

**NEW YORK STATE MEDICAID PROGRAM
 ENTERAL FORMULA PRIOR AUTHORIZATION
 DISPENSER WORKSHEET**

To facilitate the process, be prepared to answer these questions when you call the toll free voice interactive Enteral Prior Authorization Call Line at **(866) 211-1736** and choose **Option 4**.

1. Place 8 digit prior authorization number here	_____
2. Recipient CIN (Client ID number is 2 alpha/5 numeric/1 alpha)	_____
3. Pharmacy or DME MMIS Provider Number	_____
4. Pharmacy or DME Category of Service (COS) (0160, 0161, 0261, 0262, 0287, 0288, 0321, 0323, 0441, 0442)	_____
5. Provider telephone number (where you can be reached)	(____) _____ - _____
6. HCPCS code of enteral being prescribed (B4150, B4151, B4152, B4153, B4154, B4155, or B4156) and the two-digit alpha BO modifier to indicate oral administration, if applicable (shaded area)	B _____
7. Record quantity of caloric units authorized (this is based on the prescriber's input of number of calories required)	_____

DISPENSER INSTRUCTIONS

1. Enter the prior authorization number obtained by the prescriber and written on the prescription.
2. Enter the Recipient CIN (Client Identification Number) of the patient for which the enteral formula is ordered. The automated system will then confirm that a valid, unused prior authorization number exists for this patient.
3. Enter your MMIS Provider ID number.
4. Enter your provider Category of Service.
5. Enter your telephone number where you can be reached.
6. Enter the HCPCS code of the enteral ordered.
 - The **Enteral Product Classification List** is included in this Medicaid Update. Products categorized under the same HCPCS code must be combined into one prior authorization request by the prescriber.
 - When the system reports the HCPCS code assigned back to you, it will add the "BO" modifier at the end of the five-character HCPCS code if the prescriber ordered the formula for oral administration. These spaces are left blank for tube administration. **Your claim must match the full five-character or seven-character code the system reports to you for payment to be made.**
7. You will hear a message that you have authorization to dispense a specific quantity of the enteral formula using a specific HCPCS code.
8. **Use the same prior authorization number on claims for refills** – you do not need to call the prior authorization line again for refills of the prescription.
9. Dispensers may enter multiple prior authorizations during one telephone call.