

**To:** AmeriHealth Caritas Louisiana Providers

**Date:** February 13, 2023

**Subject:** [Informational Bulletin 22-31](#): Enteral Formula Reimbursement Changes and Publication of New Fee Schedules (Revised February 10, 2023)

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**Informational Bulletins that summarize policies and/or procedures are intended for quick reference and are accurate on the date they are issued.**

### **Enteral Formula Reimbursement Changes and Publication of New Fee Schedules**

Effective with dates of service on or after **January 1, 2023**, Louisiana Medicaid will implement changes to enteral formula provided through the Durable Medical Equipment (DME) program. The change include:

- Effective **January 1, 2023**, all prior authorizations (PA) must be submitted without an NDC entered. Units requested must be calculated based on 100 kcals and not cans, pouches, packets, etc.

For full details, please see [IB 22-31 revised 2.10.23](#).

Questions regarding this message should be directed to AmeriHealth Caritas Louisiana Provider Services at 1-888-922-0007. The Provider Services Department can be reached between 7:00 am – 7:00 pm daily.

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