

EL PASO HEALTH PROVIDER GUIDE TO IN-LIEU OF SERVICES

SB 1177 (86R, 2019) directed HHSC to amend MCO contracts to allow MCOs to offer medically appropriate, cost-effective services approved by the State Medicaid Managed Care Advisory Committee (SMMCAC) in lieu of mental health or substance use disorder services specified in the Texas Medicaid State Plan.

This Guide describes the Partial Hospitalization Program and Intensive Outpatient Program services that are offered in Lieu of mental health or substance use disorder services. This guide will assist you with in-lieu of service benefits, eligibility requirements, limits and prescribing rules and process.

INTRODUCTION

EPH is proud to work with you, our Provider community, to improve the physical and behavioral health of our members, your patients. El Paso Health's new In Lieu of Services are intended to provide medically cost-effective services for mental health or substance abuse disorder services as an alternative to an inpatient psychiatric setting. In accordance with 42 C.F.R. §438.3(e)(2) and the Health and Human Services Commission *Uniformed Managed Care Manual Chapter 16.3*. Partial Hospitalization Services (PHP) or Intensive Outpatient Program (IOP) Services will be offered to STAR, STAR+PLUS and CHIP Members. EPH members are not obligated to use inlieu of services or settings. Members may choose to continue using Covered Service or setting, unless medically appropriate.

The intent of providing partial hospitalization services (PHP), or intensive outpatient program (IOP) services, as in-lieu-of services, is to prevent or reduce inpatient hospitalization. However, there may be cases where inpatient hospitalization is medically necessary. The Member must receive the most appropriate service during an episode of care.

PROVIDER QUALIFICATIONS: El Paso Health Credentialing Department follows Utilization Review Accreditation Commission (URAC), National Committee for Quality Assurance (NCQA) guidelines in addition to relevant and federal regulations for initial and re-credentialing standards. El Paso Health requires Providers to be credentialed prior to joining the network and to be re-credentialed every three years. El Paso Health uses, the states Credentialing Verification Organization (CVO) vendor for primary source verification. <u>UTILIZATION MANAGEMENT</u>: EPH's Utilization Management process reviews processes in place to ensure services provided are medically necessary. PHP or IOP services will be reviewed for appropriateness using Millimen Care Guidelines (MCG), InterQual, Texas Provider Procedural Manual (TMPPM), DSM-V Guidelines. Services that do not meet these guidelines will be reviewed with a Medical Director. Members will be provided with required notices that include information on appeal rights and the process to request.

SERVICE COORDINATION: EPH has a designated BH service coordinators that conduct concurrent review for appropriateness and will offer in-lieu of services to eligible members. Members at-risk of re-admission are added to the Service Coordination Program and educated on availability of in-lieu of services. For members who require inpatient services the Service Coordinator will conduct reviews to ensure services are medically necessary and initiate a discharge plan to include in-lieu of services. Transition of care discussions are included in the discharge planning process and initiated upon admission.

Partial Hospitalization Program (PHP) Services (In Lieu of Inpatient Psychiatric Hospital Care)

Partial hospitalization services provide a structured program of outpatient behavioral health services during daytime hours as an alternative to inpatient psychiatric care. Partial Hospitalization Programs (PHPs) can provide services to address issues regarding mental health, SUD, or both. These services resemble highly structured, short-term hospital inpatient programs. Generally, the treatment level is more intense than that of outpatient day treatment or psychosocial rehabilitation programs. Services that may be included in PHPs include:

- Psychotherapy (individual, family, group)
- Counseling for Substance Abuse Disorders
- Medication assisted treatment (MAT)
- Services of trained staff to work with psychiatric conditions (social workers, psychiatric RNs and others)
- Therapeutic drugs and biologicals that cannot be self-administered as described by the TMPPM
- Individualized activity therapies that are not primarily recreational or divisionary Individualized activities essential for the treatment of the person's diagnosed condition for progress toward goals.
- Training and educational activities related to person's care and treatment of diagnosed condition
- Medically necessary diagnostic services related to mental health or SUD/ treatment

ELIGIBLE MEMBERS: Members eligible for partial hospitalization services include:

- 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 partial hospitalization services, would be at reasonable risk of requiring inpatient hospitalization; or
- Members admitted to a PHP who are under the care of a physician who certifies the need for partial hospitalization services at a minimum of 20 hours per week of therapeutic services, as evidenced by their plan of care

| Service Limits | For PHP, approvals will be authorized for a period of 8 weeks. Programs whose duration is greater than 8 weeks will require a resubmission of authorization for an additional eight (8) week period. |
|---------------------|--|
| Prior Authorization | YES link to PA: Texas Standard Prior Authorization Form |
| Prior Authorization | Link to requirements: Guidelines for Medical Necessity |
| Requirements | Determination In lieu of Services |
| Eligible Members | STAR Medicaid eligible |
| | CHIP Medicaid eligible |
| | STAR+PLUS eligible |
| Provider Types | Licensed Intensive Outpatient Program |

Intensive Outpatient Program (IOP)

Intensive outpatient services are used to treat behavioral health issues that do not require detoxification or 24-hour supervision. IOPs are generally less intensive than PHPs. They may be delivered for mental health concerns, SUD, or both. Items and services that may be included as part of IOPs are:

- Organized non-residential services
- Structured group and individual therapy
- Education services
- Life skills training consisting of time limits (at least 10 hours per week for 4 to 12 weeks)
- Less than 24 hours per day

<u>Eligible Members:</u> Members eligible for IOP services include:

- Members who are discharged from an inpatient hospital treatment program, and the IOP is in-lieu-of continued inpatient treatment; or
- Members, who in the absence of outpatient intensive services, would be at reasonable risk of requiring inpatient hospitalization but at lower risk than those of partial hospitalization.
- Members admitted to an IOP must be under the care of a physician who certifies the need for intensive outpatient services, as evidenced by their plan of care.

| Service Limits | For IOP, approvals will be authorized for a period of 2 weeks. Programs whose duration is greater than 2 weeks will require resubmission for an additional two (2) weeks. Requests for duration exceeding 2 weeks will be reviewed and determination will be based on medical necessity. |
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| Prior Authorization | YES Texas Standard Prior Authorization Form |
| Prior Authorization | Link to requirements: Guidelines for Medical Necessity |
| Requirements | Determination In lieu of Services |
| Eligible Members | STAR Medicaid eligible |
| | CHIP Medicaid eligible |
| | STAR+PLUS eligible |
| Provider Types | Rehab Facilities |

TRANSITION OF CARE: Transition of care discussions are included in the discharge planning process initiated upon admission. EPH has a designated BH service coordinator that conducts concurrent review for appropriateness and will offer in-lieu of services to eligible members. EPH currently has a process in place for inpatient notification. Facilities are required to notify EPH within one business day of admission. This same process will continue when a member transitions from in-lieu of services to inpatient status should the member's condition warrant it.

COMPLAINTS AND APPEALS:

http://www.elpasohealth.com/members/complaints-and-appeals/

Compliance/SIU Monitoring: To ensure the appropriate use of these In Lieu of Services, the Compliance Department and Special Investigations Unit (SIU) at EPH maintain oversight through detailed claims data analytics, facilitated by our third-party vendor. This enables us to monitor the utilization of PHP and IOP services and ensure they are being used appropriately to reduce inpatient hospitalizations when medically necessary. Auditors may select a sample of ILOS claims to test for compliance, ensuring that all documentation is complete, accurate, and meets Medicaid guidelines. The audit process will verify that the ILOS services provided align with the member's care plan, are medically necessary, and comply with Medicaid rules. If necessary, auditors may request additional information or clarification, recoupment may be required. These measures ensure that services are being provided in a cost-effective and compliant manner, maintaining program integrity while ensuring the best care for our members.