

EFFECTIVE DATE: 11/20/2007
POLICY LAST UPDATED: 08/06/2013

OVERVIEW

This payment policy documents the coverage for Enteral/Parenteral Nutrition Therapy. Enteral nutrition therapy (commonly called tube feeding) is a form of nutrition administered into the gastrointestinal tract through a small catheter that may be temporary or permanent. Parenteral nutrition involves the delivery of micronutrients and macronutrients through catheters in central or peripheral veins when adequate nutritional intake is not possible via the oral or tube-feeding route because the gastrointestinal tract is non-functioning.

PRIOR AUTHORIZATION

Prior authorization is not required.

POLICY STATEMENT

BlueCHiP for Medicare and Commercial products

- Enteral nutrition therapy as the sole source of nutrition delivered by means of a nasogastric (NG), nasoenteric (NE), gastrostomy (G), or jejunostomy (J) tube feeding tube or through a vein is covered.
- Parenteral nutrition therapy as the sole source of nutrition delivered through a catheter through a central or peripheral vein is covered.
- Enteral or parenteral formulas must be prescribed by a physician for use and administered by a participating Home Infusion Therapy provider.

The following enteral products **are not covered**:

- Enteral products that are administered orally and related supplies
- Enteral products used as supplements to the patient's daily diet
- Baby food and other grocery items/products that can be blenderized and used with the enteral system
- Over-the-counter products (e.g., Boost, Ensure, Pediasure, Sustacal)

MEDICAL CRITERIA

Not Applicable

BACKGROUND

The policy describes the reimbursement for enteral and parenteral nutrition therapy. Enteral nutrition therapy (commonly called tube feeding) is a form of nutrition administered into the gastrointestinal tract through a small catheter that may be temporary or permanent. The liquid nutritional formula may be delivered via a nasogastric, nasoenteric, jejunostomy, or gastrostomy infusion tube. The American Gastroenterological Association states that tube feeding should be considered for patients who cannot or will not eat, who have a functional digestive tract, and for whom a safe method of access is possible. The use of enteral therapy may be on a short-term basis for acute conditions, or long-term for chronic conditions. The nutrient mixture is a diet that provides essential nutrients in a readily assimilated form requiring little or no active digestion and

minimal residue. The standard formula selected for most patients is the isotonic polymeric formula, which meets the nutritional needs of most people.

Enteral nutrition is typically for a patient with a functioning gastrointestinal tract who cannot maintain weight and strength commensurate with his/her general condition due to an anatomical or motility disorder that prevents food from reaching the digestive tract. Examples of anatomical conditions include obstructions due to head and neck cancer, tumors, reconstructive surgery, or stricture of the esophagus or stomach. Examples of motility disorders include dysphagia following a stroke and neuromuscular diseases that interfere with the normal ability to chew and swallow. It is also for patients with partial impairments such as Crohn's disease resulting with absorption problems, or a patient who can only swallow small amounts of food due to dysphagia where the gastrointestinal tract function is adequate and the enteral nutrition is the sole source. **Sole source** is defined as "the primary source of sufficient caloric/nutrient intake to achieve or maintain appropriate body weight."

For most adults, a total caloric intake of 20-35 calories per kilogram per day is considered sufficient to achieve or maintain appropriate body weight adults. Sufficient caloric intake is essential in pediatric patients to ensure proper growth and maintenance of body metabolism.

Estimated energy needs of a pediatric patient's caloric intake ranges vary. Infants 0-1 years of age require 90-120 calories per kilogram per day; 1-7 years, 75-90 calories per kilogram per day; 7-12 years, 60-75 calories per kilogram per day; 12-18 years, 30-60 calories per kilogram per day; older than 18 years should follow the adult recommendations of 20-35 calories per kilogram per day.

COVERAGE

Benefits may vary between groups/contracts. Please refer to the appropriate Evidence of Coverage, Subscriber Agreement for applicable Services Not Medically Necessary coverage.

CODING

BlueCHiP for Medicare and Commercial Products

B4034	B4035	B4036	B4081	B4082	B4083
B4087	B4088				

The following **codes are non-covered** for BlueCHiP for Medicare and Commercial products as the formula is **not administered via a feeding tube**:

B4102	B4103	B4104
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The following codes for enteral and parenteral nutrition **are covered** for BlueCHiP for Medicare and Commercial products as the formula **is administered via a feeding tube** for institutional and professional providers:

B4149	B4150	B4152	B4153	B4154	B4155
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B4157	B4158	B4159	B4160	B4161	B4162
B4164	B4168	B4172	B4176	B4178	B4180
B4185	B4189	B4193	B4197	B4199	B4216
B4220	B4222	B4224	B5000	B5100	B5200

Pumps:

The following codes **are covered** for Blue CHiP for Medicare and Commercial Products:

B9000	B9002	B9004	B9006
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RELATED POLICIES

Oral Enteral Nutrition Mandate

PUBLISHED

Provider Update	Sep 2013
Provider Update	Feb 2009
Policy Update	Mar 2008

REFERENCES

¹American Gastroenterological Association. American Gastroenterological Association Medical Position Statement: Guidelines for the Use of Enteral Nutrition. *Gastroenterology*. 1995 108:1280.

August, D MD, CNSP, et al, *Guidelines for the Use of Parenteral and Enteral Nutrition in Adult and Pediatric Patients*, Journal of Parenteral and Enteral Nutrition, Vol 26, No. 1, Supplement, January-February 2002

Blue Cross and Blue Shield Association Medical Policy Reference Manual, Policy 1.02.01 Total Parenteral Nutrition and Enteral Nutrition in the Home, 1:2003

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