

30-Day Countdown: Phase IV, Lift 3: Reinstatement of Reject Code 76: Plan Limitations Exceeded

September 13, 2023

Background

The purpose of this alert is to notify pharmacy providers and prescribers that on October 13, 2023, Phase IV, Lift 3 (P4/L3) will be implemented.

What Pharmacy Providers and Prescribers Need to Know

Reject Code 76 – Plan Limitations Exceeded applies to new start claims for all ages and will apply to refill claims for members 22 years of age and older beginning October 13, 2023. Claims that reject with Reject Code 76 can also reject for the following reasons:

- Minimum Billed Quantity
- Maximum Billed Quantity
- Days' Supply Limit Exceeded
- Quantity Limit Exceeded
- Maximum Quantity Per Day Limit Exceeded
- Number of Fills Per Specific Time Limit Exceeded
 - Claims for members 21 years of age and younger that are paying under the transition policy will NOT be impacted by the reinstatement of Reject Code 76.
 - » New start claims for all ages including enteral nutrition products, continue to be subject to Reject Code 76.

What Pharmacy Providers and Prescribers Need to Do

Pharmacy providers and prescribers should:

1. Review Quantity Limit (QL) requirements included in the <u>Contract Drugs Lists & Covered Products Lists</u> on the <u>Medi-Cal Rx Web Portal</u>.

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- 2. Submit a prior authorization (PA) request, if resubmission of the claim that meets the established quantity limitations is not appropriate, via one of the approved Medi-Cal Rx PA submission methods:
 - CoverMyMeds®
 - Medi-Cal Rx Secured Provider Portal
 - NCPDP P4 Transaction
 - Fax
 - U.S. Mail

Note: If a claim rejects due to quantity limitations exceeding 100 days' supply for drugs/products, a PA is not reviewable for coverage consideration as it must meet this limitation of up to and including a 100-day supply (except U.S. Food and Drug Administration [FDA]-approved self-administered hormonal contraceptives **[this includes transdermal patches and vaginal rings in addition to oral dosage forms]** and sodium fluoride products/drops/solutions).

Resources

- Review Medi-Cal Rx billing guidelines in the <u>Medi-Cal Rx Billing Tips</u>.
- Review Appendix D and other parts of the <u>Medi-Cal Rx Provider Manual</u>.
- Review the <u>NCPDP Payer Specification Sheet</u>.
- Review the <u>Prior Authorization Submission Reminders</u> alert.
- Review PA resources by selecting Prior Authorization (PA) on the <u>Forms & Information</u> page.
- Continue to review the Medi-Cal Rx Web Portal for additional information.

Contact Information

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 per year.

For other questions, email Medi-Cal Rx Education & Outreach at MediCalRxEducationOutreach@magellanhealth.com.

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