

Who is eligible?

Adults and children 6 years of age and older seen in the emergency department (ED) with a principal diagnosis of mental illness (including phobia and anxiety), or any diagnosis of intentional self-harm.

Why it matters?

Mental illness can affect people of all ages. In the United States, 18% of adults and 13%–20% of children under 18 years of age experience mental illness. Research suggests that follow-up care for people with mental illness is linked to fewer repeat ED visits, improved physical and mental function and increased compliance with follow-up instructions.¹

Measure Description

The percentage of emergency department (ED) visits for members 6 years of age and older with 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:

- The percentage of 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.
- The percentage of 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:**

- An outpatient visit, telehealth or telephone visit, e-visit, virtual check-in, or peer support service with any diagnosis of a mental health disorder.
- An intensive outpatient encounter or partial hospitalization.
- Electroconvulsive therapy.
- Psychiatric collaborative care management.
- Psychiatric residential treatment.
- A visit in a behavioral healthcare setting.

Best Practices

- Reserve appointment times for follow-up patients such as those recently seen in the ED.
- Schedule follow-up visit within 5 days of ED visit to allow flexibility in rescheduling within 7 days of ED visit.
 - If appointment doesn't occur within the first 7 days, schedule within 30 days of ED visit.
 - Involve the member's parent/guardian 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.
- Outreach patients who cancel appointments and assist them with rescheduling as soon as possible.
- Use the same diagnosis for mental illness 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.

FUM Claim Codes- Any of the following code combinations meet criteria for a visit **when used with any diagnosis of a mental health disorder:**

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

OR

Behavioral Health (BH) Outpatient

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
HCPC
T1012, H0040, H0039, H0025, H0024, T1016, H0046, S9445, G0140, H0038, H2014, H2023, G0177

AND

Mental Health Disorder (not all-inclusive, see the complete list at NCQA.org)
ICD10
F10.10, F10.120, F10.121, F10.129-F10.132, F10.139, F10.14, F10.150, F10.151, F10.159, F10.180-F10.182, F10.188, F10.19, F10.20, F10.220, F10.221, F10.229-F10.232, F10.239, F10.24, F10.250, F10.251, F10.259, F10.26, F10.27, F10.280-F10.282, F10.288, F10.29, F11.10, F11.120- F11.122, F 11.129, F11.13, F11.14

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

Psychiatric Collaborative Care Management
CPT
99494, 99492, 99493

OR

Psychiatric Residential Treatment
HCPC
T2048, H0019, H0017, H0018

OR

Behavioral Healthcare Setting
UBREV
0904, 0917, 0907, 0901, 0916, 0900, 0915, 0914, 0905, 0902, 0919, 0913, 0912, 0903, 0513, 0911, 1001

Reference

¹ <https://www.ncqa.org/hedis/measures/follow-up-after-emergency-department-visit-for-mental-illness/>