



Medicaid Managed Care Organization Contract Attachment C: In Lieu of Services

The Contractor may, at its option, cover the approved services or settings for Enrollees in lieu of Medicaid State Plan services as provided in this Attachment. Requirements and policies for in lieu of services are provided in the Contract and the MCO Manual.

Physical Health

In Lieu of Service	Medicaid State Plan Service(s)	Effective Date
Chiropractic services for adults age 21 and older	Inpatient hospitals, outpatient hospitals, physician services, nurse practitioner services, other licensed practitioners' services, laboratory and x-ray services, prescribed drugs	1/1/2023
Hospital-based care coordination for pregnant and postpartum individuals with substance use disorder and their newborns	Inpatient hospitals, outpatient hospitals, physician services, nurse practitioner services, other licensed practitioners' services	1/1/2023
Doula Services	Inpatient and outpatient hospital services	1/1/2023

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<p><u>Chiropractic services for adults age 21 and older</u></p> <p><u>The purpose of this ILOS is to provide coverage of chiropractic services to diagnose and treat neuromusculoskeletal conditions associated with the functional integrity of the spine. Services include evaluation and management services, x-rays, spinal manipulation, and other treatments.</u></p>	<p><u>Inpatient hospitals, outpatient hospitals, physician services, nurse practitioner services, other licensed practitioners' services, laboratory</u></p>	<p><u>Enrollees age 21 and older</u></p>	<p><u>99202 thru 99205 (E/M new pt); 99212 thru 99215 (E/M estab. pt); 72020, 72040, 72050, 72052, 72070, 72072, 72074, 72080, 72100, 72110,</u></p>	<p><u>1/1/2023</u></p>	<p><u>1/1/2022</u></p>

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	and x-ray services, prescribed drugs		72114, 72120, 72220 (X Rays); 98940, 98941, 98942 (spinal manipulation); 97012, 97014, 97022, 97035, 97032, 97110, 97112, 97116, 97124, 97140 (other treatments); 20560, 20561 (dry needling)		
<p><u>Hospital-based care coordination for pregnant and postpartum individuals with substance use disorder and their newborns</u></p> <p><u>The purpose of this ILOS is to provide coverage of a comprehensive pregnancy medical home model of care to enrollees with substance use disorder (SUD) who are pregnant or postpartum. The model includes care coordination, health promotion, individual and family support, and linkages to community/support services, behavioral, and physical health services. The model does not include coverage of physical and behavioral health services otherwise covered under the Louisiana Medicaid State Plan (e.g., outpatient OB care, SUD treatment services). In addition, this ILOS is not duplicative of MCO case management services.</u></p> <p><u>This ILOS will not serve as a substitute for medically necessary physical and behavioral health services such as obstetrical care or SUD care. Rather, the ILOS will help to ensure that enrollees</u></p>	Inpatient hospitals, outpatient hospitals, physician services, nurse practitioner services, other licensed practitioners' services	Enrollees with substance use disorder (SUD), who are pregnant and age 18 or older or up to 12 months postpartum, and their newborns	H0002(alcohol and drug screening); H0006(alcohol and drug tx services); H0023 (alcohol and drug tx outreach/BH services)	1/1/2023	1/1/2022

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<p><u>receive comprehensive physical and behavioral health care services that meet their needs, while avoiding preventable use of acute care.</u></p>					
<p><u>Doula Services</u></p> <p><u>The purpose of this ILOS is to offer pregnant enrollees adjunctive services that encourage and support healthy childbirth experiences through support of pregnant persons before, during, and after childbirth. Support also may include birthing, lactation, and parenting classes. Reduction in adverse birth outcomes is the primary goal of this program by supporting birthing persons through the use of doulas that are trained and dedicated to providing physical, emotional, and informational support during the childbirth period. Doulas augment routine prenatal care by assuring that members receive safe, healthy, and equitable prenatal and postnatal health care.</u></p>	<p><u>Inpatient and outpatient hospital services</u></p>	<p><u>Pregnant and postpartum women</u></p>	<p>S9443: Lactation Class S9442: Birthing Class S9443: Lactation Class S9444: Parenting Class S9445: Pre/post-natal Doula visits 99199: Attendance at Vaginal Delivery by Doula 99404: Preventive Medicine Counseling/Post/Natal Nurse Advocacy</p> <p>(Billing provider type DL/1W and/or Rendering Provider Type DL/IV)</p>	<p><u>1/1/2023</u></p>	<p><u>1/1/2022</u>1/1/2022</p>
<p><u>Remote Patient Monitoring</u> <u>Effective 7/1/2023</u></p> <p><u>Remote patient monitoring (RPM) means digital technologies to collect medical and other forms of health data from individuals in one location and electronically transmit that information securely to health care providers in a different location for assessment, recommendations, and interventions. RPM devices include (1)</u></p>	<p><u>Physician services (office visits), emergency services, and inpatient hospitals</u></p>	<p><u>Members with hypertensive disorders and/or diabetes, ages 18-75 (HEDIS), with the following characteristics:</u></p> <ul style="list-style-type: none"> <u>Members with hypertension and a PPA/PPR/PPV* event within the last 18 months.</u> 	<p>99453 (setting up remote patient monitoring); 99454 (remote monitoring of physiologic parameters); 99199 (unlisted service) with</p>	<p><u>7/1/2023</u></p>	<p><u>7/1/2023</u>7/1/2023</p>

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<p>non-invasive remote monitoring devices that measure or detect common physiological parameters, and (2) non-invasive monitoring devices that wirelessly transmit the beneficiary's medical information to their health care provider or other monitoring entity. The device must be reliable and valid, and the beneficiary must be trained or sufficiently knowledgeable in the proper use/wearing of the device to ensure appropriate recording of medical information. Medical information may include, but is not limited to, blood pressure and heart rate and rhythm monitoring for members with hypertension and blood glucose control for members with diabetes. Members enrolled should have smart phone or tablet access and connectivity for data reporting.</p>		<ul style="list-style-type: none"> Members with diabetes and a PPA/PPR/PPV events within last 18 months Poorly controlled hypertension (>140/90), at risk for PPA/PPR/PPV Poorly controlled diabetes (HbA1c >9.0%), at risk for PPA/PPR/PPV Smart phone or tablet access <p>Pregnant women with hypertensive disorders and/or diabetes, ages 16-50, with the following characteristics:</p> <ul style="list-style-type: none"> Poorly controlled hypertension (>140/90) Insulin dependent diabetes in pregnancy Smart phone or tablet access 	<p>appropriate modifiers: may be used as an alternative reimbursement CPT code for systems that have conflict with use of 99454) <u>99453</u> <u>99454</u> <u>99199—with appropriate modifiers</u></p>		
<p>Outpatient Lactation Support <u>Effective 1/1/2024</u></p>	<p>Physician services, outpatient hospital services.</p>		<p>S9445, modifier 33 S9443</p>	<p><u>1/1/2024</u></p>	<p><u>1/1/2024</u>1/1/2024</p>
<p><u>Care at Home</u></p> <p>The purpose of this ILOS is to provide ordered treatment, at home, for enrollees with chronic disease who are experiencing an acute exacerbation of their illness. This is not intended as emergency care, but urgent care for enrollees who are physically unable to reach their provider and may otherwise necessitate emergency transport for care. Providers refer their patient for an at home scheduled visit when a virtual care or an in-office visit is not appropriate to address the enrollee's acute chronic health needs. An in-home care provider, either an EMT or paramedic, depending</p>	<p><u>Emergency ambulance, emergency department</u></p>	<p>Medicaid-eligible members aged 18 and up, with chronic disease, with acute needs and unable to access office visit or virtual visit.</p>	<p><u>99342</u> <u>99344</u> <u>99345</u> <u>99348</u> <u>99349</u> <u>99350</u> <u>99417</u> E&M codes <u>99211-99215</u></p>	<p><u>7/1/2024</u></p>	<p><u>7/1/2024</u></p>

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on need, is sent to the member's residence within 24 hours to facilitate treatment and symptom management, reducing unnecessary ED use and hospitalizations. Communication and coordination of care is arranged with the referring Provider.					

Behavioral Health

<u>In Lieu of Service</u>	<u>Medicaid State Plan Service(s)</u>	<u>Effective Date</u>
23-Hour observation bed services for adults age 21 and older	Inpatient psychiatric hospitals	1/1/2023
Freestanding psychiatric hospitals for adults ages 21-64	General hospital psychiatric units	1/1/2023
Injection services provided by licensed nurses to adults age 21 and older	Physician services	1/1/2023
Mental Health Intensive Outpatient Programs	Inpatient psychiatric hospitals	1/1/2023
Population health management programs	Emergency services, inpatient hospitals	1/1/2023

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<p>23-Hour observation bed services for adults age 21 and older</p> <p>23-hour observation offers an alternative to an unwarranted inpatient psychiatric hospitalization admission by providing 23-hour crisis respite and observation in a secure setting. This service is aimed for members who are voluntarily admitting for less than</p>	Inpatient psychiatric hospitals	Medicaid-eligible adults 21+, presenting in a crisis.	G0379, 99218,99219,99220, 99234,99235,99236	1/1/2023	12/1/2015

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<p><u>24 hours due to sub-imminent crisis stabilization which is currently not available in every region. This service attempts to prevent psychiatric/psychologic impairments through rapid stabilization thus leading to the sooner return of functional independence.</u></p>					
<p><u>Freestanding psychiatric hospitals for adults ages 21-64</u></p> <p><u>The purpose of this alternative service is to assist adult Medicaid members with significant behavioral health challenges. This population would be treated in more expensive general hospital psych units without this service. This creates access issues as beds in general hospitals are limited. Multiple downstream issues occur as a result. Consumers must remain in emergency departments while waiting for available beds. Costs increase to the healthcare system as members utilize those medical resources while awaiting beds in general hospitals. Use of free standing psych units reduces Emergency Department consumption, increases psychiatric bed capacity and provides a less costly alternative to general hospital beds.</u></p>	<p><u>General hospital psychiatric units</u></p>	<p><u>Medicaid-eligible adults, with significant behavioral health challenges, ages 21-64 years, with the following characteristics: Any adult that would have previously required treatment in general hospital psych units.</u></p>	<p><u>Rev Codes - 100, 114, 116, 124, 126, 134, 136,144, 146, 154, 156, 204 S9480, 124',126 00400P2, 00400QX, 00560QK, 01830QK, 90792, 90870, H0011SE, H0011TG, H0015HB, H0015HM,H0015HO , H0015HQ, H0039HB, H2034HB, H2036, H2036HB, H2036SE, H2036TG Provider Specialty (PS)/Provider Type: (PT)"PS = 86, PT = 64</u></p>	<p><u>1/1/2023</u></p>	<p><u>12/1/2015</u></p>
<p><u>Injection services provided by licensed nurses to adults age 21 and older</u></p> <p><u>This service allows licensed nurses to provide injectable medications to adult Medicaid members. Many members are unable or unwilling to take oral psychotropics or their mental status indicates a need for injectable meds to assure compliance and stability. The objective of adding Licensed Nurses is to fill in this services delivery method to aid members to receive</u></p>	<p><u>Physician services</u></p>	<p><u>Medicaid-eligible adults ages 21 who have outpatient medication needs requiring injectable medications, as opposed to oral intake. Members who have tried and failed on oral psychotropics or their mental status indicates a need for injectable meds to assure compliance and stability.</u></p>	<p><u>99201-99215, 96372, 96372, 99070, J0400, J1630, J1631, J2060, J2315, J2358, J2426, J2794, J3310, J3360, J3486</u></p>	<p><u>1/1/2023</u></p>	<p><u>12/1/2015</u></p>

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<p><u>medications in the most efficient and least costly manner possible, and at the same time increasing compliance, reducing subsequent office visits, and reducing hospitalizations resulting from decompensation.</u></p>					
<p><u>Mental Health (MH) Intensive Outpatient Programs (IOP)</u></p> <p><u>The purpose of this ILOS is to provide enrollees treatment via the least restrictive level of care, allowing an alternative to inpatient hospitalization or Assertive Community Treatment and providing a step-down option from inpatient hospitalization for enrollees at high risk for readmission.</u></p>	<p><u>Inpatient hospitalization or Assertive Community Treatment</u></p>	<p><u>Medicaid Eligible Members, Age 12+, who are at risk for inpatient hospitalization for a psychiatric condition, or members needing a step down from an inpatient hospitalization that is a higher level than standard outpatient services.</u></p>	<p><u>S9480, S9480HB, H0015</u></p>	<p><u>1/1/2023</u></p>	<p><u>9/14/2018</u></p>
<p><u>Population Health Management Program</u></p> <p><u>Mindoula Clinical Services, P.C.'s Population Health Management Program ("PHMP") is a precision solution that targets, engages, and serves members with Serious Mental Illness ("SMI"), Substance Use Disorder ("SUD") and/or members with Sickle Cell Disease ("SCD") and other comorbid medical conditions through team-based, tech-enabled, care extension services. This focused approach includes (1) identification of members for the PHMP using proprietary algorithms and member archetype data, (2) outreach and enrollment of members using an intake process specific to SMI, SUD and SCD populations, and (3) provision of tech-enabled programmatic interventions that include content and methods tailored to reducing total costs of care by addressing behavioral, medical, and social needs specific to SMI, SUD and SCD populations.</u></p>	<p><u>Emergency services, inpatient hospitals</u></p>	<p><u>Members with Serious Mental Illness (SMI), Substance Use Disorder (SUD) and/or Sickle Cell Disease (SCD) living in Louisiana, ages 18+, who have a diagnosis of Schizophrenia, Major Depressive Disorder, Bipolar Disorder, and other SMI, with or without substance use, and members with SCD who have not engaged with outpatient care and experience repeated behavioral health-related hospitalizations and/or visits to the emergency department because of poorly treated/controlled behavioral health symptoms. Most of these members have either refused case management services or cannot be contacted.</u></p>	<p><u>99490</u></p>	<p><u>1/1/2023</u></p>	<p><u>1/5/2022</u></p>
<p><u>Therapeutic Day Center for ages 5-20</u> <u>Effective 7/1/2023</u></p> <p><u>The Center for Resilience is a therapeutic day center which provides educational and intensive mental health supports in an</u></p>	<p><u>Inpatient psychiatric hospitals, psychiatric residential</u></p>	<p><u>Children and adolescents with behavioral health diagnoses, 5 to <21, with the following characteristics:</u></p>	<p><u>G0177 or H0035</u></p>	<p><u>7/1/2023</u></p>	<p><u>7/1/2023</u></p>

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<p>innovative partnership with the Tulane University Medical School Department of Child and Adolescent Psychiatry to ensure the emotional well-being and academic readiness of children with behavioral health needs. Children receive instructional, medical, and therapeutic services at the day program site with the goal of building the skills necessary to successfully transition back to the traditional school setting. Center for Resilience provides a caring, non-punitive, therapeutic milieu with positive behavioral supports, trauma-informed approaches, evidence-based mental health practices, small-group classroom instruction, and therapeutic recreation activities. The leadership team is comprised of clinicians, educators, and medical doctors, and the therapeutic milieu is a result of this intentionally interdisciplinary collaboration. The goal of this ILOS is to reduce incidents of crisis hospitalization and residential psychiatric care.</p>	<p>treatment facility (PRTF)</p>	<ul style="list-style-type: none"> PTSD, anger, depression, mood disorders, developmental disabilities, learning disabilities, psychosis High risk behaviors & juvenile justice-involvement <p>Unresponsive to school and agency/MHR intervention</p>			
<p><u>Integrated Behavioral Health Homes</u> <u>Effective 7/1/2023</u></p> <p>Integrated Behavioral Health Homes (IBHH) is a value-based program that furthers alternative payment methodologies and integration by improving medical, behavioral, and social healthcare outcomes for participants while decreasing the overall total cost of care. MCOs who offer this ILOS will contract with qualified providers to deliver the six core services that are central to Medicaid health homes, as outlined by the ACA and endorsed by CMS, Substance Abuse and Mental Health Services Administration (SAMHSA), and the National Council for Mental Wellbeing:</p> <ul style="list-style-type: none"> Comprehensive care management; Care coordination; Health promotion; 	<p>Inpatient psychiatric hospitals, psychiatric residential treatment facility (PRTF)</p>	<p>Medicaid and dual eligible beneficiaries, all ages, with the following characteristics: Members with SMI, SED and/or SUD diagnoses who have complex medical comorbidities and high utilization of ER/ED, Medical IP, or Behavioral IP/Residential care</p>	<p>G9002</p>	<p><u>7/1/2023</u></p>	<p><u>7/1/2023</u></p>

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<ul style="list-style-type: none"> • <u>Comprehensive transitional care and follow-up;</u> • <u>Patient and family support; and</u> • <u>Referrals to community and social support services.</u> <p><u>The eligible population will be identified by the MCO and assigned to the participating providers within the eligible population’s geographical area. This is an opt-in model and does not require enrollees to change or adjust any of their existing provider relationships.</u></p>					
<p><u>Visions of Hope Community Services</u></p> <p><u>The Visions of Hope Community Services program is a comprehensive and intensive service bundling for high-risk, low-functioning individuals with severe and persistent mental illness. This model addresses whole person care that combines behavioral health while addressing social determinants of health and providing physical health coordination and support. The VOH-CS program serves individuals who would have difficulty navigating services across multiple, disconnected providers and thus are at greater risk of hospitalization, homelessness, substance use, victimization and incarceration. This model offers daily socialization opportunities for this population who might not interact socially with their peers in other settings.</u></p>	<p><u>Inpatient psychiatric hospitalization, Assertive Community Treatment Program, and Emergency Room Visits</u></p>	<p><u>Region 7 members 18 years or older who have a severe and persistent mental illness (SPMI) with or without a co-occurring disorder that is seriously impairing their functioning within the community as evidenced by a LOCUS of 3 or higher</u></p>	<p><u>H2022</u></p>	<p><u>7/1/2024</u></p>	<p><u>7/1/2024</u></p>