Seven day follow-up appointments after mental health hospitalization (FUH)

A resource for: Facilities with a behavioral health inpatient unit and outpatient behavioral health providers



Comprehensive care coordination and discharge planning can help reduce hospital readmissions

Effective discharge planning and timely follow-up care helps patients make the transition from one level of care to another, and helps ensure that gains made during their behavioral health hospitalization are not lost.

Follow-up within seven days of a behavioral health inpatient stay is proven to reduce hospital readmissions, improve the patient's chances of successfully staying out of the hospital, and meets the Health Effectiveness Data and Information Set (HEDIS) standard.

Why is follow-up within seven days important for patients?

For patients, following and understanding their discharge plan can be overwhelming. Having a follow-up appointment within seven days of discharge allows outpatient providers to:

- Assess the patient for psychiatric stability
- Explore medication adherence, including if the patient has filled their prescriptions, understands their medications, and is taking them appropriately
- Evaluate safety and security systems (for example, are caregivers being supportive)

According to criteria developed by the American Academy of Child and Adolescent Psychiatry (AACAP) and the American Psychiatric Association (APA)¹, regular and timely assessments and documentation of the patient's response to all treatments are critical.

Your role in follow-up visits

You can help improve clinical outcomes by promoting seven-day follow-up:

Discharging facility's responsibility	Outpatient behavioral health provider's responsibility
Begin planning for discharge at admission.	Offer availability of appointments within seven days.
Communicate the importance of follow-up care to patients and their caregivers.	File and accurately code claims in a timely manner.
• Ensure that an outpatient appointment is scheduled <i>before</i> discharge (see our resources section to learn how we can help find a practitioner, if needed).	Maintain information about kept appointments.
Include all appointment information on the patient's discharge instructions.	Coordinate care with other treating providers, as appropriate.

¹American Academy of Child and Adolescent Psychiatry and the American Psychiatric Association. Criteria for Short-term Treatment of Acute Psychiatric Illness. 1997. These criteria are cited as evidence for the rationale for this HEDIS measure, as listed on the National Quality Measures Clearinghouse website.





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About the HEDIS measure

The National Committee for Quality Assurance (NCQA) has developed measures of healthcare outcomes called the Health Effectiveness Data and Information Set (HEDIS) measures. HEDIS measures allow us to identify the impact of clinical interventions across a population of health plan members. We use claims and other data to report on the measure.

The HEDIS behavioral health measure for follow-up appointments:

Percentage of discharges for members six years of age and older who
were hospitalized for treatment of selected mental health disorders
and who had a follow-up visit with a mental health practitioner within
seven days of discharge.

Resources

- NCQA www.ncqa.org
- Agency for Healthcare Research and Quality https://www.qualitymeasures.ahrq.gov/content.aspx?id=48642
- Measuring Continuity of Care for Clients of Public Mental Health Systems

http://www.ncbi.nlm.nih.gov/pmc/articles/PMC1360938/

NCOA 2015 HEDIS scores

For this measure, here's the percentage of Blue Cross Blue Shield of Massachusetts members who had a follow-up visit within seven days of discharge. Our goal is to work with you to increase this percentage.

Product	Percentage of members who had a follow-up visit within 7 days
HMO/POS	66.57%
PPO	65.59%

Supports for you and our members

Can be used to
Find an outpatient behavioral health practitioner.
Support our members by helping them make the most of their health plan, find community resources, and follow their recommended discharge care plan.
To refer a member, fill out our: <u>Patient Referral for Health Management Programs & Services</u> <u>Form</u> and fax it to the number listed on the form. You can get the form on our website. Go to <u>bluecrossma.com/provider</u> and click Forms>Administrative.
Coordinate care and discharge planning.

^{*}Blue Cross Blue Shield of Massachusetts refers to Blue Cross and Blue Shield of Massachusetts, Inc., Blue Cross and Blue Shield of Massachusetts HMO Blue®, Inc., and/or Massachusetts Benefit Administrators LLC, based on Product participation. ©2016 Blue Cross and Blue Shield of Massachusetts HMO Blue®, Inc. MPC_033016-1N-1-FS (04/16)