



Prior Authorization Required: Reject Code 75

January 9, 2022

Medi-Cal Rx has identified pharmacy claim denials that were expected to be adjudicated under the Medi-Cal Rx 180-day transition policy. These claims were adjudicated as “new start” and denied with **Reject Code 75** (PA Required). A temporary override code has been established for documented cases of ongoing therapy, to which providers can attest at the Point of Service (POS) and resubmit the claim.

If you are a pharmacy provider whose claim was denied with this reject code and you have a historical claim on file, please review the following guidance.

Reject Code 75 (PA Required)

If you receive Reject Code 75 from Medi-Cal Rx for a claim and **you have evidence** the beneficiary has a valid approved PA and/or a prior paid claim in your system, please resubmit the claim to Medi-Cal Rx with a value of **5555** in the **Prior Authorization Number Submitted** field (462-EV).

Your attestation is subject to audit.

Contact Information

Medi-Cal Rx Customer Service Center toll-free number: 1-800-977-2273, available 24 hours a day, 7 days a week, 365 days per year.