

* NOTE: Fee schedules are subject to review and amendment under the provisions of § 67:16:01:28.

ENTERAL THERAPY UNDER 21 YEARS OLD

As per § 67:16:42:09, when no fee is specified for covered services, payment is limited to 60% of the provider's usual and customary charge. Supplies and administration kits are paid at 90% of the provider's usual and customary charge.

**Last Updated May 2, 2013
FY13**

CODE	DESCRIPTION	ALLOWANCE
B4034	Enteral feeding supply kit - syringe (per day)	\$5.70
B4035	Enteral feeding supply kit - pump fed (per day)	\$10.87
B4036	Enteral feeding supply kit - gravity fed (per day)	\$7.45
B4081	Nasogastric tubing with stylet	\$20.15
B4082	Nasogastric tubing without stylet	\$15.00
B4083	Stomach tube - Levine type	90%
B4100	Food thickener, administered orally, per ounce.	60%
B4103	Enteral formula, for pediatrics, used to replace fluids and electrolytes (e.g. clear	\$1.20
B4104	Additive for enteral formula (e.g. fiber).	60%
B4149	Enteral formula, manufactured blenderized natural foods with intact nutrients, includes proteins, fats, carbohydrates, vitamins and minerals, may include fiber,	\$1.20
B4150	Enteral formula, nutritionally complete with intact nutrients, includes proteins, fats,	\$0.75
B4152	Enteral formula, nutritionally complete, calorically dense (equal to or greater than 1.5 kcal/ml) with intact nutrients, includes proteins, fats, carbohydrates, vitamins and minerals, may include fiber, administered through an enteral feeding tube, 100	\$0.46
B4154	Enteral formula, nutritionally complete, for special metabolic needs, excludes inherited disease of metabolism, includes altered composition of proteins, fats, carbohydrates, vitamins and/or minerals, may include fiber administered through an	\$1.55
B4155	Enteral formula, nutritionally incomplete/modular nutrients, includes specific nutrients, carbohydrates (e.g. glucose polymers), protein/amino acids (e.g. glutamine, arginine), fat, (e.g. medium chain triglycerides) or combination, administered through an enteral feeding tube, 100 calories = 1 unit.	\$0.99
B4157	Enteral formula, nutritionally complete, for special metabolic needs for inherited disease of metabolism, includes proteins, fats, carbohydrates, vitamins and minerals, may include fiber, administered through an enteral feeding tube, 100 calories = 1 unit	\$0.75
B4158	Enteral formula, for pediatrics, nutritionally complete with intact nutrients, includes proteins, fats, carbohydrates, vitamins and minerals, may include fiber and/or iron, administered through an enteral feeding tube, 100 calories = 1 unit.	\$0.75
B4159	Enteral formula, for pediatrics, nutritionally complete soy based with intact nutrients, includes proteins, fats, carbohydrates, vitamins and minerals, may include fiber and/or iron, administered through an enteral feeding tube, 100 calories = 1 unit.	\$0.75
B4160	Enteral formula, for pediatrics, nutritionally complete calorically dense (equal to or greater than 0.7 kcal/ml) with intact nutrients, includes proteins, fats, carbohydrates, vitamins and minerals, may include fiber, administered through an enteral feeding	\$0.75

B4161	Enteral formula, for pediatrics, hydrolyzed/amino acids and peptide chain proteins, includes fats, carbohydrates, vitamins and minerals, may include fiber and/or iron, administered through an enteral feeding tube, 100 calories = 1 unit.	\$2.13
B4162	Enteral formula, for pediatrics, special metabolic needs for inherited disease of metabolism, includes proteins, fats, carbohydrates, vitamins and minerals, may include fiber and/or iron, administered through an enteral feeding tube, 100 calories = 1 unit	\$0.75
E0776	IV Pole	\$122.30
B9998	Not otherwise classified enteral therapy – per diem. To be used only with approval from the department before supplies are furnished.	60%