**Letter of Medical Necessity**

**COMPLEAT® Standard 1.4**

**Date**

**TO:** *Insurance Company*

**FROM:** *Insert Physician’s Name*

**SUBJECT: Request for coverage / reimbursement for COMPLEAT® Standard 1.4 nutritionally complete tube feeding formula.**

I am requesting insurance coverage and reimbursement on behalf of my patient, *Name/Date of Birth****.***I have prescribed **COMPLEAT® Standard 1.4** tube feeding formula, manufactured by Nestlé Health Science for the nutritional management of *Diagnosis or Condition,* as documented in the patient’s medical record *(Dates).* Please refer to the attached **Criteria for Tube Feeding** **Formula** form, which provides specific justification for this formula.

*Verify medical necessity for formula, including: diagnosis, documented failure or intolerance to other formulas, current HT/WT/IBW, history of wt loss, pertinent lab results, medications, potential outcome if formula were denied.*

**COMPLEAT® Standard 1.4** tube feeding formula is a nutritionally complete enteral formula for adults who will benefit from a sole source, plant-based tube feeding formula. This tube-feeding formula is intended for the nutritional management of those with a variety of feeding issues and intolerance that are not resolved on standard milk-based protein or soy-based protein tube feeding formulas. **COMPLEAT® Standard 1.4** is also appropriate for patients with multiple food allergies. **COMPLEAT® Standard 1.4** tube feeding formula is intended for use under the supervision of a medical professional.

**COMPLEAT® Standard 1.4** does **not** contain any dairy (milk), soy, or corn ingredients, which supports the nutritional requirements of patients who need to avoid these ingredients. It is also lactose-free and gluten-free. The pea protein isolate and the addition of the amino acid, L-cystine, provide all the indispensable (essential) amino acids the body requires. The blend of soluble fiber (partially hydrolyzed guar gum) and insoluble fiber (pea fiber) helps support digestive health and bowel management. **COMPLEAT® Standard 1.4** is calorically dense at 1.4 calories per mL (40% more calories than standard 1.0 calorie/mL formulas), which is beneficial for those with fluid restriction, volume intolerance, or shortened feeding cycles. **COMPLEAT® Standard 1.4** contains a blend of MCT oil, canola oil, and high oleic sunflower oil. 30% of the fat source is provided by MCT to promote absorption and tolerance. **COMPLEAT® Standard 1.4** meets the Dietary Reference Intake (DRI) for 24 key vitamins and minerals in 1000 mL (1400 calories), which is critical for those who receive this formula as a sole source of nutrition via a feeding tube.

For the reasons mentioned above, **COMPLEAT® Standard 1.4** tube feeding formula is not synonymous with milk protein-based or soy protein-based formulas. **COMPLEAT® Standard 1.4** tube feeding formula is specifically formulated with a plant-based protein source from peas. A denial of coverage for this plant-based tube feeding formula may result in health care professionals recommending a formula that is not as well-tolerated. In addition to being free of dairy (milk), soy, or corn ingredients, **COMPLEAT® Standard 1.4** tube feeding formula is free of all the remaining major allergens (milk, wheat, eggs, soy, tree nuts, peanuts, fish, shellfish, sesame) and corn and is appropriate for patient with multiple food allergies.

**COMPLEAT® Standard 1.4** is currently recognized by the Centers for Medicare and Medicaid Services (CMS) in **HCPCS Category B4150:** *an enteral formula, nutritionally complete with intact nutrients includes proteins, fats, carbohydrates, vitamins and minerals, may include fiber, administered through an enteral feeding tube.*

Based on the explanation provided, my clinical judgement, and my determination that this formula is required for the care of my patient, I am requesting coverage for **COMPLEAT® Standard 1.4.**

Thank you for taking the time to review this request. Please contact me if you require any additional information or refer to [www.Compleat.com](http://www.Compleat.com) and [www.NestleMedical](http://www.NestleMedical)Hub.com.

Sincerely,

Signature

Name/Title