



NETWORK *Notification*

Notice Date: June 20, 2023
To: Ohio Medicaid Providers
From: CareSource
Subject: Enteral B Codes
Effective Date: March 13, 2023

Summary

The Ohio Department of Medicaid (ODM) incorporated a payment change for enterals that require prior authorization. Effective March 13, 2023, the new payment amount is 185% of the provider cost. Any prior authorization request granted after March 13, 2023 will use this amount regardless of service date.

Impact

Until further notice, effective March 13, 2023, all enteral formulas that require prior authorization will be paid at 185% of the provider cost. Providers must bill Enteral B Codes at 185% of Provider Invoice Cost.

Importance

Providers must include the invoice in addition to billing the claim at 185% of the provider cost when submitting the claim.

The codes are as follows:

- B4157
- B4158
- B4159
- B4160
- B4161
- B4162

Questions?

Please contact Provider Services at **1-800-488-0134**, Monday through Friday from 8 a.m. to 6 p.m. Eastern Time (ET).

OH-MED-P-2118987