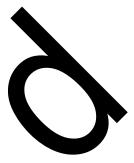
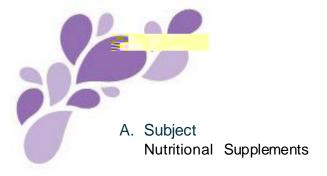
MEDICAL











Oral Nutrition

- A. Prior Authorization is required except for inborn error of metabolism conditions.
- B. CareSource considers oral nutrition medically necessary when the following criteria are met:
 - 1. Must be a medical food for oral feeding;
 - 2. Must be used under medical supervision;
 - 3. Member has the ability to swallow without increased risk of aspiration; and
 - 4. Documentation supports all of the following criteria:
 - a. Member's diet consists of more than 50 percent enteral nutrition and less than 50 percent standard diet for age;
 - b. Member is unable to maintain body weight and nutritional status (initial and ongoing treatment) with regular or therapeutic oral nutrition; and
 - c. Member has one of the following:
 - 01. Inborn error of metabolism conditions including but not limited to
 - (1) Phenylketonuria(PKU);
 - (2) Homocystinuria; or
 - (3) Methylmalonic academia;

- 02. A condition that interferes with nutrition absorption and assimilation including, but not limited to:
- 00.(1) Allergy or hypersensitivity to cow or soy milk diagnosed through Mtd 0 78v(2ppn of

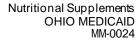












Effective Date: 01/01/2022

Style, and Conventions Used in ASPEN Board of Directors-Approved Documents. Retrieved September 10, 2021 from www.nutritioncare.org

8. Worthington, P., Balint J., Bechtold, M., Bingham, A...... Holcombe, B. (2017) When is Parenteral Nutrition Appropriate? Journal of Parenteral and enteral Nutrition, 41(3), 324-377. DOI: 10.1177/0148607117695251.

The Medical Policy Statement detailed above has received due consideration as defined in the Medical Policy Statement Policy and is approved.

