

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

2025

Members ages 6 and older

COMMERCIAL | MEDICARE | MEDICAID

## Measure definition

Emergency department (ED) visits with a principal diagnosis of mental illness **or** intentional self-harm **and** had a follow-up visit for mental illness.

### Two rates are reported:

- Within 7 days of ED visit (8 total days)
- Within 30 days of ED visit (31 total days)

**Service date range:** January 1 through December 1 of measurement year with member being ages 6 or older on date of visit

### The following meet criteria for a follow-up visit:

- Outpatient visit
- Intensive outpatient encounter
- Psychiatric residential treatment
- Behavioral health visit
- Partial hospitalization
- Visit with a community mental health center or peer support services
- Electroconvulsive therapy
- Observation visit, telehealth/telephone visit, e-visit/virtual check-in
- Follow-up visit can be with any practitioner, with a principal diagnosis of a mental health disorder **or** a principal diagnosis of intentional self-harm **and** any diagnosis of a mental health disorder
- Follow-up can occur on date of ED visit **or** within 7 days after ED visit (8 days) **or** within 30 days after ED visit (31 days)



### Medical record requirements

- Member legal name and date of birth
- Provider/practice identifier
- Provider Business Group (PBG) name and number
- Date of service (DOS)
- Applicable lab/test results and date collected



### Commonly used claim codes\*

(Not all-inclusive)

- Visit, setting unspecified: **90847, 90853, 99222**
- ECT: **90870**
- BH outpatient: **99483, 99344**
- Telephone visit: **99442**
- Online assessment: **99421, 99422, 99423**

Medical record submission methods may not be applicable to all plan types.  
For more details, you can reach out to your HEDIS plan representative.

## Required exclusions (Other exclusions may also apply)

- Members in hospice or using hospice services anytime during measurement year
- Members who died anytime during measurement year

## Insights and recommendations

- Reach out to member after notification of ED discharge to promptly schedule a follow-up visit
- Reschedule members who do not keep their initial appointment within 24 hours
- A diagnosis of mental health disorder and date of service is required for all submitted data
- Use correct coding, and submit claims and encounter data in a timely manner
- Refer members for behavioral health support, such as a community health worker
- Close management of patient care results in better outcomes for both behavioral and physical health with:
  - Reduction in use of ED
  - Patient is more compliant with care
  - Reduces suicidal ideation, attempted and completed suicide

\*FOR COMMONLY USED CODES: Not a comprehensive list of codes.

For measures that require claims data only, we cannot accept supplemental data sources such as data feeds and medical record collection methods.

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