

## Who is eligible?

All members, 6 years of age and older who were hospitalized for selected principal diagnosis of mental illness or any diagnosis of intentional self-harm during the measurement year.

## Why it matters?

Mental health disorders are common in the U.S.; an estimated 1 in 5 adults live with a mental illness, which translates to about 57.8 million people. Recent research estimates that 1 in 6 children experience a mental health disorder each year.<sup>1</sup>

## Measure Description

The percentage of discharges for persons 6 years of age and older who were hospitalized for a principal diagnosis of mental illness, or any diagnosis of intentional self-harm, and had a mental health follow-up service. Two rates are reported:

1. The percentage of discharges for which the person received follow-up within 30 days after discharge.
2. The percentage of discharges for which the person received follow-up within 7 days after discharge.

## Measure tips

If a member is compliant for the 7-day indicator, they are automatically compliant for the 30-day indicator. Visits that occur on the date of discharge **will not** count toward compliance.

**For both indicators, any of the following meet criteria for a follow-up visit:**

- An outpatient visit, telehealth or telephone visit, or transitional care management services with a mental health provider or any diagnosis of mental health disorder.
- An intensive outpatient encounter or partial hospitalization.
- A community mental health center visit.
- Electroconvulsive therapy.
- A visit in a behavioral healthcare setting.
- Psychiatric collaborative care management.
- Peer support services with any diagnosis of mental health disorder.
- Psychiatric residential treatment.

## Best practices

- Involve the patient and family in all stages of discharge planning. Using the “Teach Back Method” educate the patient and family on the importance of follow up care and the risk of harm immediately following hospitalization.
- Schedule appointments prior to discharge and on the soonest date possible (1-5 days) in case the patient needs to reschedule. Reserve appointment times for follow-up visits to ensure availability.
- Confirm and document current contact information including, phone numbers, address, and alternate contacts.
- Provide reminder calls before appointments and after missed appointment to reschedule.
- Identify and address any barriers that may prevent a patient from attending their appointment.
- Consider telehealth visits, when clinically appropriate, for patients at risk for missing their appointment.
- Educate TCHP patients on available resources such as [transportation assistance](#) and incentives such as our [\\$25 mental health follow-up reward](#).
- Endorse the use of Care Everywhere to increase care coordination between providers. Ensure member's discharge paperwork is sent to the outpatient provider as well within 24 hours.
- Submit claims with appropriate coding in a timely manner.
- Establish communication pathways with inpatient discharge coordinators at local facilities.

## FUH Claim Codes

Any of the following code combinations meet criteria for a visit when used with any diagnosis of a mental health disorder OR with a mental health provider:

<div>Visit Setting Unspecified</div> <div>90791, 90792, 90832, 90833, 90834, 90836, 90837, 90838, 90839, 90840, 90845, 90847, 90849, 90853, 90875, 90876, 99221, 99222, 99223, 99231, 99232, 99233, 99238, 99239, 99252, 99253, 99254, 99255</div>	<div>1 Visit Code with 1 POS Code</div> <div></div>	<div>Outpatient03, 05, 07, 09, 11, 12, 13, 14 17, 18, 15, 16 33, 19, 20, 22 49, 50, 71, 72</div> <div>Partial Hospitalization52</div> <div>Telehealth02, 10</div> <div>Community Mental Health Center53</div>						
OR								
<div>Behavioral Health (BH) Outpatient</div> <table><tr><td>CPT</td><td>UBREV</td><td>HCPCS</td></tr><tr><td>98960, 98961, 98962, 99078, 99201, 99202, 99203, 99204, 99211, 99212, 99213, 99214, 99215, 99241, 99242, 99205, 99245, 99341, 99342, 99343, 99344, 99345, 99243, 99244, 99350, 99381, 99382, 99383, 99384, 99347, 99348, 99349, 99392, 99393, 99394, 99385, 99386, 99387, 99391, 99395, 99396, 99397, 99401, 99402, 99403, 99404, 99411, 99412, 99483, 99510</td><td>0510, 0513, 0515, 0516, 0517, 0519, 0520, 0521, 0526, 0527, 0528, 0529, 0900, 0902, 0903, 0522, 0523, 0915, 0916, 0917, 0919, 0982, 0983, 0904, 0911, 0914</td><td>G0155, G0176, G0177, G0409, G0463, G0512, H0002, H0004, H0031, H0034, H0036, H0037, H0039, H0040, H2000, H2010, H2011, H2013, H2014, H2015, H2016, H2017, H2018, H2019, H2020, T1015</td></tr></table>			CPT	UBREV	HCPCS	98960, 98961, 98962, 99078, 99201, 99202, 99203, 99204, 99211, 99212, 99213, 99214, 99215, 99241, 99242, 99205, 99245, 99341, 99342, 99343, 99344, 99345, 99243, 99244, 99350, 99381, 99382, 99383, 99384, 99347, 99348, 99349, 99392, 99393, 99394, 99385, 99386, 99387, 99391, 99395, 99396, 99397, 99401, 99402, 99403, 99404, 99411, 99412, 99483, 99510	0510, 0513, 0515, 0516, 0517, 0519, 0520, 0521, 0526, 0527, 0528, 0529, 0900, 0902, 0903, 0522, 0523, 0915, 0916, 0917, 0919, 0982, 0983, 0904, 0911, 0914	G0155, G0176, G0177, G0409, G0463, G0512, H0002, H0004, H0031, H0034, H0036, H0037, H0039, H0040, H2000, H2010, H2011, H2013, H2014, H2015, H2016, H2017, H2018, H2019, H2020, T1015
CPT	UBREV	HCPCS						
98960, 98961, 98962, 99078, 99201, 99202, 99203, 99204, 99211, 99212, 99213, 99214, 99215, 99241, 99242, 99205, 99245, 99341, 99342, 99343, 99344, 99345, 99243, 99244, 99350, 99381, 99382, 99383, 99384, 99347, 99348, 99349, 99392, 99393, 99394, 99385, 99386, 99387, 99391, 99395, 99396, 99397, 99401, 99402, 99403, 99404, 99411, 99412, 99483, 99510	0510, 0513, 0515, 0516, 0517, 0519, 0520, 0521, 0526, 0527, 0528, 0529, 0900, 0902, 0903, 0522, 0523, 0915, 0916, 0917, 0919, 0982, 0983, 0904, 0911, 0914	G0155, G0176, G0177, G0409, G0463, G0512, H0002, H0004, H0031, H0034, H0036, H0037, H0039, H0040, H2000, H2010, H2011, H2013, H2014, H2015, H2016, H2017, H2018, H2019, H2020, T1015						
OR								
<div>Transitional Care Management Services</div> <table><tr><td>CPT</td><td>99495, 99496</td></tr></table>	CPT	99495, 99496	<div>Telephone Visit</div> <table><tr><td>CPT</td><td>98008, 98009, 98010, 98011, 98012, 98013, 98014, 98015, 98966, 98967, 98968, 99441, 99442, 99443</td></tr></table>		CPT	98008, 98009, 98010, 98011, 98012, 98013, 98014, 98015, 98966, 98967, 98968, 99441, 99442, 99443		
CPT	99495, 99496							
CPT	98008, 98009, 98010, 98011, 98012, 98013, 98014, 98015, 98966, 98967, 98968, 99441, 99442, 99443							
OR								
<div>Peer Support Services</div> <div>HCPCS</div> <div>G0140, G0177, H0024, H0025, H0038, H0039, H0040, H0046, H2014, H2023, S9445, T1012, T1016, T1017</div>								

Claim codes continue on next page.

# HEDIS® Quick Reference for Follow-Up After Hospitalization For Mental Illness (FUH)

In addition, the following also meet criteria with any diagnosis or provider type:

Intensive outpatient encounter or partial hospitalization	
HCPCS	UBREV
H2001, H2012, S0201, S9480, S9484, S9485	0905, 0907, 0912, 0913
Outpatient Electroconvulsive Therapy	
CPT	ICD10
90870	GZB0ZZZ, GZB1ZZZ, GZB2ZZZ, GZB3ZZZ, GZB4ZZZ
Behavioral Healthcare Setting	
UBREV	
0513, 0900, 0901, 0902, 0903, 0904, 0905, 0907, 0911, 0912, 0913, 0914, 0915, 0916, 0917, 0919	
Psychiatric Collaborative Care Management	
CPT	HCPCS
99492, 99493, 99494	G0512
Psychiatric Residential Treatment	
HCPCS	
H0017, H0018, H0019, T2048	

<sup>1</sup> Follow-up after hospitalization for mental illness. NCQA. (2023, February 3).  
<https://www.ncqa.org/hedis/measures/follow-up-after-hospitalization-for-mental-illness/>