

Clinical Policy: Treatment at Home In Lieu of Service

Reference Number: LA.CP.MP.527c

Date of Last Revision: 01/25

[Coding Implications](#)

[Revision Log](#)

See [Important Reminder](#) at the end of this policy for important regulatory and legal information.

Description

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 pilot will evaluate clinical outcome effectiveness and cost effectiveness of receiving care at home by paramedics employed by Acadian Health.

This policy applies to the Integrated Care Management staff and any LHCC clinical/non-clinical member facing staff.

Policy/Criteria

I. Policy for the In Lieu of Service (ILOS) Pilot Program

It is the policy of Louisiana Healthcare Connections that the In Lieu of Service (ILOS) pilot program is deemed medically necessary when the following criteria are met:

- A. There are two distinct Care at Home treatment pathways within the pilot program, which are aimed at reducing Emergency Department (ED) utilization. These pathways will run concurrently for eligible populations. The population eligible for these programs consists of enrollees who are LHCC-eligible with P-linkages, aged 13 years and older, and residing in Regions 4 and 5.
- B. The two pathways for the Care at Home program are as follows:
 - a. **Acute Care @ Home Program:** This is an on-demand urgent care service available from 8 a.m. to 10 p.m., seven days a week, for enrollees who are physically unable to reach their provider and would otherwise require ambulance transport to an ED. Acute Care @ Home visits are scheduled within one hour of receiving the referral. This program is limited to member/enrollees with chronic conditions who are experiencing an acute exacerbation and require care within one hour. Member/enrollees are allowed a maximum of (4) four Acute Care @ Home visits per rolling 12-month period.
 - b. **Clinic @ Home Program:** This is a non-urgent, scheduled visit available from 8 a.m. to 10 p.m., seven days a week. It is designed to address the needs of high ED-utilizing member/enrollees, including but not limited to an in-home assessment and screening. The Clinic @ Home program is available to member/enrollees identified by LHCC with (5) five or more ED visits in a 12-month rolling period, who are not actively engaged with Case Management. Once referred to Acadian Health, the visit is scheduled within 24 hours or by the next business day. Member/enrollees are allowed a maximum of (4) four Clinic @ Home visits per rolling 12-month period unless agreed upon by LHCC case management department.

II. Procedure for the In Lieu of Service (ILOS) Pilot Program

It is the policy of Louisiana Healthcare Connections that the following procedure be adhered to for the In Lieu of Service (ILOS) pilot program:

A. Acute Care @ Home:

The Primary Care Physician (PCP) contacts Acadian Health to arrange an in-home visit for a member/enrollee who has reported an acute exacerbation of a chronic disease, when an in-office or telehealth visit is not feasible. If the member/enrollee agrees, Acadian Health will deploy a paramedic to the home within one hour to conduct a comprehensive assessment. The paramedic will communicate findings to the referring PCP and request treatment orders for symptom management. If the enrollee's condition improves, Acadian Health will conduct a Social Determinants of Health (SDOH) assessment, assist with scheduling a follow-up visit with the PCP, and/or refer to LHCC Care Management as needed. Clinical documentation from the visit will be made available securely to the PCP and the Managed Care Organization (MCO). The goal of this service is to avoid unnecessary ED visits and reconnect the member/enrollee to their PCP.

B. Clinic @ Home:

Once a member/enrollee is identified as eligible for the program, the MCO will contact the PCP to educate them on the benefits of this program and how to enroll their eligible patients. The referral will be sent via the online portal to Acadian Health, which will reach out to the member/enrollee to schedule an initial visit. The visit will be scheduled within 24 hours or by the next business day. The paramedic visit will include an in-home assessment of the member/enrollee's chronic disease state, address SDOH issues (e.g., food and housing instability), identify barriers to care (e.g., transportation), and develop a care plan to connect the member/enrollee to their PCP. Referrals to Case Management will be made as needed. Clinical documentation from the visit will be made available securely to the PCP and MCO.

C. Acute Care @ Home Encounter Transition to 911 Ambulance Transport:

Should Acadian Health respond to an Acute Care @ Home or Clinic @ Home visit and determine that the member/enrollee is experiencing a severe medical condition, Acadian Health Providers will initiate care per emergency protocols.

D. Utilization of LHCC Community Health Platform:

- a. In addition to providing in-home care services, Acadian Health shall utilize the online platform through LHCC to support member/enrollees in accessing community resources. The platform should be used to connect member/enrollees to available local services, such as financial assistance, food pantries, medical care, and other free or reduced-cost help that may enhance the effectiveness of care.
- b. Acadian Health will be responsible for ensuring that referrals to the community health resource platform are integrated into the care plan for eligible member/enrollees to address their broader needs, further reducing unnecessary ED utilization.

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E. Reporting:

Acadian Health will provide monthly data to the contracting MCO, including member/enrollee outcomes, follow-up appointment information with the PCP, community health resource referrals, and clinical diagnoses.

III. It is the policy of Louisiana Healthcare Connections that enrollees with B-linkages, pre & post-natal services, and the treatment of behavioral health conditions are **excluded** for the In Lieu of Service (ILOS) pilot program.

IV. Acadian Health Quality Measures

Acadian Health will focus on several quality measures to improve the health outcomes of member/enrollees and ensure that care gaps are addressed. These measures include, but are not limited to:

CBP - Controlling High Blood Pressure
GSD - Glycemic Status Assessment for Patients With Diabetes
BPD - Blood Pressure Control for Patients With Diabetes
EED - Eye Exams for Patient's with Diabetes
KED - Kidney Exam for Diabetics (lab test)
COL - Colorectal Cancer Screening
PPC - Post Partum Care
FUA - Follow-Up After Emergency Department Visit for Substance Use
FUM - Follow-Up After Emergency Department Visit for Mental Illness

These quality measures will be tracked and monitored to ensure that enrollees receive the necessary care, and gaps are closed in a timely and efficient manner. Acadian Health is responsible for ensuring that these measures are met as part of the ILOS pilot program and that appropriate interventions are made to close care gaps for enrolled members.

Coding Implications

This clinical policy references Current Procedural Terminology (CPT®). CPT® is a registered trademark of the American Medical Association. All CPT codes and descriptions are copyrighted 2023, American Medical Association. All rights reserved. CPT codes and CPT descriptions are from the current manuals and those included herein are not intended to be all-inclusive and are included for informational purposes only. Codes referenced in this clinical policy are for informational purposes only and may not support medical necessity. Inclusion or exclusion of any codes does not guarantee coverage. Providers should reference the most up-to-date sources of professional coding guidance prior to the submission of claims for reimbursement of covered services.

CPT® Codes	Program	Mobile Health Home Visit Description	Visit Description
99342 99342-EM*	Acute Care @ Home	ALS Provider (Paramedic) - Includes Advanced Life Support	New Patient Home Visit (Un-

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CPT® Codes	Program	Mobile Health Home Visit Description	Visit Description
		(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. 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.	Scheduled) Up to 30 minutes
99344 99344-EM*	Acute Care @ Home	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. 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.	New Patient Home Visit (Un-Scheduled) Up to 60 minutes
99345 99345-EM*	Acute Care @ Home	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	New Patient Home Visit (Un-Scheduled) Up to 75 minutes

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CPT® Codes	Program	Mobile Health Home Visit Description	Visit Description
		<p>support care such as IVs, EKGs, A1C, fluid and medication administration.</p> <p>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.</p>	
99348 99348-EM*	Clinic @ Home	<p>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)</p> <p>BLS Provider (Paramedic) - Includes basic assessment, basic vital signs (pulse, blood pressure, pulse oximetry, temperature, weight, and respiratory rate) support virtual medical</p>	Patient's Home (Scheduled) Up to 30 minutes
99349 99349-EM*	Clinic @ Home	<p>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)</p>	Patient's Home (Scheduled) Up to 45 minutes

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CPT® Codes	Program	Mobile Health Home Visit Description	Visit Description
		BLS Provider (Paramedic) - Includes basic assessment, basic vital signs (pulse, blood pressure, pulse oximetry, temperature, weight, and respiratory rate) support virtual medical	
99350 99350-EM*	Clinic @ Home	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) BLS Provider (Paramedic) - Includes basic assessment, basic vital signs (pulse, blood pressure, pulse oximetry, temperature, weight, and respiratory rate) support virtual medical	Patient's Home (Scheduled) Up to 60 minutes
99211-99215	Acute Care @ Home Clinic @ Home	E&M code billed by physician collaborating care.	Telehealth visit
99417-EM*	Acute Care @ Home Clinic @ Home	Non-Paramedic/EMT – Includes prolonged outpatient evaluation and management services that go beyond primary service's required time	Patient's Home (Scheduled) Prolonged Services, per additional 15-minute increment
99417	Acute Care @ Home Clinic @ Home	ALS – Includes prolonged outpatient evaluation and management services that go beyond primary service's required time	Patient's Home (Scheduled) Prolonged Services, per additional 15-minute increment

*Modifier "EM" is used when care is provided by non-paramedic EMT staff

Reviews, Revisions, and Approvals	Revision Date	Approval Date	Effective Date
New Policy	1/25	3/12/25	4/12/25

References

1. 2023 Louisiana Medicaid Managed Care Organization Attachment A: Model contract
2. Louisiana Medicaid Managed Care Organization (MCO) Amendment Attachment C9: In Lieu of Services

Important Reminder

This clinical policy has been developed by appropriately experienced and licensed health care professionals based on a review and consideration of currently available generally accepted standards of medical practice; peer-reviewed medical literature; government agency/program approval status; evidence-based guidelines and positions of leading national health professional organizations; views of physicians practicing in relevant clinical areas affected by this clinical policy; and other available clinical information. LHCC makes no representations and accepts no liability with respect to the content of any external information used or relied upon in developing this clinical policy. This clinical policy is consistent with standards of medical practice current at the time that this clinical policy was approved.

The purpose of this clinical policy is to provide a guide to medical necessity, which is a component of the guidelines used to assist in making coverage decisions and administering benefits. It does not constitute a contract or guarantee regarding payment or results. Coverage decisions and the administration of benefits are subject to all terms, conditions, exclusions and limitations of the coverage documents (e.g., evidence of coverage, certificate of coverage, policy, contract of insurance, etc.), as well as to state and federal requirements and applicable LHCC administrative policies and procedures.

This clinical policy is effective as of the date determined by LHCC. The date of posting may not be the effective date of this clinical policy. This clinical policy may be subject to applicable legal and regulatory requirements relating to provider notification. If there is a discrepancy between the effective date of this clinical policy and any applicable legal or regulatory requirement, the requirements of law and regulation shall govern. LHCC retains the right to change, amend or withdraw this clinical policy, and additional clinical policies may be developed and adopted as needed, at any time.

This clinical policy does not constitute medical advice, medical treatment or medical care. It is not intended to dictate to providers how to practice medicine. Providers are expected to exercise professional medical judgment in providing the most appropriate care, and are solely responsible for the medical advice and treatment of members/enrollees. This clinical policy is not intended to recommend treatment for members/enrollees. Members/enrollees should consult with their treating physician in connection with diagnosis and treatment decisions.

Providers referred to in this clinical policy are independent contractors who exercise independent judgment and over whom LHCC has no control or right of control. Providers are not agents or employees of LHCC.

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