

Ohio Medicaid PDN Contract 09-25-2023

Procedure Code	Procedure Description	Pricing Indicator	Rate Type	Mod1	Mod2	Mod3	Mod4	Max Fee	Max Fee Eff. Date	Max Fee End Date	PA
T1000	PRIVATE DUTY/INDEPENDENT NSG	HHPDN	NRB					NA	NA	NA	Y N
T1000	PRIVATE DUTY/INDEPENDENT NSG	HHPDN	OLB					NA	NA	NA	Y N
T1000	PRIVATE DUTY/INDEPENDENT NSG	HHPDN	NLB					NA	NA	NA	Y N
T1000	PRIVATE DUTY/INDEPENDENT NSG	MAXFEE	ORU					10.62	11/1/2021	12/31/2299	Y N
T1000	PRIVATE DUTY/INDEPENDENT NSG	HHPDN	ARB					NA	NA	NA	Y N
T1000	PRIVATE DUTY/INDEPENDENT NSG	MAXFEE	OLU					8.84	11/1/2021	12/31/2299	Y N
T1000	PRIVATE DUTY/INDEPENDENT NSG	HHPDN	ALB					NA	NA	NA	Y N
T1000	PRIVATE DUTY/INDEPENDENT NSG	HHPDN	ORB					NA	NA	NA	Y N
T1001	NURSING ASSESSMENT/EVALUATN	MAXFEE	ORU					10.53	11/1/2021	12/31/2299	N
T1001	NURSING ASSESSMENT/EVALUATN	MAXFEE	NRC					7.38	11/1/2021	12/31/2299	N
T1001	NURSING ASSESSMENT/EVALUATN	MAXFEE	ARC					8.83	11/1/2021	12/31/2299	N
T1001	NURSING ASSESSMENT/EVALUATN	MAXFLT	NRA					NA	NA	NA	N
T1001	NURSING ASSESSMENT/EVALUATN	MAXFLT	ARA					NA	NA	NA	N