



Restricted Pharmacy Benefit Coverage for Emergency and/or Pregnancy-Related Services for Select Medi-Cal Aid Codes, Effective January 1, 2026

January 1, 2026

Background

As of January 1, 2026, enrolled Medi-Cal members in select aid codes have restricted Medi-Cal benefit coverage that only covers emergency and/or pregnancy-related services. As a result, Medi-Cal Rx has implemented a new reject code to deny non-covered services for members enrolled in these select aid codes.

What Pharmacy Providers and Prescribers Need to Know

For members with restricted coverage and associated pharmacy claims submitted with a date of service (DOS) on or after January 1, 2026, each claim will be evaluated, upon submission, to determine if the claim meets the requirement for emergency and/or pregnancy-related services, as defined by the Department of Health Care Services (DHCS). Emergency and/or pregnancy-related services are identified by *International Classification of Diseases – 10th Revision* (ICD-10) diagnosis code(s) along with other claim information (such as, the NCPDP field 335-2C Pregnancy Indicator value of 2 – Pregnant) as submitted on the claim. DHCS **is not providing** a list of ICD-10 diagnosis codes as a reference source as member diagnoses are case by case and individualized. Prescribers should include appropriate ICD-10 diagnosis codes that align with the member's diagnosis or condition.

- » Medi-Cal Rx accepts up to five ICD-10 diagnosis codes on a submitted pharmacy claim.
- » Pharmacies should retain the supporting documentation on the prescription or in the member's record so it can be readily referenced in the event of an audit.

If the claim does **not** meet the requirements for emergency or pregnancy-related services, Medi-Cal Rx will deny the claim for the member enrolled in an aid code having restricted pharmacy benefit coverage with **Reject Code M1 – Patient Not Covered In This Aid Category** with the supplemental message "*Restricted to emergency or pregnancy services. Review claim data and resubmit as appropriate.*"

What Prescribers Need to Do

Prescribers are to take the following actions:

- Provide the appropriate ICD-10 diagnosis code(s) for the member's condition with the prescription at the time of prescribing.
- If the prescription does not include ICD-10 diagnosis code(s), provide the ICD-10 diagnosis code(s) when the pharmacy provider reaches out.

What Pharmacy Providers Need to Do

Pharmacy providers are to take the following actions:

- Contact the prescriber if the prescription does not include the ICD-10 diagnosis code(s).
- Include ICD-10 diagnosis code(s) and/or the appropriate value in the NCPDP field(s) to indicate that the claim submitted is for emergency and/or pregnancy-related services.
- Assist members by providing contact information for their local county social service offices if the member has questions regarding their Medi-Cal eligibility.

Resources

- Refer to [Appendix C – Aid Codes](#) in the [Medi-Cal Rx Provider Manual](#) to identify which aid codes are restricted for emergency or pregnancy-related services.
- Registered Medi-Cal Rx pharmacy providers can use the Member Eligibility Lookup Tool on the [Medi-Cal Rx Secured Provider Portal](#) to identify a member's aid code, level of benefit, and description. Refer to the [Member Eligibility Lookup Tool Job Aid](#) for additional information.
- The [Local County Social Service Offices](#) can assist members if they have questions regarding their Medi-Cal eligibility.

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.