



TOBY DOUGLAS  
DIRECTOR

State of California—Health and Human Services Agency  
Department of Health Care Services



EDMUND G. BROWN JR.  
GOVERNOR

Date: May 9, 2014

CCS Information Notice: 14-08

TO: ALL COUNTY CALIFORNIA CHILDREN SERVICES (CCS) PROGRAM AND GENETICALLY HANDICAPPED PERSONS PROGRAM (GHPP) ADMINISTRATORS, MEDICAL CONSULTANTS, COUNTY MEDICAL STAFF, AND SYSTEMS OF CARE DIVISION (SCD) STAFF

SUBJECT: CHANGES TO CONTRACTED ENTERAL NUTRITION PRODUCTS FROM VITAFLO EFFECTIVE JUNE 1, 2014

The purpose of this information notice is to communicate that beginning June 1, 2014, the following contracted enteral nutrition products from Vitaflo will undergo a billing number change. The product name and formulation will not change, just their contracted Medi-Cal billing number:

Product Label Name	Current Billing Number	New Billing Number
GA Gel	50600053602	50600051516
HCU Gel	50600053503	50600051486
MMA/PA Gel	50600054355	50600051523
MSUD Gel	50600053404	50600051493
PKU Gel Orange	50600051264	50600051462
PKU Gel Raspberry	50600051233	50600051455
PKU Gel Unflavored	50600051202	50600051448
TYR Gel	50600053800	50600051509

Beginning on August 1, 2014, the old billing numbers (colored red) will cease to be payable in the Medi-Cal claims system. The CCS Program counties and GHPP staff should review current Service Authorization Requests to ensure that the old numbers are updated to the new billing number for dates of service beginning August 1, 2014.

As a reminder, the product billing number approved on an authorization must be the product number dispensed to the beneficiary and be the product number claimed for reimbursement by the provider.

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If you have any questions, please contact Edan Lum, Pharm D., Pharmaceutical Consultant, at (916) 327-2616 or (510) 286-0708, or via e-mail at [edan.lum@dhcs.ca.gov](mailto:edan.lum@dhcs.ca.gov)

**ORIGINAL SIGNED BY ROBERT J. DIMAND**

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