

## Follow-up after hospitalization for mental illness

Published: Aug 1, 2020 - State & Federal / Medicaid

We understand providers are committed to providing our members with quality care, including follow-up appointments after a behavioral health (BH) inpatient stay. Since regular monitoring, follow-up appointments and making necessary treatment recommendations or changes are all part of quality care, we would like to provide an overview of the related HEDIS<sup>®</sup> measure.

The Follow-Up After Hospitalization for Mental Illness (FUH) HEDIS measure evaluates members 6 years and older who were hospitalized for treatment of selected mental illness diagnoses and who had a follow-up visit with a mental health practitioner.

Two areas of importance for this HEDIS measure are:

- The percentage of BH inpatient discharges for which the member received follow-up within seven days after discharge.
- The percentage of BH inpatient discharges for which the member received follow-up within 30 days after discharge.

On a regular basis, we continue to monitor if these two consecutive follow-up appointments are recommended and scheduled during the inpatient stay as part of discharge planning by the eligible BH facilities (such as psychiatric hospitals, freestanding mental health facilities and acute care hospitals with psychiatric units), as well as by practicing BH providers.

Please consider the following for improving member outcomes for this measure:

- Earliest follow-up with a BH provider can help with continuing treatment after leaving the hospital.
- With greater emphasis on care coordination, primary care providers can help facilitate the BH follow-up appointments.
- Weekend discharges have shown to have very inconsistent follow-up appointments after discharge. Start discharge planning as soon as possible during inpatient stay so those who are discharged on weekends have already scheduled follow-up appointments.

- In addition, facilitate discussion of other social determinants of health (such as housing, food, living in a rural area, transportation, job schedules, family and social support, child care, etc.) which can influence follow-up opportunities. Please address these needs and issues during the behavior health inpatient stay.
- Social workers at the facilities can contact Member Services for Anthem Blue Cross and Blue Shield to learn if additional sources of assistance are available through case management or other referrals.
- Telehealth services may be considered as part of follow-up for this HEDIS measure. Please follow required guidelines and policies related to telehealth services specific to this measure.
- If the service is specifically listed on the [telehealth code-set](#), it should be billed in accordance with the [telehealth module](#) (generally, Place of Service 02 and Modifier 95)
- During the COVID-19 emergency, if a code is not on the telehealth code-set, the provider should bill the code along with the GT modifier, with the exception of the following services:
  - Surgical procedures
  - Radiological services
  - Laboratory services
  - Anesthesia services
  - Audiological services
  - Chiropractor services
  - Care coordination without the member present
  - Durable medical equipment/home medical equipment providers
  - Provider-to-provider consultation
- Our goal is continuity of care and treatment within seven]days of inpatient BH discharge, followed by another visit within 30 days.

Please note this bulletin is for informational purposes only, as a resource for BH HEDIS follow up guidelines.

**URL:** <https://providernews.anthem.com/indiana/article/follow-up-after-hospitalization-for-mental-illness-9>

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August 2020 Anthem Provider News - Indiana

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