



AETNA BETTER HEALTH®

d/b/a Aetna Better Health of Louisiana

Policy

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PURPOSE

Aetna Better Health Louisiana (ABHLA) developed this policy to assist with making coverage determinations for the In Lieu Of Service (ILOS) Care at Home Treatment pilot program. The In Lieu Of Service (ILOS) pilot program is to provide mobile treatment for a wide array of non-threatening physical health medical conditions to avoid Emergency Department (ED) care.

The duration of the pilot will last six months from the effective date of the final contract with Acadian Health. The pilot will evaluate clinical outcome effectiveness and cost effectiveness of receiving care at home by paramedics employed by Acadian Health. Acadian Health will provide data monthly to the contracting MCO including enrollee outcomes, PCP follow up appointment information, and clinical diagnosis.

SCOPE

The scope of this policy applies to the Integrated Care Management staff and any ABHLA clinical/non-clinical member facing staff.

POLICY

There are (2) Care at Home treatment pathways for the pilot program. These are two distinct programs aimed at reducing Emergency Department utilization for eligible populations. The population in scope for the two programs are ABHLA eligible enrollees with P-linkages, aged 13 years and older, with (5) or more ED visits in a rolling (12) month period, and residing in regions 4 & 5. The pilot program excludes enrollees with B-linkages, pre & postnatal services, and the treatment of behavioral health conditions.

The (2) pathways for the Care at Home program are:

Acute Care @ Home program is on demand urgent care available 8am-10pm, (7) days a week. The population is limited to those enrollees who need acute care, are physically unable to reach their provider and may otherwise necessitate transport by ambulance to an ED. Acute Care @ Home in-home visits shall be scheduled within (1) hour of the receipt of the referral.

Clinic @ Home program is a non-urgent visit scheduled in advance available 8am-10pm, (7) days a week. It is to identify and address the needs of high ED utilizer enrollees which includes but is not limited to an in-home assessment and screening. The Clinic @ Home



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program population is limited to enrollees identified with (5) or more ED visits in (12) rolling months and who are not actively engaged with Case Management. Once referred to Acadian Health, the visit shall be scheduled within (24) hours or (1) business day. Enrollees are allowed a maximum of (4) Clinic @ Home visits per (12) rolling months.

PROCEDURE

Acute Care @ Home

The Primary Care Physician (PCP) contacts Acadian Health to arrange a visit to the enrollee when an in-office or telehealth visit is not otherwise available. If the enrollee agrees, Acadian Health will deploy a paramedic into the home within (1) hour to conduct a comprehensive assessment. The paramedic will then contact the referring PCP to communicate findings and request orders for treatment and symptom management. If the enrollee’s condition improves, Acadian Health will conduct a Social Determinants of Health (SDOH) assessment, assist in scheduling a follow up visit with their PCP, and/or submit a referral to ABHLA Care Management as needed. Acadian Health will make clinical documentation of the visit available via secure online site to the PCP and MCO. The goal is to avoid an unnecessary ED visit and reconnect the enrollee to their PCP.

Clinic @Home

Once an enrollee is identified as being eligible for the program, the MCO will contact the PCP to obtain approval of the enrollee’s participation. ABHLA will then contact the enrollee, explain the program, and obtain commitment to participate. The referral will be sent via online portal to Acadian Health who will outreach the enrollee to schedule an initial visit. The visit will be scheduled within (24) hours or by the next business day. The goal of the paramedic visit is to schedule an in-home assessment of the member in order to assess the disease state, address SDoH issues (i.e. food and housing instability), identify barriers to care, develop a plan, and connect the enrollee to their PCP. Referral is made to ABHLA Case Management as needed. Acadian Health will make clinical documentation of the visit available via secure online site to the PCP and MCO.

Acute Care @ Home encounter transition to 911 ambulance transport

Should Acadian Health arrive for an Acute Care @ Home or a Clinic @ Home visit and the enrollee is experiencing severe medical difficulty, Acadian Health Providers will begin care per emergency protocols.



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BILLABLE CPT CODES

The following billable codes are included for the Care @ Home programs (unscheduled = acute care @ home; scheduled = clinic @ home).

The CPT code in the table below will be inclusive of all interventions and services provided during the in-home visit.

<u>CPT</u>	<u>Program</u>	<u>Mobile Health Home Visit Description</u>	<u>Visit Description</u>
<u>99342</u>	<u>Acute Care @ Home</u>	<u>ALS Provider (Paramedic) - Includes Advanced Life Support (ALS) assessment, basic vital signs (pulse, blood pressure, pulse oximetry, temperature, weight, and respiratory rate). Advanced Level Providers can support care such as IVs, EKGs, A1C, fluid and medication administration.</u> <u>BLS Provider (Paramedic) - Includes basic assessment, basic vital signs (pulse, blood pressure, pulse oximetry, temperature, weight, and respiratory rate) support virtual medical assessments and no medical interventions.</u>	<u>New Patient Home Visit (Un-Scheduled) Up to 30 minutes</u>
<u>99344</u>	<u>Acute Care @ Home</u>	<u>ALS Provider (Paramedic/Licensed Practical Nurse) - Includes Advanced Life Support (ALS) assessment, basic vital signs (pulse, blood pressure, pulse oximetry, temperature, weight, and respiratory rate). Advanced Level Providers can support care such as IVs, EKGs, A1C, fluid and medication administration.</u> <u>BLS Provider (Paramedic) - Includes basic assessment, basic vital signs (pulse, blood pressure, pulse oximetry,</u>	<u>New Patient Home Visit (Un-Scheduled) Up to 60 minutes</u>



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		<u>temperature, weight, and respiratory rate) support virtual medical assessments and no medical interventions.</u>	
<u>99345</u>	<u>Acute Care @ Home</u>	<u>ALS Provider (Paramedic/Licensed Practical Nurse) - Includes Advanced Life Support (ALS) assessment, basic vital signs (pulse, blood pressure, pulse oximetry, temperature, weight, and respiratory rate). Advanced Level Providers can support care such as IVs, EKGs, A1C, fluid and medication administration.</u> <u>BLS Provider (Paramedic) - Includes basic assessment, basic vital signs (pulse, blood pressure, pulse oximetry, temperature, weight, and respiratory rate) support virtual medical assessments and no medical interventions.</u>	<u>New Patient Home Visit (Un-Scheduled) Up to 75 minutes</u>
<u>99348</u> <u>99348</u> <u>EM*</u>	<u>Clinic @ Home</u>	<u>ALS Provider (Paramedic/Licensed Practical Nurse) - Includes Advanced Life Support (ALS) assessment, basic vital signs (pulse, blood pressure, pulse oximetry, temperature, weight, and respiratory rate). Advanced Level Providers can support care such as IVs, EKGs, A1C, fluid and medication administration. (This is repetitive in provider proposal at same rates)</u> <u>BLS Provider (Paramedic) - Includes basic assessment, basic vital signs (pulse, blood pressure, pulse oximetry, temperature, weight, and respiratory rate) support virtual medical</u>	<u>Patient's Home (Scheduled) Up to 30 minutes</u>



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<p><u>99349</u> <u>99349</u> <u>EM*</u></p>	<p><u>Clinic @ Home</u></p>	<p><u>ALS Provider (Paramedic/Licensed Practical Nurse) - Includes Advanced Life Support (ALS) assessment, basic vital signs (pulse, blood pressure, pulse oximetry, temperature, weight, and respiratory rate). Advanced Level Providers can support care such as IVs, EKGs, A1C, fluid and medication administration. (This is repetitive in provider proposal at same rates)</u></p> <p><u>BLS Provider (Paramedic) - Includes basic assessment, basic vital signs (pulse, blood pressure, pulse oximetry, temperature, weight, and respiratory rate) support virtual medical</u></p>	<p><u>Patient's Home (Scheduled) Up to 45 minutes</u></p>
<p><u>99350</u> <u>99350</u> <u>EM*</u></p>	<p><u>Clinic @ Home</u></p>	<p><u>ALS Provider (Paramedic/Licensed Practical Nurse) - Includes Advanced Life Support (ALS) assessment, basic vital signs (pulse, blood pressure, pulse oximetry, temperature, weight, and respiratory rate). Advanced Level Providers can support care such as IVs, EKGs, A1C, fluid and medication administration. (This is repetitive in provider proposal at same rates)</u></p> <p><u>BLS Provider (Paramedic) - Includes basic assessment, basic vital signs (pulse, blood pressure, pulse oximetry, temperature, weight, and respiratory rate) support virtual medical</u></p>	<p><u>Patient's Home (Scheduled) Up to 60 minutes</u></p>
<p><u>99211 - 99215</u></p>	<p><u>Acute Care @ Home Clinic @ Home</u></p>	<p><u>E&M code billed by physician collaborating care.</u></p>	<p><u>Telehealth visit</u></p>



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<u>99417</u> <u>EM*</u>	<u>Acute Care @ Home Clinic @ Home</u>	<u>Non-Paramedic/EMT – Includes prolonged outpatient evaluation and management services that go beyond primary service’s required time</u>	<u>Patient’s Home (Scheduled) Prolonged Services, per additional 15-minute increment</u>
<u>99417</u>	<u>Acute Care @ Home Clinic @ Home</u>	<u>ALS – Includes prolonged outpatient evaluation and management services that go beyond primary service’s required time</u>	<u>Patient’s Home (Scheduled) Prolonged Services, per additional 15-minute increment</u>

DEFINITIONS:

<u>Advanced Life Support (ALS)</u>	<u>Emergency medical care administered to at least the level of an emergency medical technician-paramedic's scope of practice.¹</u>
<u>Basic Life Support (BLS)</u>	<u>Emergency medical care administered to the EMT-basic scope of practice²</u>
<u>Case Management</u>	<u>A collaborative process of assessment, planning, facilitation and advocacy for options and services to meet an individual Enrollee’s health-related needs through communication and available resources to promote quality and cost-effective outcomes. Case management implicitly enhances care coordination through the designation of a case manager whose specific responsibility is to oversee and coordinate access and care delivery targeted to high-risk patients with diverse combinations of health, functional, and social needs.³</u>

¹ Louisiana Dept. of Health Managed Care Organization Manual, pg. 84

² Louisiana Dept. of Health Managed Care Organization Manual, pg. 84

³ Louisiana Medicaid Managed Care Organization Model Contract, Part 1 Glossary and Acronyms, pg. 4



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<u>Current Procedural Terminology (CPT®)</u>	<u>Listing of descriptive terms and identifying codes for reporting medical services and procedures performed by physicians. LDH has designated the CPT code set as the national coding standard for physician and other health care professional services and procedures under HIPAA.⁴</u>
<u>Emergency Medical Condition</u>	<u>A medical condition manifesting itself by acute symptoms of sufficient severity (including severe pain) that a prudent layperson, who possesses an average knowledge of health and medicine, could reasonably expect the absence of immediate medical attention to result in: (1) placing the health of the individual (or, with respect to a pregnant woman, the health of the woman or her unborn child) in serious jeopardy, (2) serious impairment to bodily functions, or (3) serious dysfunction of any bodily organ or part.⁵</u>
<u>Emergency Medical Transportation</u>	<u>Transportation provided for an Emergency Medical Condition.⁶</u>
<u>Emergency Room Care</u>	<u>Emergency Services provided in an emergency department.⁷</u>
<u>Emergency Services</u>	<u>Covered inpatient and outpatient services that are as follows: (a) furnished by a provider that is qualified to furnish these services under Title 42 of the Code of Federal Regulations and Title XIX of the Social Security Act; and (b) needed to evaluate or stabilize an Emergency Medical Condition.⁸</u>
<u>Enrollee</u>	<u>Beneficiary who is currently enrolled in an MCO, either by choice or Automatic Assignment by the Enrollment Broker⁹</u>

⁴ Louisiana Medicaid Managed Care Organization Model Contract, Part 1 Glossary and Acronyms, pg. 7

⁵ Louisiana Medicaid Managed Care Organization Model Contract, Part 1 Glossary and Acronyms, pg. 9

⁶ Louisiana Medicaid Managed Care Organization Model Contract, Part 1 Glossary and Acronyms, pg. 9

⁷ Louisiana Medicaid Managed Care Organization Model Contract, Part 1 Glossary and Acronyms, pg. 9

⁸ Louisiana Medicaid Managed Care Organization Model Contract, Part 1 Glossary and Acronyms, pg. 9

⁹ Louisiana Medicaid Managed Care Organization Model Contract, Part 1 Glossary and Acronyms, pg. 10



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<u>Healthcare Effectiveness Data and Information Set (HEDIS)</u>	<u>A set of performance measures developed by the National Committee for Quality Assurance (NCQA). The measures are designed to help health care purchasers understand the value of health care purchases and measure plan (e.g. MCO) performance.¹⁰</u>
<u>In Lieu of Service (ILOS)</u>	<u>A medically appropriate service outside of Managed Care Organization (MCO) covered services or settings (or beyond service limits established by Louisiana Department of Health LDH for MCO covered services) that are provided to members at their option, by the health plan as a cost-effective alternative to a MCO covered service or setting.¹¹</u>
<u>Non-Emergency Ambulance Transportation (NEAT)</u>	<u>A ride provided to an Enrollee with no other transportation resources that is not ambulatory and must travel via ambulance. NEAT does not include transportation provided on an emergency basis.¹²</u>
<u>Non- Emergency Medical Transportation (NEMT)</u>	<u>A ride, or reimbursement for a ride, provided so that an Enrollee with no other transportation resources can receive services from an entity providing Medicaid covered Services. NEMT does not include transportation provided on an emergency basis. ¹³</u>
<u>Plan of Care (POC)</u>	<u>The plan developed by the Contractor in conjunction with the Enrollee and other individuals involved in the Enrollee’s case management to support the coordination of an Enrollee’s care and provide support to the Enrollee in achieving care goals.¹⁴</u>
<u>Primary Care Provider (PCP)</u>	<u>An individual physician, nurse practitioner, or physician assistant who accepts primary responsibility for the management of an Enrollee's health care. The primary care provider is the patient’s point of access for preventive care or an illness and may treat the patient directly,</u>

¹⁰ Louisiana Medicaid Managed Care Organization Model Contract, Part 1 Glossary and Acronyms, pg. 12

¹¹ Louisiana Medicaid Managed Care Organization Model Contract, Part 1 Glossary and Acronyms, pg. 14

¹² Louisiana Medicaid Managed Care Organization Model Contract, Part 1 Glossary and Acronyms, page 19

¹³ Louisiana Medicaid Managed Care Organization Model Contract, Part 1 Glossary and Acronyms, page 19

¹⁴ Louisiana Medicaid Managed Care Organization Model Contract, Part 1 Glossary and Acronyms, page 21



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	<u>refer the patient to a specialist (secondary/tertiary care), or admit the patient to a hospital.¹⁵</u>
<u>Social Determinants of Health (SDOH)</u>	<u>The complex, integrated, and overlapping social structures and economic systems that are responsible for most health inequities. These social structures and economic systems include the social environment, physical environment, health services, and structural and societal factors. Social determinants of health are shaped by the distribution of money, power, and resources throughout local communities, nations, and the world.¹⁶</u>
<u>Telemedicine</u>	<u>Provision of MCO Covered Services through two-way, real time interactive electronic communication between the patient and the physician or practitioner at the distant site. This electronic communication means the use of interactive telecommunications equipment that includes, at a minimum, audio and video equipment.¹⁷</u>
<u>Urgent Care</u>	<u>Medical care provided for a condition that without Timely treatment, could be expected to deteriorate into an emergency, or cause prolonged, temporary impairment in one or more bodily functions, or cause the development of a chronic illness or need for a more complex treatment. Examples of conditions that require urgent care include abdominal pain of unknown origin, unremitting new symptoms of dizziness of unknown cause, and suspected fracture. Urgent care requires timely face-to-face medical attention within twenty-four (24) hours of Enrollee notification of the existence of an urgent condition.¹⁸</u>

Legal/Contract Reference:

- **2023 Louisiana Medicaid Managed Care Organization Attachment A: Model contract**
- **Louisiana Medicaid Managed Care Organization (MCO) Amendment Attachment C9: In Lieu of Services**

¹⁵ Louisiana Medicaid Managed Care Organization Model Contract, Part 1 Glossary and Acronyms, page 22

¹⁶ Louisiana Medicaid Managed Care Organization Model Contract, Part 1 Glossary and Acronyms, page 26

¹⁷ Louisiana Medicaid Managed Care Organization Model Contract, Part 1 Glossary and Acronyms, page 28

¹⁸ Louisiana Medicaid Managed Care Organization Model Contract, Part 1 Glossary and Acronyms, page 29



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Aetna Better Health

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