



The monthly bulletin consists of alerts and notices posted to the [Bulletin & News](#) page on the Medi-Cal Rx Web Portal. Sign up for the [Medi-Cal Rx Subscription Service](#) to be notified when new information is posted.

1. [Changes to the Medi-Cal Rx Contract Drugs List](#)
2. [Changes to the Medi-Cal Rx Contract Drugs List – Authorized Drug Manufacturer Labeler Codes](#)
3. [Changes to the Medi-Cal Rx Contract Drugs List – Over-the-Counter Drugs and Cough/Cold Preparations](#)
4. [Changes to the Medi-Cal Rx Pharmacy Reimbursable Physician Administered Drugs](#)
5. [Updates to the Medi-Cal Rx Provider Manual](#)
6. [30-Day Countdown: Implementation of Reject Code 80](#)
7. [Removal of Code I Restrictions for Medical Supplies](#)
8. [Diabetic Test Strips and Lancets: Updates to the Code I Diagnosis and Quantity Limit Restrictions](#)
9. [Opill® Available Over-the-Counter Under Medi-Cal Rx Prescription](#)
10. [Medi-Cal Rx Secured Provider Portal Password Criteria Update](#)
11. [Medi-Cal Rx Learning Management System Migration](#)
12. [Medi-Cal Rx Email Domains, Mailboxes, and Meeting Links Transitioning to Prime Therapeutics](#)
13. [Pharmacy Claim Mass Adjustments: New Resources](#)
14. [Mass Adjustment for Disposable Insulin Delivery Devices for Impacted Claims Submitted January 1, 2022, through March 31, 2022](#)
15. [Mass Adjustment for COVID-19 Antigen Tests for Impacted Claims Submitted on February 1, 2022](#)
16. [Mass Adjustment for COVID-19 Vaccine Incentive Fee for Impacted Claims Submitted February 1, 2022, through March 31, 2022](#)
17. [Updates to Paper Checks and Remittance Advices](#)

1. Changes to the Medi-Cal Rx Contract Drugs List

The below changes have been made to the [Medi-Cal Rx Contract Drugs List](#) posted to the Medi-Cal Rx Web Portal, effective May 1, 2024.

Drug Name	Description	Effective Date
Cabergoline	Added to the Contract Drugs List (CDL).	May 1, 2024
Doxycycline Monohydrate	75 mg capsules end-dated.	May 1, 2024
Hydrocortisone	Additional formulation (suppository) added to the CDL.	May 1, 2024
Ibrutinib	560 mg tablets end-dated.	May 1, 2024
Insuline Aspart	Labeler restriction added.	May 1, 2024
Insulin Aspart Protamine Suspension/Insulin Aspart (rDNA Origin)	Labeler restriction added.	May 1, 2024
Lithium Carbonate	Additional strengths (150 mg capsule and 450 mg ER tablet) added to the CDL.	May 1, 2024
Minoxidil	Added to the CDL.	May 1, 2024
Mirtazapine	Additional strength (7.5 mg) added to the CDL.	May 1, 2024
Omacetaxine Mepesuccinate	End-dated.	May 1, 2024
Penicillin G Benzathine	Additional formulation (powder for injection) added to the CDL.	May 1, 2024
Progesterone	Additional formulation (capsules, micronized) added to the CDL.	May 1, 2024
Saquinavir Mesylate	End-dated.	May 1, 2024
Saxagliptin/Metformin HCL Extended-Release	Labeler restriction removed.	May 1, 2024
Selenium Sulfide	Added to the CDL.	May 1, 2024

2. Changes to the Medi-Cal Rx Contract Drugs List – Authorized Drug Manufacturer Labeler Codes

The below changes have been made to the [Medi-Cal Rx Contract Drugs List – Authorized Drug Manufacturer Labeler Codes](#) with their respective effective dates and posted to the Medi-Cal Rx Web Portal.

Labeler Code Additions:

NDC Labeler Code	Contracting Company's Name	Effective Date
25357	GLAUKOS CORPORATION	April 1, 2024
74157	INA PHARMACEUTICS INC.	April 1, 2024
82644	PHARMAKA GENERICS INC.	April 1, 2024
81520	PHATHOM PHARMACEUTICALS, INC.	April 1, 2024
80789	PYROS PHARMACEUTICALS	April 1, 2024
82448	SPRINGWORKS THERAPEUTICS, INC.	April 1, 2024
83148	THE J. MOLNER COMPANY LLC	April 1, 2024

Labeler Code Terminations:

NDC Labeler Code	Contracting Company's Name	Effective Date
77530	IMPEL PHARMACEUTICALS	April 1, 2024
18860	JAZZ PHARMACEUTICALS, INC.	April 1, 2024

3. Changes to the Medi-Cal Rx Contract Drugs List – Over-the-Counter Drugs and Cough/Cold Preparations

The below changes have been made to the [Medi-Cal Rx Contract Drugs List – Over-the-Counter Drugs and Cough/Cold Preparations](#) posted to the Medi-Cal Rx Web Portal, effective May 1, 2024.

Drug Name	Description	Effective Date
Calcium Polycarbophil	Added to the Contract Drugs List (CDL).	May 1, 2024
Lidocaine	Added to the CDL.	May 1, 2024
Magnesium Citrate	Added to the CDL.	May 1, 2024

4. Changes to the Medi-Cal Rx Pharmacy Reimbursable Physician Administered Drugs

The below changes have been made to the [Medi-Cal Rx Pharmacy Reimbursable Physician Administered Drugs](#) posted to the Medi-Cal Rx Web Portal, effective May 1, 2024.

Drug Name	Description	Effective Date
Beremagene geperpavec-svdt	Added to Pharmacy Reimbursable Physician Administered Drugs with prior authorization (PA) required.	May 1, 2024

5. Updates to the Medi-Cal Rx Provider Manual

The updates/additions below have been made to the [Medi-Cal Rx Provider Manual](#) version 18.0.

Updates

Section	Update Description	Effective Date
<i>Section 11.1 – Code I Restrictions</i>	<ul style="list-style-type: none"> Removed “type of illness” and replaced with “diagnosis.” Removed language referencing <i>Medi-Cal Rx Provider Manual</i> sections. Refined language pertaining to requirements that have not been met. 	May 1, 2024
<i>Section 13.0 – Medical Supplies</i>	<ul style="list-style-type: none"> Refined opening paragraph. Added language “Claims must be submitted with the Medi-Cal Rx 11-digit billing number, or NDC-like number, which is printed on each package (box). Products dispensed must be an exact match to a Medi-Cal Rx billing code in a list and the Medi-Cal Rx billing code submitted on the pharmacy claim submitted on the pharmacy claim menu.” Added bullet “Common household items and articles of clothing are not covered (CCR, Title 22, Section 51320).” Added “Medi-Cal Rx” to “Covered Disposable Outpatient Medical Supplies” header. 	May 1, 2024

Section	Update Description	Effective Date
	<ul style="list-style-type: none"> • Removed bullet “Sterile Syringes with Needles (non-insulin) – Effective January 1, 2024, sterile syringes with needles (non-insulin) are no longer restricted to a covered list. Quantity limits and frequency restrictions will apply.” • Removed “Note: Medicare covers some medical supplies for diabetes. When Medicare covers an item and the beneficiary is eligible for Medicare Part B, providers should bill Medicare before billing Medi-Cal Rx. Refer to <i>Section 10.0 – Coordination of Benefits (COB)</i> for additional information.” • Removed verbiage “(Effective January 1, 2024)” from “Sterile Syringes with Needles” bullet. • Added “Billing Requirements for Dual Covered Medicare Part B and Medi-Cal Members” header and language. 	
<p><i>Section 13.1 – Diabetic Supplies - Test Strips and Lancets</i></p>	<ul style="list-style-type: none"> • Refined pre-existing language throughout section. • Added “Prescription Requirements” header and language. • Added “Billing Requirements” header and language. • Refined “Quantity and Frequency Limits for Test Strips and Lancets” and added Table of Accepted Pregnancy-Related Diagnosis International Classification of Disease – 10th Revision (ICD-10) Codes. • Added “Test Strips and Lancets PA Request Requirements” header and language. 	<p>May 1, 2024</p>

Section	Update Description	Effective Date
<p><i>Section 13.2 – Diabetic Supplies – Self-Monitoring Blood Glucose Systems (Glucometers) , Control Solutions, and Lancing Devices</i></p>	<ul style="list-style-type: none"> • Refined pre-existing language throughout section. • Removed “Claims are restricted to the...” • Added “Contracted.” • Refined “Prescription Requirements” language. • Added “Quantity and Frequency Limits” header and language. 	<p>May 1, 2024</p>
<p><i>Section 13.5 – Personal Home Blood Pressure Monitoring Devices and Blood Pressure Cuffs</i></p>	<ul style="list-style-type: none"> • Refined pre-existing language throughout section. • Added “Billing Requirements” header and language. • Removed language “A Code I diagnosis of any ICD-10-CM diagnosis code that justifies medical necessity for cardiovascular monitoring for a chronic condition or on a regular basis is required; documentation in the electronic file or on the prescription is required.” • Added “Non-Contracted Products” and refined pre-existing language. 	<p>May 1, 2024</p>
<p><i>Section 14.1 – PA Request Overview</i></p>	<ul style="list-style-type: none"> • Removed verbiage “(or the next business day if request is received after-hours).” 	<p>May 1, 2024</p>
<p><i>Section 15.1.2 – Medical Supplies Dispensing Quantity Limitations</i></p>	<ul style="list-style-type: none"> • Updated language throughout section. • Removed Code I restriction verbiage throughout table. • Removed lookback policy verbiage throughout table. 	<p>May 1, 2024</p>
<p><i>Section 15.8.1 – Coverage</i></p>	<ul style="list-style-type: none"> • Refined pre-existing language throughout section. • Added sentence “Medi-Cal Rx claim UM edits may apply for PADs found on these lists.” • Removed sentence “Claims submitted to Medi-Cal Rx for PADs are subject to PA request requirements.” 	<p>May 1, 2024</p>

Section	Update Description	Effective Date
	<ul style="list-style-type: none"> Removed verbiage "PA request requirements" and replaced with "UM edits." 	
<p><i>Section 15.8.2 – Reject Code 816</i></p>	<ul style="list-style-type: none"> Removed verbiage "Drugs found in <i>Appendix H – List of Physician Administered Drugs (PADs) with Reject Code 816</i> will reject..." Added sentence "Medi-Cal Rx will deny claims for PADs that should be submitted as a medical claim to the member's respective MCP or through the Medi-Cal fee-for-service delivery system when applicable." Removed sentence "Claims denying with Reject Code 816 should be submitted as a medical claim to the member's respective MCP or through the Medi-Cal fee-for-service delivery system as applicable." 	<p>May 1, 2024</p>
<p><i>Section 15.10 – Intravenous or Intra-Arterial Solutions</i></p>	<ul style="list-style-type: none"> Refined pre-existing language throughout section. Added verbiage "Note: Claims submitted to Medi-Cal Rx for a parenteral nutrition solution dispensed within 10 days following inpatient discharge can be submitted using SCC 57 – Discharge Medication for a 10-day supply. Providers may submit a PA request with clinical rationale establishing medical necessity for coverage considerations for a days' supply exceeding 10 days." 	<p>May 1, 2024</p>
<p><i>Appendix H – List of Physician Administered Drugs (PADs) with Reject Code 816</i></p>	<ul style="list-style-type: none"> Appendix removed. 	<p>May 1, 2024</p>

6. 30-Day Countdown: Implementation of Reject Code 80

Background

The purpose of this alert is to notify pharmacy providers and prescribers that Medi-Cal Rx will implement claim utilization management (UM) edits for **Reject Code 80 – Diagnosis Code Submitted Does Not Meet Drug Coverage Criteria** for members 22 years of age and older on April 30, 2024.

Members 21 years of age and younger will not be impacted at this time.

What Pharmacy Providers and Prescribers Need to Know

Effective April 30, 2024, Medi-Cal Rx will implement claim UM edits for Code I diagnosis restriction (Reject Code 80) for members 22 years of age and older. If the Code I diagnosis requirement is not met, claims submitted to Medi-Cal Rx will deny with Reject Code 80 with the following supplemental message: *"Code I Restriction: requires a valid ICD-10 diagnosis code or Submission Clarification Code = 7."*

Prescription documentation requirements apply to Code I diagnosis restricted drugs. Prescribers and pharmacy providers must document the treatment diagnosis and keep that information readily available for auditing purposes.

Code I drugs are subject to the prescription documentation requirements in *California Code of Regulations (CCR), Title 22, Section 51476(c)*. Refer to CCR, Title 22, Section 51313.3(b).

What Pharmacy Providers and Prescribers Need to Do

Prescribers and pharmacy providers may identify Code I diagnosis restricted drugs and the Medi-Cal Rx accepted diagnosis by reviewing the following resources:

- Refer to the [Medi-Cal Rx Diagnosis Crosswalk](#) to identify accepted diagnosis or International Classification of Disease – 10th Revision (ICD-10) code(s) to meet the Code I diagnosis restriction.
- Refer to the Medi-Cal Rx Contract Drugs Lists to identify the drugs with Code I diagnosis restrictions by navigating to the [Contract Drugs & Covered Products Lists](#) page on the [Medi-Cal Rx Web Portal](#).

Prescribers

Prescribers have the following options to demonstrate that the diagnosis restriction is met:

- Provide a diagnosis or ICD-10 code(s) with the prescription.
- Provide a diagnosis or ICD-10 code(s) communicated verbally to the pharmacy provider.

- » Prescribers are encouraged to provide multiple diagnoses, when medically appropriate, as applicable to the drug/product. This will assist the claim adjudication process.
- » For members newly diagnosed with a condition, there will be a delay in the diagnosis code being added to the member's medical record. Prescribers are encouraged to provide the diagnosis or ICD-10 code with the prescription.

- Submit a prior authorization (PA) request via an approved Medi-Cal Rx submission method establishing the Code I diagnosis restriction is met or establishing medical necessity for an alternate diagnosis.

Pharmacy Providers

Pharmacy providers have the option to attest the diagnosis restriction is met or submit a PA request.

- Attest the diagnosis restriction is met via one of the following options:
 - ICD-10 Attestation
 - If the pharmacy software requires resolution with an ICD-10 code, the pharmacy provider should enter the appropriate ICD-10 code related to the diagnosis (diagnosis confirmed by the member, prescriber, or other source of knowledge with the diagnosis).
 - Submission clarification code (SCC) 7 Attestation
 - The dispensing pharmacy provider may also attest the Code I restriction is met by using SCC 7 – Medically Necessary to manage claims submitted for Code I restricted drugs with a diagnosis/type of illness restriction when an ICD-10 code is not available (diagnosis confirmed by the member or other source of knowledge with the diagnosis).
- Submit a PA request via an approved Medi-Cal Rx submission method establishing the Code I diagnosis restriction is met or establishing medical necessity for an alternate diagnosis.

Prior Authorization Requests

Prescribers and pharmacy providers may submit a PA request using one of the following approved Medi-Cal Rx submission methods:

- [CoverMyMeds®](#)
- [Medi-Cal Rx Secured Provider Portal](#)
- NCPDP P4 Transaction
- Fax
- U.S. Mail

Note: Refer to the *Prior Authorization Request Overview, Request Methods, and Adjudication* section in the [Medi-Cal Rx Provider Manual](#) for information on the methods available to submit a PA request.

Resources

- [Medi-Cal Rx Diagnosis Crosswalk](#)
- [Contract Drugs & Covered Products Lists](#) page on the [Medi-Cal Rx Web Portal](#)
- [NCPDP Payer Specification Sheet](#)
- [Medi-Cal Rx Provider Manual](#)
- [Prior Authorization Submission Reminders](#)

7. Removal of Code I Restrictions for Medical Supplies

Background

The purpose of this alert is to inform pharmacy providers and prescribers of the removal of Code I diagnosis restrictions from Medi-Cal Rx covered outpatient disposable medical supplies, effective April 30, 2024.

What Pharmacy Providers and Prescribers Need to Know

Effective April 30, 2024, Code I diagnosis restrictions have been removed for the following medical supplies:

- Glucose, Urine, and Ketone Test Strips
- Lancets
- Self-Monitoring Blood Glucose Systems (Glucometers)
- Glucometer Control Solutions
- Lancing Devices
- Syringes, Insulin U-500
- Blood Pressure Monitors and Cuffs

Resources

For additional information about these products and Code I restrictions, refer to the following resources:

- [List of Covered Medical Supplies Product Descriptions and Billing Information](#)
- [Medi-Cal Rx Contract Drugs Lists](#)
- [Medi-Cal Rx Provider Manual](#)

8. Diabetic Test Strips and Lancets: Updates to the Code I Diagnosis and Quantity Limit Restrictions

Background

Medi-Cal Rx has revised the Code I diagnosis and Quantity Limit (QL) restrictions as it pertains to diabetic test strips and lancets. Effective April 30, 2024, the Code I diagnosis requirement of diabetes has been removed from both diabetic test strips and lancets. In addition, a system change will occur to capture insulin use from historical claims data as it applies to the QL restrictions for these products.

What Pharmacy Providers Need to Know

Prescription documentation requirements pertaining to a Code I diagnosis of diabetes and insulin use will not be required on and after April 30, 2024. Medi-Cal Rx coverage of diabetic test strips and lancets is restricted to contracted products found on the [List of Covered Disposable Insulin Delivery Devices](#), which can be found by visiting the [Forms & Information](#) page on the [Medi-Cal Rx Provider Portal](#). Product addition or inclusion on the *List* does not guarantee supply or individual specific coverage. These products will be subject to QL restrictions as follows:

- A maximum of one per day of each product type (one blood glucose test strip or one lancet) for a member not using insulin and no pregnancy-related diagnosis; **or**
- A maximum of six per day of each product type (six blood glucose test strips or six lancets) for members meeting one of the following situations:
 - The member has historical paid claims data for insulin with Medi-Cal Rx.
 - **Note:** If the member is a new-start to insulin, pharmacy providers should submit the insulin claim first, then submit claims for diabetic test strips or lancets. This will ensure the claim is subject to the appropriate QL.
 - The member has a pregnancy-related diagnosis requiring blood glucose (BG) monitoring in their medical record with their medical benefit.
 - **Note:** Members with pregnancy-related diagnoses requiring BG monitoring may continue to receive a maximum of six per day of each product during the pregnancy and up to 12 months postpartum.
 - The pharmacy provider includes one of the following pregnancy-related diagnosis ICD-10 Codes at time of submitting diabetic test strips and lancet claims:

ICD 10 Code	Diagnosis
O09	Supervision of high-risk pregnancy
O10-O16	Edema, proteinuria, and hypertensive disorders in pregnancy, childbirth, and the puerperium
O20-O29	Other maternal disorders predominantly related to pregnancy

ICD 10 Code	Diagnosis
O99	Other maternal diseases classifiable elsewhere but complicating pregnancy, childbirth, and the puerperium
Z34	Encounter for supervision of normal pregnancy

A prior authorization (PA) request establishing medical necessity is required for coverage considerations for claims submitted to Medi-Cal Rx for quantities exceeding the QL requirements as mentioned above.

9. Opill® Available Over-the-Counter Under Medi-Cal Rx Prescription

Background

The purpose of this alert was to inform pharmacy providers and prescribers about the addition of the over-the-counter (OTC) oral contraceptive, Opill® (norgestrel 0.075 mg), to the [Medi-Cal Rx Contract Drugs List](#) and [Medi-Cal Rx Family Planning, Access, Care, and Treatment Pharmacy Formulary](#).

What Pharmacy Providers and Prescribers Need to Know

The U.S. Food and Drug Administration (FDA) has approved the OTC oral contraceptive, Opill (norgestrel 0.075 mg) tablets as the first daily oral contraceptive available over-the-counter or without a prescription requirement. Medi-Cal members can receive Opill from a Medi-Cal enrolled pharmacist who furnishes self-administered hormonal contraception under a [protocol](#) in accordance with California Law (CCR 1746.1 and BPC 4052.3). Prior to dispensing these self-administered medications, a pharmacist is required to provide the Medi-Cal member with a self-screening patient intake form. If the pharmacist deems the selected medication is appropriate, they will provide counseling including direction for self-administered usage, potential risks associated with medications, and risk for HIV and other sexually transmitted infections. Medi-Cal members are encouraged to self-screen at minimum every 12 months, and pharmacists shall notify the Medi-Cal member's primary care provider after dispensing the medication. If the Medi-Cal member does not have a primary care provider, the pharmacist can provide a written record of the medication that was furnished to the Medi-Cal member. Medi-Cal enrolled pharmacies are encouraged to have pharmacists register as Ordering, Rendering, and Prescribing (ORP) providers to be eligible for contraceptive furnishing services to ensure access for Medi-Cal members.

Alternatively, Opill is available through Medi-Cal Rx without a prior authorization (PA), but a prescription is required.

Note: The update is reflected in the April 1, 2024, publications of the [Medi-Cal Rx Contract Drugs List – Over-the-Counter Drugs and Cough/Cold Preparations](#) and [Medi-Cal Rx Family Planning, Access, Care, and Treatment Pharmacy Formulary](#).

10. Medi-Cal Rx Secured Provider Portal Password Criteria Update

Background

The purpose of this alert was to inform Medi-Cal Rx Secured Provider Portal users that on March 26, 2024, Medi-Cal Rx enhanced program integrity and security by requiring stronger password criteria for access to the [Medi-Cal Rx Secured Provider Portal](#). This Portal contains the following applications: Medi-Cal Rx Finance Portal, Prior Authorization (PA) Request Submission, Web Claims Submission, Cornerstone Learning Management System (LMS), Secured Chat and Messaging, Batch Claims Information, and Member Eligibility Lookup.

What Medi-Cal Rx Secured Provider Portal Users Need to Know

Beginning March 26, 2024, Medi-Cal Rx Secured Provider Portal passwords that do not meet the following requirements must be updated, and Medi-Cal Rx Secured Provider Portal users will be prompted to do so upon their attempt to log in.

Users are required to update their Medi-Cal Rx Secured Provider Portal passwords so that they meet the following criteria:

- Between 12 and 30 characters long
- At least one lower case character (a-z)
- At least one upper case character (A-Z)
- At least one numeric or special character
 - Allowed special characters are (!#\$%()*+ ,./:;?@[]_{}~)
- Maximum of two consecutive repeating characters
- Not the same as the last 13 passwords

If your current password meets the above criteria,
no action is required.

What Medi-Cal Rx Secured Provider Portal Users Need to Do

Medi-Cal Rx Secured Provider Portal users should plan ahead and reset their password to meet the new password criteria prior to March 26, 2024, to avoid any log in issues.

Use the following steps to reset your Medi-Cal Rx Secured Provider Portal password:

1. On the [Medi-Cal Rx Secured Provider Portal](#) Log In page, select **Need help signing in?** to initiate the password reset process. See *Figure 1*.

The image shows a 'Log In' form. At the top, it says 'Log In' in bold. Below that, it says 'Please log in with your email address and password.' There are two input fields: 'Email' and 'Password'. Below the input fields is a blue button labeled 'Login'. At the bottom, there is a link that says 'Need help signing in?' which is highlighted with a red box.

Figure 1

2. Select **Forgot your password**. See *Figure 2*.

The image shows a 'Log In' form. At the top, it says 'Log In' in bold. Below that, it says 'Please log in with your email address and password.' There are two input fields: 'Email' and 'Password'. Below the input fields is a blue button labeled 'Login'. At the bottom, there is a link that says 'Need help signing in?' and another link that says 'Forgot your password?' which is highlighted with a red box.

Figure 2

3. Type your email address or username, then select reset via email to reset the password. See *Figure 3*.

The image shows a 'Reset Password' form. At the top, it says 'Log In' in bold. Below that, it says 'Reset Password'. There is one input field labeled 'Email or Username'. Below the input field is a blue button labeled 'Reset via Email'. At the bottom, there is a link that says 'Back to sign in'.

Figure 3

4. Follow the provided prompts to reset your password using the new password criteria listed above.

11. Medi-Cal Rx Learning Management System Migration

Background

As a result of Prime Therapeutics' acquisition of Magellan Rx, a series of transitions for Medi-Cal Rx users was scheduled for the first half of 2024, as previously announced in the alert titled [Upcoming Transitions for Medi-Cal Rx Applications](#). As part of this migration, on Tuesday, March 26, 2024, the Medi-Cal Rx Learning Management System (LMS) was replaced with a new application on the Prime Therapeutics platform.

What Pharmacy Providers and Prescribers Need to Know

On March 26, 2024, Medi-Cal Rx's current LMS, SabaSM, was deactivated and replaced with a new LMS, Cornerstone, on Prime Therapeutics' system. Users can access the same resources that were available in Saba and can continue to use the Medi-Cal Rx Secured Provider Portal to access the LMS.

What Pharmacy Providers and Prescribers Need to Do

No action is required of users at this time. After the transition, refer to the [Education & Outreach](#) page of the [Medi-Cal Rx Web Portal](#) and select **Medi-Cal Rx Training** for additional information and resources regarding Cornerstone.

12. Medi-Cal Rx Email Domains, Mailboxes, and Meeting Links Transitioning to Prime Therapeutics

Background

As a result of Prime Therapeutics' acquisition of Magellan Rx, a series of application transitions was scheduled for the first half of 2024, as previously announced in the alert titled [Upcoming Transitions for Medi-Cal Rx Applications](#). Transitions include changes to some email address domains, including the Medi-Cal Rx Education & Outreach (E&O) mailbox.

What Pharmacy Providers and Prescribers Need to Know

- On Monday, March 25, 2024, at 12 a.m. PT, **all Magellan Medicaid Administration, LLC (MMA) Medi-Cal Rx email addresses transitioned to the Prime Therapeutics domain "@primetherapeutics.com."** For example, the updated Medi-Cal Rx Education & Outreach Inbox is now MediCalRxEducationOutreach@primetherapeutics.com.
 - **Note:** Providers should utilize the existing email address MediCalRxEducationOutreach@magellanhealth.com through March 24, 2024.

- MMA individual email addresses also transitioned to @primetherapeutics.com and new usernames will vary. Refer to the automatic reply messages to ensure accuracy of individual email addresses. A previous email would appear as LastNameFirstInitial@magellanhealth.com. New email addresses will appear as **FirstName.LastName@primetherapeutics.com**.
- Medi-Cal Rx Zoom meetings transitioned and are now hosted on the Microsoft Teams platform. New links have been provided as applicable.
- Beginning March 29, 2024, the Medi-Cal Rx E&O Reinstatement Webinar that is held on Fridays from 12 p.m. to 1 p.m. PT will utilize the new link: [Medi-Cal Rx E&O Reinstatement Webinar](#).

Individual and shared Medi-Cal Rx mailbox email domains ending in @dhcs.ca.gov are not impacted by this transition.

What Pharmacy Providers and Prescribers Need to Do

1. Remove @magellanhealth.com email addresses from your AutoComplete cache in Outlook:
 - a. Open **Outlook**.
 - b. On the Home tab, click **New Email**.
 - c. In the To: field, type the first three characters of the cached name to trigger the AutoComplete feature.
 - d. Highlight the name or email address by hovering over it or using the Down Arrow key.
 - e. Press **Delete (X)** to remove the AutoComplete entry.
2. Effective 12 a.m. PT on Monday, March 25, 2024, providers should send their email inquiries using the updated domain, @primetherapeutics.com.

Beginning March 25, 2024, use the following email address to contact Medi-Cal Rx E&O:

MediCalRxEducationOutreach@primetherapeutics.com

13. Pharmacy Claim Mass Adjustments: New Resources

Background

Beginning in March 2024, Medi-Cal Rx started processing pharmacy claim mass adjustments for pharmacy claims that required reprocessing to reflect the Department of Health Care Services (DHCS) policies. Each pharmacy claim mass adjustment initiative will be announced via an alert published on the [Bulletins & News](#) page of the [Medi-Cal Rx Web Portal](#) prior to commencement of the adjustment.

What Pharmacy Providers Need to Know

On March 29, 2024, Medi-Cal Rx added a new Mass Adjustment tab on the Medi-Cal Rx Web Portal. This new resource tab hosts informational notifications about each mass adjustment initiative. Notifications provide applicable details such as the time period of impacted claims, the impacted NDCs, and the reason for the adjustment, and also describe the remittance advice (RA) information for each mass adjustment initiative. Users can access this tab by navigating to the [Forms & Information](#) page on the [Medi-Cal Rx Provider Portal](#), then selecting the **Mass Adjustment** tab.

14. Mass Adjustment for Disposable Insulin Delivery Devices for Impacted Claims Submitted January 1, 2022, through March 31, 2022

Background

The purpose of this alert was to inform pharmacy providers that Medi-Cal Rx initiated a mass adjustment related to disposable insulin delivery devices (DIDDs) for claims submitted on or after January 1, 2022.

What Pharmacy Providers Need to Know

Medi-Cal Rx identified a claims processing issue affecting a select number of claims submitted on or after January 1, 2022, for DIDDs with NDCs 8508112005, 8508200005, 8560940001, 8560940002, and 8560940003. For these DIDD claims, the Medi-Cal Rx reimbursement calculation used an incorrect maximum allowable product cost (MAPC) price which may have resulted in an incorrect provider reimbursement. Medi-Cal Rx MAPC prices for these DIDDs were updated on April 28, 2022, to correctly calculate DIDD claims per the Department of Health Care Services' (DHCS) policy.

Medi-Cal Rx has identified the impacted net paid claims and will be adjusting these claims on providers' behalf which may result in an amount owed to you, an amount you owe DHCS, or no net change to the amount you were already reimbursed. Medi-Cal Rx will complete the claim adjustments in stages over the next several months.

Adjustments have been made for some of the impacted claims submitted January 1, 2022, through March 31, 2022, and appeared on the March 29, 2024, remittance advice (RA). Adjustments for the remaining claims submitted January 1, 2022, through March 31, 2022, and for claims submitted on or after April 1, 2022, will be processed at a later date and a separate alert will be published when the next adjustment commences.

What Pharmacy Providers Need to Do

No action is required by providers at this time.

Adjustments for the impacted claims submitted January 1, 2022, through March 31, 2022, have been included on the March 29, 2024 RA. On the RA, impacted providers will see a reversal of

the original claim and a new claim processed (same member, Rx number, date of service, NDC, etc.) to reflect the adjustment.

For more information about this and future mass adjustment activities, refer to the Mass Adjustment tab located on the [Forms & Information](#) page on the [Medi-Cal Rx Provider Portal](#). This new resource offers detailed information about each mass adjustment.

15. Mass Adjustment for COVID-19 Antigen Tests for Impacted Claims Submitted on February 1, 2022

Background

The purpose of this alert was to inform pharmacy providers that Medi-Cal Rx initiated a mass adjustment related to COVID-19 antigen tests for claims submitted on February 1, 2022.

What Pharmacy Providers Need to Know

Medi-Cal Rx identified a claims processing issue affecting a select number of claims submitted on February 1, 2022, related to COVID-19 antigen tests with NDCs 11877001140, 50010022431, 56362000589, 82607066026, and 82607066027. These COVID-19 antigen test claims were paid incorrectly due to an issue identified in the reimbursement calculation. The Medi-Cal Rx claim reimbursement calculation was updated on February 1, 2022, at 11:57 a.m. PT, to correctly calculate the reimbursement for the COVID-19 antigen test claims per the Department of Health Care Services' (DHCS) policy; however, claims submitted prior to the correction require an adjustment.

Medi-Cal Rx has identified the impacted net paid claims and will be adjusting these claims on providers' behalf which may result in an amount owed to you, an amount you owe DHCS, or no net change to the amount you were already reimbursed. Medi-Cal Rx will complete the claim adjustments in stages over the next several months.

Adjustments have been made for some of the impacted claims that were submitted on February 1, 2022, and appeared on the March 29, 2024, remittance advice (RA). A separate alert will be published when the next adjustment commences for the remainder of the impacted claims submitted on February 1, 2022.

What Pharmacy Providers Need to Do

No action is required by providers at this time.

Adjustments for some of the impacted claims submitted on February 1, 2022, have been included on the March 29, 2024 RA. On the RA, impacted providers will see a reversal of the original claim and a new claim processed (same member, Rx number, date of service, NDC, etc.) to reflect the adjustment.

For more information about this and future mass adjustment activities, refer to the Mass Adjustment tab located on the [Forms & Information](#) page on the [Medi-Cal Rx Provider Portal](#). This new resource offers detailed information about each mass adjustment.

16. Mass Adjustment for COVID-19 Vaccine Incentive Fee for Impacted Claims Submitted February 1, 2022, through March 31, 2022

Background

The purpose of this alert was to inform pharmacy providers that Medi-Cal Rx initiated a mass adjustment related to COVID-19 vaccine incentive fees for claims submitted on or after February 1, 2022.

What Pharmacy Providers Need to Know

Medi-Cal Rx identified a claims processing issue affecting a select number of claims submitted on or after February 1, 2022, for COVID-19 vaccines with NDCs 59267105501, 59267105504, and 80777027599 where a submission clarification code (SCC) of 7 or 10 was submitted with the claim. For these claims, the \$40.00 incentive fee was not included in the reimbursement calculation. Medi-Cal Rx claim reimbursement calculation was updated on May 8, 2022, to correctly calculate the COVID-19 Incentive Fee calculation per the Department of Health Care Services' (DHCS) policy.

Medi-Cal Rx has identified the impacted net paid claims and will be adjusting these claims on providers' behalf to correctly reimburse for the allowed incentive fee up to \$40.00. Medi-Cal Rx will complete the claim adjustments in stages over the next several months.

Adjustments have been made for some of the impacted claims submitted February 1, 2022, through March 31, 2022, and appeared on the March 29, 2024, remittance advice (RA). Adjustments for the remaining claims submitted February 1, 2022, through March 31, 2022, and for claims submitted on or after April 1, 2022, will be processed at a later date and a separate alert will be published when the next adjustment commences.

What Pharmacy Providers Need to Do

No action is required by providers at this time.

Adjustments for the impacted claims submitted February 1, 2022, through March 31, 2022, have been included on the March 29, 2024 RA. On the RA, impacted providers will see a reversal of the original claim and a new claim processed (same member, Rx number, date of service, NDC, etc.) to reflect the adjustment. For instances where Medi-Cal Rx determined the claim reimbursement to be correct, no changes will be reflected on your RA.

For more information about this and future mass adjustment activities, refer to the Mass Adjustment tab located on the [Forms & Information](#) page on the [Medi-Cal Rx Provider Portal](#). This new resource offers detailed information about each mass adjustment.

17. Updates to Paper Checks and Remittance Advices

Background

The purpose of this alert was to notify pharmacy providers of the format changes to Medi-Cal Rx paper checks and remittance advices (RAs). Planned changes will not impact the content of the information provided or when pharmacy providers receive their check and/or RA.

What Pharmacy Providers Need to Know

Effective March 22, 2024, Medi-Cal Rx paper checks and RAs will be mailed from Pennsylvania instead of Missouri. This does **not** impact when pharmacy providers receive their check and/or RA.

There are also changes to the appearance of Medi-Cal Rx paper checks and RAs, including:

- Font has been changed on checks and coversheets from Arial or Courier to Helvetica.
- Barcode has been replaced with a two-dimensional (2D) barcode. Refer to *Figure 1* and *Figure 2*.



Figure 1: Original Barcode



Figure 2: New 2D Barcode

- Name and address in the envelope window display have been shifted to accommodate the 2D barcode.
- RA margins have been increased, and the content was scaled at 95 percent to accommodate the 2D barcode. This will not impact the information provided.

- » No action is required of pharmacy providers.
- » Medi-Cal Rx Electronic Data Interchange (EDI) 835 files are not impacted by this update.
- » The RA PDFs available on the Medi-Cal Rx Finance Portal provided before the March 22, 2024, Medi-Cal Rx payment release date remain unchanged.

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 questions regarding checks and/or RAs, pharmacy providers can contact the Medi-Cal Rx Finance Portal Support Team via the following methods:

- Send an email to MediCalRxFinancePortalSupport@primetherapeutics.com.
- Call the Medi-Cal Rx Customer Service Finance Portal Support Team at 1-800-977-2273, select **Option 2**, enter your NPI, and then select **Option 3** for Checkwrite.

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