



# Required Documentation for Claim and Prior Authorization Support

February 24, 2022

Providers can troubleshoot Pharmacy Claim and Prior Authorization (PA) issues by utilizing the [Medi-Cal Rx Provider Manual](#), the [Bulletins & News](#) page, or the [Medi-Cal Rx FAQs](#).

If you still cannot find a resolution, either email Medi-Cal Rx Education & Outreach (E&O) at [MediCalRxEducationOutreach@magellanhealth.com](mailto:MediCalRxEducationOutreach@magellanhealth.com) or call the Customer Service Center (CSC) at 1-800-977-2273. Customer Service Representatives are available 24 hours a day, 7 days a week, 365 days per year.

Please provide the following documentation if available:

Required Documentation	
Pharmacy Claim	Prior Authorization
<ul style="list-style-type: none"><li>• Method used to submit claim:<ul style="list-style-type: none"><li>– Point of Sale (POS)</li><li>– Medi-Cal Rx Provider Portal</li><li>– Fax</li><li>– Mail</li><li>– Batch</li></ul></li><li>• Claim number</li><li>• Reject code</li><li>• 14-digit Beneficiary ID</li><li>• 9-digit Client Index Number</li><li>• Health Access Program ID</li><li>• First and last name</li><li>• Date of Birth (DOB)</li><li>• Screenshot(s) that documents the issue</li></ul>	<ul style="list-style-type: none"><li>• Method used to submit PA:<ul style="list-style-type: none"><li>– CoverMyMeds® (CMM)<ul style="list-style-type: none"><li>• Include CMM 8-character reference key</li></ul></li><li>– POS</li><li>– Medi-Cal Rx Provider Portal</li><li>– Fax</li><li>– Mail</li></ul></li><li>• PA denial reason as stated on rejection</li><li>• 14-digit Beneficiary ID</li><li>• 9-digit Client Index Number</li><li>• Health Access Program ID</li><li>• First and last name</li><li>• Date of Birth (DOB)</li><li>• Screenshot(s) that documents the issue</li></ul>