



Medi-Cal Rx

Updates to the Medi-Cal Rx Provider Manual

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

<i>Section 12.5.5.6 – Chylothorax or LCHAD Deficiency Specialty Infant Products</i>	<ul style="list-style-type: none"> Reinstated language regarding documented member diagnoses. 	January 1, 2024
---	--	-----------------

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

Section	Update Description	Effective Date
<i>Section 17.4.5 – Commercial COVID-19 Oral Antiviral Products Reimbursement (NEW!)</i>	Added language regarding reimbursement for commercial. COVID-19 oral antiviral products.	January 1, 2024
<i>Section 17.4.3 – Lagevrio (NEW!)</i>	<ul style="list-style-type: none"> Added language regarding Lagevrio. 	January 1, 2024
<i>Section 17.4.3.1 – Commercial Lagevrio (NEW!)</i>	<ul style="list-style-type: none"> Added language regarding commercial Lagevrio. 	January 1, 2024
<i>Section 17.4.4 – COVID-19 Oral Antiviral Products Reimbursement (NEW!)</i>	<ul style="list-style-type: none"> Added language regarding reimbursement for COVID-19 oral antiviral products. 	January 1, 2024
<i>Section 17.4.4.1 – Paxlovid Reimbursement for Pharmacist Services (NEW!)</i>	<ul style="list-style-type: none"> Added information regarding reimbursement for pharmacist services on a medical claim. 	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@primetherapeutics.com.