Medi-Cal Rx Monthly Bulletin

December 1, 2025

Medi-Cal Rx has implemented or scheduled the following updates. Stay up to date with all that is happening at Medi-Cal Rx by visiting the Bulletins & News page and signing up for the Medi-Cal Rx Subscription Service to receive notification of future publications.

1. Updates to the Medi-Cal Rx Contract Drugs List
2. Updates to the List of Contracted Enteral Nutrition Products, Effective January 1, 2026
3. Updates to the Medi-Cal Rx Provider Manual
4. Maximum Allowable Ingredient Cost 30-Day Pharmacy Provider Notice
5. Update: Long Term Care Claims Processing
6. Reminder: Medi-Cal Coverage and Billing Policy for LYFGENIA™ and CASGEVY® Under the Cell and Gene Therapy Access Model
7. New Medi-Cal Rx State Budget Policy Updates – Frequently Asked Questions (FAQs)
8. New GLP-1 Drugs – Medi-Cal Rx Members' Frequently Asked Questions (FAQs)
9. New Changes to GLP-1 Drug Coverage – Effective January 1, 2026 Flyer
10. Updates to the Medi-Cal Rx NCPDP Payer Specification Sheet
11. Updates to the Medi-Cal Rx Web Claims Submission User Guide

1.   Updates to the Medi-Cal Rx Contract Drugs List

The following updates have been made to the _Medi-Cal Rx Contract Drugs List_ (CDL).

Drug Name	Description
Apremilast	Additional formulations (extended-release tablets and initiation packs) added to the CDL with labeler restriction (LR) and diagnosis restriction.
Bacteriostatic Sodium Chloride	Additional package size (30 ml) added to the CDL.
Belantamab Mafodotin-blmf	Added to the CDL with LR.
Ethyl Alcohol	Added to the CDL.
Gemcitabine HCL	Additional formulation (intravesical system) added to the CDL with LR.
Imlunestrant	Added to the CDL with LR.
Norethindrone	Additional strength (5 mg) added to the CDL.

2.   Updates to the List of Contracted Enteral Nutrition Products, Effective January 1, 2026

The _List of Contracted Enteral Nutrition Products_ has been updated on the Medi-Cal Rx Web Portal. The effective date of the changes is January 1, 2026.

Several Vitaflo™ products have updated NDCs and Universal Product Codes (UPCs). The following product will be added to the _List_.

Manufacturer	Product Label Name	Medi-Cal 11-digit Billing Number (NDC)
POA Pharma; Nexus Patient Services LLC	TYR® Easy Tablets, 6 x 96.25 g bottles, unflavored	50059034116

The amount reimbursed to providers is the estimated acquisition cost (EAC), per unit, multiplied by the number of units dispensed, plus a 23 percent markup. Assembly Bill 97 (2011) still impacts enteral nutrition claims; a 10 percent reduction applies to each paid claim.

Product addition or inclusion on the _List_ does not guarantee supply or individual-specific coverage. Products deleted from the _List_ will no longer be reimbursable, even with an approved prior authorization (PA), on or after the effective date of deletion.

Note: The Maximum Acquisition Cost (MAC) for these products is no longer guaranteed.

Members affected by deletions from the *List* should seek new prescriptions from their licensed prescriber, and new PAs from their pharmacy provider, if applicable, for a comparable item that is listed. Continuing care does not apply.

Medi-Cal members denied coverage of a requested Medi-Cal Rx product have the right to a State Hearing. A State Hearing may be requested by contacting the California Department of Social Services, State Hearings Division, at the following address:

[State Hearings](#)

P.O. Box 944243, MS 21-37
Sacramento, CA 94244-2430

Toll Free: 1-800-743-8525 or 1-855-795-0634
Fax: 1-833-281-0905

Medi-Cal members have the right and are encouraged to consult their primary care provider or prescriber to determine if an appropriate substitute product is available and covered by Medi-Cal Rx.

3.   Updates to the Medi-Cal Rx Provider Manual

The following updates/additions have been made to the *Medi-Cal Rx Provider Manual*.

Section	Update Description
Section 8.2 – Special Eligibility/Client Conditions	• Updated the Relationship Code = 03 – Child. • Updated the Prior Authorization Type Code (PATC) = 8 – Payer Defined Exemption.
Section 8.2.2 – Newborns	• Updated the Relationship Code = 03 – Child. • Updated the PATC = 8 – Payer Defined Exemption.
Section 19.1.1 – Completion Instructions for the UCF	• Updated the Relationship Code = 03 – Child.
*Section 20.4 – Pharmacy Audit Oversight Activities (**NEW!**)*	• New section added explaining pharmacy audit oversight activities used to detect inaccurate payments, drug waste, or other benefit coverage abuses.
*Section 20.4.1 – Types of Audits (**NEW!**)*	• New section added explaining the two different types of audits (desk and onsite audits).
*Section 20.4.2 – Reporting Audit Results (**NEW!**)*	• New section added explaining how the reporting audit results are determined and communicated.
*Section 20.4.3 – Audit Appeal Process (**NEW!**)*	• New section added explaining that pharmacies have the right to appeal audit findings and how to find instructions.

Section	Update Description
Section 20.4.4 – Pharmacy Audit Recoveries (**NEW!**)	• New section added explaining the pharmacy audit recovery process with the Department of Health Care Services (DHCS) mailing address.
Section 20.4.5 – Audit Contact Information (**NEW!**)	• New section added with the pharmacy audit team's contact information.
Section 20.5 – How to Report FWA	• Formerly *Section 20.4*; renumbered to *Section 20.5*.

4. Maximum Allowable Ingredient Cost 30-Day Pharmacy Provider Notice

DHCS has contracted with Prime Therapeutics State Government Solutions LLC (Prime), who contracts with Mercer Government Human Services Consulting (Mercer), part of Mercer Health and Benefits, LLC, to establish and maintain a Maximum Allowable Ingredient Cost (MAIC) program for generic pharmaceutical drugs.

Rates will be effective January 1, 2026, and will be posted to the Mercer Medi-Cal Rx website no later than December 1, 2025.

• Refer to the Mercer Medi-Cal Rx website for MAIC rate lists, MAIC program information, Frequently Asked Questions (FAQs), and contact information.
• To request a review of a MAIC rate for a specific drug, submit a request using the *Medi-Cal Rx Maximum Allowable Ingredient Cost Price Research Request* (DHCS 6540) form found on the Mercer Medi-Cal Rx website and the Forms & Information page on the Medi-Cal Rx Web Portal.

Note: All required fields on the form must be completed. Providers will be contacted for supporting documentation or other information, as necessary.

The primary method for pharmacy provider notifications for the MAIC and Annual Attestation Survey is via email and/or fax. It is important and recommended that pharmacy providers maintain accurate and consistent contact information across all organizations involved in pharmacy administration, including but not limited to, NCPDP and Medi-Cal.

5. Update: Long Term Care Claims Processing

Effective January 1, 2026, Medi-Cal Rx will implement the following updates to claims processing for Medi-Cal members residing in Long Term Care (LTC) facilities:

• Claims submitted for products not reimbursable by Medi-Cal Rx will deny with **Reject Code 70 – Product/Service Not Covered** with the supplemental message *"Requested product is included in facility per diem rate and not separately payable."*
• Claims submitted for enteral nutritional products will not be covered.

Notes:

- Claims submitted for members residing in LTC facilities must be submitted with a Patient Residence code value of 3 – Nursing Facility or 9 – Intermediate Care Facility/Individuals with Intellectual Disabilities in NCPDP Field 384-4X.
- Claims for products not reimbursable by Medi-Cal Rx should be billed as part of the facility's per diem rate.
- LTC claims processing for other situations will continue as outlined in the *Long Term Care Claims Processing* section in the [*Medi-Cal Rx Provider Manual*](#).
- As a reminder, claims are monitored for program integrity by DHCS' Audits & Investigations (A&I) Division. Refer to the *Medi-Cal Rx Program Integrity* section in the *Medi-Cal Rx Provider Manual* for more information.

6. Reminder: Medi-Cal Coverage and Billing Policy for LYFGENIA™ and CASGEVY® Under the Cell and Gene Therapy Access Model

As announced in the alert titled [*Coverage for Cell and Gene Therapy Access Model Medications*](#), LYFGENIA™ and CASGEVY® are covered as a medical benefit under the Cell and Gene Therapy (CGT) Access Model when prescribed for the treatment of sickle cell disease (SCD).

Refer to the [CGT Access Model General Frequently Asked Questions (FAQs)](#) page for general guidance and clarification regarding the CGT Access Model. DHCS has also created dedicated FAQs for [members](#) and [providers](#).

7. New Medi-Cal Rx State Budget Policy Updates – Frequently Asked Questions (FAQs)

Medi-Cal Rx published the new [*Medi-Cal Rx State Budget Policy Updates – Frequently Asked Questions (FAQs)*](#) on November 14, 2025, and then updated it on November 21, 2025, to include feedback from stakeholders. To access the document, visit the [FAQ](#) page on the [Medi-Cal Rx Web Portal](#) or select the **State Budget Policy Updates** tab on the [Education & Outreach](#) page.

8. New GLP-1 Drugs – Medi-Cal Rx Members' Frequently Asked Questions (FAQs)

Medi-Cal Rx published the new [*GLP-1 Drugs – Medi-Cal Rx Members' Frequently Asked Questions (FAQs)*](#) on November 14, 2025. To access the document, visit the [FAQ](#) page on the [Medi-Cal Rx Web Portal](#) or select the **State Budget Policy Updates** tab on the [Education & Outreach](#) page.

9.   New Changes to GLP-1 Drug Coverage – Effective January 1, 2026 Flyer

Medi-Cal Rx published the new *Changes to GLP-1 Drug Coverage – Effective January 1, 2026* flyer on November 14, 2025. To access the document, visit the Medi-Cal Rx Web Portal and select the **State Budget Policy Updates** tab on the Education & Outreach page.

10.   Updates to the Medi-Cal Rx NCPDP Payer Specification Sheet

Medi-Cal Rx published updates to the *Medi-Cal Rx NCPDP Payer Specification Sheet* on December 1, 2025. To access the document, visit the Medi-Cal Rx Provider Portal and select the **Billing Tips & Payer Sheet** tab on the Forms & Information page.

11.   Updates to the Medi-Cal Rx Web Claims Submission User Guide

Medi-Cal Rx published updates to *the Medi-Cal Rx Web Claims Submission User Guide* on December 1 2025. To access the document, visit the Medi-Cal Rx Provider Portal and select the **Reference Materials** tab on the Forms & Information page.

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.