

## **Attachment 25**

## **Approved In Lieu of Services**

The Contractor may only provide the ILOS that are identified in this Attachment. Any other services that the Contractor provides to Enrollees beyond the services covered under the contract or identified as an ILOS, will not be included in capitation rate development.

The ILOS are only permitted to be provided to the target populations identified in the table, and the Contractor shall follow all service exclusions identified in this Attachment.

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ILOS Name	ILOS Definition	Substitute Service or Setting	Procedure Codes	Target Population
Mental Health (Mi and Substance U Disorder (SUI Institution for Ment Diseases (IMDs)	provided for an Enrollee	Inpatient Psychiatric (Psych) services provided in an acute care hospital	Revenue codes of 0114, 0124, 0134, 0154, 0204, 0760, 0761, 0762, 0769, 0900, 0901, 0902, 0903, 0904, 0909, 0911, 0914, 0915, 0916, 0917, 0918, 0919, 0920, 0929, 0949 with a concurrent MH or SUD diagnosis	Members needing inpatient MH or SUD services
Skilled Nursing Facili	transitional care services between an Inpatient stay and discharge to their home	Inpatient	Revenue codes 0128 and 0550	Enrollees who are being discharged from a hospital after a spinal lesion or cerebrovascular incident who
ADMINISTRACION DE SEGUROS DE SALUD	or other community setting			would otherwise be at risk for

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ILOS Name	ILOS Definition	Substitute Service or Setting	Procedure Codes	Target Population
				readmission without acces to a rehab o SNF
Eyeglasses	Devices to assist with vision impairment	Outpatient and Emergency Room	Current CPT and HCPCS coding for eyeglasses with a coverage limitation of \$100 every	Enrollees with vision impairment with a provide prescription for eyeglasses

## Exclusions to ILOS coverage

1. Rehab and SNF stays are allowable up to seven days after discharge. Longer stays or additional conditions are permissible based on a physician established treatment plan authorized by the Contractor and written prior approval from ASES.

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Contrato Número