Professional nursing services

SERVICE CODE DATA SHEET

Registered providers must only select service codes and modifiers that are available to them based on their fully executed contract (and contract subcode if applicable). See contract for additional details.

SERVICE CODE/ MODIFIER	SERVICE CODE DESCRIPTION	UNIT TYPE	PAYMENT TYPE	MAXIMUM LENGTH OF SERVICE PER AUTHORIZATION	MAXIMUM NUMBER OF UNITS/$	MAXIMUM RATE
Skilled Nursing Subcode Payment for short-term, intermittent treatment of acute conditions or exacerbation of a chronic condition. Skilled nursing is used for treatment of chronic, stable, long-term conditions that cannot be delegated or self-directed.						
T1001/CG	Skilled nurse consultation	EA	MB	3 calendar months (up to 93 calendar days)	32 units per consultation	$36 per unit
T1002	Skilled nursing - RN - quarter hour	OF	RB	3 calendar months (up to 93 calendar days)	100 units per month	$36 per unit
T1002/U2	Skilled nurse consultation – Skin observation protocol: Home visit	OF	MB	3 calendar months (up to 93 calendar days)	100 units per consultation	$36 per unit
T1003	Skilled nursing - LPN - quarter hour	OF	RB	3 calendar months (up to 93 calendar days)	100 units per month	$36 per unit
Nurse Delegation Subcode Payment for an RN to delegate and supervise specific skilled nursing tasks to nursing assistants or home care aides for eligible clients who have a skilled nursing task need.						
H2014/U5	Nurse delegation	OF	RB	3 calendar months (up to 93 calendar days)	200 units per month	$16 per unit

SERVICE CODE/ MODIFIER	SERVICE CODE DESCRIPTION	UNIT TYPE	PAYMENT TYPE	MAXIMUM LENGTH OF SERVICE PER AUTHORIZATION	MAXIMUM NUMBER OF UNITS/$	MAXIMUM RATE
Private Duty Nursing Subcode Payment for in-home skilled nursing care to individuals who would otherwise be served in a medical institution. Individuals using PDN services are dependent on a technological modality, including mechanical ventilation, complex respiratory support, tracheostomy, intravenous (IV) or parenteral administration of medications, or IV administration of nutritional substances.						
T1000/TD	Private duty nursing: RN	OF	RB	3 calendar months (up to 93 calendar days)	1984 units per month	$68 per unit
T1000/TE	Private duty nursing: LPN	OF	RB	3 calendar months (up to 93 calendar days)	1984 units per month	$68 per unit
T1000/U1	Private duty nursing, holiday pay: RN	OF	RB	3 calendar months (up to 93 calendar days)	288 units per month	$101 per unit
T1000/U2	Private duty nursing, holiday pay: LPN	OF	RB	3 calendar months (up to 93 calendar days)	288 units per month	$101 per unit
T1000/U3	Private duty nursing, holiday pay: Agency	OF	RB	3 calendar months (up to 93 calendar days)	288 units per month	$101 per unit

ADDITIONAL INFORMATION

- See the statement of work in your contract for information on services that are covered and excluded under this contract.
- Use the comment section of the pre-authorization screen to itemize or provide details of the service(s) that will be provided.

KEY

UNIT TYPE	
EA	One unit is equal to the total cost of each good or service.
OF	One unit is equal to one quarter hour (15 minutes).
PAYMENT TYPE	
MB	Units/dollars are the total for the entire date span and can be billed multiple times within the span, not exceeding the total amount pre-authorized.
RB	Units/dollars repeat for each month in the date span. If multiple months are pre-authorized, the number of units will be applicable to each calendar month.

RESOURCES

LINK	DESCRIPTION
Provider toolkit	Webpage for accessing all provider resources (including the ones below).
Pre-authorization guide	Step-by-step guidance and examples to help you create a pre-authorization in ProviderOne.
Maximum rates sheet	Maximum rates for all service codes.
Billing guide	Guide to support you in setting up your ProviderOne account, creating pre-authorizations, submitting claims and more.