

Physician

Enteral Formula Prior Authorization Prescriber Worksheet Revised

In this Newsletter:

Enteral Formula Prior Authorization Prescriber Worksheet Revised

Contact Details

1-800-343-9000 emednyalert@csc.com

Enteral Formula Prior Authorization Prescriber Worksheet Revised

The New York State Medicaid Program Enteral Formula Prior Authorization Prescriber Worksheet has been revised. Click **here** for the latest version of this document.

If you are having problems viewing content within this newsletter, please email emednyalert@csc.com for further assistance.

The Department has attempted to ensure that the information contained in these notifications is as accurate as possible. However, no e-mail transmittals or materials provided are intended to constitute legal or medical advice.