



Aetna Better Health[®] of Florida

In Lieu of Services Resource Guide

For our Aetna Medicaid members there are behavioral health treatment options. They are considered in lieu of services that may be medically appropriate alternate treatments for our members.

Members have the choice to receive the Medicaid covered service or an in lieu of service. We ask that providers document in the enrollee record the members choice in the members' record.

Description of Service	In lieu of:	Procedure Code	Modifier	PA Required?	Limitations
Crisis Stabilization Unit (CSU)	Inpatient Psychiatric Hospital Care	129		Yes	No limits
Addiction Receiving Facilities	Inpatient Detoxification Hospital Care	169		Yes	No limits
Intensive Outpatient (IOP)-SUD	Inpatient Detoxification Hospital Care	906 H0015		Yes	90 days annually for ages 21 and older, no limits for children under 21
Partial Hospitalization Program (PHP)	Inpatient Psychiatric Hospital Care	Half Day 912 Full Day 913		Yes	No limits
Ambulatory Detox-SUD	Inpatient Detoxification Hospital Care	944		Yes	No limits
Ambulatory Detox-Alcohol	Inpatient Detoxification Hospital Care	945		Yes	No limits
Ambulatory Detox	Inpatient Detoxification Hospital Care	S9475 H0014		Yes	No limits

Description of Service	In lieu of:	Procedure Code	Modifier	PA Required?	Limitations
Substance Abuse Short-Term Residential Treatment (SRT)	Inpatient Detoxification Hospital Care	H0018		Yes	No limits
Self-Help/Peer Support	Psychosocial Rehabilitation	H0038		No	No limits
Community-Based Wrap Around Services	Therapeutic Group Care services or Statewide Inpatient Psychiatric Program (SIPP) services	H2022		Yes	No limits
Drop-In Center	Clubhouse Services	S5102	HE	No	No limits
Mobile Crisis Assessment and Intervention	Emergency Behavioral Health Care	S9484 H2011		No	No limits
Infant Mental Health Pre & Post Testing Services	Psychological Testing services	T1023	HA	Yes	No limits
Family Training/Counseling for Child Development	Therapeutic Behavioral On-Site Services	T1027		No	No limits
Behavioral Health Services-Child Welfare	Therapeutic Group Care services or Statewide Inpatient Psychiatric Program services	T2023	HA	Yes	No limits
Nursing Facility Services	Inpatient Hospital Services	0101 0190 0191 0192 0193 0194 0199 0655 0658		Yes	No limits