ingredient vitamin and antihistamines will be restricted to a 90- to 100-day supply per fill for all Medi-Cal members 21 years of age and older.

- **OTC Prenatal Vitamins**
  - OTC prenatal vitamins will be limited to use during pregnancy or lactation conditions for Medi-Cal members between 10 and 60 years of age. Additionally, claims for these items will be restricted to a 90- to 100-day supply per fill for maintenance supplies. The initial fill will be approvable for a 30-day supply to ensure the Medi-Cal member can tolerate the vitamin.

Step Therapy

- Medi-Cal Rx will continue to prefer the use of drugs/products listed on the CDL(s) on the Contract Drugs & Covered Products Lists page prior to considering approval of a drug/product requiring a PA request.
  - Providers should consider prescribing covered therapies that may not require a PA.
  - If a covered drug/product is not clinically appropriate, submit a PA request establishing medical necessity.
  - Providers are required to include drugs/products tried and considered and the reason(s) why those drugs/products do not meet the needs of the member when submitting PA requests. Refer to the *Reminder: Establishing Medical Necessity* alert.
- Continuation of therapy, which refers to when a member previously used or is currently using the drug/product, will not suffice as justification for approval.
- This change will impact all members regardless of eligibility, age, and specialty program enrollment.

What Pharmacy Providers and Prescribers Need to Do

- Review the Budget Information page on the DHCS website.
- Review the California Budget 2025-26 website.
- Visit the Education & Outreach page on the Medi-Cal Rx Web Portal and select the **State Budget Policy Updates** tab.
  - Medi-Cal Rx will be offering a series of Office Hours in December and January to address stakeholder questions and review how state budget policy updates will impact Medi-Cal Rx. Information about the Office Hours will be available on the State Budget Policy Updates tab.
- Review the *Medi-Cal Rx State Budget Policy Updates – Frequently Asked Questions (FAQs)*, which will be available prior to policy update implementation, on the State Budget Policy Updates tab and the FAQ page on the Medi-Cal Rx Web Portal.

Contact Information

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.

For other questions, email Medi-Cal Rx Education & Outreach at MediCalRxEducationOutreach@primetherapeutics.com.