	DEPARTMENT: Specialty Programs
LOCAL HEALTH PLAN: Louisiana	LINE OF BUSINESS: Medicaid
TITLE: Criteria for Medical Necessity & Prior Authorization – Pediatric Day Health Care (PDHC)	NUMBER: LA 010.2
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I. PURPOSE

To provide all staff working with the United Healthcare Community & State Louisiana (UHC C&S LA) Health Plan, including but not limited to, the Pediatric Day Health Care (PDHC) Care Coordination team and United HealthCare Medical Directors with concise criteria for use during prior authorization and appeal reviews for PDHC to determine medical necessity.

II. DEFINITIONS

Pediatric Day Health Care (PDHC) is a community-based alternative to long-term care and extended in-home nursing care designed to provide an array of services to meet the medical, social and developmental needs of children from birth up to 21 years of age, who have a complex medical condition which requires skilled nursing care and therapeutic interventions on an ongoing basis. PDHC is intended to be for individuals needing a higher level of care that cannot be provided in a more integrated community- based setting.

PDHC does not provide respite care, and it is not intended to be an auxiliary (back-up) for respite care.

Applicable Codes:

T2002 – Pediatric Day Health Care (PDHC) transportation per diem service code.

T1025 – Pediatric Day Health Care (PDHC) full-day service code.


T1026 – Pediatric Day Health Care (PDHC) 6 hours or less per day service code.

III. SCOPE/POLICY

PDHC services require prior authorization using codes: T1025, T1026 and T2002 and will be reviewed for a service period of 90 calendar days. Services may be provided seven days a week and up to 12 hours per day for qualified Medicaid recipients as documented in the plan of care.

Medical Necessity for PDHC exists when the beneficiary:

- **is categorically eligible Medicaid beneficiary birth through 20 years of age (EPSDT eligible); and,**
- **has been prescribed PDHC by a physician; and,**
- **has a complex medical condition which requires skilled nursing care and therapeutic interventions on an ongoing basis to:**

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- preserve and maintain health status; and/or
- prevent death; and/or
- treat/cure disease; and/or
- ameliorate disabilities or other adverse health conditions; and/or
- prolong life

PDHC is to serve as a community-based alternative to long-term care and extended in-home nursing care.

PDHC is intended to be for individuals needing a higher level of care that cannot be provided in a more integrated community-based setting.

Services may be provided seven days a week and up to 12 hours per day for qualified Medicaid beneficiaries as documented in the plan of care.


PDHC does not provide respite care, and it is not intended to be an auxiliary (back-up) for respite care.

The following documentation is required to be submitted with the prior authorization request for review:

- Prior authorization form; and
- Physician's order; and
- Plan of care for PDHC; and
- Documentation to substantiate medical necessity of requested services, including but not limited to:
 - Physician's most recent note documenting medical necessity for the PDHC; and
 - The Prior Authorization checklist indicating the beneficiary's skilled nursing care requirements.
- Renewal of Prior Authorization Only: Documentation of a face-to-face evaluation between the prescribing physician and beneficiary which shall be held every 90 days (In exceptional circumstances, at the discretion of the physician prior authorizing PDHC services, the face to face evaluation requirement may be extended to 180 days).

IV. REFERENCES:

Louisiana Department of Health PEDIATRIC DAY HEALTH CARE PROVIDER MANUAL: Chapter Forty-five of the Medicaid Services Manual; Section 45.0 – Pediatric Day Health Care

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V. APPROVED BY:

 Julie Morial, MD
 Chief Medical Officer
 Louisiana Community and State

 Date

 Nicole Thibodeaux, BSN RN CCM
 Director of Clinical Services
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 Date

VI. REVIEW HISTORY:

Effective Date	Key update from Previous Version	Reason for Revision