



Medi-Cal Rx Electronic Claims Submission

September 7, 2021; Rev: October 1, 2021

Beginning January 1, 2022, Magellan Medicaid Administration, Inc. (MMA) will provide administrative support and services for the Department of Health Care Services (DHCS) Medi-Cal Fee-for-Service (FFS) pharmacy benefits, collectively referred to as "Medi-Cal Rx." Medi-Cal Rx will include all pharmacy benefits billed by pharmacy providers on pharmacy claims for Medi-Cal beneficiaries in both the Medi-Cal FFS and managed care delivery systems.

Under the existing processes, Medi-Cal providers choosing to submit claims electronically to the Medi-Cal FFS Fiscal Intermediary (FI) must complete and submit the [DHCS 6153 \(Rev. 08/19\) form](#) titled "MEDI-CAL TELECOMMUNICATIONS PROVIDER AND BILLER APPLICATION/AGREEMENT." The DHCS 6153 form indicates that Medi-Cal providers will be provided a unique Medi-Cal Submitter Identification (ID) and password to be used for claims certification purposes, accuracy and correction of claims or payments, and more.

In order to reduce the burden on existing Medi-Cal pharmacy providers and ease the transition to Medi-Cal Rx, as well as to comply with the Governor's January 1, 2019 [Executive Order N-01-19](#), DHCS will be using the existing DHCS 6153 forms already on file for Medi-Cal pharmacy providers and billers submitting Medi-Cal Rx electronic claims until further notice.

For Medi-Cal Rx electronic claims submissions, Medi-Cal pharmacy providers will be provided specific Medi-Cal Rx credentials, which are different than the Medi-Cal Submitter ID and the password used for the existing Medi-Cal FFS FI. Please note that the use of unique Medi-Cal Rx credentials constitutes the acceptance of all terms and conditions outlined in the existing DHCS 6153 form.

While DHCS recognizes that the DHCS 6153 form only references the current Medi-Cal FFS FI, a new form that specifically references MMA and Medi-Cal Rx, inclusive of all related processes and procedures, is being developed. Medi-Cal Rx aims to release this new form no later than November 15, 2021. At that time, the Medi-Cal pharmacy provider/biller will need to return the new DHCS form within a specified time frame to ensure that an up-to-date Medi-Cal Rx-inclusive agreement is on file.

Until then, the provider/biller agrees that submission of electronic claims using the [Medi-Cal Rx NCPDP Standard Payer Sheet](#) will identify the submitter and shall serve as acceptance to the terms and conditions of DHCS' Medi-Cal Telecommunications Provider and Biller Application/Agreement (DHCS 6153). The provider/biller further acknowledges the necessity of maintaining the privacy of the Medi-Cal Rx credentials and agrees to bear full responsibility for the use or misuse of the Medi-Cal Rx credentials should privacy not be maintained.

If Medi-Cal pharmacy providers/billers have questions regarding this alert, please direct all such communications to the Medi-Cal Rx Customer Service Center by one of the available "Contact Us" options on the [Medi-Cal Rx Web Portal](#) or to the following mailing address:

Medi-Cal Rx Customer Service Center
ATTN: Billing Agreement Processing
P.O. Box 610
Rancho Cordova, CA 95741-0610

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