



Durable Medical Equipment Information Form (DIF) Documentation Requirements for Enteral Nutrition

Section 1833(e) of the Social Security Act precludes payment to any provider of services unless "there has been furnished such information as may be necessary in order to determine the amounts due such provider." It is expected that the patient's medical records will reflect the need for the care provided. The patient's medical records include the physician's office records, hospital records, nursing home records, home health agency records, records from other healthcare professionals and test reports. This documentation must be available upon request. An order for each item billed must be signed and dated by the treating physician, kept on file by the supplier, and made available upon request. Items billed before a signed and dated order has been received by the supplier must be submitted with an EY modifier added to each affected HCPCS code. A DME Information Form (DIF), which has been completed, signed, and dated by the supplier, must be kept on file by the supplier and made available upon request. The DIF for Enteral Nutrition is CMS Form 10126. The initial claim must include an electronic copy of the DIF.

A new Initial DIF for enteral nutrients is required when

1. a formula billed with a different code, which has not been previously certified, is ordered, or
2. enteral nutrition services are resumed after they have not been required for two consecutive months.

A new Initial DIF for a pump (B9000 or B9002) is required when

1. Enteral nutrition services involving use of a pump are resumed after they have not been required for two consecutive months, or
2. A patient receiving enteral nutrition by the syringe or gravity method is changed to administration using a pump.

A revised DIF for enteral nutrients is required when:

1. the number of calories per day is changed, or
2. the number of days per week administered is changed, or
3. the method of administration (syringe, gravity, pump) changes, or
4. the route of administration is changed from tube feedings to oral feedings (if billing for denial)

Special nutrient formulas, HCPCS codes B4149, B4153-B4157, B4161, and B4162, are produced to meet unique nutrient needs for specific disease conditions. The patient's medical record must adequately document the specific condition and the need for the special nutrient. This information shall be available upon request.

If two enteral nutrition products, which are described by the same HCPCS code, are being provided at the same time, they should be billed on a single claim line with the units of service reflecting the total calories of both nutrients.

Refer to the Supplier Manual for more information on documentation requirements.

References:

NHIC DME MAC LCD 3/2008

[http://www.medicarenhic.com/dme/medical_review/mr_lcds/mr_lcd_current/Enteral Nutrition_0308.htm](http://www.medicarenhic.com/dme/medical_review/mr_lcds/mr_lcd_current/Enteral_Nutrition_0308.htm)

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