Table I-8					Alaska ivieuica	IO DIVIEPOS FEE	Scriedule					
			AK Medicaid State-Based Reimbursement			Service Authorization	Capped Rental					Required Medical Necessity
HCPCS	Mod	Mod2	Rate	Description	Fee Schedule	Required	(10 months)	Alaska	Medicaid Maxim	um Quantity	Age Restriction	Criteria
												**Max allowed includes addt
4034			MCR	Enter feed supply kit, syr, per day	MEDICARE-BASED	Voc		Lossor of	51 Per Month	or current NCCI rules		supply kits that may be needed for school/work**
4034			IVICR	uay	WEDICARE-BASED	Yes		Lesser of	31 Pel Month	NCCITULES		needed for school/work*
												**Max allowed includes add
4035			MCR	Enter fee supply kit, pump, per day	MEDICARE-BASED	Yes		Lesser of	51 Per Month	or current NCCI rules		supply kits that may be needed for school/work**
				Entor foo supply kit, gravity						or current		**Max allowed included add
34036			MCR	Enter fee supply kit, gravity, per day	MEDICARE-BASED	Yes		Lesser of	51 Per Month	NCCI rules		supply kits that may be needed for school/work**
									3 Every 3	or current		
34081			MCR	Enteral ng tubing w/stylet	MEDICARE-BASED			Lesser of	Months 3 Every 3	NCCI rules or current		
34082			MCR	Enteral ng tubing w/o stylet	MEDICARE-BASED			Lesser of	Months	NCCI rules		
34083			MCR	Enteral stomach tube-Levine	MEDICARE-BASED			Lesser of	3 Every 3 Months	or current NCCI rules		
54063			WICK	Enteral stomach tube-Levine	WEDICARE-BASED			Lesser or	1 Every 3	or current		**Allowed 2 at initial set-up
B4087			MCR	Gastro/jejuno tube, standard	MEDICARE-BASED			Lesser of	Months	NCCI rules		only, for back-up**
34088			MCR	Gastro/jejuno tube, low- profile	MEDICARE-BASED			Lesser of	1 Every 3 Months	or current NCCI rules		**Allowed 2 at initial set-up only, for back-up**
-1000								LEGGET OF				Food thickeners, not covered for infants under age one wh
												were born at less than 37
34100			\$1.23	Food thickener, per ounce	STATE-BASED	Yes		Lesser of	200 Per Month	or current NCCI rules		weeks gestation; Simply Thic brand: 1 yr +
34102			NC NC		STATE-BASED	1.03	l	ECSSCI OI		Covered	<u> </u>	orana: 1 yr
				ENTERAL FORMULA, FLUID REPLACEMENT AND								
				ELECTROLYTES (E.G. CLEAR								
34103			NC	LIQUIDS), 500 ML = 1 UNIT	STATE-BASED			Not Covered				
												Not covered when unbundle
										current NCCI		from primary enteral formula
34104			By Report	Ef additive, fiber	STATE-BASED	Yes		Lesser of	020	rules		containing fiber
34149			MCR	Enteral, blenderized food	MEDICARE-BASED	Yes		Lesser of	930 units per Month	or current NCCI rules		
									930 units per	or current		
34150		1	MCR	Enteral, complet w/intact nut Enteral, calorie dense >/=1.5	MEDICARE-BASED	Yes		Lesser of	Month 930 units per	NCCI rules or current		
34152			MCR	kcal	MEDICARE-BASED	Yes		Lesser of	Month	NCCI rules		
				Enteral, hydrolyzed/amino				_	930 units per	or current		
B4153			MCR	acids	MEDICARE-BASED	Yes		Lesser of	Month 930 Units Per	NCCI rules or current		+
B4154			MCR	Ef spec metabolic noninherit	MEDICARE-BASED	Yes		Lesser of	Month	NCCI rules		
B4155			MCR	Ef incomplete/modular	MEDICARE-BASED	V			930 Units Per Month	or current NCCI rules		
54133			IVICK	El Ilicompiete/illoudiai	WEDICARE-BASED	Yes		Lesser of	930 Units Per	or current		
34157			\$3.35	Ef nutr complete, metabolic	STATE-BASED	Yes		Lesser of	Month	NCCI rules		
B4158			\$1.05	Ef pediatric	STATE-BASED	Yes		Lesser of	930 Units Per Month	or current NCCI rules	Age 0-18	
			7-100						930 Units Per	or current	. 60 0 -0	
B4159			\$1.12	Ef pediatric, soy	STATE-BASED	Yes		Lesser of	Month 930 Units Per	NCCI rules or current	Age 0-18	
B4160			\$1.03	Ef pediatric, calorically dense	STATE-BASED	Yes		Lesser of	Month	NCCI rules	Age 0-18	
B4161			\$2.34 per HCPCS unit (100 kcal)	Ef pediatric, hydrolyzed/amino	STATE-BASED	Yes		Lesser of	930 Units Per Month	or current NCCI rules	Age 0-18	MUST SUBMIT PRODUCT CODE/NDC ON CLAIM
54101			unit (100 kcai)	aciu	STATE-BASED	163		Lesser or	WIGHT	iveerrules	Age 0-10	CODE/ NDC ON CLAIM
				Ef pediatric, hydrolyzed/amino								
			\$2.95 per HCPCS	acid; Products: Elecare, Elecare JR, Peptamen,					930 Units Per	or current		MUST SUBMIT PRODUCT
34161	CG		unit (100 kcal)	Peptamen Jr, Peptamen 1.5	STATE-BASED	Yes		Lesser of	Month	NCCI rules	Age 0-18	CODE/NDC ON CLAIM
24162			ć2 25	Ef pediatric, metabolic	STATE DASED	Voc		Lossor of	930 Units Per	or current	Λαο Ο 19	
34162	1		\$3.35	Li pediatric, metabolic	STATE-BASED	Yes		Lesser of	Month 1 Unit Per	NCCI rules	Age 0-18	**Only 1 pump (stationary or
									Month up to	or current		portable) is covered at any o
39000	RR		\$115.47	Ent nut inf pump w/o alarm	STATE-BASED	Yes	Yes	Lesser of	purchase price 1 Unit Per	NCCI rules		time**  **Only 1 pump (stationary or
									Month up to	or current		portable) is covered at any o
39002	RR		MCR	Ent nut inf pump w/alarm	MEDICARE-BASED	Yes	Yes	Lesser of	purchase price	NCCI rules		time**
									1 Unit Per Month up to	or current		**Only 1 pump (stationary or portable) is covered at any or
39004	RR		MCR	Parenteral inf pump portable	MEDICARE-BASED	Yes	Yes	Lesser of	purchase price	NCCI rules		time**
									1 Unit Per Month up to	or current		**Only 1 pump (stationary or portable) is covered at any or
39006	RR	<u>L</u>	MCR	Parenteral inf pump stationary	MEDICARE-BASED	Yes	Yes	Lesser of	purchase price	NCCI rules		time**
				NOC for contains	CTATE DAGED					current NCCI		
39998	1	1	By Report	NOC for enteral supplies	STATE-BASED	Yes		Lesser of		rules	+	+
39999	<u> </u>			NOC for parenteral supplies	STATE-BASED	<u> </u>	<u> </u>	<u> </u>		<u></u>		
	NCCI	Notice 10		DIFIER TO THE HCPCS CODE IF T	HE ENTERAL NUTRITION IS BEIN	NG ADMINISTER	ED ORALLY AND	IS NOT BE	ING ADMINISTER	ED BY A FEEDIN	IG TUBE.	
	NCCI PTP		rect Coding Initiation  Procedure	ve								
	MUE	Medically U			Medicare (MCR) Fee Schedules							
	MCR PDAC	Medicare Pricing Data	Analysis and Codin	ng Contractor	https://www.cms.gov/Medicar	re/Medicare-Fee	-for-Service-Pay	ment/DME	POSFeeSched/DN	MEPOS-Fee-Sche	dule.html	
	DME	Durable Me	dical Equipment		Refer to the following for Natio							
-	NOS		se specified (miscel		https://www.cms.gov/Medicar	re/Coding/Natio	nalCorrectCodIn	itEd/index.	html			
	NOC DMEPOS		se covered (miscella dical Equipment, Pr	osthetics, Orthotics, Supplies								
	NC	Code not co										