

**NEW YORK STATE MEDICAID PROGRAM ENTERAL  
FORMULA PRIOR AUTHORIZATION  
DISPENSER WORKSHEET (Rev. 3/23)**

To facilitate the process, be prepared to answer these questions when using the Enteral Prior Authorization portal at [MEDICAIDENTERALPORTAL.health.ny.gov](http://MEDICAIDENTERALPORTAL.health.ny.gov) or Interactive Voice Response System at 1-866-211-1736.

Do not block your Caller ID. For audit purposes, Caller ID is recorded by the call line.

1. Enter the 11 digit-prior authorization number obtained by the prescriber and written on the fiscal order. \_\_\_\_\_

2. Member's Medicaid ID # ( 2 alpha/5 numeric/1 alpha) \_\_\_\_\_

3. Dispenser's 10-digit National Provider ID # (NPI): \_\_\_\_\_

4. Enter your Pharmacy (0161, 0288 or 0441) or DME (0160, 0287, 0321, 0323 or 0442) **Category of Service.** \_\_\_\_\_

5. Dispenser's email address \_\_\_\_\_ and telephone number \_\_\_\_\_

6. Enter numeric portion of **HCPCS code** of enteral being prescribed.  
(Refer to the DME Provider Manual/DME Provider Communications at eMedny.org for the link to the current Enteral Classification list)

The system will add the two-digit alpha BO modifier (indicating oral administration) to the HCPCS code, if applicable. B \_\_\_\_\_

Products categorized under the same HCPCS code must be combined into one prior authorization request by the prescriber.

Please be sure of the Product Code being requested and the age of the member is appropriate.

7. To activate the prior authorization you must continue and validate the information below. Record caloric units authorized per month, the prior authorization activation date (today), refills, and the prior authorization expiration date. Use the same authorization number for each refill. Renewal authorizations cannot be activated until 10 days prior to expiration date of existing authorization.

\_\_\_\_ CALORIC UNITS/MONTH  
\_\_\_\_ REFILLS  
\_\_\_\_/\_\_\_\_/\_\_\_\_ ACTIVATION DATE  
\_\_\_\_/\_\_\_\_/\_\_\_\_ EXP. DATE

Caloric units are calculated by the system from the prescriber's input of enteral formula calories per day, then divided by 100 and multiplied by 30 days to equal caloric units per month, i.e., a month's supply of formula.