

ForwardHealth **UPDATE**

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NEW COVERAGE POLICY FOR ENTERAL NUTRITION FORMULA AND PRODUCTS

Effective for dates of service (DOS) on and after June 9, 2023, ForwardHealth announces changes to enteral nutrition policy to improve and increase member access and to reduce the administrative burden to providers through the following changes:

- Removing the requirement for prior authorization (PA) for enteral nutrition products administered through a feeding tube
- Removing specific documentation criteria from enteral nutrition administered orally
- Expanding oral enteral nutrition coverage to individuals with feeding/swallowing deficits and for wound treatment
- Adding coverage of food/liquid thickener
- Revising the associated Prior Authorization/Enteral Nutrition Formula Attachment (PA/ENFA) form, F-11054 (06/2023)

Removal of a Prior Authorization Requirement

Effective on and after June 9, 2023, ForwardHealth will no longer require PA for enteral nutrition products administered through a feeding tube.

The removal of this requirement is in accordance with Wisconsin Act 125,

AFFECTED PROGRAMS

BadgerCare Plus, Medicaid, Wisconsin Chronic Disease Program—Adult Cystic Fibrosis, Wisconsin Chronic Disease Program—Chronic Renal Disease

TO

End-Stage Renal Disease Service Providers, Home Health Agencies, Hospital Providers, Individual Medical Supply Providers, Medical Equipment Vendors, Nurse Practitioners, Nursing Homes, Pharmacies, Physician Assistants, HMOs and Other Managed Care Programs

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which grants Wisconsin Medicaid the authority to remove PA requirements for enteral nutrition products administered through a tube.

Removal of Criteria for Enteral Nutrition Administered Orally

ForwardHealth has removed certain documentation requirements and criteria pertaining to enteral nutrition administered orally.

Effective June 9, 2023, a provider is no longer required to write a detailed plan to decrease dependence on the formula if the member obtains less than 50 percent of their daily nutrition orally from a nutritionally complete enteral nutrition formula.

Providers are also no longer required to list the following on prescriptions or orders for enteral nutrition administered orally:

- Route of administration
- Length of treatment

ForwardHealth has removed the following criteria for enteral nutrition administered orally as they appeared in the Covered Enteral Nutrition Formula topic ([#14817](#)) in the ForwardHealth Online Handbook:

- The member has had an assessment by a registered dietitian within the last 12 months that includes:
 - The expected duration of the need for enteral nutrition formula
 - The percentage of the member's average daily nutrition taken by mouth and/or gastric or jejunostomy tube
- If the member obtains less than 50 percent of their daily nutrition orally from a nutritionally complete enteral nutrition formula, there is a detailed plan written by a qualified health care provider to decrease dependence on the supplement.

Revised and Additional Covered Medical Conditions

ForwardHealth is expanding coverage of enteral nutrition, including adding coverage of enteral nutrition formula and/or food thickener for certain medical conditions and wound care. Enteral nutrition formula and/or food thickener may be covered when a member is diagnosed by a qualified health care provider with one of the medical conditions listed below:

- Swallowing and/or feeding difficulties (for example, dysphagia, oral motor/oral sensory dysfunction/disorder)
- Open wounds (for example, diabetic wounds, surgical wounds, pressure ulcers, burns)

QUICK LINKS

- [Modifiers topic \(#3869\)](#)
- [Covered Enteral Nutrition Formula topic \(#14817\)](#)
- [Prior Authorization Request Form Completion Instructions for Enteral Nutrition Formula topic \(#3864\)](#)
- [Enteral Nutrition Formula Procedure Codes topic \(#1734\)](#)
- [Forms](#) page
- [User Guides](#) page

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- Inborn errors of metabolism (for example, histidinemia, homocystinuria, phenylketonuria, hyperlysinemia, maple syrup urine disease, tyrosinemia, or methylmalonic acidemia)
- More than 50 percent of the member's caloric need is required to be met orally by specially formulated nutrition due to a medical condition (for example, severe seizures/epilepsy, food protein-induced enterocolitis, severe allergy, eosinophilic esophagitis, or eosinophilic gastritis)
- Impaired absorption of nutrients caused by disorders affecting the absorptive surface, function, length, or motility of the gastrointestinal tract (for example, short-gut syndrome, fistula, cystic fibrosis, inflammatory bowel disease, ischemic bowel disease)
- Central nervous system disease leading to interference with neuromuscular mechanisms of ingestion of such severity that the member cannot be maintained with regular oral feeding
- Nutritional deficiency (for example, failure to thrive or malnutrition)
- Chronic disease (for example, advanced AIDS or end-stage renal disease with or without renal dialysis)
- Ongoing cancer treatment or specific cancers (for example, gastrointestinal or head/neck)

Revised Prior Authorization Approval Criteria for Enteral Nutrition Administered Orally

PA continues to be required for orally administered enteral nutrition formula (with a BO modifier). Providers should refer to the Modifiers topic ([#3869](#)) in the Online Handbook for more information. PA requests for enteral nutrition formula administered orally will be approved when all of the following criteria are met:

- The nutrition formula and/or food thickener will be used under the supervision of a certified health provider in conjunction with a registered dietitian.
- The member has a documented medical condition that prevents adequate nutrition or requires enteral nutrition formula and/or food thickener when medically indicated to thrive and develop normally.
- There is documentation that sufficient caloric and protein intake are not obtainable through any regular, liquefied, or pureed foods.
- The member has had an assessment by a registered dietitian within the last 12 months that includes:
 - A clinical history indicating that oral intake is inadequate
 - A description of the impairment that prevents adequate nutrition by conventional means

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- Lab values to support nutritional deficiency, when applicable
- The member's recommended daily caloric intake
- Weight trends over the past six months (for example, weight-for-length, progression along a growth chart, or body mass index, as appropriate)

New Code Covered for Enteral Nutrition Formula

Effective for DOS on and after June 9, 2023, ForwardHealth will cover Healthcare Common Procedure Coding System (HCPCS) code B4100 (Food thickener, administered orally, per ounce) with PA when all of the criteria for orally administered enteral nutrition formula are met.

Revised PA Form for Enteral Nutrition Formula

ForwardHealth has revised the PA/ENFA.

Effective July 1, 2023, dispensing providers are required to submit PA requests for enteral nutrition formula when administered orally using the revised form (dated 06/2023). Clinical documentation supporting the use of enteral nutrition formula must be submitted with the PA request.

PA requests for enteral nutrition formula received by ForwardHealth on and after July 1, 2023, must be submitted on the revised PA/ENFA. ForwardHealth will return PA requests submitted using the 04/2020 version of the form received on and after July 1, 2023. Providers may refer to the [Forms](#) page of the Portal for a copy of the form and instructions.

Submitting PA Requests for Enteral Nutrition Products

PA requests for enteral nutrition formula may be submitted on the ForwardHealth Portal, by fax, or by mail (but not using the Specialized Transmission Approval Technology-Prior Authorization system).

Providers who submit PA requests for enteral nutrition formula through the Portal will see the policy changes described in this ForwardHealth Update. Providers may refer to the ForwardHealth Provider Portal Prior Authorization User Guide, available on the [User Guides](#) page, for step-by-step instructions to guide providers and BadgerCare Plus or Medicaid HMOs through the online form.

Documentation Retention

Providers are reminded that they must follow the documentation retention requirements per Wis. Admin. Code § [DHS 106.02\(9\)](#). Providers are required to produce or submit documentation, or both, to Wisconsin Department of

DID YOU KNOW?

Providers can find specific PA forms on the [Forms](#) page by entering the form number into the Keyword field of the Search Criteria and clicking Search.

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Health Services (DHS) upon request. Per Wis. Stat. § [49.45\(3\)\(f\)](#), providers of services shall maintain records as required by the DHS for verification of provider claims for reimbursement. DHS may audit such records to verify actual provision of services and the appropriateness and accuracy of claims. DHS may deny or recoup payment for services that fail to meet these requirements. Refusal to produce documentation may result in denial of submitted claims, recoupment of paid claims, application of intermediate sanctions, or termination from the Medicaid program.

Information Regarding Managed Care Organizations

This Update applies to enteral nutrition services and products that members receive on a fee-for-service basis and through BadgerCare Plus, Medicaid SSI, and other managed care programs. For information about managed care implementation of the updated policy, contact the appropriate managed care organization (MCO). MCOs are required to provide at least the same benefits as those provided under fee-for-service arrangements.

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The ForwardHealth Update is the first source of program policy and billing information for providers.

Wisconsin Medicaid, BadgerCare Plus, SeniorCare, and Wisconsin Chronic Disease Program are administered by the Division of Medicaid Services within the Wisconsin Department of Health Services (DHS). The Wisconsin AIDS Drug Assistance Program and the Wisconsin Well Woman Program are administered by the Division of Public Health within DHS.

For questions, call Provider Services at 800-947-9627 or visit our website at www.forwardhealth.wi.gov/.