



STATE OF NEW YORK DEPARTMENT OF HEALTH

Corning Tower The Governor Nelson A. Rockefeller Empire State Plaza Albany, New York 12237

****ALL NEW CASES REQUIRE PRIOR APPROVAL****

Private Duty Nursing Paperwork Requirement for New Cases

MEDICAID ID#: _____

1. Letter of Medical Necessity from ordering physician to include all skilled needs, level of care (LPN or RN) and number of hours being recommended.
2. Nursing Assessment – This is a head-to-toe, system-by-system physical assessment done by an RN. If client is hospitalized, in a rehabilitation center or skilled nursing facility, an in-house RN can do the assessment. If the client is currently residing at home in the community, then a Certified Home Health Agency (CHHA) must do the assessment (i.e., the M27R).
3. Back-up/training statement signed and dated by the primary caretaker, i.e., “In the event a nursing shift is not covered, I will be responsible for taking care of _____, and have been fully trained in all skilled tasks.”
4. Documentation of training by facility staff (for hospitalized clients or those in a rehabilitation or SNF).
5. Psychosocial Assessment to include:
 - a. Who resides in the household with the client (include ages of any siblings);
 - b. Caregiver(s) work schedules on their company letterhead;
 - c. If applicable, school schedule and calendar;
 - d. If primary caretaker is attending college, send course schedule on college stationery.
6. Ventilator dependent clients, send the respiratory company home assessment and ventilator settings.
7. If there is Primary Insurance, send an Explanation of Benefits (EOB) from the insurance company
 - a. If client has primary insurance and this is **NOT** disclosed on the Medicaid system, then no approval for PDN hours will be authorized.
8. All skilled tasks must be “specified.” For example, do not write suction “PRN,” instead, document actual frequency such as suctioned Q 4hrs. For tube feedings – list the actual time of day administered (8a, 12N, 4p, etc.)
9. For cases to be staffed by independent LPNs: a “letter of oversight” signed by the ordering physician must be submitted. This letter should state, “I am aware that there are independently enrolled LPNs staffing this case and I am willing to provide oversight to them.”
10. If PDN is for school, then submit a letter from the school district stating child cannot attend without 1:1 nursing and district cannot provide it.