# Required Documentation for Claim and Prior Authorization Support

**February 24, 2022**

Providers can troubleshoot Pharmacy Claim and Prior Authorization (PA) issues by utilizing the *Medi-Cal Rx Provider Manual*, the Bulletins & News page, or the Medi-Cal Rx FAQs.

If you still cannot find a resolution, either email Medi-Cal Rx Education & Outreach (E&O) at MediCalRxEducationOutreach@magellanhealth.com or call the Customer Service Center (CSC) at 1-800-977-2273. Customer Service Representatives are available 24 hours a day, 7 days a week, 365 days per year.

Please provide the following documentation if available:

| Required Documentation | |
|---|---|
| **Pharmacy Claim** | **Prior Authorization** |
| • Method used to submit claim:<br>  – Point of Sale (POS)<br>  – Medi-Cal Rx Provider Portal<br>  – Fax<br>  – Mail<br>  – Batch<br>• Claim number<br>• Reject code<br>• 14-digit Beneficiary ID<br>• 9-digit Client Index Number<br>• Health Access Program ID<br>• First and last name<br>• Date of Birth (DOB)<br>• Screenshot(s) that documents the issue | • Method used to submit PA:<br>  – CoverMyMeds® (CMM)<br>  – POS<br>  – Medi-Cal Rx Provider Portal<br>  – Fax<br>  – Mail<br>• PA denial reason as stated on rejection<br>• 14-digit Beneficiary ID<br>• 9-digit Client Index Number<br>• Health Access Program ID<br>• First and last name<br>• Date of Birth (DOB)<br>• Screenshot(s) that documents the issue |