



# Aetna Better Health® In-Lieu-Of Services for Texas STAR Provider Information

## In-Lieu-of Services (ILOS)

Effective October 1, 2024, Aetna Better Health® will begin offering In-Lieu-Of Services (ILOS) to ensure a continuum of care for members diagnosed with mental health and/or substance use disorder.

Aetna Better Health® will offer Mental Health and Substance Use Disorder (SUD) Partial Hospitalization Program (PHP) and Intensive Outpatient Program (IOP) services in lieu of inpatient psychiatric care. ILOS will be available to members twenty-one (21) years of age and older.

Aetna Better Health® will not require members to use ILOS instead of a covered service or setting, but members will be offered the option of ILOS services when medically appropriate and cost-effective. **The member must agree to receive ILOS before the service is provided.**

Aetna Better Health® will not offer PHP and IOP for members who are at immediate risk of harming themselves or others.

For members ages twenty (20) and younger, PHP and IOP are covered under EPSDT benefits and are not considered ILOS. The EPSDT program is known as “Texas Health Steps.” For Members with CHIP, PHP and IOP are covered services (does not include CHIP Perinate). Providers should continue to follow their usual process for requesting prior authorization.

The processes below are based on requirements set forth in HHSC Uniform Managed Care Manual, Chapter 16.3. ([In-Lieu-of Covered Services and Settings \(PDF\) \(texas.gov\)](#))

## Notifying Members Who Are Eligible to Select In-Lieu-Of Services

### Partial Hospitalization Program (PHP) Services

Members eligible for PHP services include:

- Members who meet medical necessity for PHP level of care
- Members who are discharged from an inpatient hospital treatment program, and the PHP is in-lieu-of continued inpatient treatment; or
- Members, who in the absence of PHP services, would be at reasonable risk of requiring inpatient hospitalization.



## **Intensive Outpatient Program (IOP) Services**

Members eligible for IOP services include:

- Members who meet medical necessity for IOP level of care;
- Members who are discharged from an inpatient hospital treatment program, and the IOP is in-lieu-of continued inpatient treatment; or
- Members who are stepping down from PHP level of care; and/or
- Members who do not require withdrawal management or 24-hour supervision.

As part of the providers comprehensive assessment, Aetna Better Health® will request that members who meet medical necessity for PHP or IOP are educated by the provider on ILOS including a description of services and their option to accept services in lieu of inpatient hospitalization. The Aetna Better Health® ILOS Member Talking Points document will be shared with providers to facilitate member education. ([Refer to ABH Member ILOS Talking Points in Appendix](#))

The Aetna Better Health® Member ILOS Documentation form will be used to confirm the member has been educated and the member's decision whether they accept ILOS. The provider is required to fax the Aetna Better Health® ILOS Member Consent form to the health plan's UM Department. ([Refer to ABH Member ILOS Consent Form in Appendix](#))

Each time a member is admitted to PHP/IOP and/or transitions between levels of care, it is required that the facility/provider educate the member about ILOS and document the member's decision on the Aetna Better Health® Member ILOS Documentation form.

## **Inpatient/Outpatient Coordination**

When the health plan receives an authorization request for a member's admission to a PHP/IOP and the member is transitioning from an inpatient stay, Aetna Better Health's® UM clinician will confirm the ILOS Member Documentation Form is included in the request from the PHP/IOP provider. If the required document was not submitted, Aetna Better Health's® UM clinician will submit a Request for Additional Information (RFI) to the Utilization Review clinician at the PHP/IOP. As part of the request for additional information, Aetna Better Health's® UM clinician will communicate State requirements to the Utilization Review clinician regarding member education on ILOS, member agreement to receive services.

Aetna Better Health® expects discharge planning to begin on the day of admission. Aetna Better Health's® Service Coordinator is central to this process in supporting the member in establishing outpatient care as part of discharge planning from inpatient hospitalization.



Upon notification of the member's admission to an inpatient facility, Aetna Better Health's® Service Coordinator will outreach the facility discharge planner to begin collaborating on the member's discharge plan as appropriate. Aetna Better Health's® Service Coordinator will request to be included in discharge planning meetings with the facility clinical team and member, contingent upon member permission. Aetna Better Health's® Service Coordinator will communicate requirements to the facility discharge planner regarding member education on ILOS and member agreement to receive services. Aetna Better Health's® Service Coordinator will communicate to the facility discharge planner that ILOS cannot be authorized by the health plan unless it is confirmed the member has received education on ILOS and agrees to ILOS.

If the member decides to receive ILOS, Aetna Better Health's® Service Coordinator will collaborate with the facility discharge planner on the member's transition to PHP or IOP. Aetna Better Health's® Service Coordinator will reach out to the PHP or IOP provider to explain their role in supporting the member while in treatment and assisting in coordinating the member's transition to a lower level of care.

If the member does not meet medical necessity for PHP/IOP or decides not to receive ILOS, then Aetna Better Health's® Service Coordinator will collaborate with the health plan's UM department, the facility discharge planner, and the member and their family in coordinating the member's care following discharge. The Service Coordinator will ensure that the member has follow-up appointments within seven days of discharge with a behavioral health provider for medication management and with a behavioral health clinician for therapy. The Service Coordinator will help identify community resources that the member needs to ensure that the member has housing resources, a safe living environment and transportation to their appointments.

### **Outpatient Coordination**

When the health plan receives an authorization request for PHP or IOP for a member who is not transitioning from an inpatient stay, Aetna Better Health's® UM Department will confirm that the Member ILOS Documentation Form is included in the clinical information. This includes members who are transitioning from SUD Residential Treatment to a PHP/IOP. If the Member ILOS Documentation Form was not included in the clinical, Aetna Better Health's® UM clinician will submit a Request for Additional Information (RFI) to the PHP/IOP provider. As part of the RFI, the Aetna Better Health's® UM clinician will communicate State requirements to the PHP/IOP Utilization Review clinician regarding member education on ILOS, member agreement to receive services.



## Prior Authorization Process

The health plan will not delay the member's admission to PHP/IOP and will continue to work toward securing confirmation of member education and the member's decision on ILOS. PHP and IOP providers can submit claims after an approved authorization has been documented in Aetna's business application system.

Providers can submit authorization requests via Fax:

- Inpatient (855-857-9932)
- Outpatient (855-841-8355)

Authorization requests can also be submitted via Availity.

To process a prior authorization request Essential Information (EI) must be included on the [Texas Standard Prior Authorization Request Form for Health Care Services](#).

- If all EI information is included, the authorization request will be processed within the appropriate time frame three based on whether the request is urgent or non-urgent. The member and PHP/IOP provider will be notified in writing of the determination.
- If not all EI is included, a faxed notification will be generated informing the PHP/IOP provider that the authorization request will not be processed and a request containing all EI will need to be resubmitted for processing.

EI includes the following information:

- Member Name
- Member number or Medicaid number
- Member date of birth
- Requesting provider name
- Requesting provider's National Provider Identifier (NPI)
- Service requested: Current CPT Codes for PHP/IOP include:
  - CPT code for Mental Health PHP: H0035
  - CPT code for Mental Health IOP: S9480
  - CPT Codes for Substance Use Disorder PHP: S0201
  - CPT Code for Substance Use Disorder IOP: H0015
- Service Requested start and end date(s)
- Quantity of service units requested based on the HCPCS code



## **Clinical Information**

Authorization requests must include documentation/supporting information that if PHP or IOP were not available to the member, that the member would require a higher level of care (i.e., inpatient). It is suggested that PHP and IOP authorization requests include the following clinical information:

- The Member ILOS Documentation Form
- Treatment plan, including long and short-term goals related to the reason for admission
- Mental health/substance use disorder diagnoses
- Mental Status Exam
- Substance use history
- History of withdrawal
- Suicidal ideations/behaviors
- Homicidal ideations/behaviors
- Urine drug screen
- Vital signs
- History of severe withdrawal complications
- Medical conditions
- Current medications
- History of trauma
- Legal issues
- Treatment history: Has member been adherent to treatment plan, note whether the member has made improvement and/or progress toward reaching treatment goals
- PCP name and phone number
- Current BH providers contact information
- Referrals to community services/anticipated discharge needs
- Discharge plan

## **Provider And Member Notification of Authorization Determinations**

- The provider will receive a fax with details of the determination for both approved and denied authorizations. The provider and member will receive a letter for both approved and denied authorizations.



- Providers are notified of the adverse determination within one (1) business day of receipt for an urgent request.
- Providers are notified of the adverse determination within three (3) business days of receipt for a non-urgent request.

### **Duplication of Services and Payment for ILOS**

Aetna Better Health® will ensure there is not a duplication of services or payment when providing ILOS and covered services under the Medicaid state. PHP and IOP each have components that are also covered services under the Medicaid state plan (i.e., individual therapy, medication management). Aetna Better Health® will not reimburse ILOS and Medicaid state plan covered services that is a component of the ILOS per diem on the same date of services. Additionally, PHP and IOP, provided as ILOS, will not be reimbursed on the same day as each other.



# Appendix



# Aetna Better Health<sup>®</sup> Member Education

## Talking Points

*The following information can be used to educate members and facilitate discussion regarding the member's options for In-Lieu-of Services (ILOS). This information is intended to be used as a guide and not a substitute for clinical judgement when discussing treatment options with members.*

You are qualified to receive behavioral health services in a Partial Hospitalization Program (PHP), Intensive Outpatient Program (IOP).

These services are not covered by the State Medicaid Plan, but your health plan has opted to offer them as In-Lieu-Of Services (ILOS) to make sure you get the care you need. ILOS means that these services are offered instead of inpatient care. I'm going to explain what these programs are (PHP, IOP) is and then you can decide if that is what you want for your behavioral health care.

### **Mental Health and Substance Use Disorder Partial Hospitalization Programs**

- Partial Hospitalization Programs (PHP) are structured programs that provide behavioral health treatment for individuals, like you, who are ready for discharge from an inpatient stay; **or,**
- PHP is for individuals, like you, who have been assessed in the community by a behavioral health provider and determined that the individual meets medical necessity for PHP level of care.
- Partial hospitalization provides a structured program of outpatient psychiatric services as an alternative to inpatient psychiatric care. It's more intense than care you get in a doctor's or therapist's office. You get this treatment during the day, and you don't stay overnight.
- PHP can be offered through a hospital or through a community clinic/provider.
- PHPs can be for mental issues like depression or anxiety and for substance use disorders such as alcohol dependence.
- Some programs address both mental health issues and substance use disorders.
- You will be under the care of a physician who will make sure you are progressing in your treatment, that your medication is working, and who work with your therapists on creating an individual plan of treatment.





- PHP programs are typically 5 days a week and a minimum of 20 hours per week of therapy services.
- Typical length of stay for PHP is 2 weeks, but this will depend on your needs and recovery.

### **Mental Health and Substance Use Disorder Intensive Outpatient Programs**

- Intensive Outpatient Programs (IOP) are structured programs that provide behavioral health treatment for individuals, like you, who are ready for discharge from an inpatient stay; **or**,
- IOP is also for individuals, like you, who have been assessed in the community by a behavioral health provider and it has been determined that the individual meets medical necessity for IOP level of care.
- IOP is typically offered through a community behavioral health care center.
- IOP can be for mental issues like depression or anxiety and for substance use disorders such as alcohol dependence.
- Some programs address both mental health and substance use disorders.
- IOP provides a structured program of outpatient psychiatric services as an alternative to a higher level of care such as PHP or hospitalization. IOP is more intense than the care that you get in a doctor's or therapist's office. You get this treatment during the day, and you don't stay overnight.
- You will have a clinical team that works with you in creating an individualized treatment plan, making sure you are progressing in your treatment, and making sure your medication is working.
- IOP are typically 10 hours per week for 4 to 12 weeks.

**Following discussion with the member, ask if they have additional questions.**

**If not, ask if they have made a decision on whether to accept ILOS.**

**Document date of member education and member decision on the Aetna Better Health® ILOS Member Documentation Form.**

**Submit the Aetna Better Health® ILOS Member Documentation Form to the health plan according to instructions on the form.**



# Aetna Better Health<sup>®</sup> of Texas

Please complete this form and submit along with the member's clinical information to Aetna Better Health<sup>®</sup> of Texas Utilization Management (UM) Department at:

**FAX Inpatient:** 1-855- 857-9932

**FAX Outpatient:** 1-855-841-8355

Submitter Name:

Facility/Provider  Title

Member's Name:

Member's Medicaid ID Number:

Member's Date of Birth (MM/DD/YYYY):

Date member was educated on In Lieu of Service (ILOS):

Document member's decision on receiving ILOS:

- Agrees to Partial Hospitalization Program (PHP)
- Agrees to Intensive Outpatient Program (IOP)
- Declined In Lieu of Service (ILOS)