
Per the National Committee for Quality Assurance (NCQA): "A significant percentage of individuals experience some form of mental illness (including manic depression, paranoia and schizophrenia), yet only a small proportion of these are medically diagnosed. Mental illness accounts for more than 15 percent of the overall disease burden in the United States. This is greater than the burden associated with all forms of cancer.

It is important to provide regular follow-up therapy to patients after they have been hospitalized for mental illness. An outpatient visit with a mental health practitioner is necessary to ensure that the patient's transition to the home and work environment is supported and that gains made during hospitalization are not lost. A follow-up visit also helps healthcare providers detect early post-hospitalization reactions or medication problems, and demonstrates continuing care.

There are many reasons for low follow-up rates. Poor communication between inpatient and outpatient providers can result in appointments that are not made or kept. Patient noncompliance is also a significant issue. The key to improving performance in this area is managing the transition of care from the hospital to the ambulatory site. This can involve case management and systems that link scheduling of outpatient care within hospital discharge."

Meeting the measure:

This measure requires patients who are age 6 or older, who have had an inpatient stay for treatment of a behavioral health condition, receive a follow-up visit with a mental health professional within **seven days of discharge**. The mental health professional can be a medical doctor (MD), nurse practitioner (NP), licensed clinical social worker (LCSW), licensed professional counselor (LPC), or an outpatient facility visit, intensive outpatient service or partial hospitalization service with a facility.

For billing purposes, a variety of Current Procedural Terminology (CPT®) codes and revenue codes will meet the requirements for follow-up visits or services.

Keys to success:

- Make sure patients have follow-up visits scheduled prior to being discharged.
- At discharge, provide the patient with detailed information about the follow-up visit, including the provider and practice name, physical address, phone number and website and/or email address.
- If possible, address obstacles for the follow-up visit in advance, such as transportation concerns.
- The mental health professional should be given detailed information about the patient, including alternative phone numbers or contacts.
- Mental health professionals should consider systems for advance patient notification for visits, and develop processes for following up after missed appointments.