

Cost Breakdown for TPN Claims: Please attach a copy of the signed TPN order

Main Ingredients	Drug Strength	Package Size	NDC#	Quantity (ml) per Bag	Cost
Amino Acid	10 or 15%				
Dextrose	70%				
Lipids	20%				
Misc.electrolytes with supplies	XXXXX	XXX	XXXXX	Flat rate per bag:	\$17.10

Cost per bag: \$ _____
 Cost for entire batch (Cost per bag x # of bags): \$ _____
 Dispensing fees: \$7.25/day of therapy or per bay X ____ (# of bags) = \$ _____
 Total charges: Usual&Customary = \$ _____

Cost Breakdown for Hydration Therapy Claims: Please attach a copy of the signed IV order.

Main Ingredients	Drug Strength	Package Size	NDC#	Quantity (ml) per Bag	Cost
Drug Cost per bag					

Drug Cost: Itemized Cost per bag: \$ _____ X # of bgs _____ = \$ _____
 Supply Cost per bag (flat rate of \$8.67/bag X # of bags _____) = \$ _____
 Dispensing fees (\$7.25 per day of therapy x days supply) = \$ _____
 Total Charges: Usual&Customary = \$ _____