



Medi-Cal Rx

# Updates to the Medi-Cal Rx Provider Manual

January 2, 2024

The updates/additions below have been made to the [Medi-Cal Rx Provider Manual](#) version 14.0.

## Updates

Section	Update Description	Effective Date
<i>Section 12.5.1 – Standard Products</i>	<ul style="list-style-type: none"><li>Removed ICD-10 code “K08.1” and diagnosis “Complete loss of teeth.”</li><li>Updated table with additional ICD-10 codes for Standard Product Type Diagnosis.</li></ul>	January 1, 2024
<i>Section 12.5.5 – Specialty Infant Products Criteria</i>	<ul style="list-style-type: none"><li>Updated section title.</li><li>Reinstated language regarding authorization requirements.</li></ul>	January 1, 2024
<i>Section 12.5.5.1 – Premature and Low Birth Weight Products</i>	<ul style="list-style-type: none"><li>Reinstated language regarding product limitations for premature and low weight members.</li></ul>	January 1, 2024
<i>Section 12.5.5.2 – Human Milk Fortifier Products</i>	<ul style="list-style-type: none"><li>Reinstated language regarding authorization requirements.</li></ul>	January 1, 2024
<i>Section 12.5.5.3 – EH Specialty Infant Products</i>	<ul style="list-style-type: none"><li>Reinstated language regarding member coverage criteria.</li></ul>	January 1, 2024
<i>Section 12.5.5.4 – Amino Acid-Based (100 Percent) Products</i>	<ul style="list-style-type: none"><li>Reinstated language regarding use of specialty infant Amino Acid-based products and supporting documentation.</li></ul>	January 1, 2024
<i>Section 12.5.5.5 – Renal Specialty Infant Products</i>	<ul style="list-style-type: none"><li>Reinstated language regarding member coverage criteria.</li></ul>	January 1, 2024
<i>Section 12.5.5.6 – Chylothorax or LCHAD Deficiency Specialty Infant Products</i>	<ul style="list-style-type: none"><li>Reinstated language regarding documented member diagnoses.</li></ul>	January 1, 2024

Section	Update Description	Effective Date
<i>Section 12.8 – Shortages and Product Interchangeability</i>	<ul style="list-style-type: none"> <li>Updated language regarding interchanging products.</li> <li>Added information regarding quantity limitations.</li> </ul>	January 1, 2024
<i>Section 12.8.1 – Product Interchangeability Requirements (NEW!)</i>	<ul style="list-style-type: none"> <li>Added language regarding documentation requirements for product interchangeability.</li> </ul>	January 1, 2024
<i>Section 12.8.2 – Prescription Requirements (NEW!)</i>	<ul style="list-style-type: none"> <li>Added language regarding prescription requirements for enteral product substitution.</li> </ul>	January 1, 2024
<i>Section 13.0 – Medical Supplies</i>	<ul style="list-style-type: none"> <li>Added language referring to section regarding non-covered medical supplies.</li> <li>Added language regarding sterile syringes with needles (non-insulin).</li> </ul>	January 1, 2024
<i>Section 13.6 – Non-Covered Medical Supplies (NEW!)</i>	<ul style="list-style-type: none"> <li>Added language regarding non-covered medical supplies and managed care plan (MCP) obligation.</li> </ul>	January 1, 2024
<i>Section 17.4.1 – Paxlovid</i>	<ul style="list-style-type: none"> <li>Updated language pertaining to the U.S. Food and Drug Administration (FDA) approval of Paxlovid.</li> </ul>	January 1, 2024
<i>Section 17.4.1.1 – Commercial Paxlovid (NEW!)</i>	<ul style="list-style-type: none"> <li>Added language regarding commercial transition of Paxlovid.</li> <li>Added language regarding member eligibility.</li> </ul>	January 1, 2024
<i>Section 17.4.2 – Remdesivir (Veklury)</i>	<ul style="list-style-type: none"> <li>Language refined.</li> </ul>	January 1, 2024
<i>Section 17.4.3 – Lagevrio (NEW!)</i>	<ul style="list-style-type: none"> <li>Added language regarding Lagevrio.</li> </ul>	January 1, 2024
<i>Section 17.4.3.1 – Commercial Lagevrio (NEW!)</i>	<ul style="list-style-type: none"> <li>Added language regarding commercial Lagevrio.</li> </ul>	January 1, 2024
<i>Section 17.4.4 – COVID-19 Oral Antiviral Products Reimbursement (NEW!)</i>	<ul style="list-style-type: none"> <li>Added language regarding reimbursement for COVID-19 oral antiviral products.</li> </ul>	January 1, 2024
<i>Section 17.4.4.1 – Paxlovid Reimbursement for Pharmacist Services (NEW!)</i>	<ul style="list-style-type: none"> <li>Added information regarding reimbursement for pharmacist services on a medical claim.</li> </ul>	January 1, 2024

Section	Update Description	Effective Date
Section 17.4.5 – Commercial COVID-19 Oral Antiviral Products Reimbursement ( <b>NEW!</b> )	<ul style="list-style-type: none"> <li>Added language regarding reimbursement for commercial COVID-19 oral antiviral products.</li> </ul>	January 1, 2024

## 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](mailto:MediCalRxEducationOutreach@magellanhealth.com).