

MEDI-CAL RX PRIOR AUTHORIZATION REQUESTS AND APPEALS

As of April 1, 2021, pharmacy support will no longer be available through Gold Coast Health Plan or Optum Rx. Prior Authorization (PA) requests for all outpatient prescription drugs and some medical supplies for Medi-Cal beneficiaries will be adjudicated by Medi-Cal Rx. Appeals will also be managed by Medi-Cal Rx.

To submit a Prior Authorization request, providers can:

- Fax requests for prior authorizations and attachments to 1-800-869-4325.
- Enter PA information on the [Medi-Cal Rx provider portal](#) (Registration is required. Visit www.Medi-CalRx.dhcs.ca.gov for more information.).
- Submit PA electronically through CoverMyMeds® (Registration is required. Visit www.covermymeds.com for more information.).
- Mail PA requests to:
Medi-Cal Rx Customer Service Center
Attn: PA Request
P.O. Box 730
Sacramento CA 95741-0730

After April 1, 2021, providers can call the Medi-Cal Rx Customer Service Center at 1-800-977-2273 for assistance.

Appeals may be submitted to Medi-Cal Rx through the following mechanisms:

- Fax requests for appeals and attachments to 1-800-869-4325.
- Enter appeal information on the [Medi-Cal Rx provider portal](#) (Registration is required. Visit www.Medi-CalRx.dhcs.ca.gov for more information.).
- Submit appeals electronically through CoverMyMeds® (Registration is required. Visit www.covermymeds.com for more information.).
- Mail appeal requests to:
Medi-Cal Customer Service Center
Attn: Provider Claims Appeals Unit
P.O. Box 610
Sacramento CA 95741-0610.

NOTE: *Appeal documents should be clearly marked as "APPEAL." We recommend the top of the first page be marked as such with a sharpie or equivalent indelible ink pen.*

To prevent delays in processing, please make sure:

- The form is completed and has a signature by the prescribing provider.
- All writing is legible
- A diagnosis is listed.
- All quantity limit requests state the directions and justification for the dosage.
- To list all prior tried and failed medications (state doses, dates, and outcomes).
- To list common drugs that might be used to treat the condition that are contraindicated in the member and state why.
- To list all pertinent medical information such as allergies, co-morbid conditions, etc. that affected the selection of the particular drug product.
- Include chart notes, lab values / results, etc. to further document the medical necessity of the drug product requested.