



Strategies to Improve Follow-Up Care After a Hospital or Emergency Department Visit for Mental Illness

2023 | *Optimizing the Impact of the FUH and
FUM Behavioral Health HEDIS® Measures*

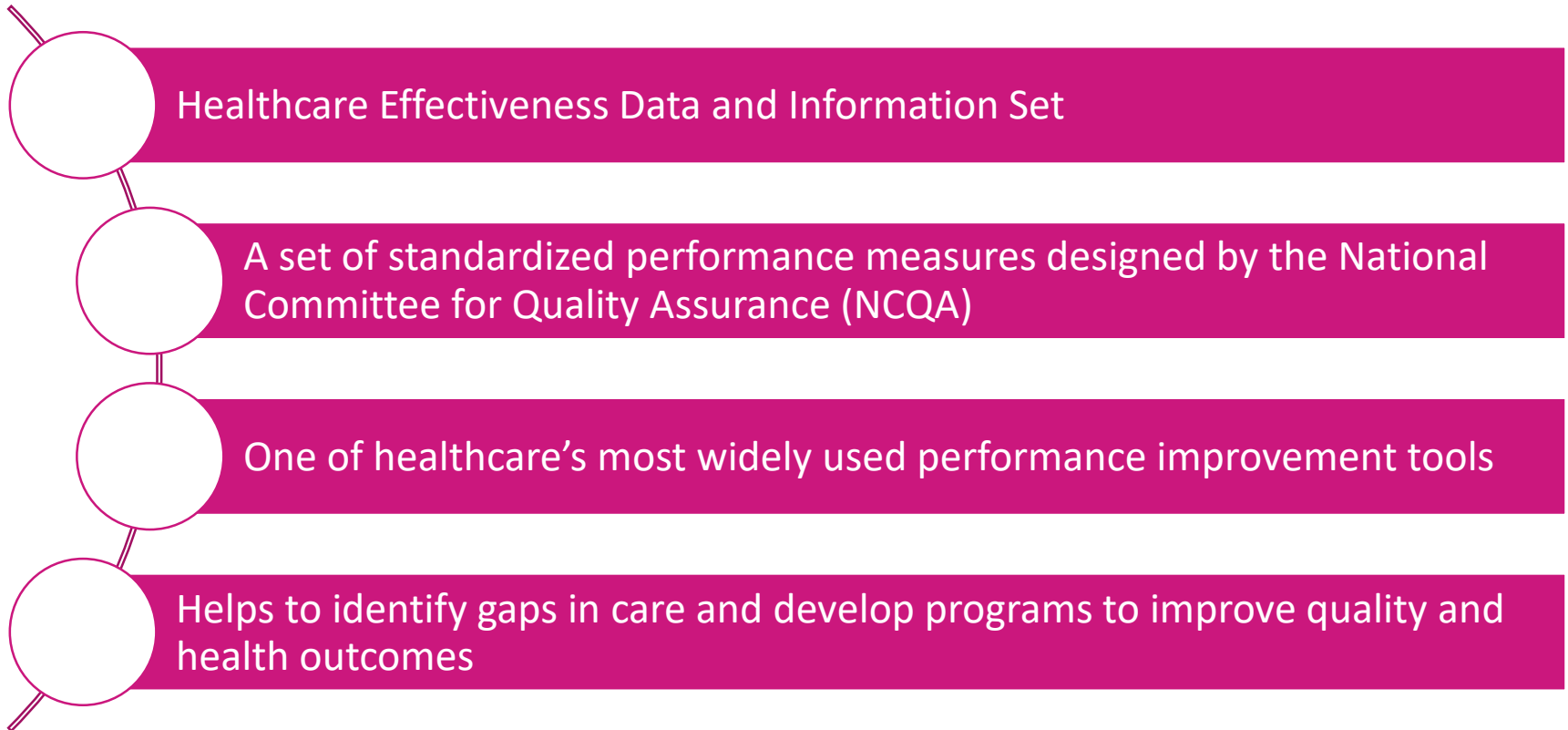


Purpose of the Training

For medical and behavioral health providers to recognize the intent of the behavioral health measures and share strategies to impact quality care and outcomes for our members.



What Is HEDIS®?



Why Is HEDIS® Important to Providers?

- Value-Based Service and other Pay-for-Performance incentive programs
- Focuses on preventative care and supports better patient outcomes
- The focus on quality outcomes can help members get the most from their benefits, which ultimately means better use of limited resources.
- It is a validated set of measurements by which one can measure the effectiveness of treatment interventions.



BH HEDIS® Measures

FUH

- Follow-Up After Hospitalization for Mental Illness

FUM

- Follow-Up After ED Visit for Mental Illness



The Importance of Mental Health Follow-Up Care



Helps patients adjust back to home, work, or school

Provides extra support

Increases the chances of medication/treatment adherence

Leads to fewer emergency room visits and re-hospitalization

Follow-Up After Hospitalization for Mental Illness (FUH)



Measure Components:

- Ages 6 years and older
- Hospitalized for mental illness or intentional self-harm
- 7-day and 30-day follow-up rates are reported

Meeting the Measure

- When the member attends a 7-day follow-up visit with an approved mental health provider, the 30-day visit is also met.
- The visit must occur after discharge.

Intent

- To support the patient's transition back home
- To help providers detect early post-hospitalization reactions or medication problems and provide continuing care

Approved Mental Health Follow-Up Visits

Outpatient visit *with* a mental health provider

Telehealth visit *with* a mental health provider

Telephone visit *with* a mental health provider

An observation visit *with* a mental health provider.

Transitional care management services *with* a mental health provider

Intensive outpatient encounter or partial hospitalization

Certified Community Mental Health Centers

Electroconvulsive therapy

A visit in a behavioral healthcare setting

Psychiatric collaborative care management (new for 2022)

***Refer to NCQA Appendix 3 for a complete list of Mental Health Providers**



Follow-Up After Emergency Department (ED) Visit for Mental Illness (FUM)



Measure Components:

- Ages 6 years and older
- Visited the ED with a principal diagnosis of mental illness or intentional self-harm
- 7-day and 30-day follow-up rates are reported

Meeting the Measure

- When the member attends a 7-day follow-up visit with any practitioner for a diagnosis of mental illness or intentional self-harm, the 30-day visit is also met.
- The visit can occur on the same day as the ED discharge.

Intent:

- Although ED visits are common among patients suffering from mental illness, many may be avoidable with outpatient treatment.

Approved Follow-Up Visits for FUM



Member can be seen by any Practitioner (PH or BH), but the claim must include a principal diagnosis for intentional self-harm or any mental health disorder.

Telehealth,
telephone, or
virtual visit

Outpatient
visit

An observation
visit

Intensive
outpatient
encounter or
partial
hospitalization

Community
Mental
Health
Center visit

Electroconvulsive
Therapy

Strategies to Impact Follow-Up Care for Mental Illness



Engage the patient and guardian in their treatment:

- Discuss discharge, medications, side effects, crisis plan
- Use teach back methods
- Encourage questions
- Assess social, mental, and physical health
- Refer to Case Management
- Ask for signed release of information forms

Strategies to Impact Follow-Up Care for Mental Illness



Offer telehealth and phone visits

Proactively outreach your patients

Code mental health-related diagnoses and visits correctly on claims

Partner with the Health Plan and other providers to secure appointments

Work with PCP offices to offer Psychiatric Collaborative Care Management when applicable

The Role of the Provider in HEDIS®

Demonstrate commitment to quality care and improved patient outcomes

Know the BH HEDIS® measure requirements and provide appropriate care or referrals within the designated timeframes

Accurately code all claims and clearly document ALL services provided

Collaborate with the Health Plan for effective programs and interventions

Play an active role in coordinating care for our members



“Mental health problems don’t define who you are. They are something you experience. You walk in the rain, and you feel the rain, but you are not the rain.”

- Matt Haig



Thank You!

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References

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- National Committee for Quality Assurance. (n.d.b.). *Follow-up after hospitalization for mental illness (FUH)*. <https://www.ncqa.org/hedis/measures/follow-up-after-hospitalization-for-mental-illness/>
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