



## HEDIS® Tip Sheet 2020-21\*

# Follow-Up after Hospitalization for Mental Illness (FUH)

### Why Is the HEDIS FUH Measure Important?

Data from the most recent National Survey on Drug Use and Health showed that almost 5% of U.S. adults have a serious mental illness. Of these, about 45% have a perceived unmet need for mental health care.<sup>1</sup> While evidence-based treatment is effective and available, many people do not receive or complete an intervention.<sup>2</sup> Members hospitalized for mental health issues are vulnerable after discharge. Follow-up care by trained mental health providers is critical.<sup>3</sup>

### FUH Measure Description<sup>4</sup>

HEDIS requires a timely outpatient follow-up visit with a qualified **mental health provider** (includes telehealth visits) or in certain outpatient<sup>5</sup> settings. The FUH measure applies to our members ages 6 years and older discharged from an acute inpatient stay. The principal diagnosis at discharge must be mental illness or intentional self-harm.

Document the date of the **first follow-up visit** that is at least one calendar day after discharge. This measure calculates two rates for the first follow-up visit:

- **Within 7 days**
- **Within 30 days**

If the first follow-up visit is within seven days after discharge, then both rates are counted for this measure.

### Mental Health Providers

The following providers can perform the FUH: psychologist, psychiatrist, clinical social worker, mental health occupational therapist, psychiatric/mental health nurse practitioner/clinical nurse specialist, neuropsychologist, psychoanalyst, professional counselor, marriage and family therapist

### Medical Record Documentation and Best Practices

- Prior to discharge:
  - Identify and remove barriers that prevent our members from follow-up appointments or following recommendations
  - Consider case management to help with our members needs
  - Discuss the importance of seeking follow-up with a mental health provider
  - Ensure our members have adequate access to prescribed medications
- Send discharge paperwork to the appropriate outpatient mental health provider within 24 hours of discharge
- Coordinate care between behavioral health and primary care physicians by sharing progress notes and updates
- Reach out to members who cancel appointments to reschedule as soon as possible

### Behavioral Health Codes

#### Coding Instructions

Use CPT®, HCPCS and ICD-10 to close gaps

#### Follow-Up Visits

**CPT:** 90791-2, 90832-40, 90845, 90847, 90849, 90853, 90875-6, 98960-2, 98966-8, 99078, 99201-5, 99211-5, 99217-23, 99231-3, 99238-9, 99241-5, 99251-5, 99341-5, 99347-50, 99381-7, 99391-7, 99401-4, 99411-2, 99441-3, 99483, 99495-6, 99510

**HCPCS:** G0155, G0176-7, G0409, G0463, H0002, H0004, H0031, H0034, H0036-7, H0039-40, H2000, H2010-1, H2013-20, M0064, T1015

#### Mental Illness Diagnosis Codes

**ICD-10:** F03.9x, F20-F25.xx, F28-F34.xx, F39-F45.xx, F48.xx, F50-F53.xx, F59-F60.xx, F63-F66.xx, F68-F69.xx, F80-F82.xx, F84.xx, F88-F93.xx, F95.xx, F98-F99.xx

CPT copyright 2020 American Medical Association (AMA). All rights reserved. CPT is a registered trademark of the AMA.

The above material is for informational purposes only and is not a substitute for the independent medical judgment of a physician or other health care provider. Physicians and other health care providers are encouraged to use their own medical judgment based upon all available information and the condition of the patient in determining the appropriate course of treatment. The fact that a service or treatment is described in this material is not a guarantee that the service or treatment is a covered benefit and members should refer to their certificate of coverage for more details, including benefits, limitations and exclusions. Regardless of benefits, the final decision about any service or treatment is between the member and their health care provider.

\* Measurement Year (MY) 2020 and MY 2021

1 Substance Abuse and Mental Health Services Administration (SAMHSA). Key Substance Use and Mental Health Indicators in the United States: Results from the 2018 National Survey on Drug Use and Health; <https://www.samhsa.gov/>

2 Association for Psychological Science, Stigma as a Barrier to Mental Health Care, accessed 7/8/2020; <https://www.psychologicalscience.org/news/releases/stigma-as-a-barrier-to-mental-health-care.html>

3 NCQA HEDIS MY 2020 & MY 2021, HEDIS measure for FUH, accessed 7/8/2020; <https://www.ncqa.org/hedis/measures/follow-up-after-hospitalization-for-mental-illness/>

4 NCQA HEDIS MY 2020 & MY 2021 Technical specifications for health plans, volume 2, Washington DC, 2020

5 NCQA HEDIS MY 2020 & MY 2021 Technical specifications; Community mental health center, electroconvulsive therapy, transitional care management services and includes intensive outpatient or partial hospital programs

HEDIS is a registered trademark of the National Committee for Quality Assurance (NCQA)