

Florida Medicaid In Lieu of Services Benefit

A guide to billing codes for In Lieu of Services when used as alternatives to state plan services

Overview

In Lieu of Services (ILOS) are alternative services that are medically appropriate and cost-effective substitutes for Florida Medicaid covered services. Please review the following guidance on which codes to use when billing for ILOS.

| State Plan Service | Billing Code(s) | ILOS Alternative | Billing Code(s) |
|--|----------------------|---|---|
| Inpatient Hospital Detox | 126 | Ambulatory Detox | S9475, 944, 945 |
| Statewide Inpatient Psychiatric Program | 124 | Community Based Wrap Around Services | H2022 |
| Inpatient Psychiatric Hospital | 124 | Crisis Stabilization Units (CSU) † | Rev code 124 |
| Inpatient Hospital Detox | 126 | Detox or Addictions Receiving Facilities † | Rev Code 126 |
| Therapeutic Behavioral On-Site | H2019 (HO,HN, or HM) | Family Training for Child Development | T1027 |
| Inpatient Psychiatric Hospital | 124 | First Episode Psychosis Program | H2040, H2040 HK |
| Inpatient Psychiatric Hospital or Inpatient Detox Hospital | 124,126 | Intensive Outpatient Program for Mental Health | Rev codes 905 |
| Inpatient Psychiatric Hospital or Inpatient Detox Hospital | 124,126 | Intensive Outpatient Program for Substance Use Disorder | Rev codes 906 |
| Inpatient Psychiatric Hospital | 124 | Mental Health Partial Hospitalization Program (PHP) | Rev Code 912 |
| Inpatient Psychiatric Hospital | 124 | Mobile Crisis Assessment/Intervention | H2011 |
| Inpatient, Residential, or Statewide Inpatient Psychiatric Program | 124,128 | Mult-Systemic Therapy | H2033 |
| Inpatient Hospital | 124 | Nursing Facility | Rev codes 0110, 0119, 0120, 0129, 0130 and 0139 |
| Psychosocial Rehabilitation | H2017 | Self-help/Peer Services | H0038 |



Provider Quick Reference Guide

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| Inpatient Psychiatric Hospital | 124 | Specialty Psychiatric Hospitals † | Rev code 124 |
| Inpatient Hospital Detox | 126 | Substance Abuse Short term Residential Treatment (SRT) | Rev Code 1002 |
| Emergency Department Visit or Inpatient Psychiatric Hospital | 124 | Transitional Housing Services for people at risk for homelessness and SMI and SUD | H0043 HK |
| Emergency Department Visit or Inpatient Psychiatric Hospital | 124 | Tenancy Sustaining Services for people at risk for homelessness and SMI and SUD | H2015 HK |
| Emergency Department Visit or Inpatient Psychiatric Hospital | 124 | Functional Family Therapy (FFT) | H0036 |

Questions?

Please contact the Network Management contract representative [for your state](#) or call the Provider Services Line at **1-877-614-0484**.