Emergent Private Duty Nursing (PDN) Need

1. Nurse/nursing agency conducts an evaluation with the family/guardian to determine health and safety needs of member.

2. Nurse/nursing agency notifies the member’s MCO care coordinator and physician (PCP) about the emergent PDN need/situation. MCO and nursing agency ensure provision of PDN services.

Is the backup/secondary caregiver able and available to provide and/or direct care?

**YES**

1. Backup plan is activated.
2. Backup/secondary caregiver assumes primary caregiver role and responsibilities.

Nurse/nursing agency works with backup/secondary caregiver.

Physician and MCO re-evaluate PDN services/authorizations based on nursing agency/family evaluation to determine if increased hours or services are needed and available.

**Increased hours needed**

1. Nursing agency notifies PCP and obtains feedback regarding next steps and care plan orders.
2. MCO completes prior authorization.
3. MCO care coordinator supports as needed.
4. Effectiveness of backup plan re-evaluated every 24-48 hours to ensure member’s safety and health are maintained.

**No need to increase hours**

Effectiveness of backup plan re-evaluated every 24-48 hours to ensure member’s safety and health are maintained.

**See page 2**

**NO**

If re-evaluation results indicate it is unsafe to maintain member in home, the nurse/nursing agency, MCO coordinator, PCP and family/guardian discuss different options and possible arrangements for transferring the member to a facility appropriate for the member’s level of care.
Private Duty Nursing Emergent Care Decision Tree

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Is the backup/secondary caregiver able and available to provide and/or direct care?

YES

See page 1

NO

Nurse/nursing agency assesses and evaluates health and safety needs of the member to determine if needs can be met at home. Assessment includes communication with any relative caregivers or temporary custodians of the child.

YES

1. Nurse/nursing agency notifies PCP and requests order for increased PDN hours.
2. MCO completes prior authorization.
3. MCO coordinates supports as needed.

PDN services are evaluated every 24-48 hours.

The need for PDN services can be met.

Maintain member in the home and re-assess health and re-evaluate safety as needed.

The need for PDN services cannot be met.

Not safe to maintain member in home.

NO

Nurse/nursing agency, MCO coordinator, PCP and family/guardian discuss different options and possible arrangements for transferring the member to a facility appropriate for the member’s level of care.