HEDIS® Toolkit
for Follow-Up After Emergency Department Visit for Substance Use (FUA)

Texas Children's® Health Plan

Who is eligible?
Members 13 years and older seen in the emergency department (ED) with a principal diagnosis of substance use disorder (SUD) or any diagnosis of drug overdose.

Why it matters?
In 2022, 48.7 million Americans over 12 years of age (about 17.3% of the population) were classified as having an SUD.[1] Between 2018 and 2021, the use of ED services for substance use increased 39%, and the rate of ED visits related to substance use went up from 74.4 to 103.8 visits per 10,000 individuals.[2] The ED plays a crucial role in helping individuals with substance use by providing immediate care and timely diagnosis, and connecting individuals to further care.[3] This measure focuses on making sure that people leaving the ED after a high-risk substance use event receiveget coordinated care, because they might be at a higher risk of losing touch with the health care system.[1]

Measure Description
Assesses emergency department (ED) visits for members 13 years of age and older with a principal diagnosis of substance use disorder (SUD), or any diagnosis of drug overdose, who had a follow up visit for SUD. Two rates are reported:

- ED visits for which the member received follow-up within 30 days of the ED visit (31 total days). Include visits and pharmacotherapy events that occur on the date of the ED visit.
- ED visits for which the member received follow-up within 7 days of the ED visit (8 total days). Include visits and pharmacotherapy events that occur on the date of the ED visit.

Measure Tips
If a member is compliant for the 7-day indicator, they are automatically compliant for the 30-day indicator. **For both indicators, any of the following meet criteria for a follow-up visit**:

- Telehealth or telephone visit.
- Outpatient visit.
- Intensive outpatient visit.
- Non-residential substance abuse treatment facility.
- Community mental health center.
- Peer support service.
- Partial hospitalization visit.
- E-visit or virtual check-in.

With any diagnosis of SUD, substance use, or drug overdose.
Or
With a mental health provider regardless of diagnosis.

Compliance can also be captured by the following:

- An opioid treatment service that bills monthly or weekly with any diagnosis of SUD, substance use, or drug overdose.
- A substance use disorder service.
- Substance use disorder counseling and surveillance. (Do not include laboratory claims).
- A behavioral health screening or assessment for SUD or mental health disorders (with any provider type).
- A substance use service, pharmacotherapy dispensing event, or medication treatment event.

Best Practices
- Schedule follow-up visit within 5 days of ED visit to allow flexibility in rescheduling within 7 days of ED visit.
  - If appointment does not occur within the first 7 days, schedule within 30 days of ED visit.
  - Involve the member's parent/guardian and/or support system regarding the follow-up plan after ED visit, if applicable.
- Identify and address any barriers to the patient attending the appointment and educate office staff on resources to assist with barriers such as transportation or work/school obligations.

- When appropriate, consider virtual or telephonic appointments for members with transportation barriers.
- Encourage the patient to bring their discharge paperwork to their first appointment.
- Provide anticipatory guidance for members with known substance use disorder.
- Outreach patients who cancel appointments and assist them with rescheduling as soon as possible.
- Use the same diagnosis for substance use disorder at each follow-up (a non-mental illness diagnosis code will not fulfill this measure).
- Consider social determinants of health (SDOH) factors as possible barriers to health equity.

FUA Claim Codes- Any of the following code combinations meet criteria for a visit. <u>Services not provided by a mental health provider must include a diagnosis of SUD, substance use, or drug overdose.</u>

1 Visit Setting Code		1 POS Code
90791, 90792, 90832, 90833, 90834, 90836, 90837, 90838, 90839, 90840, 90845, 90847, 90849, 90853, 90875	**WITH**	03, 05, 07, 09, 11, 12, 13, 14, 15, 16, 17, 18, 19,20, 22, 33, 49, 50, 71, 72, 81, 52, 57, 58, 53, 55, 56, 02, 10

OR

Behavioral Health (BH) Outpatient		
CPT	**UBREV**	**HCPCS**
98960, 98961, 98962, 99078, 99201, 99202, 99203, 99204, 99211, 99212, 99213, 99214, 99215, 99241, 99242, 99205, 99245, 99341, 99342, 99343	0510, 0513, 0515, 0516, 0517, 0519, 0520, 0521, 0526, 0527, 0528, 0529	G0155, G0176, G0177, G0409, G0463, G0512, H0002, H0004, H0031, H0034, H0036, H0037, H0039, H0040, H2000

OR

Partial Hospitalization or Intensive Outpatient
G0410, G0411, H0035, H2001, H2012, S0201, S9480, S9484, S9485

OR

Telephone Visit
98966, 98967, 98968, 99441, 99442, 99443

OR

Online Assessment	
CPT	**HCPCS**
99422, 99423, 99421, 98971, 98972, 98970, 99458, 99457, 98981, 98980	G2252, G2012, G2251, G0071, G2250, G2010

OR

Peer Support Services		Opioid Treatment Service (that bills monthly or weekly)
HCPC		**HCPC**
T1012, H0040, H0039, H0025, H0024, T1016, H0046, S9445, G0140, H0038, H2014, H2023, G0177	**OR**	G2071, G2074, G2075, G2076, G2077, G2080, G2086, G2087

With a mental health provider or with any diagnosis of:

Substance Use Disorder*	Substance Use*	Unintentional Drug Overdose*
F10.10, F10.120, F10.121, F10.129, F10.130, F10.131, F10.132, F10.139, F10.14, F10.150, F10.151, F10.159, F10.180, F10.181, F10.182, F10.188, F10.19, F10.20, F10.220, F10.221, F10.229, F10.230, F10.231, F10.232, F10.239, F10.24, F10.250	F10.90, F10.920, F10.921, F10.929, F10.930, F10.931, F10.932, F10.939, F10.94, F10.950, F10.951, F10.959, F10.96, F10.97, F10.980, F10.981, F10.982, F10.988, F10.99, F11.90, F11.920, F11.921, F11.922, F11.929, F11.93, F11.94, F11.950	T40.0X1A, T40.0X1D, T40.0X1S, T40.0X4A, T40.0X4D, T40.0X4S, T40.1X1A, T40.1X1D, T40.1X1S, T40.1X4A, T40.1X4D, T40.1X4S, T40.2X1A, T40.2X1D, T40.2X1S, T40.2X4A, T40.2X4D, T40.2X4S, T40.3X1A, T40.3X1D, T40.3X1S, T40.3X4A, T40.3X4D, T40.3X4S, T40.411A, T40.411D, T40.411S

*Not all-inclusive, see the complete list at NCQA.org

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

A Substance Use Disorder Service		
CPT	UBREV	HCPCS
99408, 99409	0906, 0944, 0945	G0396, G0397, G0443, H0001, H0005, H0007, H0015, H0016, H0022, H0047, H0050, H2035, H2036, T1006, T1012, H0006, H0028

OR

Substance Use Disorder Counseling and Surveillance
ICD10
Z71.41, Z71.51

OR

Behavioral Health Screening or Assessment for SUD	
CPT	HCPCS
99408, 99409	G0396, G0397, G0442, G2011, H0001, H0002, H0031,H0049

OR

Pharmacotherapy Dispensing Event *Alcohol Use Disorder Treatment Medications*	
Description	Prescription
Aldehyde dehydrogenase inhibitor	Disulfiram (oral)
Antagonist	Naltrexone (oral and injectable)
Other	Acamprosate (oral; delayed-release tablet
Pharmacotherapy Dispensing Event *Opioid Use Disorder Treatment Medications*	
Antagonist	Buprenorphine (sublingual tablet, injection, implant)*
Partial agonist	Buprenorphine/naloxone (sublingual tablet, buccal film, sublingual film)

OR

Medication Treatment Event
HCPCS
H0020, H0033, J0570, J0571, J0572, J0573, J0574, J0575, J0577, J0578, J2315, Q9991, Q9992, S0109, G2067, G2068, G2069, G2070, G2072, G2073
*Buprenorphine administered via transdermal patch or buccal film is not included because it is FDA-approved for the treatment of pain, not for opioid use disorder.

Reference
[1] https://www.ncqa.org/hedis/measures/follow-up-after-emergency-department-visit-for-substance-use/