

PDN Documentation Checklist

- **Initial Referral**

Step 1: Notification

- Notify PDN nurse consultant via email

Step 2: Submitting prior approval (PA) request. Please upload the following:

- 3508 – PDN Referral Form
- Recent history and physician (H&P) or Hospital Discharge Summary
- Private health insurance Explanation of Benefits (EOB) or denial

Step 3: Continuation approval. Within 30 days of the start of care, please upload the following:

- Attending physician-signed CMS 485
- Employment verification documentation for caregiver(s) on company letterhead
- PDN service provider consent to treat document

- **Reauthorization**

- Attending physician-signed CMS 485
- 3509 – PDN Medical Update
- Private health insurance Explanation of Benefits (EOB) or denial

- **Change Request**

- Notify PDN nurse consultant via email
- 3511 – PDN Change Request Form
- Attending physician-signed addendum order detailing the requested hours
- Hospital discharge summary, if applicable
- At least five non-consecutive days of nursing notes
- Caregiver employment verification or official class schedule, if applicable
- Private insurance Explanation of Benefits document, if applicable

- **Branch Transfer Request**

The *initiating* PDN Service Provider branch will:

- Notify PDN nurse consultant via email
- Submit a PA request under new NPI #
- Upload the attending physician-signed addendum order stating move from one branch with NPI # to another branch with NPI # effective on XX date, or an updated CMS-485 (Home Health Certification and Plan of Care Form) for the new NPI #

The *current* PDN Service Provider branch will:

- Upload the 3513 – PDN Discharge Summary Form

- **Transfer Provisional Request**

The *initiating* PDN service provider will:

- Notify PDN nurse consultant via email
- Submit a PA request
- Upload the 3508 – PDN Referral Form
- Upload private health insurance Explanation of Benefits (EOB) or denial

The *current* PDN service provider(s) will:

- Upload the 3513 – PDN Discharge Summary Form, if applicable

- **Transfer Continuation Request**

Within 30 days of the start of care, the initiating PDN service provider will upload the following:

- Attending physician-signed CMS 485
- PDN service provider consent to treat document

- **Shared Provisional Request**

The *initiating* PDN Service Provider will:

- Notify PDN nurse consultant via email
- Submit a PA request
- Upload the 3508 – PDN Referral Form
- Upload the 3512 – PDN Shared Case Form
- Private health insurance Explanation of Benefits (EOB) or denial

The *current* PDN service provider(s) will:

- Upload the 3513 – PDN Discharge Summary Form, if applicable

- **Shared Continuation Request**

The *initiating* PDN service provider will upload the following:

- Attending physician-signed CMS 485
- PDN service provider consent to treat document

- **Re-distribution of Shared Hours request**

The *initiating* PDN service provider will:

- Notify PDN nurse consultant via email
- Upload the 3512 – PDN Shared Case Form

The *current* PDN service provider(s) will:

- Upload the 3513 – PDN Discharge Summary Form, if applicable

- **Termination/Discharge from care**

- Notify PDN nurse consultant via email
- 3513 – PDN Discharge Summary Form