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Follow-Up After Hospitalization for Mental Illness (FUH)

New Directions Behavioral Health[®] is committed to working with participating physicians to improve the quality of care for members. To evaluate performance on important care and service measures, we use the Healthcare Effectiveness Data and Information Set (HEDIS[®]) tool developed by the National Committee for Quality Assurance (NCQA[®]). This bulletin provides information about a HEDIS measure concerning the importance of follow-up visits for members hospitalized with a principal diagnosis of mental illness.

Approximately one in four adults in the U.S. suffer from mental illness in a given year; nearly half will develop at least one mental illness in their lifetime.^{1,2} There are over 2,000,000 hospitalizations each year for mental illness in the United States.³ Patients hospitalized for mental health issues are vulnerable after discharge and follow-up care by trained mental health clinicians is critical for their health and well-being.

Meeting the Measure: Measurement Year 2022 HEDIS® Guidelines

Assesses adults and children 6 years of age and older who were hospitalized for treatment of selected mental illness or intentional self-harm and had an outpatient visit, an intensive outpatient treatment visit or a partial hospitalization with a mental health practitioner. The measure identifies the percentage of members who received follow-up within 7 days and 30 days of discharge.

Note: Follow-up visits may not occur on the same date of inpatient discharge.

Two rates are reported:

Discharges for which the member received follow-up within 30 days after discharge.

Discharges for which the member received follow-up within 7 days after discharge.

Measure does not apply to members admitted to inpatient or residential treatment within 30 days of the inpatient discharge. Does not apply to members in hospice. Does not apply to members with a principal diagnosis of substance use disorder.

Mental health provider means a provider who delivers mental health services:

- MD or doctor of osteopathy (DO)
- Licensed psychologist
- Certified clinical social worker
- Registered nurse (RN) psychiatric nurse or mental health clinical nurse specialist
- Licensed or certified counselor or professional counselor
- Physician assistant who is certified to practice psychiatry
- Licensed or certified Community Mental Health Center (CMHC), or the comparable term (e.g. behavioral health organization, mental health agency, behavioral health agency) or a Certified Community Behavioral Health Clinic (CCBHC).

Any of the following qualifies as a follow-up visit (with a mental health provider):

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- Observation
- Partial hospitalization
- Intensive outpatient
- Electroconvulsive therapy
- Outpatient
- Mental health outpatient
- Community mental health center
- Telehealth
- Telephone
- Transitional care management services
- A visit in a behavioral healthcare setting
- Psychiatric collaborative care management

You Can Help

- Before scheduling an appointment, verify with the member that it is a good fit considering things like transportation, location and time of the appointment.
- Assist member with coordination of care to follow-up visit with appropriate referrals, scheduling and communication.
- Talk frankly about the importance of follow-up to help the member engage in treatment.
- Make sure that the member has follow-up appointment scheduled; preferably within 7 days but no later than 30 days of the inpatient discharge.
- If the member is a child or adolescent, engage parents/guardian or significant others in the treatment plan. Advise them about the importance of treatment and attending appointments.
- Identify and address any barriers to member keeping appointment.
- Provide reminder calls to confirm appointment.
- Reach out proactively within 24 hours if the member does not keep scheduled appointment to schedule another.
- Follow-up providers maintain appointment availability for members with recent inpatient discharge.
- Reinforce the treatment plan and evaluate the medication regimen considering presence/absence of side effects etc.
- Emphasize the importance of consistency and adherence to the medication regimen.
- Advise the member and significant others of side effects of medications, and what to do if side effects are severe and can potentially result in lack of adherence to the treatment plan and medication regimen.
- Instruct on crisis intervention options.
- Transitions in care should be coordinated between providers. Ensure that the care transition plans are shared with the Primary Care Physician (PCP).
- Encourage communication between the behavioral health specialist and PCP. Ensure that the member has a PCP and that care transition plans with the PCP are shared.
- Provide timely submission of claims with correct service coding and principal diagnosis.

TIPS

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- Schedule follow-up visit within 5 days of inpatient to allow flexibility in rescheduling within 7 days of inpatient discharge.
- If appointment doesn't occur within first 7 days, schedule within 30 days of inpatient discharge.

New Directions is Here to Help

For providers calling New Directions -

If you need to refer a member or receive guidance on appropriate services, please call:

- New Directions Behavioral Health at (888) 611-6285
- Florida providers call (866) 730-5006

For providers directing members to call New Directions -

• Behavioral healthcare coordination and referrals 24 hours a day, call toll-free (800) 528-5763.

References:

- 1. National Alliance on Mental Illness. 2011. "Mental Illness: What is Mental Illness: Mental Illness Facts." https://www.nami.org/Search?searchtext=about+mental+illness&searchmode=anyword
- Centers for Disease Control and Prevention. Updated September 1, 2011. CDC Mental Illness Surveillance. "CDC Report: Mental Illness Surveillance Among Adults in the United States." https://www.cdc.gov/mmwr/preview/mmwrhtml/su6003a1.htm?s_cid=su6003a1_w
- Centers for Disease Control and Prevention. 2010. "Health Data Interactive." <u>http://www.cdc.gov/nchs/hdi.htm</u>
- NCQA: https://www.ncqa.org/hedis/measures/follow-up-after-hospitalization-for-mental-illness/