

Follow-Up After Hospitalization for Mental Illness (FUH)

Patient Profile

MVP members who are at least six years old and have been discharged from an inpatient hospitalization for the treatment of selected mental illnesses or intentional self-harm diagnoses and who need a follow-up visit with a mental health practitioner within seven days of discharge and then again in 30 days of discharge.

Note: The day of discharge can no longer be considered in this measure.

How to Implement Best Practices and Improve Performance

- Studies have shown that prompt follow-up with patient's post-hospitalization goes a long way in reducing re-hospitalization. It also ensures better compliance with medications and shows a commitment to best practice initiatives.
- Patients who have had a recent mental health admission, benefit from a follow-up with their mental health provider within the first seven days following the mental health admission and then again within 30 days of discharge. Mental health providers would benefit from keeping availability in their schedule to ensure the ability to add in patients with little notice.
- Evaluate your office triage system and come up with a way to promptly triage calls from hospital discharge planners, as they may want to schedule appointments for patients that are hospitalized. If the hospitalization was for mental health, please tell the discharge planner to make an appointment with patient's mental health provider. Hopefully your records have the provider name and contact information, as the discharge planner may not.
- If you are not a mental health provider but are seeing a patient who has been treated by a mental health provider, make sure that as part of your assessment, you inquire to whether they have been recently hospitalized. If the answer is yes, ask them when the last time they saw their mental health provider. If they have been hospitalized but have not seen - or do not have an appointment with their mental health provider, attempt to set one up before the patient leaves the office. If they have missed the seven day follow-up, attempt to schedule a visit to meet the criteria of 30 days within discharge.
- Continuously educate all your patients that if they are hospitalized for any reason, it is important to see their doctors as soon as possible post-hospitalization. Continuous reinforcement may help to establish learned behaviors.

Information related to all 2019 HEDIS measures has been extracted from the NCQA 2019 HEDIS Technical Specifications Volume 2.

Billing Codes

CPT Codes

For both the 30 and seven-day follow-up with a mental health practitioner, the following meet criteria for a follow-up visit:

Outpatient visit (visit setting unspecified value set) with outpatient POS value set with a mental health practitioner with or without a telehealth modifier. Visit Setting Unspecified codes: 90791, 90792, 90832–90834, 90836–90840, 90845, 90847, 90849, 90853, 90875, 90876, 99221–99223, 99231–99233, 99238, 99239, 99251–99255

Outpatient POS Codes: 03, 05, 07, 09, 11–20, 22, 33, 49, 50, 71, 72

Telehealth Modifier Value Set Codes: 95, GT

Another outpatient visit uses the BH outpatient value set codes with mental health practitioner, with or without telehealth modifier value set codes (telehealth codes are 95, GT).

BH Outpatient value set codes: 98960–98962, 99078, 99201–99205, 99211–99215, 99241–99245, 9999341–99345, 99347–99350, 99381–99387, 99391–99397, 99401–99404, 99411, 99412, 99483, 99510. (For BH outpatient visits also see HCPCS and UBREV columns for pertinent codes).

Intensive outpatient encounter or partial hospitalization use the visit setting unspecified value set codes (see above) with Partial Hospitalization POS value set codes (Code 52) with

a mental health practitioner, with or without a telehealth modifier (see above). When an intensive outpatient encounter or partial hospitalization value set codes are used, see HCPCS and UBREV for appropriate partial hospitalization/intensive outpatient value set codes.

Community Mental Health Center visit uses the visit setting unspecified value set codes (see above) with the Community Mental Health Center POS value set code (53) with a mental health practitioner, with or without a telehealth modifier code (see above).

For Electro-Convulsive Therapy visit use Electroconvulsive Therapy value set code (90870) with Ambulatory Surgical Center POS value set (24); Community Mental Health Center POS value set (53); Outpatient POS value set (03,05,07,09,11–20,22,33,49,50,71,72); and Partial Hospitalization POS value set code (52) with a mental health practitioner. See electroconvulsive therapy ICD-10 codes and UBREV code.

A telehealth visit uses the Visit Setting Unspecified value set (See Above) with a Telehealth POS value set code (02), with a mental health practitioner, with or without a telehealth modifier code (see above).

For an Observation Visit with a mental health practitioner use the Observation value set codes: 99217–99220.

For Transitional Care Management Services, use the Transitional Care Management Services value set codes 99495, 99496 with a mental health practitioner, with or without a telehealth modifier code (see above).

ICD-10 Codes

F20.0, F20.1, F20.2 F20.3, F20.5, F20.81, F20.89, F20.9 F21, F22, F23, F24, F25.0, F25.1, F25.8, F25.9, F28, F29, F30.10, F30.11, F30.12, F30.13, F30.2, F30.3, F30.4, F30.8, F30.9, F31.0, F31.10, F31.11, F31.12, F31.13, F31.2, F31.30, F31.31, F31.32, F31.4, F31.5, F31.60, F31.61, F31.62, F31.63, F31.64, F31.70, F31.71, F31.72, F31.73, F31.74, F31.75, F31.76, F31.77, F31.78, F31.81, F31.89, F31.9, F32.0, F32.1, F32.2, F32.3, F32.4, F32.5, F32.8, F32.81, F32.89, F32.9, F33.0, F33.1, F33.2, F33.3, F33.40 F33.41, F33.42, F33.8, F33.9, F34.0, F34.1, F34.8, F34.81, F34.89, F34.9, F39, F40.00, F40.01, F40.02 ,F40.10, F40.11, F40.210, F40.218, F40.220, F40.228, F40.230–F40.233, F40.240, F40.243, F40.248, F40.290, F40.291, F40.298, F40.8, F40.9, F41.0, F40.1, F41.3, F41.8, F41.9, F42, F42.2, F42.3, F42.4, F42.8, F42.9, F43.0, F43.10, F43.11, F43.12, F43.20, F43.21, F43.22, F43.23 F43.24, F43.25, F43.29, F43.8, F43.9, F44.0–F44.2, F44.4–F44.7, F44.81, F44.89, F44.9, F45.0, F45.1, F45.20–F45.22, F45.29, F45.41, F45.42, F45.8, F45.9, F48.1, F48.2, F48.8, F48.9, F50.00, F50.02, F50.2, F50.8, F50.81, F50.82, F50.89, F50.9, F51.01–F51.05, FD51.09, F51.11–F51.13, F51.19, F51.3, F51.4, F51.5, F51.8, F51.9, F52.0, F52.1, F52.21, F52.22, F52.31, F52.32, F52.4, F52.5, F52.6, F52.8, F52.9, F53, F53.0, F53.1, F59, F60.0, F60.1, F60.2, F60.3, F60.4, F60.5, F60.6, F60.7, F60.81, F60.89, F60.9, F63.0, F63.1, F63.2, F63.3, F63.81, F63.89, F63.9, F68.10, F68.11, F68.12, F68.13, F68.8, F84.0, F84.2, F84.3, F84.5, F84.8, F84.9, F90.0, F90.1, F90.2, F90.8, F90.9, F91.0, F91.1, F91.2, F91.3, F91.8, F91.9, F93.0, F93.8, F93.9, F94.0, F94.1, F94.2, F94.8, F94.9

UB Revenue Codes

For BH Outpatient Visit, use the following UBREV codes: 0510, 0513, 0515–0517, 0519–0523, 0526–0529, 0900, 0902–0904, 0911,0914–0917, 0919, 0982, 0983



For Intensive Outpatient Encounter or Partial Hospitalization, use codes: 0905, 0907, 0912, 0913

Electroconvulsive Therapy code: 0901



Provider Contact Information

for MVP Health Care and Beacon Health Options, MVP's partner in managing mental health and substance use services for our members.

MVP Provider Customer Care

 **1-866-942-7966** (TTY: **1-800-662-1220**)
Monday–Friday, 8:30 am–5 pm Eastern Time
 mvphealthcare.com

Beacon Health Options Provider Customer Service

 **1-888-204-5581**
Monday–Friday, 8:30 am–5 pm Eastern Time
 beaconhealthoptions.com