

Prior Authorization (PA) Submission Reminders

January 14, 2022

Medi-Cal Rx is live! All administrative services related to Medi-Cal pharmacy benefits that are billed on pharmacy claims have transitioned to Medi-Cal Rx. The <u>Medi-Cal Rx Provider Manual</u> houses valuable resources and information to properly submit claims. Adherence to the following reminders regarding pharmacy claim submissions will ensure effective PA submissions.

Prior Authorization – Submission Methods

As shown in the table below, there are five (5) approved methods for submitting a PA to Medi-Cal Rx. Using a different method will result in a denial.



- PAs cannot be submitted by phone.
- A beneficiary cannot initiate a PA.
- Submit a PA only once, using one of the five approved methods.

Approved PA Submission Methods		
PA Submission Method	How to Submit	
CoverMyMeds® (CMM)	PA submission through CMM is the efficient and	
	preferred method to submit a PA to Medi-Cal Rx.	
	CMM interacts in real time with the Medi-Cal Rx Point-of-Sale	
	(POS) claims processing system and with the Medi-Cal Rx	
V	Clinical Decision Module (CDM) to often present real-time	
	determinations and covered alternatives.	
	Only a prescriber can submit a completed PA directly through	
	CMM. Some pharmacies can initiate a request through CMM,	
	which provides the information included in the case initiation	

Approved PA Submission Methods		
PA Submission Method	How to Submit	
	to the prescriber. PAs submitted through the Medi-Cal Rx Secured Provider Portal will not be displayed in CMM.	
	More information on using CMM can be found in the Medi-Cal Rx: CoverMyMeds How-To Guide or on the CMM website: https://www.covermymeds.com/ .	
Medi-Cal Rx Secured Provider Portal for Electronic Prior Authorization (ePA)	Registration is required to submit an ePA via the Medi-Cal Rx Secured Provider Portal. Refer to the <u>User Administration</u> <u>Console (UAC) Quick Start Guide</u> for more information on how to register for UAC. Both pharmacies and prescribers can submit an ePA via the Medi-Cal Rx Secured Provider Portal.	
National Council for Prescription Drug Programs (NCPDP) transaction using the pharmacy POS system	P4 transactions are submitted directly from the pharmacy using the NCPDP layout. The pharmacy can request and submit a PA on behalf of the beneficiary or provider. If submitting a PA request via a pharmacy POS, pharmacies must go to the Medi-Cal Rx Secured Provider Portal to upload attachments or fax additional information to the Medi-Cal Rx Customer Service Center (CSC) when needed. Reference the Medi-Cal Rx Options for Submission Guide for detailed information.	
Fax	Providers can submit a PA request via fax to 1-800-869-4325. When submitting a PA via fax, utilize the preferred Medi-Cal Rx PA Request Form. Other accepted PA forms include: • Medi-Cal Form 50-1 • Medi-Cal Form 50-2 • California Form 61-211	

Approved PA Submission Methods		
PA Submission Method	How to Submit	
Mail	Providers can submit PA requests via mail to:	
	Medi-Cal Rx Customer Service Center	
	P.O. Box 730	
	Rancho Cordova, CA 95741-0730	
	When submitting a PA via mail, utilize the preferred	
	Medi-Cal Rx PA Request Form.	
	Other accepted PA forms include:	
	Medi-Cal Form 50-1	
	Medi-Cal Form 50-2	
	California Form 61-211	

Prior Authorization – Completion Reminders

Below are some helpful reminders when completing PA requests:

- For paper PAs, only submit one of the following PA forms:
 - Medi-Cal Rx Prior Authorization Request Form
 - Medi-Cal Form 50-1
 - Medi-Cal Form 50-2
 - California Form 61-211
- Provide a complete signature and date on the paper PA form. Stamps and initials are not a valid form of signature.
- Be sure to complete all required fields in the form such as provider phone number, fax number, National Provider Identifier (NPI), address, etc.
- Provide all necessary information for a decision (i.e., if stating covered alternatives are not acceptable, provide context or other pertinent information such as lab results with dates).
- Provide all beneficiary diagnoses and the corresponding International Classification of Diseases, 10th revision (ICD-10).
- Provide tried/failed medications, if applicable.
- Quantity and days of supply must be included.
- Do not use "unknown location" for the beneficiary.

- Do not use the Managed Care Plan (MCP) ID. Only use the following:
 - Benefits Identification Card (BIC) number
 - Client Index Number (CIN)
 - Health Access Program (HAP) number

See the *Prior Authorization Overview, Request Methods, and Adjudication* section of the *Medi-Cal Rx Provider Manual* for more detailed information.



When submitting a PA via mail or fax, the PA form will need to be printed and completed, and then either mailed or faxed.

Prior Authorization – Case Decision

A PA submitted to Medi-Cal Rx will be either **approved**, **deferred**, or **recommended for denial**.

- If the PA is approved, an approval correspondence will be sent to the requesting provider.
- If the PA is deferred, it was determined that additional information is needed and the
 reason why the PA was placed in a deferred status for up to 30 days will be provided to the
 submitter. If the submitter does not send a response within 30 days, the PA will be
 administratively denied.
- The PA is recommended for denial if the submitted information does not meet medical necessity. The PA will be moved to the California Department of Health Care Services (DHCS) for second-level review.

Prior Authorization – Claim Denials

Reject Code 75 (PA Required): If you have evidence the beneficiary has a valid (approved) PA and/or a prior paid claim in your system, please resubmit the claim to Medi-Cal Rx with a value of **55555** in the Prior Authorization Number Submitted field (**462-EV**). Your attestation is subject to audit.

Prior Authorization – Resources

The following resources are readily available on the Medi-Cal Rx website to assist with submitting a PA:

- Covered Drugs List (CDL)
- Medi-Cal Rx Drug Lookup Tool
- PA Job Aid Resource for submitting an ePA via the Medi-Cal Rx Secured Provider Portal
- <u>Prior Authorization (PA) Case Review Process Flyer</u> Flyer illustrating the case review process for claims that do not meet auto-PA rules
- Medi-Cal Rx Pharmacy Transition Policy
- Five Ways to Submit a Prior Authorization (PA) flyer
- Medi-Cal Rx Provider Manual

Contact Information

Medi-Cal Rx provides a wide range of contacts and resources for your convenience.

Department	Contact Information
Customer Service Center (CSC)	Toll-free number: 1-800-977-2273, available 24 hours a
	day, 7 days a week, 365 days per year.
Pharmacy Service	Email Education & Outreach requests to:
Representatives (PSRs)	MediCalRxEducationOutreach@magellanhealth.com
Live Chat & Messaging	For assistance, visit the Medi-Cal Rx Provider Portal's
	Contact Us page.
PSR-Hosted Office Hours	Please join our Medi-Cal Rx Office Hours held on weekdays
	(excluding holidays) from 12:00 p.m. – 1:00 p.m. PST for
	registration and troubleshooting assistance.
	Zoom Meeting Link:
	https://magellanhealth.zoom.us/j/94964434351?pwd=c1l4
	cC9oTUNod2tkYm5RRmJmeklUQT09&from=addon
	Meeting ID: 949 6443 4351
	• Password: 655990
	• Dial In: 1-888-788-0099 (US Toll Free)