## 5101:3-12-06 **Reimbursement: private duty nursing services.**

- (A) Private duty nursing (PDN) services are delivered and billed in accordance with this chapter by medicare certified home health agencies, other accredited agencies, or non-agency employed registered nurses. See appendix A for the PDN service rates.
- (B) The amount of reimbursement for a visit shall be the lesser of the provider's billed charge or the medicaid maximum rate. The medicaid maximum rate is determined by using a combination of the base rate and unit rate found in appendix A using the number of units of service (one unit equals fifteen minutes) that were provided during a visit in accordance with this chapter. A medicaid maximum for a private duty nursing visit is the amount of the base rate plus the unit rate amount for each unit over four units.
- (C) The amount of reimbursement for a visit shall be the lesser of the provider's billed charge or seventy-five per cent of the total medicaid maximum as specified in paragraph (B) of this rule when billing with the modifier HQ "group setting" for group visits.
- (D) The modifiers set forth in appendix B must be used to provide additional information in accordance with this chapter.
- (E) Reimbursement must be provided in accordance with paragraphs (A) to (D) of rule 5101:3-1-60 of the Administrative Code.
- (F) Providers of PDN will not be reimbursed for PDN services provided to a consumer that duplicate services already paid by medicaid or another funding source. For example, if the facility/home where a residential state supplemental recipient or medicaid consumer resides, such as an adult foster home, adult family home, adult group home, ICF/MR, residential care facility, community alternative home, residential facility or other facility, is paid to provide nursing services, then PDN services are not reimbursable by medicaid.

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