

Overview of In Lieu of Services

A Resource for Clinical Providers



This resource will provide an overview of the following:



What In Lieu of Services (ILOS) are and what services can be offered in Michigan.



Who is eligible for ILOS in Michigan.



How clinical providers can play a role in ILOS.

This resource complements the [ILOS Policy Guide](#), which is the definitive source for information related to all ILOS guidelines and policies. Please note that any updates or changes to ILOS policies will be reflected in the ILOS Policy Guide available on the ILOS webpage and should be considered the most current guidance.

What are ILOS and What Services can be Offered in Michigan?

In Lieu of Services Overview



ILOS are services a state deems to be **medically appropriate** and **cost effective** when provided to Medicaid Enrollees as substitutes to other services and settings covered in a state's Medicaid program.



ILOS is administered through Medicaid, which is a health program, so **they must address health-related needs.**

What are MDHHS' Goals in Introducing ILOS?



Promote availability of services to:

- **Meet Enrollee needs;**
- **Improve health; and**
- **Reduce the future need for medical services.**



Connect with MDHHS' broader strategy to address social determinants of health (SDOH) and improve health equity.

ILOS Federal Requirements



Optional

Medicaid Health Plans can choose whether to offer ILOS and Medicaid Enrollees can choose whether to use ILOS.

- ➔ ILOS may be available to some Enrollees and not others based on which Medicaid Health Plan they enroll with.
- ➔ Even if the Enrollee qualifies for ILOS, it is up to the Enrollee whether they use ILOS or not.



Medically Appropriate

Each ILOS must be **medically appropriate** for the Enrollee.

- ➔ ILOS will only be available to some Enrollees based on their health conditions and whether the ILOS can help to improve their health.
- ➔ Per federal regulations, the food provided through ILOS must be less than 3 meals / day.



Preserve Enrollees' Rights

“ILOS may not be used to reduce, discourage, or jeopardize” access to Medicaid services.¹

- ➔ An Enrollee's Medicaid coverage and access to medical services will stay the same if an Enrollee chooses to use a food service or chooses not to.

1. See 42 CFR 438.3(e)(2)(ii)(B)

Nutrition ILOS in Michigan



Medically Tailored Home Delivered Meal

A fresh or frozen home delivered meal which is medically tailored for a specific disease or condition. This ILOS includes support from a certified nutrition professional.



Healthy Home Delivered Meal

A nutritionally-balanced, home delivered meal consisting of a hot, cold, frozen or shelf-stable meal aimed at promoting improved nutrition for the Enrollee.



Healthy Food Pack

A healthy food pack consists of an assortment of medically-tailored or nutritionally-appropriate foods provided to an Enrollee.



Produce Prescription

A voucher for the Enrollee to purchase any variety of fruits and vegetables or plants/seeds that produce fruits and vegetables.

ILOS Availability Across Michigan

ILOS may be available to the individuals you treat based on where they live and which Medicaid Health Plan they receive coverage from.

Factors that Influence ILOS Availability:

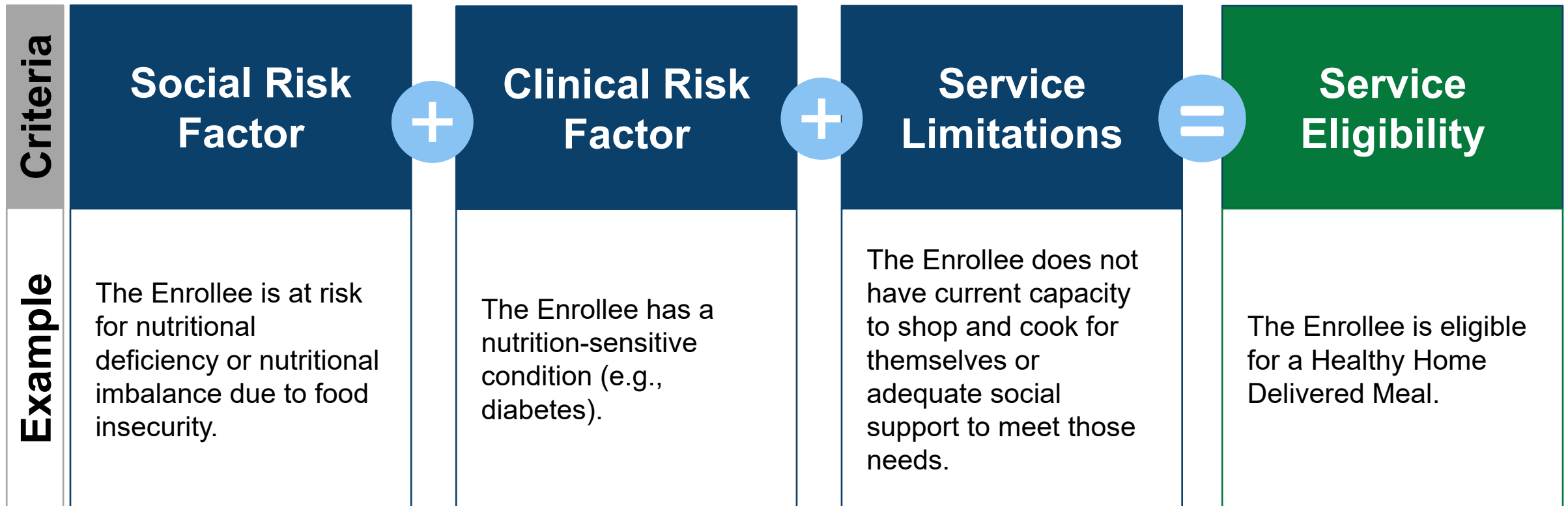
- 1** ILOS are optional and Medicaid Health Plans may elect to offer one or more of the four ILOS offered in Michigan. → Whether or not ILOS are available depends on which Medicaid Health Plan a patient is enrolled in.
- 2** Medicaid Health Plans may choose which of its service Region(s) to offer the ILOS and may opt to offer different ILOS in different Regions. → The availability of the four services may depend on where a patient lives.
- 3** Medicaid Health Plans could begin offering ILOS in 2025, but they need approval from the state before eligible enrollees can begin receiving services. → A patient's Medicaid Health Plan may intend to offer ILOS, it just may not be available yet.
- 4** Per federal requirements and state policy, Medicaid Health Plans may offer to ILOS only to enrollees who meet specific eligibility criteria. → Patients access to ILOS depends on clinical and social factors. **Refer to the next slides to learn more about which patients are eligible!**

For information on Medicaid Health Plans' [service offerings](#), including the type of ILOS and the Regions they are offered, please visit the [ILOS webpage](#) under the "Key Documents" heading.

Who is Eligible for ILOS?

Enrollee Eligibility for an ILOS

Individuals must be enrolled in a Michigan Medicaid Health Plan that offers ILOS to receive services. An enrollee is eligible for an ILOS if they meet the social risk factor, a clinical risk factor and adhere to the service limitations as defined in the ILOS Policy Guide.



Note: While the social risk factor is the same across all four ILOS, the clinical risk factor that qualifies an Enrollee for an ILOS and service limitations differ across ILOS.

Authorizing ILOS

A Medicaid Health Plan will authorize ILOS if the Enrollee meets the service eligibility criteria and deems the service medically appropriate based on the judgment of a licensed clinical provider.



Service Eligibility

Determined by Medicaid Health Plan



Medical Appropriateness

Determined by licensed clinical network provider or Medicaid Health Plan clinical staff provider



Service Authorization Determination

Determined by Medicaid Health Plan

Medical Appropriateness



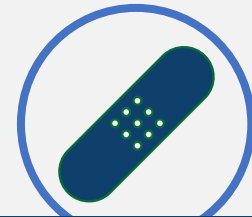
According to federal regulation and guidance, "the actual determination of medical appropriateness should be completed by a provider, for each enrollee, using their professional judgement, and assessing the enrollee." Additionally, it specifies that the assessing providers should make the determination on whether an ILOS is medically appropriate for the specific Enrollee based on the Enrollee's:



Presenting medical condition



Preferred course of treatment



Current or past medical treatment

Illustrative Scenario

Example Scenario:

An Enrollee undergoing chemotherapy and radiation is at risk for an inpatient admission. The person is experiencing food insecurity – they can receive one hot meal per day at a community kitchen, but they do not tolerate the food and cannot eat enough to meet their needs throughout the day with low-cost, shelf-stable items like tea and crackers. They are feeling weak and dizzy at home and experiencing vomiting and diarrhea.

ILOS Provided:

Healthy Home Delivered Meal

Substitute for a Future Service:

Inpatient admission due to dehydration and electrolyte imbalance.

How Can Clinical Provider Support ILOS?

Supporting Health Related Social Needs



Clinical providers play a key role in identifying and addressing patient's health related social needs, including connecting Enrollees to ILOS.

Clinical Providers Activities to Help Address Health-Related Social Needs

- **Screen for health-related social needs:** Proactively ask patients about their needs to identify if their health would benefit from nutrition-focused services.
- **Help to Connect Enrollees to Services:** Talk with patients about what nutrition services they may be eligible for and how the services can support their health. To the extent that you can, help connect patients with nutrition programs offered through national programs (e.g., WIC, SNAP) and others in the community, including ILOS if they are eligible through their Medicaid Health Plan.
- **Provide Care Coordination Support:** Connect with other care team members (e.g., case managers, nutritionist, health coaches, behavioral health specialists) to address the patients needs, provide supportive nutrition, health coaching or behavior change supports, to ensure patients needs are addressed, and the patient can attain optimal health outcomes.

If you think a patient may be eligible for ILOS through their Medicaid health plan, please help to coordinate through their Medicaid Health Plan to assess eligibility.

Depending on your clinical role and the Medicaid health plan's policies, you may play an important role in getting ILOS authorized!

Clinical Providers Supporting ILOS

To learn more about ILOS and how you can be involved, consider:

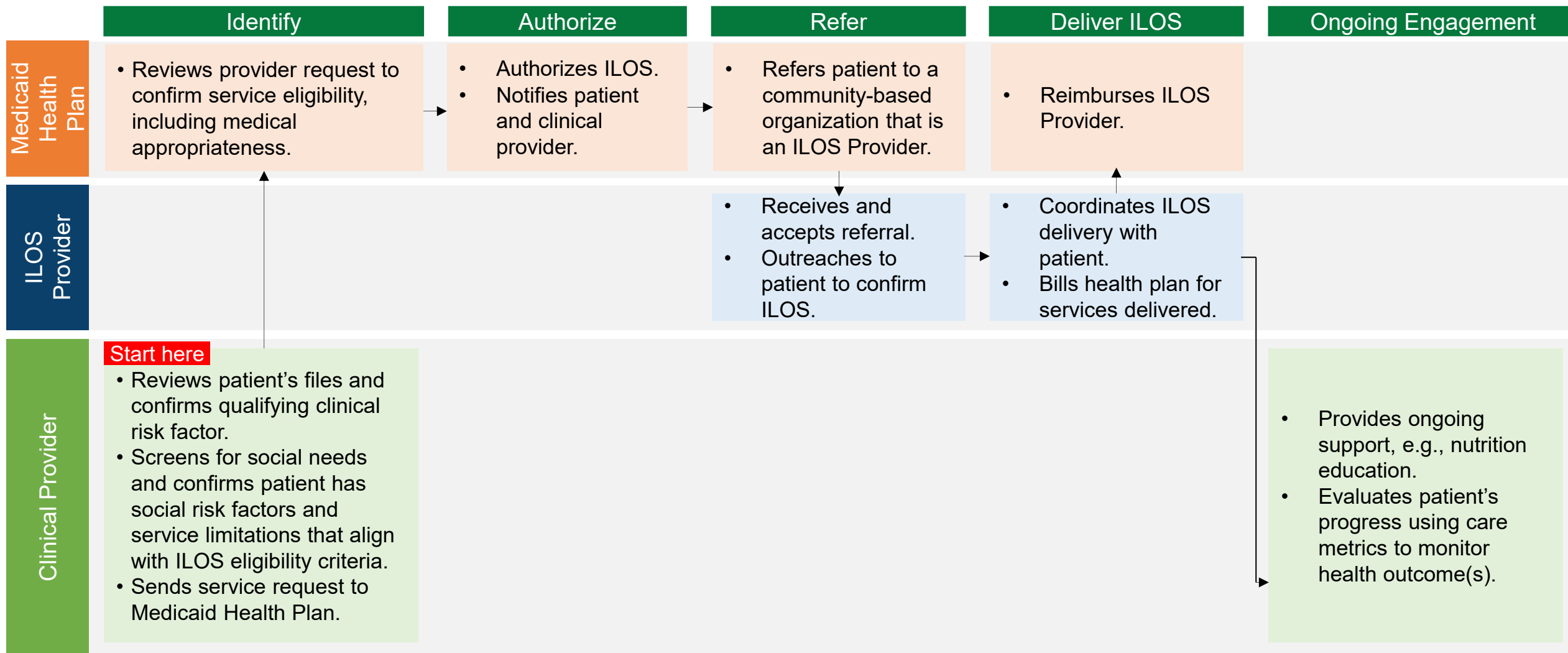
- ✓ **Connecting with the Medicaid Health Plans you contract with** to identify the ILOS they offer and in which Regions.
- ✓ **Clarifying workflows**, including how requests for ILOS are initiated and who to contact at the Medicaid Health Plan for coordination.
- ✓ **Requesting documentation guidelines and training** from Medicaid Health Plans to ensure your understanding of Medicaid Health Plan ILOS policies and procedures and your role in supporting delivery—whether as Clinical Provider, Delegated Entity, or ILOS Provider.
- ✓ **Exploring and leveraging MDHHS produced [ILOS resource](#).**

Example Scenarios

Please note that the scenarios presented in the following slides are illustrative. There is flexibility in how clinical providers may engage in ILOS coordination or delivery. Workflows will vary based on operational processes and existing systems.

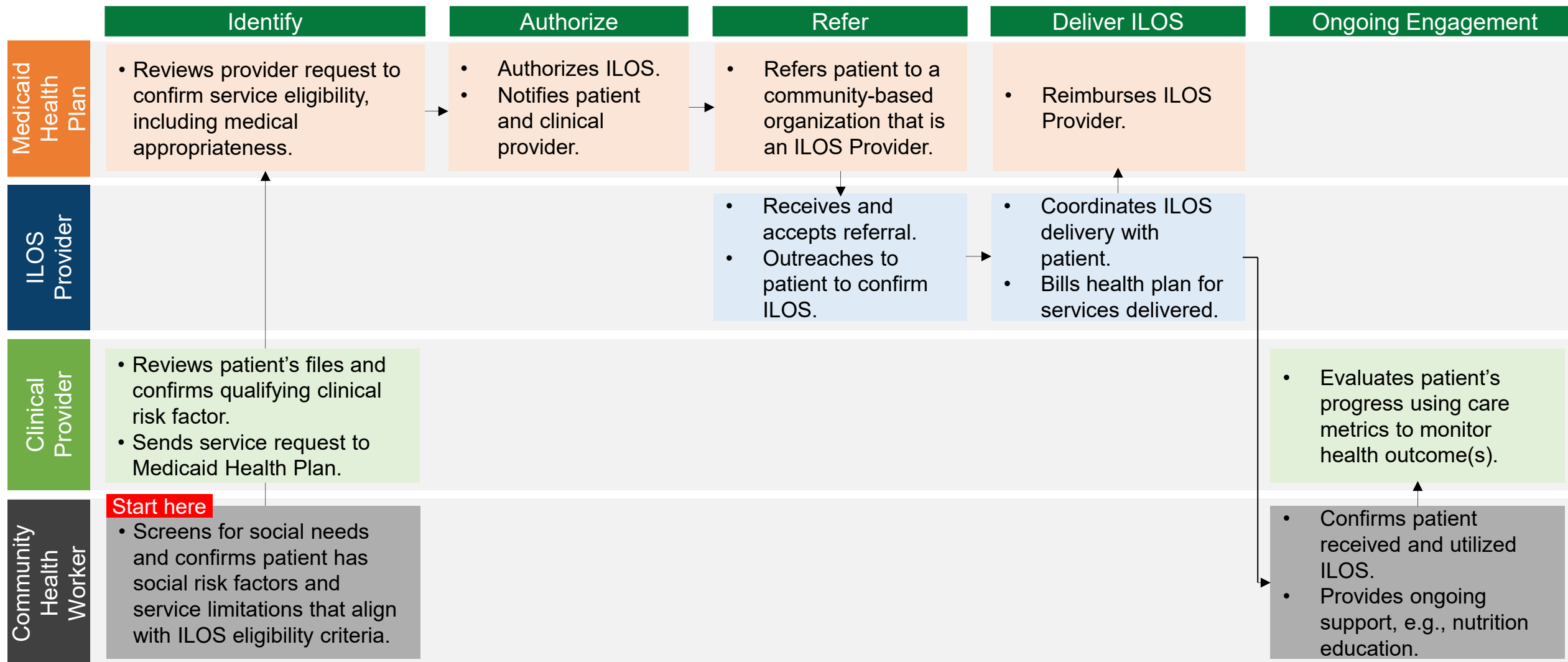
Scenario 1: Illustrative ILOS Workflow

In this scenario, a patient presents at a health center for medical care. During their appointment, the patient shares with the clinical provider that they are experiencing food insecurity. The clinical provider confirms that the patient is enrolled in a Medicaid Health Plan that offers ILOS and that they meet the clinical, social, and service limitations criteria for ILOS eligibility.



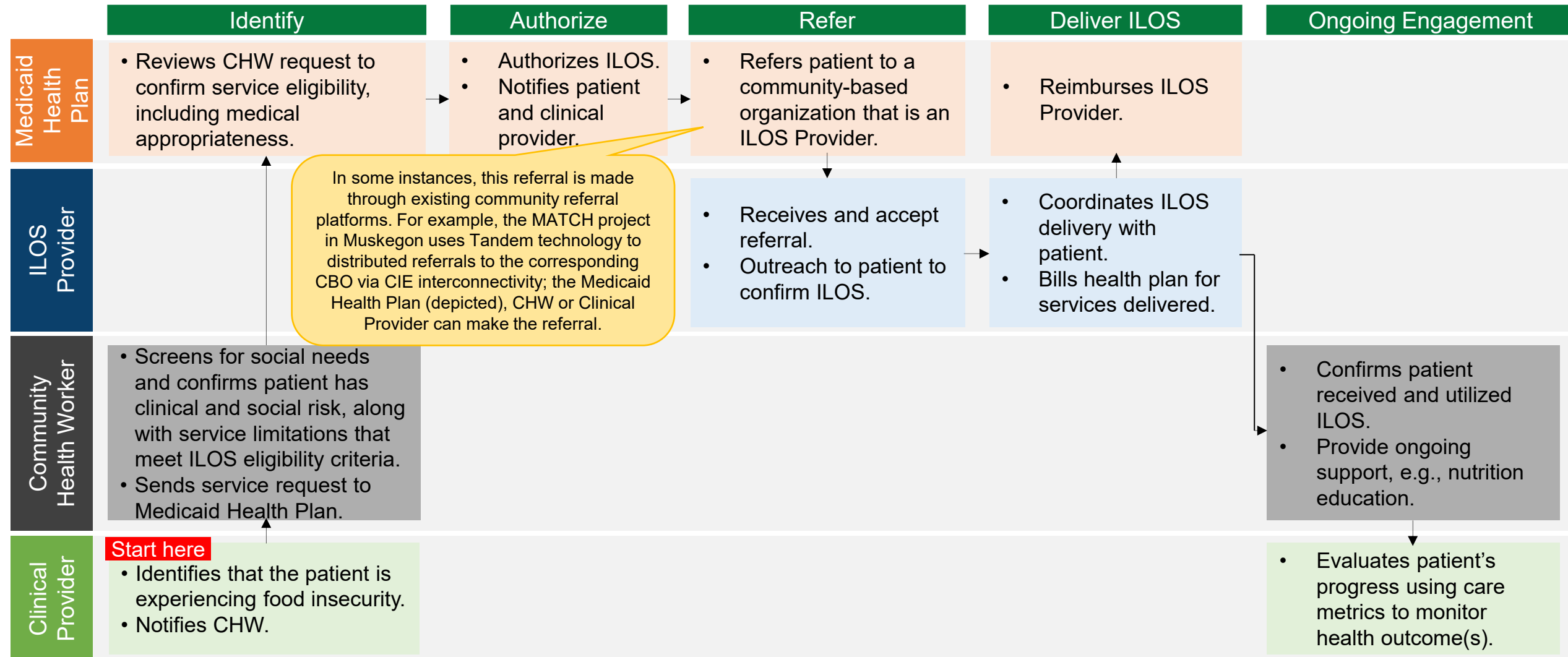
Scenario 2: Illustrative ILOS Workflow

In this scenario, a high-risk/at-risk patient enrolled in a Medicaid Health Plan presents at a health center. They engage with a community health worker, who determines that the patient is enrolled in a Medicaid Health Plan that offers ILOS, has social risk factors and limitations that align with ILOS eligibility criteria.



Scenario 3: Illustrative ILOS Workflow

In this scenario, a patient presents at a health center and shares with the clinical provider that they are experiencing food insecurity during their medical appointment. The provider connects the patient with a community health worker, who confirms that the patient is enrolled in a Medicaid Health Plan that offers ILOS and that they meet the clinical, social, and service limitations criteria for ILOS eligibility.



Appendix

Medicaid Health Plan Regions

- **Region 1 – Upper Peninsula Prosperity Alliance:** Upper Peninsula Health Plan, LLC.
- **Region 2 – Northwest Prosperity Region:** Blue Cross Complete of Michigan, LLC, McLaren Health Plan, Inc., Molina Healthcare of Michigan, Inc., Priority Health Choice, Inc.
- **Region 3 – Northeast Prosperity Region:** Blue Cross Complete of Michigan, LLC, McLaren Health Plan, Inc., Molina Healthcare of Michigan, Inc., Priority Health Choice, Inc.
- **Region 4 – West Michigan Prosperity Alliance:** Blue Cross Complete of Michigan, LLC, McLaren Health Plan, Inc., Meridian Health Plan of Michigan, Inc., Molina Healthcare of Michigan, Inc., Priority Health Choice, Inc., United Healthcare Community Plan, Inc.
- **Region 5 – East Central Michigan Prosperity Region:** Blue Cross Complete of Michigan, LLC, McLaren Health Plan, Inc., Meridian Health Plan of Michigan, Inc., Molina Healthcare of Michigan, Inc.
- **Region 6 – East Michigan Prosperity Region:** Blue Cross Complete of Michigan, LLC, HAP CareSource, Inc., McLaren Health Plan, Inc., Meridian Health Plan of Michigan, Inc., Molina Healthcare of Michigan, Inc., United Healthcare Community Plan, Inc.
- **Region 7 – South Central Prosperity Region:** Aetna Better Health of Michigan, Inc., McLaren Health Plan, Inc., Meridian Health Plan of Michigan, Inc., United Healthcare Community Plan, Inc.
- **Region 8 – Southwest Prosperity Region:** Aetna Better Health of Michigan, Inc., McLaren Health Plan, Inc., Meridian Health Plan of Michigan, Inc., United Healthcare Community Plan, Inc.
- **Region 9 – Southeast Prosperity Region:** Aetna Better Health of Michigan, Inc., Blue Cross Complete of Michigan, LLC, HAP CareSource, Inc., McLaren Health Plan, Inc., Meridian Health Plan of Michigan, Inc., United Healthcare Community Plan, Inc.
- **Region 10 – Detroit Metro Prosperity Region:** Aetna Better Health of Michigan, Inc., Blue Cross Complete of Michigan, LLC, HAP CareSource, Inc., McLaren Health Plan, Inc., Meridian Health Plan of Michigan, Inc., Molina Healthcare of Michigan, Inc., Priority Health Choice, Inc., United Healthcare Community Plan, Inc.

