



Medi-Cal Rx

Mass Adjustment for Vaccines Reimbursement for Members 19 Years of Age and Older for Impacted Claims with a Date of Service January 1, 2024, through March 31, 2024

December 19, 2025

Background

Medi-Cal Rx initiated a mass adjustment related to vaccines for members 19 years of age and older (excluding mpox vaccines, COVID-19 vaccines, and Vaccines For Children [VFC] vaccines) for claims with a date of service (DOS) on or after January 1, 2024, through June 6, 2025.

What Pharmacy Providers Need to Know

Medi-Cal Rx identified a claims processing issue affecting a select number of claims with a DOS on or after January 1, 2024, through June 6, 2025, for vaccines for members 19 years of age and older (excluding mpox vaccines, COVID-19 vaccines, and VFC vaccines). For the impacted claims, the update includes a new reimbursement methodology. Medi-Cal Rx updated the reimbursement methodology for these vaccines on June 6, 2025, to correctly calculate the claims for members 19 years of age and older per the Department of Health Care Services' (DHCS) policy.

Medi-Cal Rx has identified the impacted net paid claims and will be adjusting these claims on behalf of pharmacy providers which may result in an amount owed to you or no net change to the amount you were already reimbursed.

Adjustments have been made for some of the impacted claims with a DOS on or after January 1, 2024, through March 31, 2024, and will appear on the January 13, 2026, remittance advice (RA). Adjustments for the remaining claims with a DOS January 1, 2024, through June 6, 2025, will be processed at a later date and a separate alert will be published when the next adjustment commences.

What Pharmacy Providers Need to Do

No action is required by pharmacy providers at this time.

Adjustments for the impacted claims with a DOS on or after January 1, 2024, through March 31, 2024, and will appear on the January 13, 2026, RA. On the RA, impacted pharmacy providers will see a reversal of the original claim and a new claim processed (same member,

Rx number, DOS, NDC, etc.) to reflect the adjustment. The Mass Adjustment Notification Number, **MCRX 0217-A**, will appear on the RA for all reprocessed claims.

If an impacted pharmacy provider disagrees with an adjustment, they may take one of the following actions:

- Submit a [Medi-Cal Rx Provider Pharmacy Claim Appeal \(DHCS 6571\)](#) form within three months of the new Medi-Cal Rx RA date.
- Submit a [Medi-Cal Rx Provider Pharmacy Claim Inquiry \(DHCS 6570\)](#) form (CIF) within six months of the new Medi-Cal Rx RA date.

The forms contain completion instructions and are located on the [Forms & Information](#) page on the [Medi-Cal Rx Provider Portal](#).

For more information about this and other mass adjustment activities, refer to the [Mass Adjustments](#) page located on the [Medi-Cal Rx Provider Portal](#). For additional assistance, pharmacy providers may send a secured email to MediCalRxEducationOutreach@primetherapeutics.com and include, if appropriate, any claim-specific information with the correspondence.

Contact Information

If you have any questions regarding the mass adjustment, 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.