Prior Authorization Reinstatement Reference Guide
August 16, 2022

What is Happening:
On September 16, 2022, prior authorization (PA) requirements will be reinstated for 11 drug classes for new start medications for beneficiaries 22 years of age and older.

- “New start” is defined as either a new therapy or the first time the beneficiary has been prescribed the drug. Medi-Cal Rx will review claim Date of Service (DOS) up to 15 months to determine if the beneficiary is new to therapy.
- New start prescriptions for children and youth 21 years of age and under within these 11 drug classes will not be subject to PA reinstatement.

For the list of drug classes for which PA requirements will be reinstated, see the 30-Day Countdown – Reinstatement of Prior Authorization (PA) Requirements for 11 Drug Classes. The PA submission process will not change. The following information provides PA submission guidelines for the five methods to submit a PA.

- Prospective PAs that are submitted prior to the transition policy being phased out for beneficiaries currently on a drug therapy and covered under the transition policy will not be accepted at this time.
How to Submit a PA

There are five approved methods for submitting a PA to Medi-Cal Rx:

- CoverMyMeds®
- Medi-Cal Rx Secured Provider Portal
- National Council for Prescription Drug Programs (NCPDPs)
- Fax
- Mail

CoverMyMeds

CoverMyMeds is the most efficient and preferred method for submitting a PA to Medi-Cal Rx. CoverMyMeds interacts with both the Medi-Cal Rx Point-of-Sale (POS) claims processing system and with the Medi-Cal Rx Clinical Decision Module (CDM) to present covered alternatives and real-time PA determinations.

- PAs submitted through any other channel will not display in CoverMyMeds.

More information on using CoverMyMeds can be found in the *Medi-Cal Rx: CoverMyMeds How-To Guide* or on the [CoverMyMeds website](#).

Medi-Cal Rx Secured Provider Portal

Registration is required to submit a PA via the Medi-Cal Rx Secured Provider Portal. Refer to the *User Administration Console (UAC) Quick Start Guide* for more information on how to register for UAC.

- Both pharmacies and prescribers can submit a PA via the Medi-Cal Rx Secured Provider Portal.
National Council for Prescription Drug Programs

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. Refer to the Medi-Cal Rx Options for PA Submission Guide for detailed information.

Fax

Provide a complete signature and date on the PA form.

- Stamps and initials are not valid forms of signature.

Be sure to complete all required fields on the form including provider phone number, fax number, National Provider Identifier (NPI), service address, etc.

When submitting a PA via fax or mail, utilize the preferred Medi-Cal Rx Prior Authorization Request Form.

Other accepted PA forms:

- Medi-Cal Form 50-1
- Medi-Cal Form 50-2
- California Form 61-211

Providers can submit a PA request via fax to 1-800-869-4325.
Mail

Provide a complete signature and date on the PA form.

- Stamps and initials are not valid forms of signature.

Be sure to complete all required fields on the form including provider phone number, fax number, NPI, service address, etc.

When submitting a PA via fax or mail, utilize the preferred Medi-Cal Rx Prior Authorization Request Form.

Other accepted PA forms:

- Medi-Cal Form 50-1
- Medi-Cal Form 50-2
- California Form 61-211

Providers can submit a PA request via mail to the following:

Medi-Cal Rx Customer Service Center
ATTN: PA Request
P.O. Box 730
Rancho Cordova, CA 95741-0730

Prior Authorization – Completion Reminders

Below are some helpful reminders when completing PA requests:

- 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-and-considered medications if applicable.
- Quantity and days of supply must be included.
• Do not use the beneficiary’s Managed Care Plan (MCP) ID. Only use the following:
  – Benefits Identification Card (BIC) number
  – Cardholder Identification Number (CIN)
  – Health Access Plan (HAP) identification number
• Clinical information gathered will be used to determine medical necessity.
• PA forms may be returned if not filled out in their entirety.

Prior Authorization – Resources

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

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

• Covered Products List
• Medi-Cal Rx Drug Lookup Tool
• Medi-Cal Rx Prior Authorization (PA) Job Aid – Resource for submitting a PA via the Medi-Cal Rx Secured Provider Portal
• Prior Authorization (PA) Case Review Process Flyer – Flyer illustrating the case review process for claims that do not meet automatic PA rules
• Medi-Cal Rx Pharmacy Transition Policy
• Five Ways to Submit a Prior Authorization (PA) Flyer
• Medi-Cal Rx YouTube Channel

Contact Information

You can call the Medi-Cal Rx CSC at 1-800-977-2273, which is available 24 hours a day, 7 days a week, 365 days per year.

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