

## REFERENCE GUIDE PURPOSE:

The purpose of this Reference Guide is to outline the process for documenting Quality HEDIS measures within the Behavioral Health and Access/Availability of Care HEDIS sub-domains. This reference guide includes documentation for the following measures, Follow-Up After Hospitalization for Mental Illness, and Initiation and Engagement of Substance Use Disorder Treatment.

## DEFINITIONS & ACRONYMS:

- HEDIS: Health Effectiveness Data and Information Set
- MY: Measurement Year
- Measurement Year: The audit year in which quality measure data is collected from.
- DOS: Date of Service
- Date of Service: The date a rendered service was provided.
- Ongoing Care Providers: Clinicians who manage the member's ongoing care, such as: NP, PA, MD, DO
- Clinical Staff: LPN, RN
- Non-clinical staff: Non licensure holding staff including, but not limited to health information management specialist, health outreach workers, etc.
- Qualifying Event: Specified event, such as diagnosis code, event code, etc. as detailed per measure, that will count towards a member's compliance.
- Measure Cohort: All the details which create a measure, be it a specific set of diagnosis, an age range, or other parameters which are defined to calculate a measure population.
- Denominator: All members with qualifying events defined by a measure cohort to make them a part of the eligible population.
- Numerator: All the members within a specified measure denominator that have had a qualifying event such as diagnosis code, event code, or whatever is detailed in the measure that shows the member has had a qualifying event to be counted as having the service of interest.
- Numerator Compliant member: A member with a qualifying event for a measure.
- Administrative Data: Transaction data, or other administrative data used to identify the eligible population and numerator. This information includes both claims and other transaction data, as well as supplemental data.
- Supplemental Data: Data used to capture missing service data not received through administrative sources (claims or encounters) or by standard electronically generated files from the service providers.
- Hybrid Data: Medical record data used to identify eligible numerator events.
- Transaction Data: Data that is created and updated within operational systems, which collects information related to intake, service, diagnostic testing, procedures, purchasing, billing, accounts receivable and accounts payable. Can be from claims, EMR data exports, etc.



## Contents

Follow-Up After Hospitalization for Mental Illness (FUH)..... 3  
 Sub-measure(s):(2): 30 Days ..... 3

Follow-Up After Hospitalization for Mental Illness (FUH)..... 4  
 Sub-measure(s):(2): 7 Days ..... 4

Initiation and Engagement of Substance Use Disorder Treatment (IET)..... 5  
 Sub-measure(s):(2): Initiation ..... 5

Initiation and Engagement of Substance Use Disorder Treatment (IET)..... 6  
 Sub-measure(s):(2): Engagement ..... 6

## Follow-Up After Hospitalization for Mental Illness (FUH)

Sub-measure(s):(2): 30 Days

**Measure Member Cohort Age Range:** 6+ years old

**Measure Lookback:** 30 Days

**Description:** The percentage of discharges for members 6 years of age and older who were hospitalized for treatment of selected **mental illness or intentional self-harm diagnoses** and who had a follow-up visit with a mentalhealth practitioner and who had a follow-up visit within 7 days and within 30 days.

**Intent:** There are over 2,000,000 hospitalizations each year for mental illness in the United States. Patients hospitalized for mental health issues are vulnerable after discharge and follow-up care by trained mental health clinicians is critical for their health and well-being.

<b>Mental Health Provider</b>	Psychologist, Psychiatrist, Psychoanalyst, Neuro Clinical Social Worker, Psychiatric/Mental Health Clinical Nurse Specialist, Psychiatric/Mental Health NP
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Virtual or telephone visits are acceptable for this measure.

### WHAT DOES HEDIS REQUIRE AND BY WHOM?

Credentials	Documentation Requirement
<b>Mental Health Provider</b>	Follow up outpatient visit

### EXAMPLES OF HOW TO DOCUMENT AND WHERE.

<b>Visit Information</b>	Electronic Health Record <ul style="list-style-type: none"> <li>- Defined Visit Type               <ul style="list-style-type: none"> <li>o Post Discharge                   <ul style="list-style-type: none"> <li>▪ Defined Reason                       <ul style="list-style-type: none"> <li>• FUH Post Discharge Visit</li> </ul> </li> </ul> </li> </ul> </li> </ul>
<b>Example of CPT Visit Codes Used</b>	<ul style="list-style-type: none"> <li>- Transitional Care Management: 99495</li> <li>- Transitional Care Management: 99496</li> <li>- Psychotherapy, 30 minutes: 90832</li> <li>- Psychotherapy, 45 minutes: 90834</li> <li>- Psychotherapy, 60 minutes: 90837</li> </ul>
<b>Example of POS Codes Used</b>	<ul style="list-style-type: none"> <li>- Telehealth visit: 02</li> <li>- Home visit: 12</li> </ul>

\*Mental Illness or Intentional Self-Harm Diagnosis in Appendix I



## Follow-Up After Hospitalization for Mental Illness (FUH)

Sub-measure(s):(2): 7 Days

**Measure Member Cohort Age Range:** 6+ years old

**Measure Lookback:** 7 Days

**Description:** The percentage of discharges for members 6 years of age and older who were hospitalized for treatment of selected **mental illness or intentional self-harm diagnoses** and who had a follow-up visit with a mental health practitioner and who had a follow-up visit within 7 days and within 30 days.

**Intent:** There are over 2,000,000 hospitalizations each year for mental illness in the United States. Patients hospitalized for mental health issues are vulnerable after discharge and follow-up care by trained mental health clinicians is critical for their health and well-being.

<b>Mental Health Provider</b>	Psychologist, Psychiatrist, Psychoanalyst, Neuro Clinical Social Worker, Psychiatric/Mental Health Clinical Nurse Specialist, Psychiatric/Mental Health NP
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Virtual or telephone visits are acceptable for this measure.

### WHAT DOES HEDIS REQUIRE AND BY WHOM?

Credentials	Documentation Requirement
<b>Mental Health Provider</b>	Follow up outpatient visit

### EXAMPLES OF HOW TO DOCUMENT AND WHERE.

<b>Visit Information</b>	Electronic Health Record <ul style="list-style-type: none"> <li>- Defined Visit Type               <ul style="list-style-type: none"> <li>o Post Discharge                   <ul style="list-style-type: none"> <li>▪ Defined Reason                       <ul style="list-style-type: none"> <li>• FUH Post Discharge Visit</li> </ul> </li> </ul> </li> </ul> </li> </ul>
<b>Example of CPT Visit Codes Used</b>	<ul style="list-style-type: none"> <li>- Transitional Care Management: 99495</li> <li>- Transitional Care Management: 99496</li> <li>- Psychotherapy, 30 minutes: 90832</li> <li>- Psychotherapy, 45 minutes: 90834</li> <li>- Psychotherapy, 60 minutes: 90837</li> </ul>
<b>Example of POS Codes Used</b>	<ul style="list-style-type: none"> <li>- Telehealth visit: 02</li> <li>- Home visit: 12</li> </ul>

\*Mental Illness or Intentional Self-Harm Diagnosis in Appendix I

## Initiation and Engagement of Substance Use Disorder Treatment (IET)

### Sub-measure(s):(2): Initiation

**Measure Member Cohort Age Range:** 13+ years old

**Negative Diagnosis History:** 194 Days (about 6 months) without any other SUD diagnosis history

**Intake Period:** November 15<sup>th</sup> of the year prior to the measurement year (MY)-November 14<sup>th</sup> of the MY

**Measure Lookback:** 14 days, event based

**Description:** The percentage of members who initiate treatment through an inpatient AOD admission, outpatient visit, intensive outpatient encounter or partial hospitalization, telehealth or medication treatment within 14 days of the diagnosis, with a negative diagnosis history.

**Intent:** In 2016, 20.1 million Americans over 12 years of age (about 7.5% of the population) were classified as having a substance use disorder involving AOD. Treatment, including MAT, in conjunction with counseling or other behavioral therapies, has been shown to reduce AOD-associated morbidity and mortality, improve health, productivity, and social outcomes and reduce health care spending. Despite strong evidence, less than 20% of individuals with substance use disorders receive treatment.

Virtual or telephone visits are acceptable for this measure.

### WHAT DOES HEDIS REQUIRE AND BY WHOM?

Credentials	Documentation Requirement
Behavioral Health	Outpatient visit with a substance use diagnosis (SUD) which matches the SUD diagnosis during the initial event

### EXAMPLES OF HOW TO DOCUMENT AND WHERE.

Visit Information	Electronic Health Record <ul style="list-style-type: none"> <li>- Defined Visit Type               <ul style="list-style-type: none"> <li>o Behavioral Health                   <ul style="list-style-type: none"> <li>▪ Defined Visit Reason                       <ul style="list-style-type: none"> <li>• Initiation and Engagement of SUD (IET)</li> </ul> </li> </ul> </li> </ul> </li> </ul>
Examples of CPT Visit Codes Used	<ul style="list-style-type: none"> <li>- Psychotherapy, 30 minutes: 90832</li> <li>- Psychotherapy, 45 minutes: 90834</li> <li>- Psychotherapy, 60 minutes: 90837</li> </ul>
Examples of POS Codes Used	<ul style="list-style-type: none"> <li>- Telehealth visit: 02</li> <li>- Home visit: 12</li> </ul>

# Initiation and Engagement of Substance Use Disorder Treatment (IET)

## Sub-measure(s):(2): Engagement

**Measure Member Cohort Age Range:** 13+ years old

**Negative Diagnosis History:** 194 Days (about 6 months) without any other SUD diagnosis history

**Intake Period:** November 15<sup>th</sup> of the year prior to the measurement year (MY)-November 14<sup>th</sup> of the MY

**Measure Lookback:** 34 days, event based

**Description:** The percentage of members who initiated treatment and who were engaged in ongoing AOD treatment < 34 Days of initiation visit, with a negative diagnosis history.

**Intent:** In 2016, 20.1 million Americans over 12 years of age (about 7.5% of the population) were classified as having a substance use disorder involving AOD. Treatment, including MAT, in conjunction with counseling or other behavioral therapies, has been shown to reduce AOD-associated morbidity and mortality, improve health, productivity, and social outcomes and reduce health care spending. Despite strong evidence, less than 20% of individuals with substance use disorders receive treatment.

Virtual or telephone visits are acceptable for this measure.

### WHAT DOES HEDIS REQUIRE AND BY WHOM?

Credentials	Documentation Requirement
Behavioral Health	Outpatient visit with a substance use diagnosis (SUD) which matches the SUD diagnosis during the initial event


### EXAMPLES OF HOW TO DOCUMENT AND WHERE.

Visit Information	Electronic Health Record <ul style="list-style-type: none"> <li>- Defined Visit Type               <ul style="list-style-type: none"> <li>o Behavioral Health                   <ul style="list-style-type: none"> <li>▪ Defined Visit Reason                       <ul style="list-style-type: none"> <li>• Initiation and Engagement of SUD (IET)</li> </ul> </li> </ul> </li> </ul> </li> </ul>
Examples of CPT Visit Codes Used	<ul style="list-style-type: none"> <li>- Psychotherapy, 30 minutes: 90832</li> <li>- Psychotherapy, 45 minutes: 90834</li> <li>- Psychotherapy, 60 minutes: 90837</li> </ul>
Examples of POS Codes Used	<ul style="list-style-type: none"> <li>- Telehealth visit: 02</li> <li>- Home visit: 12</li> </ul>

**RELATED DOCUMENTS:**

Appendix I: Mental Illness Value Set

**APPROVALS:**

Sabrina N Zecher  
**CCA SUBJECT MATTER  
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Signature

Manager, HEDIS  
**Title [Print]**  
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