Payment Policy | Adult Intensive Services (AIS) and Child and Family Intensive Services (CFIT)



EFFECTIVE DATE: 04|01|2024 **POLICY LAST REVIEWED:** 02|07|2024

OVERVIEW

Adult Intensive Services (AIS) and Child and Family Intensive Treatment (CFIT) are home- and communitybased services which are provided to adults and children experiencing moderate to severe psychiatric symptoms. These services may be utilized as a step up from traditional outpatient services or as a step down from more intensive services (such as inpatient hospitalization or residential treatment). The goal of AIS/CFIT is to provide intensive treatment in the least restrictive environment possible.

This policy is applicable to Commercial products only.

MEDICAL CRITERIA

Not applicable

NOTIFICATION OF ADMISSION

Not applicable

POLICY STATEMENT

Adult Intensive Services (AIS) and Child and Family Intensive Services (CFIT) benefits are intended to offer treatment to individuals experiencing moderate to severe psychiatric symptoms. Services are generally provided in less restrictive settings (e.g., in the community, in a practitioner's office, and/or in the patient's home) in an effort to reduce inpatient admissions. Although individuals receiving these services are typically not at risk for serious harm to themselves or to others, they may have difficulty performing activities of daily living. If left untreated, these individuals might likely require more intensive care.

Services consist of, but are not limited to:

- Individual, family, and/or group therapy
- Medication consultation and management
- Case management coordination
- 24/7 emergency crisis evaluation
- Psychiatric assessment

Adult Intensive Service (AIS) program:

AIS benefits are only available to covered adult members after their eighteenth (18th) birthday.

Child and Family Intensive Treatment (CFIT) program:

CFIT benefits are only available to covered dependent children until their nineteenth (19th) birthday.

For more information, please contact BCBSRI Behavioral Health Utilization Management at 1-800-274-2958.

COVERAGE

Benefits may vary by group or contract. Please refer to the appropriate member Benefit Booklet or Subscriber Agreement for applicable behavioral health benefits/coverage.

BACKGROUND

The intent of this policy is to provide less restrictive behavioral health services to children, adults, and families with intensive behavioral health problems in order to prevent and reduce inpatient admissions.

CODING

The provider will be reimbursed at an all-inclusive per diem payment schedule.

RELATED POLICIES

Not applicable

PUBLISHED

Provider Update, February 2024, May 2024 Provider Update, January 2022, July 2022 Provider Update, June 2021 Provider Update, April 2018, October 2018

REFERENCES

None

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This medical policy is made available to you for informational purposes only. It is not a guarantee of payment or a substitute for your medical judgment in the treatment of your patients. Benefits and eligibility are determined by the member's subscriber agreement or member certificate and/or the employer agreement, and those documents will supersede the provisions of this medical policy. For information on member-specific benefits, call the provider call center. If you provide services to a member which are determined to not be medically necessary (or in some cases medically necessary services which are non-covered benefits), you may not charge the member for the services unless you have informed the member and they have agreed in writing in advance to continue with the treatment at their own expense. Please refer to your participation agreement(s) for the applicable provisions. This policy is current at the time of publication; however, medical practices, technology, and knowledge are constantly changing. BCBSRI reserves the right to review and revise this policy for any reason and at any time, with or without notice. Blue Cross & Blue Shield Association.



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