



Medi-Cal Rx

Appendix B – Directory

November 1, 2024

Contact/Topic	Contact Numbers	Web Address	Purpose/Comments/Prompts
Automated Eligibility Verification System (AEVS)	1-800-456-AEVS (2387)		For additional information on transactions available via AEVS, refer to the <i>Automated Eligibility Verification System (AEVS)</i> section of the Medi-Cal Rx Provider Manual .
Prime Therapeutics Special Investigations Unit (SIU) Pharmacy FWA Hotline	1-800-731-3269		Hours of Operation: Voicemail available 24 hours a day, 7 days a week, 365 days a year. Email: FraudTipHotline@primetherapeutics.com Mailing Address: Prime Therapeutics ATTN: Pharmacy Audit & SIU 2900 Ames Crossing Road Eagan, MN 55121
Medi-Cal Eligibility Division (MCED)		https://www.dhcs.ca.gov/services/medi-cal/eligibility/Pages/Medi-Cal%20Eligibility%20Division.aspx	The MCED is responsible for the development, coordination, clarification, and implementation of Medi-Cal regulations, policy, and procedures to assure Medi-Cal eligibility is determined accurately and promptly. The website has links for Beneficiaries, Programs, Counties, and Stakeholders and additional information on eligibility and enrollment.

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Compliance	<p>Prime Therapeutics Compliance Department: 1-612-777-5523</p> <p>Anonymous Reporting: Calls to the 24-hour Anonymous Compliance Hotline: 1-800-474-8651</p>		<p>Hours of Operation: 24 hours a day, 7 days a week, 365 days a year. All Medi-Cal Rx calls reported through the Compliance Hotline are routed to the Medi-Cal Rx Compliance Officer for investigation and/or triage to the appropriate team.</p> <p>Emails to the Prime Therapeutics Compliance Department: Compliance@primetherapeutics.com</p> <p>Emails to the Medi-Cal Rx Compliance Department: MediCalRxCompliance@primetherapeutics.com</p> <p>Anonymous emails to the Prime Therapeutics Compliance Department: Reports@lighthouse-services.com (www.lighthouse-services.com/prime)</p>
Medi-Cal Rx Customer Service Center (CSC)	<p>1-800-977-2273 TTY 711</p> <p>Prior Authorization (PA)/PA Appeal(s) Fax Number: 1-800-869-4325</p> <p>Paper Claim Fax Number: 1-866-391-6726</p>	www.Medi-CalRx.dhcs.ca.gov	<p>Hours of Operation: 24 hours a day, 7 days a week, 365 days a year (excluding approved holidays). Note: Finance Customer Service Representatives (CSRs) will only be available Monday – Friday, 8 a.m. to 5 p.m. PT. Voicemail will be available for after-hours calls and will be returned on the next business day.</p> <p>CSRs provide assistance with:</p> <ul style="list-style-type: none"> • Member inquiries • Provider inquiries • Financial inquiries • Claims processing/messaging • Drug coverage

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			<ul style="list-style-type: none"> • Member eligibility • PA request status • Pharmacy locations • Assistance with Medi-Cal Rx Provider Portal access • Assistance with identification and reporting of suspected FWA <p>Mailing Addresses:</p> <ul style="list-style-type: none"> • Medi-Cal Rx Customer Service Center ATTN: Provider Paper Claims or Provider Claims Appeals or Provider Claims Inquiries or Finance Department or Member Reimbursement Claims (CHOOSE ONE PURSUANT TO WHAT IS BEING SENT) P.O. Box 610 Rancho Cordova, CA 95741-0610 • Medi-Cal Rx Customer Service Center ATTN: Provider PA Requests or Provider PA Appeals or Accounts Receivable Forms (CHOOSE ONE PURSUANT TO WHAT IS BEING SENT) P.O. Box 730 Rancho Cordova, CA 95741-0730 <p>Note: If mailing correspondence, ensure that a department is identified in the ATTN line.</p>

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Medi-Cal Rx FWA Hotline	1-800-375-1251, TTY 711		<p>Hours of Operation: Monday-Friday 8 a.m. – 6 p.m. PT Voicemail available on corporate holidays; Monday – Friday, 6 p.m. to 8 a.m. PT; and Friday, 6 p.m. to Monday, 8 a.m. PT.</p> <p>Email: FraudTipHotline@primetherapeutics.com</p> <p>Mailing Address: Prime Therapeutics ATTN: Pharmacy Audit & SIU 2900 Ames Crossing Road Eagan, MN 55121</p>
DHCS Fraud	1-800-822-6222		<p>Email: fraud@dhcs.ca.gov</p> <p>Mailing Address: Medi-Cal Complaint – Intake Unit, Audits and Investigations P.O. Box 997413, MS 2500, Sacramento, CA 95899-7413</p>
Medi-Cal Telephone Support Center (TSC)	1-800-541-5555		<p>Note: This is different than the Medi-Cal Rx CSC. Providers needing assistance with AEVS, Medi-Cal PIN related inquiries, and any non-Medi-Cal Rx related inquiries should call the TSC.</p>

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<i>California Specific Pharmacy Claim Form (30-1) and California Specific Compound Pharmacy Claim Form (30-4)</i>		https://www.medi-calrx.dhcs.ca.gov/provider/forms	The <i>California Specific Pharmacy Claim Form (30-1)</i> and <i>California Specific Compound Pharmacy Claim Form (30-4)</i> are located on the Forms & Information page of the Medi-Cal Rx Provider Portal .
Provider Application and Validation for Enrollment (PAVE) Technical Support	1-866-252-1949	https://www.dhcs.ca.gov/provgovpart/Pages/PAVE.aspx	<p>Hours of Operation: Monday-Friday 8 a.m. – 6 p.m. PT, excluding holidays.</p> <p>Provides assistance with:</p> <ul style="list-style-type: none"> • PAVE technical issues • PAVE internet browser compatibility • PAVE log-on • System Navigation/Functionality • Uploading/Accessing documents

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Provider Enrollment Department (PED) Message Center	1-916-323-1945	https://www.dhcs.ca.gov/provgovpart/Pages/PED.aspx	<p>To access the Provider Enrollment Division Online Inquiry Form, navigate to the PED website and select Inquiry Form under "Provider Resources."</p> <p>Address: Department of Health Care Services Provider Enrollment Division P.O. Box 997412 Sacramento, CA 95899-7412</p> <p>Provides assistance with:</p> <ul style="list-style-type: none"> • Clarification of enrollment requirements • Explanation of application denial • Medi-Cal Provider Enrollment process • Revalidation/Re-Enrollment • Status of paper application • Address changes
<i>Universal Claim Form</i> (UCF)	1-877-817-3676 Fax Number: 866-308-2036	http://www.ncpdp.org/products.aspx	The <i>Universal Claim Form</i> may be purchased from NCPDP's vendor, Communiform LLC. The form may be ordered by phone, fax, or online.