



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.

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

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

Drug Name	Description	Effective Date
Apremilast	Additional strength (20 mg tablet) added to the <i>Medi-Cal Rx Contract Drugs List</i> (CDL) with diagnosis and labeler restrictions.	November 1, 2024
Atezolizumab Hyaluronidase-tqjs	Added to the CDL with labeler restriction.	November 1, 2024
Desonide	Added to the CDL.	November 1, 2024
Dexlansoprazole	Effective December 1, 2024: End-dated.	November 1, 2024
Imetelstat	Labeler restriction removed. Prior authorization (PA) requirement added.	November 1, 2024
Isosorbide Mononitrate	Additional formulation (tablets) added to the CDL.	November 1, 2024
Glatiramer Acetate	Added to the CDL with labeler restriction.	November 1, 2024
Nebivolol	Added to the CDL.	November 1, 2024
Paroxetine HCL	Additional formulation (controlled release tablets) added to the CDL.	November 1, 2024
Selpercatinib	Labeler restriction added and PA requirement removed from tablets.	November 1, 2024
Travoprost	Labeler restriction removed.	November 1, 2024

2. Updates to the Medi-Cal Rx Provider Manual

The updates/additions below have been made to the [Medi-Cal Rx Provider Manual](#) version 24.0.

Updates

Section	Update Description	Effective Date
<i>Section 10.1 – COB General Instructions</i>	<ul style="list-style-type: none">Refined language in the first paragraph.	November 1, 2024
<i>Section 15.9 – Pharmacy Administered Immunizations/Vaccines</i>	<ul style="list-style-type: none">Updated language regarding Vaccines For Children (VFC) pharmacy benefit.	November 1, 2024

Section	Update Description	Effective Date
<i>Section 15.9.1 – Vaccines For Children Program</i> (NEW!)	<ul style="list-style-type: none"> Added background and policy language regarding VFC pharmacy benefit. 	November 1, 2024
<i>Section 17.3 – COVID-19 Antigen Test Kits</i>	<ul style="list-style-type: none"> Removed “OTC” from the section title. Refined language in first paragraph and the first sentence under the “Policy Effective on and after October 1, 2024” header. Updated the title of a list to read, “List of Contracted COVID-19 Antigen Tests.” Added “Note: PA requests for quantities outside the allowed amounts will be denied unless ordered or administered by a pharmacy provider following an individualized clinical assessment with appropriate medical necessity demonstrated.” 	November 1, 2024
<i>Section 17.4.4 – Pempgarda™ (pemivibart)</i> (NEW!)	<ul style="list-style-type: none"> Added background and language regarding Pempgarda. 	November 1, 2024
<i>Appendix B – Directory</i>	<ul style="list-style-type: none"> Updated mailing address from “Financial Inquiries” to “Finance Department” in the “Medi-Cal Rx Customer Service Center (CSC)” row. 	November 1, 2024
<i>Appendix G – OHC Carrier Information</i>	<ul style="list-style-type: none"> Updated contact and payer information for Other Health Coverage (OHC) carriers pertaining to drug-related coverage. 	November 1, 2024

3. Justice-Involved Reentry Initiative Now Implemented in Inyo, Santa Clara, and Yuba Counties

Effective October 1, 2024, the Justice-Involved (JI) Reentry Initiative has been [implemented](#) in Inyo, Santa Clara, and Yuba counties. Refer to the [CalAIM Justice-Involved Reentry Initiative Implementation for Inyo, Santa Clara, and Yuba Counties](#) alert for more information.

Background

On January 26, 2023, California became the [first state in the nation](#) approved to offer a targeted set of Medicaid (Medi-Cal in California) services to youth and eligible adults in state prisons, county jails, and youth correctional facilities for up to 90 days prior to release. For

eligible Californians, the Initiative includes pre-release Medi-Cal enrollment strategies, Medi-Cal Rx benefits and services post-release to ensure individuals have continuity of coverage upon their release, and access to vital services to help them successfully return to their communities. Refer to the alert titled [CalAIM Justice-Involved Reentry Initiative and Medi-Cal Rx](#) for more information.

Why This Is Important

Beginning on October 1, 2024, pharmacy providers supporting the JI Reentry Initiative in approved counties can begin submitting pharmacy claims and prior authorization (PA) requests for eligible members to Medi-Cal Rx for outpatient medications, specific medical supplies, and/or enteral nutrition products that are covered under the Medi-Cal Rx pharmacy benefit.

For a list of covered products, refer to the [Contract Drugs & Covered Products Lists](#) page on the [Medi-Cal Rx Web Portal](#).

What Stakeholders Should Do

Stakeholders in approved counties are encouraged to attend the dedicated Medi-Cal Rx Office Hours. More information with dates and login details will be sent directly to stakeholders in the implemented counties.

All interested stakeholders should review the following resources to learn more about Medi-Cal Rx and the Initiative.

Medi-Cal Rx Resources

- Refer to the [Provider Application and Validation for Enrollment \(PAVE\) portal](#) for information about completing and submitting applications, reporting changes to existing enrollments, and responding to Provider Enrollment Division (PED)-initiated requests for continued enrollment or enroll revalidations.
- Visit the [Medi-Cal Rx Web Portal](#) to review a wide variety of resources and information and navigate to the [Medi-Cal Rx Provider Portal](#).
- Visit the [Education & Outreach](#) page on the [Medi-Cal Rx Web Portal](#) for resources and training materials.
- Refer to the [Forms & Information](#) page on the [Medi-Cal Rx Provider Portal](#) for reference materials and training.
- Refer to the [Medi-Cal Rx Provider Welcome Packet](#) for information about how to do business successfully with Medi-Cal Rx.
- Refer to the [Medi-Cal Rx Provider Manual](#) for Medi-Cal Rx coverage and billing policies.
 - Refer to the *PA Request Overview* section of the *Medi-Cal Rx Provider Manual* for guidelines on submitting a PA request.
 - **Note:** Effective October 1, 2024, *Appendix C* has been updated to include California Advancing and Innovating Medi-Cal (CalAIM) JI Reentry Initiative aid codes.
- For assistance with submitting PA requests through Medi-Cal Rx, review the [Five Ways to Submit a Prior Authorization Request](#) flyer.

- Refer to the YouTube video titled [Submitting a Prior Authorization \(PA\) Request via the Medi-Cal Rx Secured Provider Portal](#).
- For assistance submitting web claims through Medi-Cal Rx, review the [Medi-Cal Rx Web Claims Submission User Guide](#).
- Refer to the [Claim Submission Reminders](#) for guidelines on accurately submitting pharmacy claims.
- Refer to the [Contract Drugs & Covered Products Lists](#) page on the [Medi-Cal Rx Web Portal](#).
- Refer to the YouTube video titled [Medi-Cal Rx CDL and Approved NDC List Navigation](#).

JI Reentry Initiative Resources

- Refer to the [CalAIM Justice-Involved Reentry Initiative and Medi-Cal Rx](#) and [CalAIM Justice-Involved Reentry Initiative Implementation for Inyo, Santa Clara, and Yuba Counties](#) alerts.
- Refer to the [Justice-Involved Reentry Initiative](#) page for more information, news, and resources about the Initiative.
- Refer to the [Policy and Operational Guide for Planning and Implementing the CalAIM Justice-Involved Initiative](#) for the most current policy information.
- For information about JI medical claims, refer to the [Justice-Involved Initiative: An Overview](#) page on the DHCS website.

Sign up for the [Medi-Cal Rx Subscription Service \(MCRxSS\)](#) to receive notification of future Medi-Cal Rx alerts to your email.

4. Deactivation of Override Code “55555” for All Drugs/Products – Medi-Cal Rx Program Integrity Update

Background

The purpose of this alert is to inform pharmacy providers and prescribers that effective October 18, 2024, Medi-Cal Rx deactivated the override code “55555.” The “55555” override code will no longer be accepted for any drug/product claims. As a result, all claims will be subject to Medi-Cal Rx claim utilization management (UM) edits, and a prior authorization (PA) request submission may be required for coverage considerations.

Deactivation of the “55555” override code will impact all claims submitted to Medi-Cal Rx.

What Pharmacy Providers and Prescribers Need to Know

On November 3, 2023, Medi-Cal Rx removed override code "55555" from select drugs/products, as announced in the alert titled [Deactivation of Override Code "55555" for Select Drugs/Products – Medi-Cal Rx Program Integrity Update](#). In a continuing effort to reduce Fraud, Waste, and Abuse (FWA), Medi-Cal Rx deactivated override code "55555" for all drugs/products for members of all ages on and after October 18, 2024.

- » Pharmacy providers cannot utilize override code "55555" to override Medi-Cal Rx claim UM edits on and after October 18, 2024.
- » A PA request establishing medical necessity may be required for coverage considerations for claims submitted to Medi-Cal Rx.

What Pharmacy Providers and Prescribers Need to Do

To prepare for the deactivation of override code "55555" for all drugs/products, pharmacy providers and prescribers should:

1. Review the [Contract Drugs & Covered Products Lists](#) page on the [Medi-Cal Rx Web Portal](#) for covered drugs/products and coverage restrictions.
2. When applicable, submit a PA request with rationale to establish medical necessity to address the Medi-Cal Rx claim UM edit.

Resources

- [Claim Submission Reminders](#)
- [Five Ways to Submit a Prior Authorization Request](#)
- [Reminder: Establishing Medical Necessity](#)

Note: To schedule a one-on-one Office Hour to be held via a Microsoft Teams meeting, send a request to the Education & Outreach (E&O) mailbox at MediCalRxEducationOutreach@primetherapeutics.com.

5. Updated COVID-19 Vaccine Reimbursement Rates

Background

The purpose of this alert is to notify pharmacy providers of a change for reimbursement rates in administration fees and at-home administration fees for COVID-19 vaccines effective October 1, 2024.

What Pharmacy Providers Need to Know

Effective October 1, 2024, the \$40 administration fee and \$35 at-home supplemental administration fee for COVID-19 vaccines expired, marking the end of the American Rescue Plan period. Claims with a date of service (DOS) on or after October 1, 2024, will no longer receive these administration fees.

Claims for COVID-19 vaccines with a DOS on or after October 1, 2024, will follow the Medi-Cal targeted rate increase at 85 percent of the fee schedule for physician services in accordance with the *Welfare and Institutions Code* (W&I Code), Section 14132.968. Refer to the [Medi-Cal Targeted Provider Rate Increases and Investments](#) page on the Department of Health Care Services (DHCS) website.

Reimbursement for pharmacy providers will equal the ingredient cost + dispensing fee + administration fee. Vaccine claims that do not qualify for the Vaccine For Children (VFC) program will receive an administration fee of \$34; vaccines claims that do qualify for VFC will receive a \$7.65 administration fee.

VFC claims will not be reimbursed for the ingredient cost of the vaccine.

What Pharmacy Providers Need to Do

No action is required for pharmacy providers as a result of this reimbursement rate change. Pharmacy providers should refer to the following Medi-Cal Rx resources for vaccine reimbursement and billing information:

- *Pharmacy Administered Immunizations/Vaccines* section in the [Medi-Cal Rx Provider Manual](#)
- [Claim Submission Reminders](#)
- [Medi-Cal Rx Billing Tips](#)

6. Commercial JYNNEOS® Vaccine Reimbursement

Background

On April 1, 2024, Bavarian Nordic commercially launched the JYNNEOS® vaccine, identified by the 11-digit NDCs 50632000101 and 50632000103. Claims submitted for these NDCs with a date of service (DOS) on or after April 1, 2024, are a covered Medi-Cal Rx benefit. Note that NDC 50632000101 is an inner pack without a price on file; pharmacies should either submit with NDC 50632000103 or submit a paper claim when dispensing NDC 50632000101, making sure to include the “outer” NDC in the remarks area of the claim form. For more information on how to submit a paper claim, refer to the *Missing Price* section of the [Medi-Cal Rx Provider Manual](#).

What Pharmacy Providers Need to Know

Effective for claims submitted with a DOS on or after April 1, 2024, Medi-Cal Rx will reimburse pharmacy providers for commercial JYNNEOS vaccine claims submitted with NDC 50632000103 utilizing the following standard vaccine payment methodology:

Ingredient Cost + Dispensing Fee + Administration Fee

JYNNEOS is U.S. Food and Drug Administration (FDA)-approved for members 18 years of age and older and is a Vaccines For Children (VFC)-funded vaccine. Claims submitted by VFC-enrolled providers for the VFC-funded vaccine when administered to eligible Medi-Cal members will not be reimbursed for the ingredient cost.

In addition, claims submitted to Medi-Cal Rx for the government-supplied JYNNEOS vaccine (NDC 50632000102) will not be reimbursed for the ingredient cost.

Medi-Cal Rx is aware that claims submitted on or after September 13, 2024, for commercial vaccine NDC 50632000103 were only reimbursed for the administration fee. This has been corrected effective for claims submitted on or after October 11, 2024. Refer to the alert published on October 4, 2024: [Coming Soon: Commercial JYNNEOS® Vaccine Reimbursement Correction](#).

What Pharmacy Providers Need to Do

For claims submitted with a DOS on or after April 1, 2024, no additional action is required by pharmacy providers at this time. For claims submitted with a DOS on or after this policy is implemented, pharmacy providers should submit claims to Medi-Cal Rx as follows:

1. Use the 11-digit NDC of the commercially launched JYNNEOS vaccine.
 - **Note:** Medi-Cal Rx encourages pharmacy providers to use NDC 50632000103 when submitting claims.
2. Include the following Drug Use Review (DUR) code values to receive reimbursement of the administration fee:
 - Reason for Service Code (NCPDP field 439-E4): PH – Preventive Health Care
 - Professional Service Code (NCPDP field 440-E5): MA – Medication Administration
 - Result of Service Code (NCPDP field 441-E6): 3N – Medication Administration

Resources

- [Vaccines For Children Program: Medi-Cal Reference Guide](#)
- [Vaccines For Children Program Policy and Billing Guidance for Pharmacy Providers](#)
- [Medi-Cal Reimbursement of Vaccines For Children \(VFC\)-Enrolled Pharmacy Providers and for VFC and Non-VFC Vaccines – Frequently Asked Questions \(FAQs\)](#)
- [JYNNEOS Vaccine Commercial Transition](#)

7. Reminder: Verification of Member Name on Medi-Cal Rx Claims

Background

The purpose of this alert is to remind pharmacy providers about the importance of verifying the member's name and date of birth (DOB) when processing claims. This verification step is crucial for minimizing errors and reducing delays.

What Pharmacy Providers Need to Know

Pharmacy providers must submit claims using the member's Benefits Identification Card (BIC) ID, Client Index Number (CIN), or Health Access Programs (HAP) card.

Members will not be able to utilize the Managed Care Plan (MCP) ID card. Do not submit claims with the MCP ID. If billing for a newborn claim, refer to the *Newborns* section in the [Medi-Cal Rx Provider Manual](#).

Pharmacies may use the Member Eligibility Lookup Tool to verify eligibility and obtain a member's ID number by logging in to the [Medi-Cal Rx Secured Provider Portal](#).

What Pharmacy Providers Need to Do

Pharmacy providers should verify that the member's name and CIN on the claim exactly match the name on the BIC or HAP card. The member's full name needs to be used. Refer to the following examples:

- BIC Details (Example):
 - Full name: John A Smith-Thompson
 - Full name should be entered as: John A Smith-Thompson
 - BIC ID: 123456789A12345
 - Member ID/CIN should be entered as:
BIC ID: 123456789A12345 **OR**
CIN: 123456789A
- HAP Details (Example):
 - Full name: Jane B Doe De Miller
 - Member name should be entered as: Jane B Doe De Miller
 - HAP ID: 987654321G5
 - Member ID/CIN should be entered as:
BIC ID: 987654321G5 **OR**
CIN: 987654321G

After entering the member's information, verify the entered information for accuracy to minimize errors and billing discrepancies.

Resources

- [Medi-Cal Rx Member Tips](#)
- [Claim Submission Reminders](#)
- [Medi-Cal Rx Provider Manual](#)
 - Identification Numbers, Cards, and Claims section
 - Newborns section
- [Member Eligibility Lookup Tool Job Aid](#)
- [Reject Code 52: Nonmatched Cardholder ID](#)

8. Medi-Cal Rx Provider Portal Prior Authorization Submission Update: Member Validation Enhancement

Background

The purpose of this alert is to inform pharmacy providers and prescribers about the enhancement of the prior authorization (PA) request system found on the [Medi-Cal Rx Secured Provider Portal](#). Beginning September 28, 2024, the PA request system will complete a member validation check in the member sections to continue the PA request submission process. The validation check will validate that the member ID, member first and last name, and member date of birth (DOB) match the details on file before continuing to the next step. This enhancement will streamline the PA request review process and remove delays caused by mismatched member information submitted.

Note: Registered Medi-Cal Rx providers can refer to the [Medi-Cal Rx Portal Prior Authorization Request Job Aid](#) for additional assistance on PA request submissions.

What Pharmacy Providers and Prescribers Need to Know

Beginning September 28, 2024, when submitting a PA request via the Medi-Cal Rx Secured Provider Portal, selecting the **NEXT** button after entering member information in the Member Information section will initiate a member validation check.

The validation check will validate that the member ID, member first and last name, and member DOB matches what is on file. If the member information matches the information on file, the next section of the PA request system will load. This enhancement ensures that the PA request submitted is not delayed due to a mismatched member ID, member name, and/or member DOB.

The member information provided must match the member information on file to continue the PA request submission. If the member information provided does not match the member

information on file, an error message will appear indicating that the member was not found based on the provided information.

What Pharmacy Providers and Prescribers Need to Do

Pharmacy providers and prescribers are encouraged to review member information and accurately input details into the PA request system.

If member information provided does not match member information on file, an error message will appear indicating that the member was not found based on the provided information. Pharmacy prescribers and providers may then review the information submitted, update for accuracy, and resubmit. If the member is still not found and the information submitted is correct, pharmacy providers and prescribers should call the Medi-Cal Rx Customer Service Center (CSC) at 1-800-977-2273.

Resources

- [Five Ways to Submit a Prior Authorization Request](#)
- [Prior Authorization Submission Reminders](#)
- [Reminder: Establishing Medical Necessity](#)
- [Member Eligibility Lookup Tool Job Aid](#)
- [Medi-Cal Rx Portal Prior Authorization Request Job Aid](#)

9. UAC URL Update

Background

As a result of the acquisition of Magellan Rx by Prime Therapeutics LLC, a series of application transitions were completed in the first half of 2024, as previously announced in the alert titled [Upcoming Transitions for Medi-Cal Rx Applications](#).

What Pharmacy Providers and Prescribers Need to Know

On Tuesday, October 1, 2024, the existing User Administration Console (UAC) URL updated to the new Prime Therapeutics LLC URL (<https://uac.primetherapeutics.com>). The Magellan Rx UAC site will redirect users to the new Prime Therapeutics LLC UAC site until December 2, 2024. Additionally, messaging will be published to the UAC site to remind pharmacy providers and prescribers to update their bookmarks to the new URL.

What Pharmacy Providers and Prescribers Need to Do

On and after October 1, 2024, users should use and bookmark the new URL and delete the previous bookmark to avoid any disruption to their access.

Pharmacy providers and prescribers may continue to access the UAC via the [Medi-Cal Rx Secured Provider Portal](#) utilizing their existing credentials. Navigating to the site with a link is the same as entering the URL in the web address bar in your browser.

Note: After December 2, 2024, the Magellan Rx UAC link will no longer be operational. Users who attempt to access the link after December 2, 2024, will encounter an error message.

10. **Pemgarda™ (pemivibart) Now a Medi-Cal Rx Benefit**

Background

The purpose of this alert is to notify pharmacy providers and prescribers that the U.S. Food and Drug Administration (FDA) issued an [Emergency Use Authorization \(EUA\) for Pemgarda™ \(pemivibart\)](#) for the pre-exposure prophylaxis of COVID-19 in certain adults and adolescents (12 years of age and older weighing at least 88 lb. [40 kg]) who are moderately or severely immunocompromised and are unlikely to mount an adequate immune response to the COVID-19 vaccination. Pre-exposure prophylaxis helps prevent COVID-19 but does not take the place of vaccination in people who are eligible to receive an updated COVID-19 vaccine.

What Pharmacy Providers and Prescribers Need to Know

Effective March 28, 2024, Pemgarda (pemivibart) is available to Medi-Cal Rx members as a pharmacy benefit, contingent upon an approved prior authorization (PA) request when medically necessary.

Antibody	Concentration	Package Size	NDC
Pemivibart	500 mg/4 ml vial (125 mg/ml)	4 ml vial	81960003103

Coverage for this product is effective for claims with a date of service (DOS) on and after March 28, 2024. Pharmacy providers may retroactively bill Medi-Cal Rx for this product and also submit retroactive PA requests.

The product can be obtained through Cardinal Health, Cencora, McKesson Plasma and Biologics, or McKesson Specialty Care Distribution. For more information, visit the product ordering guide on the manufacturer’s website.

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.