

To: AmeriHealth Caritas Louisiana Providers

Date: May 30, 2023

Subject: Provider Alert: LDH Approved Clinical Policies In Lieu Of

Summary: Guidelines for LDH Approved Clinical Policies

AmeriHealth Caritas Louisiana would like to make you aware of three new policies that have been approved by the Louisiana Department of Health in accordance with La. R.S. 46:460.54. The guidelines will be located at the following link on our website under Clinical Policies: <https://www.amerihealthcaritasla.com/provider/resources/index.aspx>.

1. Chiropractic In Lieu Of AmeriHealth Caritas Louisiana
2. Doula Services for Pregnant and Postpartum Individuals In Lieu Of
3. Remote Patient Monitoring In Lieu Of

Reminder: If your practice is not registered with our website portal-[NaviNet](#), we highly recommend registering. To register, please visit www.navinet.net to sign up or contact your Provider Account Executive for details.

Questions:

Thank you for your continued support and commitment to the care of our members. If you have questions about this communication, please contact AmeriHealth Caritas Louisiana's Provider Services department at 1-888-922-0007 or your [Provider Network Management Account Executive](#).

Missed an alert?

You can always find a complete listing of provider alerts on the [Newsletters and Updates](#) page of our website.

Need to update your provider information? Send full details to network@amerihealthcaritasla.com

Where can I find more information on COVID-19?

AmeriHealth Caritas Louisiana has updated its website to streamline communications and important notifications about COVID-19. Please visit <http://amerihealthcaritasla.com/covid-19> for up-to-date information for both providers and members, including frequently asked questions, cancellations and postponements, and important provider alerts from AmeriHealth Caritas Louisiana and the Louisiana Department of Health.



Chiropractic Services for Adults - ACLA

In Lieu Of Policy ID: ILO.02

Recent review date: 2/2023

Next review date: 1/2024

Policy contains: Chiropractic Services for Adults - ACLA

AmeriHealth Caritas has developed In Lieu Of policies to assist with making coverage determinations for medically appropriate services outside required MCO Covered Services or settings (or beyond the service limits established by LDH for MCO Covered Services. AmeriHealth Caritas' In Lieu Of services are provided to Enrollees, at their option, as a cost-effective alternative to an MCO Covered Service or Setting.

LDH has determined that this In Lieu Of service is a medically appropriate and cost-effective substitute for the MCO Covered Service or setting under the Louisiana Medicaid State Plan.

Coverage policy

Chiropractic services to diagnose and treat neuro-musculoskeletal conditions associated with the functional integrity of the spine are a medically appropriate and cost-effective substitute for services currently covered under the Louisiana Medicaid State Plan. In addition, Chiropractic providers are to identify and refer members who may benefit from care coordination and/or case management services to the ACLA Population Health Management team. This will include complex members who are diagnosed with multiple chronic diseases (i.e. Diabetes, CAD, Asthma) and have a history of high Emergency Room and/or Inpatient utilization.

Chiropractic services are medically appropriate and approved for members diagnosed with neuro-musculoskeletal conditions associated with the functional integrity of the spine. ACLA will have a cap of 300 total enrollees per year.

Service Name and Description: Adult Chiropractic Care - Chiropractic services to diagnose and treat neuro-musculoskeletal conditions associated with the functional integrity of the spine.

Unit of Service:

Service Category	Code	Description
Evaluation and management – new patient	99202	Office or other outpatient visit for the evaluation and management of a new patient
	99203	
	99204	
	99205	
Evaluation and management – established patient	99212	Office or other outpatient visit for the evaluation and management of an established patient
	99213	
	99214	
	99215	
Spinal X-rays	72020	Radiologic examination, spine, single view, specify level
	72040	Radiologic examination, spine, cervical; 2 or 3 views
	72050	Radiologic examination, spine, cervical; 4 or 5 views
	72052	Radiologic examination, spine, cervical; 6 or more views
	72070	Radiologic examination, spine, thoracic, 2 views
	72072	Radiologic examination, spine, thoracic, 3 views
	72074	Radiologic examination, spine, thoracic, minimum of 4 views
	72080	Radiologic examination, spine, thoracolumbar, 2 views
	72100	Radiologic examination, spine, lumbosacral; 2 or 3 views
	72110	Radiologic examination, spine, lumbosacral; minimum of 4 views
	72114	Radiologic examination, spine, lumbosacral; complete, including bending views, minimum of 6 views.
	72120	Radiologic examination, spine, lumbosacral; bending views only, 2 or 3 views
72220	Radiologic examination, sacrum and coccyx, minimum of 2 views	
Spinal manipulation	98940	Spinal Manipulation 1-2 Regions
	98941	Spinal Manipulation 3-4 Regions
	98942	Spinal Manipulation 5 Regions
Other treatments‡	97012	Mechanical Traction
	97022	Whirlpool Therapy
	97035	Ultrasound Therapy

	97032	Electrical Stimulation
	97110	Therapeutic Exercises
	97112	Neuromuscular Reeducation
	97116	Gait Training
	97124	Massage Therapy
	97140	Manual Therapy
	20560	Needle insertion without injection 1-2
	20561	Needle insertion without injection 3 or more muscles

The units of service vary per individualized treatment plans. Below shows the anticipated and maximum number of treatments per service category per member, based on symptom intensity. A maximum of two (2) other treatments, in addition to spinal manipulation, are covered per day of service. Treatment CPT codes listed in the table *Units of Service* above, but not in this table, will be included in this maximum of two other treatments per day of service.

Symptom Intensity	Category	Maximum Services Rendered
Mild-to-Moderate	Overall description	Six treatment sessions over an 18-week period
	E/M	1x99203 + 5x99213
	X-ray	1x72100
	Spinal manipulation	6x98941
	Other treatments	3x97124
Moderate-to-Severe	Overall description	Twelve treatment sessions over a 26-week period
	E/M	1x99203 + 11x99213
	X-ray	1x72110
	Spinal manipulation	6x98941 + 6x98942
	Other treatments	12x97124 + 6x20560
Severe	Overall description	Eighteen treatment sessions over a 12-month period
	E/M	1x99203 + 17x99213
	X-ray	1x72110
	Spinal manipulation	18x98942
	Other treatments	18x97140 + 18x20561

Background

The Chiropractic in Lieu of service is needed to:

- Increase pain treatment alternatives
- Mitigate overutilization of Opioids
- Improve Provider Pain management prescribing behavior

Reporting

Service Utilization reports will be requested to monitor program activities to include member profiles, provider, and case management referrals. Chiropractic providers will be

encouraged to coordinate with Case Management and suggest participating in case rounds on an as needed basis.

Expected Outcomes

Anticipated outcomes for members participating in the ILO:

- Reduction in ER Utilization for reasons of pain
- Improve HEDIS rates for ER (reduce ER utilization)
- Increased Care Management engagement to address pain management
- Reduce opioid dependency; reduce opioid prescription fill rates
- Reduce All Cause Readmissions

Policy updates

2/2023: initial review date and ILO policy effective date: 2/2023

Doula Services for Pregnant & Postpartum Individuals - ACLA

In Lieu Of Policy ID: ILO.03

Recent review date: 2/2023

Next review date: 1/2024

Policy contains: Doula Services

AmeriHealth Caritas has developed In Lieu Of policies to assist with making coverage determinations for medically appropriate services outside required MCO Covered Services or settings (or beyond the service limits established by LDH for MCO Covered Services. AmeriHealth Caritas' In Lieu Of services are provided to Enrollees, at their option, as a cost-effective alternative to an MCO Covered Service or Setting.

LDH has determined that this In Lieu Of service is a medically appropriate and cost-effective substitute for the MCO Covered Service or setting under the Louisiana Medicaid State Plan.

Coverage policy

Doulas are non-clinical health care personnel who provide physical, emotional, and informational support during prenatal, intrapartum and postpartum periods. As non-clinical providers, a doula cannot replace a trained, licensed medical professional, and cannot perform clinical tasks. Doulas serve to augment the care provided by the clinical providers.

Doula services are clinically available and appropriate for pregnant individuals under an in lieu of agreement when the following criteria are met:

- Any pregnant members age 19 or less when not enrolled in Nurse Family Partnership or other intensive care management program.
- For pregnant members aged 16-50 with high risk SDOH factors as identified by Bright Start, and not enrolled in Nurse Family Partnership or other intensive care management program.
- Doula services consist of prenatal, intrapartum and postpartum support (up to 60 days postpartum). Targeted length of service is 6-8 months.
- Doula services and providers shall meet the following qualifications-
 - Doula training of at least 40 hours, and attending at least 2 births.
 - Certification by nationally recognized Doula Organization (CBI, DONA , ICEA, CAPPA, DTI, Bebo Mia, IDI, Lamaze, Bradley or Madriella).
 - Registered with Louisiana Doula Registry Board (when Board registration is available).
 - The doula provider must have a National Provider Identifier (NPI) number, an active Louisiana Medicaid ID and enrolled with ACLA.

- Doula services have the requirement of prior authorization and member engagement in Bright Start ACLA Case Management. Referrals and requests for doula services may come from obstetrical providers, ACLA case management or from direct member request.
- The member's obstetrical provider must agree to member participation in the doula program

Doulas have a responsibility to refer to a post-partum doula or lactation specialist for post-natal concerns outside their scope of practice. Lactation classes will be conducted by either an IBCLC, CLC, or CBS certified lactation consultant

Doula Levels of Care

Two models of doula care are available, a standard care and enhanced doula care mode:

- Standard doula care is comprised of up to 7 visits total during the prenatal and postpartum period, in addition to the intrapartum support (7+1 model). Attendance at the labor/delivery is anticipated and reimbursed separately.
- Enhanced doula care will be available to women who are age 19 or less with no prior births. Our Bright Start case management team may also enrolled other identified high-risk members into the enhanced model of care. Enhanced doula care is comprised of up to 10 visits total during the prenatal and postpartum period, in addition to the intrapartum support (10+1 model). Attendance at the labor/delivery is anticipated and reimbursed separately.

Services covered in both models consist of prenatal, intrapartum and postpartum support (up to 60 days postpartum). Targeted length of service is 6-8 months.

Both models of care require prior authorization.

Service	Service Code	Standard Model- Maximum Units per Pregnancy and Postpartum Period (7+1)*	Enhanced Model- Maximum Units per Pregnancy and Postpartum Period (10+1)**	Anticipated duration of visit (minutes)
Prenatal / postpartum education, non- physician	S9445	Any combination of 7	Any combination of 10	60
Birthing class, non-physician provider	S9442	Any combination of 7	Any combination of 10	60
Lactation class, non-physician provider	S9443	Any combination of 7	Any combination of 10	60
Parenting class, non-physician provider	S9444	Any combination of 7	Any combination of 10	60
Doula intrapartum	99199 (modifier)	1	1	Flat fee

support for vaginal delivery				
<p>*7 + 1 = Maximum of 7 doula visits during prenatal and postpartum periods, plus 1 intrapartum support. The 7 visits can be any combination of S9442, S9443, S9444, and/or S9445. Maximum rate based on all visits at \$65 each</p> <p>**10 + 1 = Enhanced model. Maximum of 10 doula visits during prenatal and postpartum periods, plus 1 intrapartum support. The 10 visits can be any combination of S9442, S9443, S9444, and/or S9445. Maximum reimbursement based on all visits at \$65 each</p>				

Background

Louisiana has one of the highest pregnancy morbidity/mortality and infant mortality rates in the United States. The rate of Cesarean delivery is also one of the highest in the nation. This is worsened by a significant disparity in pregnancy outcomes for African American births. Support from a doula during labor and delivery is associated with lower Cesarean rates and fewer obstetric interventions, fewer complications, less pain medication, shorter labor hours, higher infant APGAR scores, and also shows potential for reducing racial-ethnic and socioeconomic disparities in breastfeeding initiation. Doula care, especially when provided by a race concordant doula coordinated with comprehensive woman care, has been shown to result in improved outcomes and lower disparity.

Community-based doula support to the target population of pregnant and postpartum women to enhance pregnancy outcomes, specifically to increase adherence to provider visits, reduce preterm births/ reduce low birth weight, higher newborn Apgar scores, and reduce Cesarean Section deliveries. Doulas can also serve to increase member participation in breast feeding and completing postpartum care. Doulas shall refer to a post-partum doula or lactation specialist for post-natal concerns outside their scope of practice. Lactation classes will be conducted by either an IBCLC, CLC, or CBS certified lactation consultant. Doulas, especially those who are race/ethnic concordant with the member, have also been shown to decrease the disparity in maternity outcomes.

Reporting

CPT codes S9442, S9443, S9444, S9445, 99199 (modifier required)

Expected Outcomes

The goal of the ILO is to offer community-based doula support to the target population of pregnant and postpartum women to enhance pregnancy outcomes, specifically to increase adherence to provider visits, reduce preterm births/ reduce low birth weight, higher newborn Apgar scores, and reduce Cesarean Section deliveries. There will also be a goal to increase member participation in breast feeding and completing postpartum care. Doulas shall refer to a post-partum doula or lactation specialist for post-natal concerns outside

their scope of practice. Lactation classes will be conducted by either an IBCLC, CLC, or CBS certified lactation consultant. Doulas, especially those who are race/ethnic concordant with the member, have also been shown to decrease the disparity in maternity outcomes.

Anticipated outcomes under this ILO include:

- Greater adherence to prenatal and postpartum visits
- Increased participant referrals and utilization of community-based services
- Enhanced patient experience, lessened anxiety and improved overall well-being
- Reduction in total cost of care for ILO participants, driven by lower rates of preterm birth/ low birth weight infants, higher Apgar scores, and reduced rates of Cesarean births
- Enhanced member breast feeding awareness and initiation of breast feeding of newborn
- Reduction in disparity of pregnancy outcomes

Policy updates

2/2023: initial review date and ILO policy effective date: **2/2023**



Remote Patient Monitoring - ACLA

In Lieu Of Policy ID: ILO.01

Recent review date: 2/2023

Next review date: 1/2024

Policy contains: **Remote Patient Monitoring**

AmeriHealth Caritas has developed In Lieu Of policies to assist with making coverage determinations for medically appropriate services outside required MCO Covered Services or settings (or beyond the service limits established by LDH for MCO Covered Services. AmeriHealth Caritas' In Lieu Of services are provided to Enrollees, at their option, as a cost-effective alternative to an MCO Covered Service or Setting.

LDH has determined that this In Lieu Of service is a medically appropriate and cost-effective substitute for the MCO Covered Service or setting under the Louisiana Medicaid State Plan.

Coverage policy

Remote patient monitoring is medically appropriate and approved for the following groups of members, provided the member has a smart phone or tablet access:

- Adult members with hypertension and a potentially preventable admission (PPA), potentially preventable readmission (PPR), or potentially preventable ED visit (PPV) event within the last 18 months.
- Adult members with diabetes and a PPA/PPR/PPV events within last 18 months.
- Adult members with poorly controlled hypertension (>140/90), at risk for PPA/PPR/PPV.
- Adult members with poorly controlled diabetes (HbA1c >9.0%), at risk for PPA/PPR/PPV.
- Pregnant women with hypertensive disorders and/or insulin dependent diabetes.
- Remote patient monitoring (RPM) services for AmeriHealth Caritas Louisiana enrolled members are reimbursable when ordered by physicians or other qualified health professionals. RPM services may be delivered by auxiliary personnel including contracted employees, when under the supervision of a billing physician or qualified health profession.

Member Identification and Referral

AmeriHealth Caritas will identify members for enrollment into the RPM program. The member's provider will be contacted to order and begin the enrollment process. Alternatively, the member's PCP may request member enrollment. ACLA will authorize member's participation in the RPM program by providing a roster of eligible members to the RPM provider.

Service Provider Responsibility

The RPM service provider will contact members to offer the RPM services and coordinate member communication to enroll in RPM. The provider will deliver needed equipment to the member, educate the member on use and monitoring aspects of RPM program. The provider shall monitor results per agreed parameters and contact the member for results outside of agreed parameters. The provider shall engage the member with education and to maintain continued participation in RPM.

Unit of Service

99453 - Remote monitoring of physiologic parameter(s) (e.g., weight, blood pressure, pulse oximetry, respiratory flow rate), initial; set-up and patient education on use of equipment.

99454 - Remote monitoring of physiologic parameter(s) (e.g., weight, blood pressure, pulse oximetry, respiratory flow rate), initial; device(s) supply with daily recording(s) or programmed alert(s) transmission, each 30 days.

99199 - Unlisted special service, procedure, or report- This code with appropriate modifiers may be used as an alternative reimbursement CPT code for systems that have conflict with use of 99453 and/or 99454.

Anticipated Units of Service per Person

CPT code 99453 is a one-time billing upon set up of the remote monitoring equipment. This code represents the initial setup and patient education on how to use connected devices as well as best practices on when to take measurements. CPT code 99453 is reimbursable once per episode of care (every 9 months during pregnancy).

CPT codes 99454 and 99199 are billable every 30 days for ongoing monitoring and covers the cost a provider incurs if they lease or purchase the device for their patient. Providers may use either CPT code 99454 or 99199, but not both codes for the same member.

Targeted Length of Service

It is anticipated that length of service will be no greater than 6-12 months for adults with hypertension and diabetes.

It is anticipated that length of service will be no greater than 9 months for pregnant members, including prenatal and postpartum periods.

Background

Remote patient monitoring (RPM) involves digital technologies to collect medical and other forms of health data from individuals in one location and electronically transmit that information securely to health care providers in a different location for assessment, recommendations, and interventions. RPM devices include (1) non-invasive remote monitoring devices that measure or detect common physiological parameters, and (2) non-invasive monitoring devices that wirelessly transmit the beneficiary's medical information

to their health care provider or other monitoring entity. The device must be reliable and valid, and the beneficiary must be trained or sufficiently knowledgeable in the proper use/wearing of the device to ensure appropriate recording of medical information. Medical information may include, but is not limited to, blood pressure and heart rate and rhythm monitoring for members with hypertension and blood glucose control for members with diabetes. Members enrolled should have smart phone or tablet access and connectivity for data reporting.

LDH has approved an AmeriHealth Caritas Louisiana “in lieu of” (ILO) benefit to provide RPM coverage for identified members with hypertension and/or diabetes mellitus. Specific members being targeted are those who have exhibited, or at risk for, potentially preventable admissions, potentially preventable readmission, potentially preventable ED utilization, and poor outcomes. This encompasses a population of adult members with less-than-optimal disease control and in pregnancies complicated by hypertensive disorders and/or diabetes.

Reporting

The provider of RPM services shall report to ACLA, in a mutually agreed upon format and basis, both aggregate and member level data on outcomes of monitoring. Reporting to the member’s PCP on monitoring activities will occur on an ongoing basis.

Expected Outcomes

Anticipated outcomes for members participating in the ILO:

- Improved BP control (<140/90)
- Improved blood glucose control, as measured by Hgb A1c (<9.0%)
- Reduced ED utilization for hypertension and diabetes related complications
- Reduced preventable hospitalizations for hypertension and diabetes
- Reduced admission for hypertensive disorders in pregnancy and diabetes in pregnancy
- Improved pregnancy outcomes for pregnant women with hypertensive disorders and diabetes, based on preterm birth rates and infant birth weights
- Member engagement with RPM program and increased participation in care

Policy updates

2/2023: initial review date and ILO policy effective date: **2/2023**