

HEDIS® Tips:

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

MEASURE DESCRIPTION

The percentage of emergency department (ED) visits for patients 6 years of age and older with a principal diagnosis of mental illness or intentional self-harm, who had a follow-up visit for mental illness. Two rates are reported:

1. The percentage of ED visits for which the patient received follow-up within 30 days of the ED visit (31 total days).
2. The percentage of ED visits for which the patient received follow-up within 7 days of the ED visit (8 total days).

CODES INCLUDED IN THE CURRENT HEDIS® MEASURE

Description	Code
Follow-up Visits	CPT®: 98960-98962, 99078, 99201-99205, 99211-99215, 99241-99245, 99341-99345, 99347-99350, 99381-99387, 99391-99397, 99401-99404, 99411, 99412, 99483, 99492-99494, 99510 HCPCS: G0155, G0176, G0177, G0409, G0463, G0512, H0002, H0004, H0031, H0034, H0036, H0037, H0039, H0040, H2000, H2010, H2011, H2013-H2020, T1015 UBREV: 0510, 0513, 0515-0517, 0519-0523, 0526-0529, 0900, 0902-0904, 0907, 0911, 0914-0917, 0919, 0982, 0983
Follow-up Visits	CPT®: 90791, 90792, 90832-90834, 90836-90840, 90845, 90847, 90849, 90853, 90875, 90876, 99221-99223, 99231-99233, 99238, 99239, 99251-99255 with POS: 03, 05, 07, 09, 11-20, 22, 33, 49, 50, 71, 72
Follow-up Visits	CPT®: 90870 ICD10: GZB0ZZZ-GZB4ZZZ with POS: 03, 05, 07, 09, 11-20, 22, 24, 33, 49, 50, 52, 53, 71, 72
Telephone Visits	CPT®: 98966-98968, 99441-99443
Telehealth Modifier	95, GT with POS: 02
Online Assessments (E-visits or Virtual Check-in)	CPT®: 98969-98972, 99421-99423, 99444, 99457 HCPCS: G0071, G2010, G2012, G2061-G2063

HOW TO IMPROVE HEDIS® SCORES

- Schedule follow-up appointments within 7 days of ED discharge with a mental health practitioner before the patient leaves the hospital to reduce the likelihood of a preventable ED visit or hospital admission. A **telehealth, telephone, e-visit** or **virtual check-in** appointment within the required timeframe meets compliance. Contact Molina Case Management if assistance is needed to obtain follow-up appointment.
- Conduct follow-up phone calls with the patient and/or parent/guardian 24 to 72 hours after discharge to verify appointments are scheduled and address additional needs the patient may have.
- Assist the patient with navigation of the health system to lessen the impact of barriers, such as using their transportation benefit to get to their follow-up appointment.
- Ensure your patient has an understanding of the local community support resources and what to do in an event of a crisis.
- Review medications with patients (**and/or parent/caregiver as appropriate**). Educate your patient on the importance of taking their medication(s) and appropriate frequency.
- Follow-up visits must be supported by a claim, encounter or note from a healthcare practitioner's medical chart in order to count toward the measure.
- Provide information about the importance of monitoring their emotional well-being and following up with their mental health practitioner.

Per USPSTF, "Screening should be implemented with adequate systems in place to ensure accurate diagnosis, effective treatment, and appropriate follow-up."

Reference: Depression in adults: Screening. Recommendation: Depression in Adults: Screening | United States Preventive Services Taskforce. (2016, January 26). Retrieved from <https://www.uspreventiveservicestaskforce.org/uspstf/recommendation/depression-in-adults-screening>

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Updated 02/22/2022

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