

## Update: Postponement of Implementation of NCPDP Reject Code 80

July 12, 2022

## What is Happening?

The Department of Health Care Services (DHCS) has elected to postpone implementation of the National Council for Prescription Drug Programs (NCPDP) **Reject Code 80 – Diagnosis Code Submitted Does Not Meet Drug Coverage Criteria.** 

Claims submitted to Medi-Cal Rx will NOT be edited for a diagnosis code as planned to begin July 22, 2022.

Providers are reminded of their obligation to document the meeting of Code 1 restrictions and to keep that information readily available. However, if the diagnosis does not meet the Code 1 criteria, a prior authorization (PA) will not be required until such time as reinstatement of Medi-Cal Rx PA processes for the drug dispensed have been fully implemented. Claims for the medication may be submitted without an approved PA.

Feedback from stakeholder engagements has been critical to the design of the reinstatement plan for claim edits and PAs for Medi-Cal Rx. DHCS and Magellan Medicaid Administration, Inc. acknowledge that implementation of Reject Code 80 could require submission of PAs prior to the timeframe targeted for PA reinstatement.

The decision to postpone application of a diagnosis code edit at this time aligns with our commitment to continue the dialogue with our stakeholder community and ensure the delivery of timely and safe pharmacy services to Medi-Cal beneficiaries and providers across California. Medi-Cal Rx will undertake a robust communication and education plan before Reject Code 80 is executed.

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Please note: Claim edits for Drug Utilization Review (DUR) requirements will be reinstated, as planned, effective July 22, 2022. Specifically, NCPDP Reject Code 88 – DUR alerts such as drug-drug interactions, high dose, early refill, etc., will be in effect and will generate either claim rejection or informational claim messages that pharmacies may need to address for claim adjudication.

## **Next Steps**

To prepare for reinstatement of DUR claim edits, providers are encouraged to:

- Share this information with vendors, business partners, and staff who need to know about the upcoming change.
- Assess business processes and workflows to ensure successful submission of claims.
- Review Medi-Cal Rx billing guidelines in the <u>NCPDP Reject Code 88 DUR Reference Guide</u> to avoid or resolve claim rejections.
- Review <u>Appendix A Reject Code 88 DUR: Service Codes Scenarios</u> for a list of scenarios for each DUR alert.
- Review the revised <u>Medi-Cal Rx Reinstatement Plan Phase I, Wave I: Frequently Asked</u> <u>Questions (FAQs)</u>.
- Continue to monitor the <u>Medi-Cal Rx Web Portal</u> as additional alerts and bulletins are published.

## **Questions?**

For claims or PA assistance, 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 a year.

You can also submit questions via email to Medi-Cal Rx Education & Outreach at MediCalRxEducationOutreach@magellanhealth.com.