

KanCare In Lieu of Services  
7/1/2024

Name of ILOS	Definition of ILOS	Covered Medicaid State plan service or setting for which each ILOS is a substitute	Clinically oriented definition(s) for target population(s) for each ILOS for which the State has determined each ILOS to be a medically appropriate and cost-effective substitute.	Specific coding for each ILOS to be used on claims and encounter data;
Intensive Outpatient/ Partial Hospital Psychiatric Care	Structured outpatient treatment program which meets between 6-10 hours a week, incorporate group and individual therapy to treat MH diagnoses for mental health disorders such as depression, anxiety, bipolar, and eating disorders for those over age 21; mental health partial hospitalization, treatment, less than 24 hrs.	To avoid inpatient stay for DRGs such as 885 Psychoses, 886 Behavioral & developmental disorders, 887 Other mental disorder diagnoses	Eligible population includes members meeting medical necessity-MH-Adults, those at acute risk to self or others and/or necessitating more intensive oversight and acute treatment than what could be achieved through routine outpatient management.	S9480 H0035
Institutional Transition Assistance	Comprehensive community support services, per 15 minutes; Transition Coordination Services per 15 min; Comprehensive community support services, per diem.	To avoid NF placement: Revenue code 120- billing for regular long-term care (LTC) room and board days	Eligible population includes members needing direct costs for transitions out of institutional settings and members determined eligible for the FE, IDD, PD, BI 1915(c) waivers only and upon institutional discharge.	H2015 U3 H2016 U3
Transitional Living Skills	Community and in-home training to develop, adapt and/or relearn skills necessary for daily life and to optimize independence	To avoid NF placement: Revenue code 120- billing for regular long-term care (LTC) room and board days	Eligible population includes enrolled members on the FE, IDD, PD, 1915 (c)waivers only. This is a service on the BI 1915(c) waiver.	H2014

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LVAD (Left Ventricular Assist Device) as Destination Therapy	Inserts an implantable ventricular assist device (VAD) into a patient's heart. The provider performs this procedure in patients who have weak hearts or heart failure. The code 33979 is applicable to a single ventricle.	To avoid (recurrent) hospitalization for severe heart failure, DRG: 291	Eligible population includes members with people with severe heart failure, as defined by NY heart failure class 4, meeting evidence-based criteria for LVAD placement.	33979
Disease Management with Home Remote Monitoring System, Per Diem	A home remote monitoring system enables the participant to effectively manage one or more diseases and catch early signs of trouble so intervention can occur before the participant's health declines. The provision of Home Telehealth involves participant education specific to one or more diseases (e.g. COPD, CHF, hypertension, and diabetes), counseling, and nursing supervision. Remote Monitoring Technology could include, but is not limited to, a cardiac telemonitoring system, vital sign telemonitoring system with teleconsultation and/or touchscreen, vital sign telemonitoring mattress, web applications, and phone applications. Telemonitoring	To avoid NF placement: Revenue code 120- billing for regular long-term care (LTC) room and board days	Eligible population includes non-waiver members and enrolled on the PD, BI, I/DD 1915 (c) waivers only and non-waiver populations only with a chronic condition (e.g., COPD, CHF, HTN, or Diabetes) This is a service on the FE 1915(c) waiver.	S0317 S0315 Install/Training (max. 2/year)

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	services supplement rather than replace face-to-face physician visits.			
Personal Care Services Per 15 Min.	Personal care services, per 15 minutes, not for an inpatient or resident of a hospital, nursing facility, ICF/MR or IMD, part of the individualized plan of treatment. ILOS is for exceeding benefit limit.	To avoid NF placement: Revenue code 120- billing for regular long-term care (LTC) room and board days	Eligible populations include non-waiver members and members enrolled on the FE, PD, BI, I/DD waivers only.	S5130 S5125 S5125-U9 S5125-UA
Home Delivered Meals	Home delivered meals, including prep; per meal (2 meals/day delivered to home).  Standard home delivered meals will not exceed 2 meals per day for seven days or 60 meals per month. Monthly documentation of member's receipt of meals is to be submitted by vendor and is to be on file with the Managed Care Organization. State may request this documentation from the MCO at any time during the State ILOS reviewal process.	To avoid NF placement: Revenue code 120- billing for regular long-term care (LTC) room and board days	Eligible population includes any members with nutritional needs who have no access to meals/food through other avenues. This is a service on the PD and BI 1915(c) waivers.	S5170

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Vehicle Modifications	Adaptations or alterations to a vehicle that is the participant's primary means of transportation. Vehicle modifications are specified by the person-centered service plan and are designed to accommodate the needs of the participant and enable the participant to integrate more fully into the community and to ensure the health, welfare and safety and integration by removing barriers to transportation. ILOS is for exceeding benefit limit.	To avoid NF placement: Revenue code 120- billing for regular long-term care (LTC) room and board days	Eligible population includes FE, PD, BI enrolled 1915 (c) waiver members and not I/DD waiver enrolled. This is a service on the FE, PD, BI 1915(c) waivers.	T2039
Specialized Medical Equipment and Supplies	Specialized medical equipment and supplies include: devices, controls, or appliances, specified in the person-centered service plan, that enable participants to increase their ability to perform activities of daily living. ILOS is for exceeding benefit limit.	To avoid NF placement: Revenue code 120- billing for regular long-term care (LTC) room and board days	Eligible population includes FE, PD, BI enrolled 1915 (c) waiver members and not I/DD waiver enrolled. This is a service on the FE, PD, BI 1915(c) waivers.	T2029
Home Modifications	Physical modifications to the participant's home based on an assessment designed to support the participant's efforts to function with greater independence and to create a safer, healthier environment. Reimbursement for this service is limited to the participant's assessed needs	To avoid NF placement: Revenue code 120- billing for regular long-term care (LTC) room and board days	Eligible population includes FE, PD, BI enrolled 1915 (c) waiver members and not I/DD waiver enrolled. This is a service on the FE, PD, BI 1915(c) waivers.	S5165

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	and based on the person-centered service plan. Participants will have the choice to choose any qualified provider. The MCO will engage with the provider for planning and oversight of the process. Home modifications, per service; ILOS is for exceeding benefit limit.			
Cognitive Therapy	Self-care/home management training (e.g. ADL training, compensatory training, going over safety procedures/instructions, meal prep, and instructions in the use of assistive technology devices/adaptive equipment); Community/work reintegration training (e.g., shopping, transportation, money management, avocational activities and/or work environment/modification analysis, work task analysis, use of assistive technology device/adaptive equipment), direct one-on-one contact, each 15 minutes.	To avoid NF placement: Revenue code 120- billing for regular long-term care (LTC) room and board days	Eligible population includes enrolled PD, FE, or I/DD 1915 (c) waiver members and non-waiver populations. This is a service on the BI 1915(c) waiver.	97535 97537

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Brain Disorders Treatment	Under Neurostimulators (Intracranial) Procedures on the Skull, Meninges, and Brain; Twist drill, burr hole, craniotomy, or craniectomy with stereotactic implantation of neurostimulator electrode array in subcortical site (e.g., thalamus, globus pallidus, subthalamic nucleus, periventricular, periaqueductal gray), without use of intraoperative microelectrode recording; Insertion or replacement of cranial neurostimulator pulse generator or receiver, direct or inductive coupling; with connection to 2 or more electrode arrays.	To avoid hospital inpatient, stay for seizures, DRG: 101	Eligible population includes members with seizures with MCC or degenerative nervous system disorders with MCC.	Surgical Codes: 61863 61864 61867 61885 61886  Device codes: C1767 C1820 C1883 C1787
Compression Device	Pneumatic compressor, segmental home model without calibrated gradient pressure; segmental pneumatic appliance for use with, Pneumatic compressor full leg; segmental pneumatic appliance for use with pneumatic compressor, full arm	To avoid hospital inpatient, stay for deep vein thrombophlebitis, DRGs: 294, 295	Eligible population includes members with venous edema in extremities, varicosities, venous stasis, and ulcerations.	E0651 NU E0667 NU E0668
Tumor Treatment Field Therapy	Electrical stimulation device used for cancer treatment, includes all accessories, any type	To avoid hospital in patient system disorders, DRG: 056; Craniotomy, DRG:025	Eligible population includes members with cancer newly diagnosed Glioblastoma Multiforme (GBM).	E0766 RR

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Computed Tomographic (CT) Cardiac Angiography	Computed tomographic angiography, heart, coronary arteries, and bypass grafts (when present), with contrast material, including 3D image postprocessing (including evaluation of cardiac structure and morphology, assessment of cardiac function, and evaluation of venous structures); CT of the heart with contrast for evaluation of cardiac structure and morphology-aortic annulus only.	To avoid cardiac cath. and associated procedures: 93454, 93455, 93456; Avoid coronary angiography and bypass grafts along with heart cath. 93457	Eligible population includes members with at risk for coronary artery disease at low risk for acute blockages requiring catheterization or at higher risk for traditional diagnostic cardiac catheterization procedures for assessing evidence of/extent of disease.	75574 75572
PET, Perfusion Cardiac Study	PET myocardial imaging scan, a type of nuclear imaging test, with CT transmission scan that reveals blood flow to and from the heart (perfusion). Ejection fraction and ventricular wall motion studies are included if performed. This code is for multiple studies at rest and with pharmacologic or exercise stress testing.	To avoid ER visits and hospital admissions for acute myocardial infarction, DRGs: 280-285	Eligible population includes members with symptoms and/or findings suggestive of coronary artery disease and myocardial perfusion abnormalities for whom SPECT myocardial perfusion has been equivocal or inconclusive or whose body characteristics commonly affect imaging quality (such as large breasts, breast implants, obesity).	78431
Adult Day Care	Adult day care, 1-5 hours(half-day); Adult day care per diem	To avoid NF placement: Revenue code 120- billing for regular long-term care (LTC) room and board days	Eligible population includes enrolled PD or BI 1915 (c) waiver members only. This is a service on the FE 1915(c) waiver.	S5101 S5102

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Comprehensive Support	This service will provide one-on-one, nonmedical assistance, observation, and supervision for a cognitively impaired adult to meet his or her health and welfare needs. It does not involve hands-on nursing care. The primary focus of senior companion is supportive supervision. Adult care homes are excluded from providing this service; attendant care services, per 15 minutes.	To avoid NF placement: Revenue code 120- billing for regular long-term care (LTC) room and board days	Eligible population includes enrolled PD, BI 1915 (c) waiver members only. This is a service on the FE 1915 (c) waiver.	S5135
Wellness Monitoring	Wellness assessment, performed by non-physician. Requires an RN to evaluate the participants level of wellness. The RN determines if the participant is properly using medical health services as recommended by the physician and if the participant is maintaining a stable health status in his or her place of residence without frequent skilled nursing intervention-includes the following-orientation to surroundings, skin characteristics, edema, personal hygiene, blood pressure, respiration, pulse, adjustments to medications, with supervision; Once q 30d to exceed waiver benefit limit.	To avoid NF placement: Revenue code 120- billing for regular long-term care (LTC) room and board days	Eligible population includes enrolled PD, BI, FE, I/DD 1915 (c) waiver members and non-waiver populations. This is a service on the FE and I/DD 1915(c) waivers.	S5190



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Specialized Medical Care	Private duty/independent nursing service (s)-licensed up to 15 min. Exceeding for service over limits.	To avoid NF placement: Revenue code 120- billing for regular long-term care (LTC) room and board days	Eligible population includes enrolled PD, BI, FE, I/DD 1915 (c) waiver members only. This is a service on the I/DD 1915(c) waiver.	T1000-LPN T1000 TD-RN
Pain Management Unit	Neuromuscular electrical stimulation (NMES) involves the use of a device which transmits an electrical impulse to the skin over selected muscle groups by way of electrodes.	Unnecessary ER visits for Chronic Pain, 99281, 99285	Eligible population includes adult members with muscle wasting and atrophy, treatment of disuse atrophy where nerve supply to the muscle is intact, including brain, spinal cord and peripheral nerves, and other non-neurological reasons for disuse atrophy. Examples are contractures due to burn scarring; Previous casting or splinting of a limb; Major knee surgery with failure to respond to physical therapy; Recent hip replacement and NMES will be used until physical therapy begins.	E0745 E0764 E0770 A4595
Medication Reminder Device	Electronic medication compliance management device, includes all components and accessories; medication reminder/dispenser installation	To avoid NF placement: Revenue code 120- billing for regular long-term care (LTC) room and board days or ER for nonadherence or overdose of medications, 99281, 99285	Eligible population includes enrolled I/DD 1915 (c) waiver members only. This is a service on the FE, PD and BI 1915(c) waivers.	T1505-U6 dispenser  T1505 installation  S5185 call q month