

Enteral Nutrition for Members 22 Years of Age and Older: New Start Prior Authorization Reminders

August 16, 2023; Updated October 3, 2023

Background

On September 22, 2023, prior authorization (PA) requirements were reinstated for new start enteral nutrition products for members 22 years of age and older. "New starts" are defined as new enteral nutrition therapy not previously prescribed to the member during the 15-month lookback period. The purpose of this alert is to inform pharmacy providers and prescribers of the requirements for enteral nutrition product PA submission, as well as introduce the new *Medi-Cal Rx Enteral Nutrition Prior Authorization Request Form*. This is the preferred form to submit enteral nutrition product PA requests via fax or U.S Mail.

What Pharmacy Providers and Prescribers Need to Know



- Effective September 22, 2023, all new start enteral nutrition products for members 22 years of age and older require a PA.
- Claims will deny for Reject Code 75 as all enteral nutrition product claims require a PA.
- For non-new starts, claims will continue to adjudicate under the Transition Policy.

Enteral nutrition product claims submitted for a date of service (DOS) prior to September 22, 2023 did not deny with **Reject Code 75 – Prior Authorization Required** due to the temporary suspension of Medi-Cal Rx's PA requirements. However, as of September 22, 2023, new start claims for members 22 years of age and older will be subject to the following PA reject codes:

- Reject Code 75 Prior Authorization Required
- Reject Code 76 Plan Limitations Exceeded

Claims for enteral nutrition products will deny for Reject Code 75 as all enteral nutrition product claims require a PA. Claims will also deny for **Reject Code 76 – Plan Limitations Exceeded** if the quantity requested for the product exceeds a maximum daily calorie limit of 2,000 kcal/day.

What Pharmacy Providers and Prescribers Need to Do

In preparation for reinstatement of PA requirements for enteral nutrition products, pharmacy providers and prescribers should review the following checklist before submitting a PA to Medi-Cal Rx for coverage considerations:

- Review the <u>List of Contracted Enteral Nutrition Products</u>. Only products on this established Medi-Cal Rx list are covered.
 - If a member is currently receiving a product not found on the List, prescribers will need to select a therapeutic equivalent from the List.

Note: The <u>Drug Lookup Tool</u> on the <u>Medi-Cal Rx Provider Portal</u> does not include enteral nutrition products at this time. Alternatively, refer to the <u>List of Contracted Enteral</u> <u>Nutrition Products</u>.

- Verify prescription requirements are met.
 - A written or electronic prescription signed and dated by the member's physician, nurse practitioner, clinical nurse specialist, or physician assistant within the scope of their practice.
 - Enteral nutrition products are covered only when supplied by a pharmacy provider.
 - The prescriber's full name, address, and telephone number must be clearly supplied if not preprinted on the prescription form.

DHCS – Enteral Nutrition for Members 22 Years of Age and Older: New Start PA Reminders

- Ordering only those supplies necessary for the care of the member and as documented in the member's medical record.
- A written or electronic prescription signed by a physician is required for authorization of all enteral nutrition products.
- Enteral nutrition products are covered only when supplied by a pharmacy provider. The prescriber's full name, address, and telephone number must be clearly supplied if not preprinted on the prescription form. Verify billing requirements and limitations are met.
 - Claims should be submitted for a quantity that meets the member's daily caloric requirement and does not exceed a 31-day supply.

Note: Quantity should be rounded up to the smallest available package size. Rounding up **does not** include rounding up to six packs or full cases of the product.

- Verify that providers are including the following required information to meet the PA documentation requirements when submitting a PA request:
 - Medical diagnosis code related to the product requested.
 - Height (length) and weight. (Optional)
 - Daily caloric requirements.
 - This information (along with other medical measurements and labs) must be dated within 365 days (12 months) of the request with the exception of specialty infant products which must be dated within 120 days (4 months) of the request.
 - Route of administration (orally fed or tube fed).
 - 11-digit product NDC.
 - Supporting documentation as attachments must be signed by the physician.

Note: PA requests will be considered invalid if the information mentioned above is not provided at the time of PA submission. Providers will be asked to submit a new PA request.

Enteral Nutrition PA Submission Reminders

Pharmacy providers and prescribers may submit enteral nutrition product PA requests via the five submission methods (see the *Prior Authorization Submission Reminders* alert). For providers using fax or U.S. Mail for their PA submission needs, Medi-Cal Rx has created the *Medi-Cal Rx Enteral Nutrition Prior Authorization Request Form*. This will be the preferred form when submitting an enteral nutrition PA request via fax or U.S. Mail as it provides designated sections to gather product information, route of administration, and clinical justification.

Additional Considerations

- Transition Policy
 - Phase IV, Lift 2 will not affect PA requirements for enteral nutrition products for members 22 years of age and older who are currently receiving the product under the Transition Policy.
 - Override code "55555" remains available for use by pharmacy providers attesting that the member was previously maintained on the product per their pharmacy records (see the *Prior Authorization Required: Reject Code 75 Reminder* alert).
- Multiple Flavors
 - Claims submitted for the same date of service (DOS) for additional flavors of the enteral nutrition product will deny for Reject Code 83 – Duplicate Paid/Captured Claim.
 - For assistance, refer to the <u>NCPDP Reject Code 83 Duplicate Paid/Captured Claim</u> alert.
- Medicare Part B Dual Eligible
 - For dual eligible beneficiaries receiving the product via a device (tube fed), do not submit the claim to Medi-Cal Rx. These claims should be billed to Medicare Part B.
 - For dual eligible beneficiaries receiving the product orally, claims submitted to Medi-Cal Rx will deny with Reject Code A6 – Product/Service May Be Covered Under Medicare Part B. In this situation, pharmacy providers should call the Medi-Cal Rx Customer Service Center (CSC) at 1-800-977-2273 for assistance.

- If submitting a PA for dual eligible beneficiaries via the Medi-Cal Rx Provider Portal, the PA will be reviewed without denying for Reject Code A6.
- Enteral Nutrition Product Shortages
 - Claims submitted for a different flavor of the same product will not deny for Reject
 Code 75. A new PA submission will not be required.
 - Claims submitted for an alternate product due to a product shortage will deny for Reject Code 75. A PA submission will be required.

Resources

- Medi-Cal Rx Enteral Nutrition Office Hour
 - Beginning Wednesday, August 16, 2023, Medi-Cal Rx will be hosting an enteral nutrition <u>office hour</u> via Zoom every Wednesday from 12 p.m. to 1 p.m. PT (except holidays).
 - Pharmacy providers and prescribers are encouraged to attend and ask any questions regarding the upcoming reinstatement of enteral nutrition products.
- Enteral Nutrition
 - Review the Enteral Nutrition Products section and other parts of the <u>Medi-Cal Rx</u>
 <u>Provider Manual</u> for additional information.
 - Review the <u>90-Day Countdown: Reinstatement of Prior Authorization Requirements for</u>
 <u>Enteral Nutrition Products for Members 22 Years of Age and Older</u> alert.
 - Review the List of Contracted Enteral Nutrition Products.
 - Continue to review the Medi-Cal Rx Web Portal for additional information.
- Prior Authorizations
 - Review the <u>Prior Authorization Submission Reminders</u> alert.
 - Review PA resources by selecting **Prior Authorization (PA)** on the <u>Forms & Information</u> page.
 - Review the <u>Medi-Cal Rx Reinstatement Phases II-IV Webinar</u> recording on YouTube.

- Billing
 - Review Medi-Cal Rx billing guidelines in the <u>Medi-Cal Rx Billing Tips</u>.
 - Review the <u>NCPDP Payer Specification Sheet</u>.
- Assistance
 - Medi-Cal Rx Reinstatement Webinar Attend a live webinar regarding Medi-Cal Rx
 Reinstatement via Zoom every Friday at 12 p.m. PT.
 - Medi-Cal Rx Office Hour Assistance is available Monday through Friday, from
 p.m. to 1 p.m. PT (except holidays).

Contact Information

You can call the 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@magellanhealth.com.