

2025 Behavioral Health Follow-Up Measures

The Measurement Year (MY) 2025 changes to the behavioral health follow-up measures include updates to the Follow-Up After Hospitalization for Mental Illness and Follow-Up After Emergency Department Visit for Mental Illness to expand criteria for diagnoses considered and types of mental health follow-up care that qualify. Efforts have been made to align the follow-up measures, allowing for a more consistent approach to evaluating follow-up care across different care settings.

Follow-Up After Hospitalization for Mental Illness (FUH)

Meridian Medicaid Plan, Meridian Medicare-Medicaid Plan (MMP), YouthCare, and Ambetter Ages 6+

The percentage of discharges received between January 1 - December 1, for members 6 years of age and older who were hospitalized for 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:

1. The percentage of discharges for which the member received follow-up within 30 days after discharge.
2. The percentage of discharges for which the member received follow-up within 7 days after discharge.

Key Changes to FUH:

- Modified the denominator criteria to allow intentional self-harm diagnoses to take any position on the acute inpatient discharge claim (potential to increase the denominator).
- Added new diagnoses including phobia, anxiety, intentional self-harm X-chapter codes, and the R45.851 suicidal ideation code to the denominator in the event/diagnosis (potential to increase the denominator).
- Added more provider type visits (i.e., PCP) with any diagnosis of a mental health disorder to meet the mental health follow-up numerator (potential to increase the numerator).
- Added peer support and residential treatment services to the numerator (potential to increase the numerator).

Follow-Up After Emergency Department Visit for Mental Illness (FUM)

Meridian Medicaid Plan, Meridian Medicare-Medicaid Plan (MMP), YouthCare, and Ambetter Ages 6+

The percentage of emergency department (ED) visits between January 1 - December 1, 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:

1. The percentage of ED visits for which the member received follow-up within 30 days of the ED visit (31 total days)..
2. The percentage of ED visits for which the member received follow-up within 7 days of the ED visit (8 total days).

Key Changes to FUM:

- Modified the denominator criteria to allow intentional self-harm diagnoses to take any position on the claim (potential to increase the denominator).
- Added new diagnoses including phobia, anxiety, intentional self-harm X-chapter codes, and the R45.851 suicidal ideation code to the denominator in the event/diagnosis (potential to increase the denominator).
- Modified the numerator criteria to allow a mental health diagnosis to take any position on the claim (potential to increase the numerator).
- Added peer support and residential treatment services to the numerator (potential to increase the numerator).
- Added visits in a behavioral healthcare setting and psychiatric collaborative care management services to the numerator (potential to increase the numerator).
- Deleted the mental health diagnosis requirement for partial hospitalization/ intensive outpatient visits, community mental health center visits and electroconvulsive therapy (potential to increase the numerator).

Follow-Up After Emergency Department Visit for Substance Use (FUA) - No Key Changes

Meridian Medicaid Plan, Meridian Medicare-Medicaid Plan (MMP), YouthCare, and Ambetter Ages 13+

The percentage of emergency department (ED) visits between January 1 - December 1, among members aged 13 years and older with a **principal diagnosis of substance use disorder (SUD), or any diagnosis of drug overdose**, for which there was follow-up. Two rates are reported:

1. The percentage of ED visits for which the member received follow-up within 30 days of the ED visit (31 total days).
2. The percentage of ED visits for which the member received follow-up within 7 days of the ED visit (8 total days).

Follow-Up After High-Intensity Care for Substance Use Disorder (FUI)- No Key Changes

Meridian Medicaid Plan, Meridian Medicare-Medicaid Plan (MMP), YouthCare, and Ambetter Ages 13+

The percentage of acute inpatient hospitalizations, residential treatment, or withdrawal management visits for a diagnosis of substance use disorder between January 1 - December 1, among members 13 years of age and older that result in a **follow-up visit or service for substance use disorder**. Two rates are reported:

1. The percentage of visits or discharges for which the member received follow-up for substance use disorder within the 30 days after the visit or discharge.
2. The percentage of visits or discharges for which the member received follow-up for substance use disorder within the 7 days after the visit or discharge.

Tips for Providers:

- Offer in-person, virtual, telehealth and phone visits when applicable.
- Include the patient and caregivers in decision making.
- Schedule follow-up appointments to meet the 7- and 30-day requirements.
- Address social drivers of health, determinants, health equity, and quality care.
- Coordinate care between physical and behavioral health providers to address any comorbidity.
- Offer psychoeducation, various treatment, medication assistance and recovery options.
- Provide timely submission of claims and code related diagnosis and visits correctly.

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