

## Section VI. Attachment L. Policies, 7. Approved Vaya Health In Lieu of Services

In Lieu of Services are alternative services or settings that are substituted for services or settings covered under the Medicaid State Plans or otherwise covered by this Contract but have been determined by the Department to be medically appropriate, cost-effective substitutes for the State Plan services included within this Contract.

The PIHP may cover for Members, services or settings that are in lieu of services or settings covered under the State Plans as follows:

1. The Department determines that the alternative service or setting is a medically appropriate and cost effective substitute based on documentation provided to the Department by the PIHP demonstrating such cost effectiveness and clinical effectiveness;
2. Members shall not be required by the PIHP to use the alternative service or setting;
3. The approved In Lieu of Services are authorized and identified in this Contract and will be offered to Members at the option of the PIHP; and
4. The utilization and actual cost of In Lieu of Services is taken into account in developing the component of the capitation rates that represent the covered State Plan services, unless a federal or State statute or regulation explicitly requires otherwise.

In the event In Lieu of Services do not meet cost neutrality, excess expenses will be excluded from the rate development process. In accordance with Section IV.F. Benefits, the following In Lieu of Services have been approved by the Department:

Attachment L. 7. Approved Vaya Health In Lieu of Services				
No.	Service Name	Revenue/ Procedure Code	End Date (Glidepath only)	Description
BCM07- MD_1EL1_16	Acute and Subacute Services Provided in an Institute for Mental Disease	RC 0160		This service provides 24-hour access to continuous intensive evaluation and treatment delivered in an Institute for Mental Disease (IMD) as defined in CFR 435.1010 for acute and subacute inpatient psychiatric or substance use disorders. Delivery of service is provided by nursing and medical professionals under the supervision of a psychiatrist. Members ages 21-64 who meet medical necessity criteria for inpatient level of care may be treated for up to 15 days per calendar month in an IMD.
BCM07- MD_1EL1_15	Outpatient Plus	H2021 U5	12/31/2023	Outpatient Plus (“OPT Plus”) is a combination of best practice outpatient therapy services, monitoring, support, and management of care interventions to be provided for individuals of any age with complex clinical needs that basic outpatient therapy cannot adequately address.
BCM07-MD_1EL1_7	Critical Time Intervention	H0032 U5 HK	12/31/2023	Critical Time Intervention (CTI) is an intensive 9-month case management model designed to assist adults ages 18 years and older with mental illness who are going through critical transitions, and who have functional

				impairments which preclude them from managing their transitional need adequately. For this definition, CTI defines a critical transition as occurring within no more than 45 days from the start of service.
BCM07-MD_1EL1_4	Case Support	T1016 U5	12/31/2023	Case support activities are performed by an individual employed by a provider agency. The activities are for members who do not have other services in place that provide this type of clinical support and need help coordinating social determinants of health or healthcare services.
BCM07-MD_1EL1_3	Behavioral Health Crisis Risk Assessment and Intervention (BH-CAI)	T2016 U5 or T2016 U6		A designated service that is designed to provide triage, crisis risk assessment, and intervention within a Behavioral Health Urgent Care (BHUC) setting. A BHUC setting is an alternative, but not a replacement, to a community hospital emergency department (ED). Individuals receiving this service have primary behavioral health needs and an urgency determination of urgent or emergent. Individuals receiving this service will be evaluated, stabilized, and/or referred to the most appropriate level of care.
BCM07-MD_1EL1_10	Family Centered Treatment	H2022 U5 U1 H2022 U5 U2 H2022 U5 U3 H2022 U5 U4		Family Centered Treatment® (FCT) is an evidence-based practice designed to prevent out-of-home placements for children and adolescents. It is delivered by clinical staff trained and certified in FCT and promotes direct intervention with both the child and the family. Coordination and intervention also target other systems, such as schools, child welfare departments, the legal system, and primary care physicians. FCT includes the provision of crisis services.
BCM07-MD_1EL1_6	Residential Services – Complex Needs	H0018 HA		This short-term residential treatment service focuses on members with primary diagnoses of intellectual/developmental disabilities (I/DD) with co-occurring mental health (MH) diagnoses or significant behavioral challenges. The members being served would benefit most from a multi-disciplinary approach with staff that are trained to treat I/DD, MH, and severe behaviors.
BCM07-MD_1EL1_13	Rapid Care Services	S9480 U5 Rapid Care Services Low  S9480 HK U5 Rapid Care Services High		Rapid Care Services allow time for extended assessment, which may involve a clinical interview; assessment by clinicians, nurse, and/or psychiatric staff; various screening tools, with the ability to observe the member over a longer period of time to determine if symptoms increase or decrease; response to any administered medication; or other treatment interventions to determine the

				ongoing treatment needs of the member. This includes observation in a secure, medically staffed and psychiatrically monitored setting as an alternative to the community hospital/ emergency department (ED).
BCM07-MD_1EL1_1	High Fidelity Wrap-around	H0032U5		High Fidelity Wraparound (HFW) is an intensive, team-based, person-centered service that provides coordinated, holistic, family-driven care to meet the complex needs of youth/young adults who are involved with multiple systems (e.g., mental health, child welfare, juvenile/criminal justice, special education), experience serious emotional or behavioral difficulties, are at risk of placement in a Psychiatric Residential Treatment Facility (PRTF) or other institutional settings, or are aging out of Department of Social Services (DSS) care.
BCM07-MD_1EL1_11	In-Home Therapy Services	H2022 HE U5 H2022 TS U5		In-Home Therapy Services (IHTS) consist of evidence-based therapy services and coordination of care interventions provided in the home for individuals with complex clinical needs that outpatient therapy alone cannot adequately address in a time-limited fashion.
BCM07-MD_1EL1_8	Enhanced Crisis Response (ECR)	H2011 U5 U1 weekly unit		Enhanced Crisis Response (ECR) operates under the philosophy that children thrive when they can safely remain in or be reunified with the home of their own family and/or a safe permanent alternative. The program will utilize fully licensed practitioners who provide an immediate comprehensive clinical assessment (when necessary), along with corresponding 24/7 service delivery. For youth in the emergency department (ED) or in a non-therapeutic home who are at risk of admission to the ED, the practitioner will respond as soon as possible but no longer than two hours from receipt of the referral. For other referrals, response will be on the same day or by the end of the following day.
BCM07-MD_1EL1_12	Long-Term Community Supports (LTCS)	T2016 U5 U1 through U5 U4 and U5-U6 T2016 U5 U1 – Level 1 T2016 U5 U2 – Level 2 T2016 U5 U3 – Level 3		Long-Term Community Supports (LTCS) is a community-based comprehensive service for adults (age 22 and older) with intellectual/developmental disabilities (I/DD) that provides individualized services and supports to a person who would otherwise be institutionalized in an Intermediate Care Facility for Individuals with Intellectual Disabilities (ICF/IID).

		T2016 U5 U4 – Level 4  T2016 U5 U6 – Level 5		
BCM07-MD_1EL1_5	Child- Focused Assertive Community Treatment	H0040 U5 HA		Child-Focused Assertive Community Treatment (Child ACT) is a team-based, multi-disciplinary approach to serve children in their residential setting. This includes homes, kinship placements, and Department of Social Services (DSS) foster homes, or the service may begin during transition from a therapeutic residential setting. Child ACT uses a community-based team approach to meet the needs of youth with Serious Emotional Disturbance (SED).
BCM07-MD_1EL1_14	Transitional Youth Services	H2022 U5		The Transitional Youth Services Program is a home and community-based outpatient intervention that supports transition-age members (ages 16-21) with behavioral health diagnoses in reestablishing the knowledge and skills necessary to live independently.
BCM07-MD_1EL1_2	Assertive Community Treatment Step Down (ACT SD)	H0040 U5	12/31/2023	ACT SD service supports beneficiaries whose symptom severity no longer merits the intensity of ACT interventions but cannot be adequately addressed with Outpatient Therapy alone. ACT SD is a community based, person-centered and recovery focused service designed to assist the beneficiary in maintaining stable functioning and wellness while providing support for continued recovery.
BCM07-MD_1EL1_9	Family Navigator	T2041 U5	12/31/2023	Family Navigators can assist members and families to navigate challenging times and understand the changes in systems through lived experience. NC already offers this for adults who experience mental health and substance use disorders using a peer support model.

ILOS that have received conditional approval from the Department are effective through December 31, 2023. If the PIHP wishes to continue offering the conditionally approved ILOS beyond December 31, 2023, the PIHP shall resubmit the Department’s standardized ILOS Service Request Form at least ninety (90) Calendar Days prior to December 31, 2023.