



IDAHO DEPARTMENT OF HEALTH & WELFARE

Private Duty Nursing (PDN) Services

** This Fee Schedule includes the rates for Nursing Agency (PDN) providers delivering Private Duty Nursing (PDN) services. Refer to the [separate Fee Schedules](#) for rates specific to Certified Family Homes (CFH), Personal Assistance Agencies (PAA), Residential Assisted Living Facilities (RALF), and other A&D Waiver service Providers.**

Fee schedules are prepared as tools to assist Medicaid providers and are not intended to grant rights or impose obligations. Every effort is made to ensure the accuracy of the information within the fee schedules as of the date they are posted. Medicaid makes no guarantee that this compilation of fee schedule information is error-free and will bear no responsibility or liability for the results or consequences of the use of these schedules.

Providers must verify member coverage on the date of service by calling (866) 686-4272 or using their trading partner account at IDMedicaid.com. Coverage and criteria information is communicated in the Provider Handbook, Medicaid Newsletters and Information Releases posted on IDMedicaid.com. The Current Procedural Terminology (CPT) codes descriptors, and other data are registered trademarks of the American Medical Association with all rights reserved.

Procedure Code	Modifier	Description	1 Unit Equiv.	Allowed Amount
T1001		Nursing Assessment/Evaluation (Agency)	1 Visit	\$97.82
T1002		Nursing Services RN (RN services up to 15 min)	15 min	\$19.56
T1003		Nursing Services LPN (LPN/LVN services up to 15 min)	15 min	\$14.04
G9002		RN Care Plan Development and Placement (Initial-10 units, Redetermination-5 units)	15 min	\$19.56

Coverage and criteria information is communicated in the Provider Handbook, Medicaid Newsletters and Information Releases at IDMedicaid.com.

For questions related to billing and claims, please contact the appropriate resource:

- **Fee-For-Service Medicaid Participants:**
 - Gainwell Technologies – (866) 686-4272

Questions about pricing should be directed to the Office of Reimbursement, Idaho Division of Medicaid, at (208) 287-1180 or email MedicaidReimTeam@dhw.idaho.gov

Requests for a reimbursement rate review should be directed to the Provider Rate Review team at MedicaidRateReview@dhw.idaho.gov

Thank you for your continued participation in the Idaho Medicaid Program.