September 1, 2020

Background:

Pursuant to Governor Gavin Newsom's January 7, 2019 Executive Order N-01-19 (EO-N-01-19), the Department of Health Care Services (DHCS) will transition all Medi-Cal pharmacy services billed on a pharmacy claim to managed care (MC) to fee for service (FFS) by January 1, 2021. The Medi-Cal pharmacy benefits and services administered by DHCS in the FFS delivery system will be identified collectively as "Medi-Cal Rx".

Medi-Cal Rx will impact all Medi-Cal MCPs, including AIDS Healthcare Foundation. Medi-Cal Rx will not apply to Programs of All-Inclusive Care for the Elderly (PACE), Senior Care Action Network (SCAN), Cal MediConnect health plans, and Major Risk Medical Insurance Program (MRMIP).

Effective January 1, 2021, DHCS will transition all administrative services related to Medi-Cal pharmacy benefits and services billed on pharmacy claims from the existing Medi-Cal FFS Fiscal Intermediary (FI) to Magellan Medicaid Administration, Inc. (Magellan). For claims administration, the chart below represents claims processing and adjudication responsibilities pre- and post-transition, depending on who is submitting the claim (i.e., Managed Care Plan (MCP) and FFS) and how the claim is being billed, (i.e., on a pharmacy versus medical/institutional claim).

Delivery			Responsibility
System	Medical/Institutional)	Pre-Transition	Post-Transition
MCP Delivery System	Pharmacy services billed on a medical /institutional claim	MCPs	MCPs
	Pharmacy services billed on a pharmacy claim	MCPs	Medi-Cal Rx
FFS Delivery System	Pharmacy services billed on a medical /institutional claim	FFS FI	FFS FI
	Pharmacy services billed on a pharmacy claim	FFS FI	Medi-Cal Rx

Caller Beneficiary	<u>Agent</u>
What is changing?	Starting on January 1, 2021, the Department of Healthcare Services (DHCS) will manage your pharmacy benefits with a new pharmacy benefit contractor, Magellan Medicaid Administration, Inc. (Magellan). The new approach is called "Medi-Cal Rx". Your health plan will no longer manage the pharmacy part of your Medi-Cal benefit. Starting January 1, 2021, bring your Medi-Cal Benefits Identification Card, the BIC, when you go to the pharmacy. The pharmacy will use your card to look up your information and give you your medications.

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How can I get a new BIC?	If you did not receive your BIC or it is lost or stolen, you may ask for a BIC from your county social services office. If your BIC is stolen, you must tell your local police and your county social services office. You should give as much information about the theft as possible. If you are issued a new card, your old card will no longer be valid. Please contact your local county office.
Do I need to do anything different than I do today?	Most people will not need to do anything. DHCS will automatically transition from the existing administrator to Magellan on January 1, 2021.
	Your health plan, if enrolled in a plan, doctors and pharmacies know about the change and know what to do.
	There is no change in your Medi-Cal eligibility or benefits.
	Starting January 1, 2021, bring your Medi-Cal Benefits Identification Card, the BIC, when you go to the pharmacy. The pharmacy will use your card to look up your information and give you your medications.
Will I have to change my medications?	Most people will not have any change in their medications. The list of medications that Medi-Cal Rx allows without a prior approval may be different than the list your health plan uses. If you are on a medication that needs a prior approval, your doctor or pharmacy will have to fill out a form and get approval when you renew your prescription. Your doctor might also talk to you about changing to a medication that is similar that doesn't need prior approval. Your doctor and pharmacy will know about this change.
Will I have to find a new pharmacy?	You will probably be able to use the same pharmacy you do now starting January 1, 2021. But there may be pharmacies that are not enrolled with Medi-Cal Rx.
	If you use a mail order pharmacy that is based outside of California, you may need to change to another one that is in the Medi-Cal Rx system.
	If you need help finding a pharmacy near you starting January 1, 2021, use the Medi-Cal Rx Pharmacy Locator online at www.Medi-CalRx.dhcs.ca.gov or call Medi-Cal Rx Customer Service at 1-800-977-2273 twenty-four hours a day, seven days a week, or 711 for TTY Monday thru Friday, 8am to 5pm (Note: The website pharmacy locator will be available in December 2020 and the phone number starting January 1, 2021).
	If you need help finding a pharmacy for Medi-Cal Rx in advance of January 1, 2021, contact the Medi-Cal Member Help Line (1-800-541-5555, TTY 1-800-430-7077), Monday thru Friday, 8am to 5pm.

I'm eligible for both Medicare and Medicaid (Medi-Cal). How does this change affect me?	If you are eligible for both Medicare and Medi-Cal, the Medi-Cal Rx transition does not change your current Medicare Part D pharmacy coverage. Medi-Cal Rx may cover things Medicare does not, so you should talk to your doctor or pharmacy if you have questions. You should take your health plan ID Card and Medi-Cal Benefits Identification Card, the BIC card, when you go to the pharmacy. The pharmacy will use the information on your cards to look up your information and give you your medications.
Is the CCS program impacted?	Yes, the CCS program is included in the transition to Medi-Cal Rx. The DHCS Pharmacy benefits service provider, Magellan, will manage your authorizations and pharmacy claims payment. Your provider and pharmacy will be trained and knowledgeable of the new program. We have implemented policies to eliminate or minimize impacts to CCS beneficiaries. For additional information, contact your managed care plan; or, contact your county CCS Office.
I'm a member of Senior Care Action Network (SCAN) plan. How does this change affect me?	This change does not affect you. Prescription drug benefits for SCAN members are provided by Medicare Part D and Over the Counter (OTC) drugs are covered by the SCAN plan. That will continue after January 1, 2021.
I'm a member in a Cal MediConnect Plan. How does this change affect me?	This change does not affect you. Prescription drug benefits for Cal MediConnect members are primarily provided by Medicare Part D. That will continue after January 1, 2021.
I'm a member in a Programs of All- Inclusive Care for the Elderly (PACE) Plan. How does this change affect me?	This change does not affect you. Prescription drug benefits for PACE plan members are not managed by Medi-Cal. That will continue after January 1, 2021.
I'm a member in a Major Risk Medical Insurance Program (MRMIP) Plan. How does this change affect me?	This change does not affect you. Prescription drug benefits, to the extent covered, will continue to be covered by your Major Risk Medical Insurance Program health plan. That will continue after January 1, 2021.
Who can I contact for more information?	If you receive your care from a health plan and have questions about your medication or other pharmacy services, please call your Managed Care Plan.
MCP Member	

Prior to 1/1/2021	If you have questions about the beneficiary notice letter or have Medi-Cal Rx general questions, contact the Medi-Cal Member Help Line (1-800-541-5555, TTY 1-800-430-7077), Monday thru Friday, 8am to 5pm.
	You may also contact DHCS by email at RxCarveOut@dhcs.ca.gov . Make sure to indicate that you have a question about Medi-Cal Rx. Please do NOT include personal information in your first email. DHCS staff will reply with a secure email asking for your information, if needed to assist.
Who can I contact for more information?	If you receive your care through regular FFS Medi-Cal and you have any questions about this change, please contact the Medi-Cal Member Help Line (1-800-541-5555 TTY 1-800-430-7077), Monday thru Friday, 8am to 5pm.
FFS Beneficiary Prior to 1/1/2021	You may also contact DHCS by email at RxCarveOut@dhcs.ca.gov . Make sure to indicate that you have a question about Medi-Cal Rx. Please do NOT include personal information in your first email. DHCS staff will reply with a secure email asking for your information, if needed to assist.
Who can I contact for more information? All Medi-Cal beneficiaries On or after 1/1/2021	You can contact DHCS' contractor Magellan at the Medi-Cal Rx Call Center Line (1-800-977-2273) twenty four hours a day, seven days a week or 711 for TTY Monday thru Friday, 8am to 5pm.
Why did I receive the Medi-Cal Rx letter in a language I do not know?	If your preferred written language is Vietnamese or Thai, you received the wrong letter. You should receive a new letter in your preferred language by the end of the week of 10/12. Note: Please confirm the caller's preferred language verbally over the phone. If the caller's preferred language is Vietnamese or Thai,
	don't refer beneficiary to the county office because their preferred written language is correct in their file. If the beneficiary wants to look at a copy of the same notice in English, you can refer them to the DHCS website at: https://www.dhcs.ca.gov/provgovpart/pharmacy/Pages/Medi-CalRX.aspx

Caller Provider	<u>Agent</u>
What is changing	Effective January 1, 2021, DHCS will transition all administrative
with the new Medi-	services related to Medi-Cal pharmacy benefits billed on
Cal Rx?	pharmacy claims from the existing Medi-Cal Fee-for-Service (FFS)
	Fiscal Intermediary (FI) or the member's Managed Care Plan
	(MCP) to DHCS' new Medi-Cal Rx vendor/FI, Magellan Medicaid
	Administration, Inc. (Magellan).

	All pharmany convices hilled as a pharmany claim, including
	All pharmacy services billed as a pharmacy claim , including outpatient drugs (prescription and over the counter), Physician
	Administered Drugs (PADs), Medical Supplies and Enteral
	Nutritional Products (and their electronic equivalents) are <i>in</i>
	scope for Medi-Cal Rx.
	Pharmacy services billed as a medical (professional) or
	institutional claim (or their electronic equivalents) are <i>not in</i>
	scope.
What can I do to	With the transition to Medi-Cal Rx, Medi-Cal beneficiaries should
prepare my patients	not experience a significant difference in how they receive Medi-
for this transition to	Cal pharmacy benefits.
Medi-Cal Rx?	Car priarriacy scrionic.
	You can remind your patients to always keep both their health
	plan ID Card (if they are a member of an MCP) and their Medi-Cal
	Benefits Identification Card (BIC) with them to all medical and
	pharmacy visits.
	While most pharmacies in the state are enrolled as Medi-Cal FFS
	providers and the network is larger than individual MCP networks,
	the pharmacy frequented by some MCP beneficiaries may not be
	enrolled in FFS.
	The difference will be more pronounced for mail order pharmacies.
	If your patient uses a mail order pharmacy based outside of
	California, it may not be part of the Medi-Cal Rx system.
	To find a pharmacy enrolled in FFS, you can visit the pharmacy
	locator tool online at www.Medi-CalRx.dhcs.ca.gov starting in
	December 2020 or call Customer Service at 1-800-977-2273 on
	or after January 1, 2021.
	Check the FFS Contract Drugs List (CDL) to determine if your
	patient's current medication is on the list. Refer to questions below
MPH (L. D	for next steps.
Will the Drug	Medi-Cal FFS covers all FDA approved drugs but uses a Contract
Formulary be	Drugs List (CDL) to determine what drugs are subject to Prior
different in Medi-Cal	Authorization.
Rx?	The CDL gate up detect promite and is excelled in the except of 550
	The CDL gets updated monthly and is available in the current FFS
	Medi-Cal website
	https://files.medi-
	cal.ca.gov/pubsdoco/manual/man_query.aspx?wSearch=drugscdl
	*&wFLogo=Part2+%23+Contract+Drugs+List&wPath=N
	Path: <u>www.medi-cal.ca.gov</u> - References - Contract Drugs List
	Starting in November 2020, the CDL will be available from the Medi-Cal Rx website www.Medi-CalRx.dhcs.ca.gov

What is required to transition from MCPs' drug formularies to FFS CDL?	DHCS has established a Medi-Cal Rx Pharmacy Transition Policy to help support the transition from MCP formularies to FFS CDL-based requirements for Prior Authorizations. The policy includes "grandfathering" previously approved prior authorizations (PAs) from managed care and fee-for-service, as well as a 180-day period with no PA requirements for existing prescriptions. For new prescriptions (i.e., drugs/therapies not previously prescribed to the Medi-Cal beneficiary in either Medi-Cal managed care or FFS) requiring PA under Medi-Cal Rx, the "grandfather" component would not apply, and the submitting prescriber or pharmacist would need to submit a PA for review/approval consistent with Medi-Cal Rx policy and based upon medical necessity for each individual patient. For more information on the transition policy, visit the new Medi-Cal Rx policy and based upon medical necessity for each individual patient.
	Cal Rx website www.Medi-CalRx.dhcs.ca.gov [link to be updated with direct link closer to publication and script use]
Will I have to request new PA's for my patients?	DHCS' pharmacy transition policy will use strategies such as "grandfathering" previously approved PAs through their stated duration, a 180-day period where DHCS will not require PA for existing prescriptions, for drugs not on the Medi-Cal Contract Drug List (CDL) or that otherwise have PA requirements under Medi-Cal Rx. This policy does not apply to new prescriptions or drugs that do not otherwise have PA requirements under Medi-Cal Rx.
	Refer to the transition policy for more details. Visit the new Medi-Cal Rx website www.Medi-CalRx.dhcs.ca.gov [link to be updated with direct link closer to publication and script use]
Will all Pharmacy claims be billed to Medi-Cal Rx?	In general, all pharmacy services billed as a pharmacy claim , including outpatient drugs (prescription and over the counter), Physician Administered Drugs (PADs), Medical Supplies and Enteral Nutritional Products (and their electronic equivalents) are <i>in scope</i> for Medi-Cal Rx. Only pharmacy services billed as a medical (professional) or institutional claim (or their electronic equivalents) are <i>not in scope</i>
I'm a Medicare provider for patients who are dual eligible for Medicare and	The Medi-Cal Rx transition does not change beneficiaries' Medicare Part D pharmacy coverage.

Medicaid (Medi-Cal).	
How does this change affect me?	
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What do I need to do if I'm involved with the CCS program?	The CCS Program is transitioning to Medi-Cal Rx. Visit the new Medi-Cal Rx website www.Medi-CalRx.dhcs.ca.gov for general information, including Frequently Asked Questions (FAQs) and the Medi-Cal Rx Pharmacy Transition Policy. You will also be able to sign up for the Medi-Cal Rx Subscription service for notices and links to important information. Starting in August, www.Medi-CalRx.dhcs.ca.gov will include a training calendar and ability to sign up for training on the Medi-Cal Rx resources and tools. For additional and ongoing updates regarding this transition, please visit the DHCS Medi-Cal Rx website . For general questions relating to Medi-Cal Rx, please direct your
	comments and questions to RxCarveOut@dhcs.ca.gov.
I'm a Medicare provider for patients in Senior Care Action Network (SCAN) plan. How does this change affect me?	This change does not affect you. Prescription drug benefits for SCAN members are provided by Medicare Part D and Over the Counter (OTC) drugs are covered by the SCAN plan. That will continue after January 1, 2021. Continue to prescribe and submit prior authorizations, as necessary, using the same processes as you use now.
I'm a prescriber for patients in a Cal MediConnect Plan. How does this change affect me?	This change does not affect you. Prescription drug benefits for Cal MediConnect members are primarily provided by Medicare Part D. That will continue after January 1, 2021. Continue to prescribe and submit prior authorizations, as necessary, using the same processes as you use now.
I'm a prescriber for patients in Programs of All-Inclusive Care for the Elderly (PACE) Plan. How does this change affect me?	This change does not affect you. Prescription drug benefits for PACE plan members are not managed by Medi-Cal. Continue to prescribe and submit prior authorizations, as necessary, using the same processes as you use now.
I'm a prescriber for patients in a Major Risk Medical Insurance Program (MRMIP) Plan. How does this change affect me?	This change does not affect you. Continue to prescribe and submit prior authorizations, as necessary, using the same processes as you use now.

What do I need to do if I'm an enrolled FFS Medi-Cal pharmacy provider?	You do not need to do anything to continue providing services in Medi-Cal Rx. FFS Medi-Cal enrolled pharmacies will be able to submit claims and prior authorizations in Medi-Cal Rx as of January 1, 2021. To look up your claims and PAs via the online web portal, you will need to register to get credentials to access the secure portion of the web portal. Please visit the new Medi-Cal Rx website www.Medi-CalRx.dhcs.ca.gov for more information about registering for secure portal access and for information on training and
	instructions to submit claims and PAs.
What do I need to do if I'm not an enrolled FFS Medi-Cal	You will need to be an enrolled FFS Medi-Cal pharmacy provider to be able to submit and get paid for claims in Medi-Cal Rx.
pharmacy provider?	Pharmacies that are not yet enrolled as Medi-Cal providers who want to provide pharmacy services to Medi-Cal beneficiaries after January 1, 2021 can enroll at https://pave.dhcs.ca.gov/sso/login.do
Where can I find information throughout the new transition?	Visit the new Medi-Cal Rx website www.Medi-CalRx.dhcs.ca.gov for general information, including Frequently Asked Questions (FAQs) and the Medi-Cal Rx Pharmacy Transition Policy. You will also be able to sign up for the Medi-Cal Rx Subscription service for notices and links to important information. Starting in August, www.Medi-CalRx.dhcs.ca.gov will include a training calendar and ability to sign up for training on the Medi-Cal Rx resources and tools.
	For additional and ongoing updates regarding this transition, please visit the DHCS Medi-Cal Rx website .
	For general questions relating to Medi-Cal Rx, please direct your comments and questions to RxCarveOut@dhcs.ca.gov .
Who can I call for more information? Prior to 1/1/2021	You can contact the Medi-Cal Call Center (1-800-541-5555, TTY 1-800-430-7077) Monday thru Friday, 8am to 5pm.
Who can I call for more information? On or After 1/1/2021	You can contact DHCS' contractor Magellan at the Medi-Cal Rx Call Center (1-800-977-2273 or 711 for TTY), twenty-four hours a day, seven days a week.