



How to Resolve Reject Code 16 – M/I Prescription/Service Reference Number

November 4, 2024; Updated December 2, 2024

Background

The purpose of this alert is to assist pharmacy providers in resolving **Reject Code 16 – M/I Prescription/Service Reference Number**. As announced in the alert titled [Activation of Reject Code 16 – Medi-Cal Rx Program Integrity Update](#), utilization management (UM) claim edit Reject Code 16 will be applied to all claims for members of all ages, beginning November 6, 2024.

What Pharmacy Providers Need to Know

Claims will deny with Reject Code 16 when a single pharmacy provider submits a claim for a member with a paid claim in history for the same prescription number and/or fill number. Review the [Activation of Reject Code 16 – Medi-Cal Rx Program Integrity Update](#) alert for more information.

What Pharmacy Providers Need to Do

If a claim is denied with Reject Code 16, verify the following prescription information:

- Member information (name and date of birth)
- Prescription (Rx) number
- Fill number
- Same drug/product as previously dispensed

Once the information is verified, complete one of the following actions, as appropriate:

1. If the claim is for a refill (same member, same prescription number, and same drug/product), resubmit the claim with a new fill number.
2. If the claim is for a different member or different drug/product, resubmit the claim with a new prescription number.

Example Scenarios

Review the following resolution information for commonly encountered scenarios where two claims are submitted by the same pharmacy National Provider Identifier (NPI) within 365 days:

Scenario	Claim #1 Details	Claim #2 Details	Resolution
Scenario #1: <ul style="list-style-type: none"> • Same Rx/Service Reference Number • Same or Different Fill Number • Different Member • Same Drug/Product 	Rx Number: 12345 Fill Number: 00 Member: John A Smith Drug/Product: ABC Status: Claim Paid	Rx Number: 12345 Fill Number: 01 Member: Jane B Doe Drug/Product: ABC Status: Reject Code 16	Resubmit Claim #2 using a new Rx number.
Scenario #2: <ul style="list-style-type: none"> • Same Rx/Service Reference Number • Same or Different Fill Number • Same Member • Different Drug/Product 	Rx Number: 12345 Fill Number: 00 Member: John A Smith Drug/Product: ABC Status: Claim Paid	Rx Number: 12345 Fill Number: 01 Member: John A Smith Drug/Product: DEF Status: Reject Code 16	Resubmit Claim #2 using a new Rx number.
Scenario #3: <ul style="list-style-type: none"> • Same Rx/Service Reference Number • Same Fill Number • Same Member • Same Drug/Product 	Rx Number: 12345 Fill Number: 00 Member: John A Smith Drug/Product: ABC Status: Claim Paid	Rx Number: 12345 Fill Number: 00 Member: John A Smith Drug/Product: ABC Status: Reject Code 16	Resubmit Claim #2 using the next fill number.

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.