

Provider update

HEDIS spotlight:

Follow-Up After Emergency Department Visit for Substance Use (FUA) Follow-Up After High Intensity Care for Substance Use Disorder (FUI) Initiation and Engagement of Substance Use Disorder Treatment (IET)

In the past, the identification of physical health needs and treatment has been managed by primary care providers (PCP), while the identification of behavioral health (BH) and substance use treatment has been managed by behavioral health providers. We now know that early identification and treatment for substance use can often get at the root cause of the addiction and prevent further escalation of the dependence and other health consequences.

Having an integrated approach between the PCP and the BH provider is crucially important to manage this population. Below are some specific measures to capture compliance for your patients and our members.

For all the codes pertaining to these three measures, please reference the 2023 HEDIS[®] Benchmarks and Coding Guidelines for Quality Care* and any applicable billing guides.

* The codes listed are for informational purposes only and are not intended to suggest or guide reimbursement. If applicable, refer to your provider contract or health plan contract for reimbursement information. For a complete list of CPT[®] codes, go to the American Medical Association website at https://www.ama-assn.org/.

Follow-Up After Emergency Department Visit for Substance Use (FUA)

Just as times of stress can exacerbate symptoms of mental illness, individuals with a diagnosis and history of substance use disorder (SUD) may turn to these substances to cope:

- The FUA measure pertains to members who are 13 years of age or older with a principal diagnosis of substance use disorder (SUD), or any diagnosis of drug overdose, who had a follow up visit for SUD.
- The follow-up visit can be with any provider.
- The follow-up visit can be conducted via telehealth or phone call.
- Two dates for follow up are captured:
 - Within seven days after discharge, **including events on the date of the ED visit** (eight total days)
 - Within 30 days after discharge, **including events on the date of the ED visit** (31 total days)

Helpful tips and exclusions

Helpful tips: If using an EMR system, consider electronic data sharing with your health plan to capture all coded elements. Contact your Healthcare Network representative (**800-454-3730**) for additional details and questions.

Exclusions:

- ED visits that result in an inpatient stay
- Members in hospice or using hospice services anytime during the measurement year
- Members who died during the measurement year

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Follow-Up After High-Intensity Care for Substance Use Disorder (FUI)

- The FUI measure includes members ages 13 and older with a diagnosis of substance use disorder on the date of discharge.
- Events included are:
 - Inpatient discharge
 - Residential treatment discharge
 - o Withdrawal treatment visit
- Two dates for follow up are reviewed:
 - Within the first seven days of discharge
 - Within 30 days after discharge
- The follow-up visits *can be with any provider*.
- Visits on the day of discharge **do not count.**

Initiation and Engagement of Substance Use Disorder Treatment (IET)

Once there is identification of a substance use disorder (SUD), the IET HEDIS measure provides some guidance as a standard for minimal initiation and engagement of treatment:

- The IET measure looks at adolescent or adult members ages 13 and older with a new episode of alcohol or other drug dependence.
- Treatment may be provided in one of these settings:
 - \circ Inpatient
 - o Outpatient
 - o Telehealth
 - Partial hospitalization
 - Medication treatment
- First initiation of treatment should occur within 14 days of the initial diagnosis.
- Engagement of treatment should occur in two or more visits within 34 days from the initial visit.

Exclusions:

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



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