



2010 Medicare Part B Nestlé HealthCare Nutrition Products

This chart should not be interpreted as a guarantee of reimbursement or as an endorsement by the Medicare Program or Carriers.

HCPCS CODE	NESTLÉ HEALTHCARE NUTRITION ENTERAL FORMULAS	2010 FEE SCHEDULE*
ADULT FORMULAS/ MODULARS		
B4100		
Food thickener, administered orally, per ounce	RESOURCE [®] PUREE APPEAL [®] RESOURCE [®] THICKENUP [®]	NA
B4102		
Enteral formula, for adults, used to replace fluids and electrolytes (e.g. clear liquids). (500 mL = 1 unit)	RESOURCE ARGINAID EXTRA [®] RESOURCE [®] BREEZE RESOURCE [®] DIABETISHIELD [®]	NA
B4104		
Additive for enteral formula (e.g. fiber)	RESOURCE [®] BENEFIBER [®]	NA
B4149		
Enteral formula, blenderized natural foods with intact nutrients includes proteins, fats, carbohydrates, vitamins and minerals, may include fiber, administered through an enteral feeding tube. (100 calories = 1 unit)	COMPLEAT [®] COMPLEAT [®] PEDIATRIC	\$1.52
B4150		
Enteral formula, nutritionally complete with intact nutrients includes proteins, fats, carbohydrates, vitamins and minerals, may include fiber, administered through an enteral feeding tube. (100 calories = 1 unit)	BOOST [®] BOOST [®] HIGH PROTEIN CARNATION [®] INSTANT BREAKFAST [®] LACTOSE FREE FIBERSOURCE [®] HN ISOSOURCE [®] HN NUTREN [®] 1.0 NUTREN [®] 1.0 FIBER OPTISOURCE [®] HIGH PROTEIN DRINK NUTREN [®] REPLETE [®] NUTREN [®] REPLETE [®] FIBER	\$0.65
B4152		
Enteral formula, nutritionally complete, calorically dense (equal to or greater than 1.5 kcal/mL) with intact nutrients includes proteins, fats, carbohydrates, vitamins and minerals, may include fiber, administered through an enteral feeding tube. (100 calories = 1 unit)	BOOST PLUS [®] CARNATION [®] INSTANT BREAKFAST [®] LACTOSE FREE PLUS CARNATION [®] INSTANT BREAKFAST [®] LACTOSE FREE VHC ISOSOURCE [®] 1.5 CAL NUTREN [®] 1.5 NUTREN [®] 2.0 RESOURCE [®] 2.0	\$0.54

* Medicare Part B 2010 Fee for Service Payment Rates can be found at:
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ADULT FORMULAS/ MODULARS		
<p style="text-align: center;">B4153</p> <p>Enteral formula, nutritionally complete hydrolyzed proteins (amino acids and peptide chain) includes proteins, fats, carbohydrates, vitamins and minerals, may include fiber, administered through an enteral feeding tube. (100 calories = 1 unit)</p>	<p>CRUCIAL® IMPACT® GLUTAMINE PEPTAMEN® PEPTAMEN® with PREBIO^{1™} PEPTAMEN AF™ PEPTAMEN® 1.5 PEPTAMEN® OS PEPTAMEN® OS 1.5 TOLEREX® VIVONEX® PLUS VIVONEX® RTF VIVONEX® T.E.N.</p>	<p>\$1.85</p>
<p style="text-align: center;">B4154</p> <p>Enteral formula, nutritionally complete special metabolic needs, excludes inherited disease of metabolism, includes altered composition of proteins, fats, carbohydrates, vitamins and/or minerals, may include fiber, administered through an enteral feeding tube. (100 calories = 1 unit)</p>	<p>BOOST® GLUCOSE CONTROL™ DIABETISOURCE® AC NUTREN® GLYTROL® IMPACT® IMPACT® 1.5 IMPACT ADVANCED RECOVERY® IMPACT® with FIBER NOVASOURCE® RENAL NUTREN® PULMONARY NUTRIHEP® RENALCAL®</p>	<p>\$1.18</p>
<p style="text-align: center;">B4155</p> <p>Enteral formula, nutritionally incomplete/modular nutrients, includes specific nutrients carbohydrates (e.g. glucose polymers), proteins/amino acids (e.g. glutamine, arginine), fat (e.g. medium chain triglycerides) or combination, administered through an enteral feeding tube. (100 calories = 1 unit)</p>	<p>MCT OIL® MICROLIPID® ARGINAID® RESOURCE® BENECALORIE® RESOURCE® BENEPROTEIN® INSTANT PROTEIN POWDER GLUTASOLVE®</p>	<p>\$0.92</p>

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PEDIATRIC FORMULAS		
<p style="text-align: center;">B4160</p> <p>Enteral formula, for pediatrics, nutritionally complete calorically dense (equal to or greater than 0.7 kcal/mL) with intact nutrients includes proteins, fats, carbohydrates, vitamins and minerals, may include fiber, administered through an enteral feeding tube. (100 calories = 1 unit)</p>	<p>NUTREN JUNIOR® NUTREN JUNIOR® FIBER BOOST® KID ESSENTIALS BOOST® KID ESSENTIALS 1.5 CAL BOOST® KID ESSENTIALS 1.5 CAL with FIBER</p>	<p>NA</p>
<p style="text-align: center;">B4161</p> <p>Enteral formula for pediatrics, hydrolyzed/amino acids and peptide chain proteins includes fats, carbohydrates, vitamins and minerals, may include fiber, administered through an enteral feeding tube. (100 calories = 1 unit)</p>	<p>PEPTAMEN JUNIOR® PEPTAMEN JUNIOR® 1.5 PEPTAMEN JUNIOR® with PREBIO^{1™} PEPTAMEN JUNIOR® FIBER VIVONEX® PEDIATRIC</p>	<p>NA</p>

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HCPCS CODE	ENTERAL KITS AND SUPPLIES	2010 FEE SCHEDULE*
DESCRIPTION		
B4034	Syringe Supply Kit (1/day)	\$5.93/day
B4035	Pump Supply Kit (1/day)	\$11.30/day
B4036	Gravity Supply Kit (1/day)	\$7.76/day
B4081	Nasogastric Tube with stylet (3 per 3 months)	\$20.96
B4082	Nasogastric Tube without stylet (3 per 3 months)	\$15.59
B4083	Stomach Tube-Levine type (3 per 3 months)	\$2.39
B4088	Gastrostomy/Jejunostomy Tube	\$34.59
B9000 NU	Enteral Infusion Pump without alarm	\$1188.74 (purchase new)
B9000 RR	Enteral Infusion Pump without alarm	\$109.23 (rental rate)
B9000 UE	Enteral Infusion Pump without alarm	\$891.55 (purchase used)
B9002 NU	Enteral Infusion Pump with alarm	\$1188.74 (purchase new)
B9002 RR	Enteral Infusion Pump with alarm	\$115.13 (rental rate)
N9002 UE	Enteral Infusion Pump with alarm	\$891.55 (purchase used)

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