

Using the New York State Medicaid Enteral Prior Authorization Portal

Dispensing an Enteral Formula

 Click on Dispense an Enteral Formula

Welcome to the Enteral Authorization portal.

You must answer all questions before submitting a claim. Do not proceed unless the Enteral is in-stock and available to be dispensed at this time.

> Dispense an Enteral Formula

Perform an Authorization Inquiry

Paper Prior Approval Requests

Medicaid Enteral Coverage Criteria

- Enter the Prior
 Authorization number
- Click Continue
- Enter the Medicaid member's client identification number
- Click Continue



- Enter the four-digit Enteral Code excluding the letter B
- Click Continue
- Regulation message received
- Click Continue







- Is the amount sufficient per written order
- Click Yes or No
- Click Continue





- Once the authorization has successfully been activated a message is received
- Click start over if you have another authorization to dispense

This information has been entered into our records, and you have prior authorization to dispense this request. Prior authorization does not guarantee payment. Payment is subject to patient eligibility and other Medicaid guidelines.

The dispensing provider must make sure the diagnosis code is written on the ordering provider's prescription. If not, please contact the ordering provider to obtain the information. It is the responsibility of the dispensing provider to maintain this information as part of their records.

Start Over



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RECORDING AND MATERIALS

A recording of the webinar and related materials are available at:

eMedny.org/ProviderManuals/DME/index.aspx

Contact Us: OHIPMEDPA@health.ny.gov

or 800-342-3005 (Option 1)

Live Support is available Monday – Friday 8:30am to 4:45pm



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