

## HEDIS® TIP SHEET

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

#### Why is the FUI Measure Important?

Timely follow-up and continuity of care after being discharged from high-intensity services for a diagnosis of substance use disorder (SUD) is critical. Individuals receiving treatment for SUD in these settings are vulnerable to losing contact with the healthcare system.<sup>1</sup>

#### What is the FUI Measure Looking At?

This measure assesses the percentage of acute inpatient hospitalizations, residential treatments, or withdrawal management visits for a diagnosis of substance use disorder among Medicaid members ages 13 and older that result in a follow-up visit or service for substance use disorder. Two rates are reported:

1. A follow-up visit or event with any practitioner for a principal diagnosis of substance use disorder within 30 days **after** the visit or discharge.
2. A follow-up visit or event with any practitioner for a principal diagnosis of substance use disorder within 7 days **after** the visit or discharge.

#### What is Included?

- The denominator is based on all episodes between January 1 and December 1 of the measurement year.
- Only follow-up visits that occur after episode/discharge count toward measure compliance.

#### What is Excluded?

- Nonacute inpatient stays, other than behavioral health is excluded from the denominator.
- Follow-up for withdrawal management (detox) events are excluded from the numerator.
- Members in hospice or who died during the measurement year.

#### What Can You Do to Help?

- Offer virtual, telehealth, and phone visits.
- Provide empathic listening and nonjudgmental discussions to engage the patient and caregivers in decision making and a relapse prevention plan.
- Consider Medication Assisted Treatment (MAT) options for patients with alcohol or opioid use disorder and maintain appointment availability.
- Offer mutual help options like case management, peer recovery support, harm reduction, 12-step fellowships (AA, NA, etc.), or other community support groups.
- Reach out proactively within 24 hours if the patient does not keep scheduled appointment to reschedule.
- Provide integrated/coordinated care between the physical and behavioral health providers to address any comorbidity.

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- Reinforce the treatment plan and evaluate any medication regimen considering presence/absence of side effects, etc.
- Partner with the health plan to address social determinants, health equity, and quality care.
- Provide timely submission of claims and code substance related diagnosis and visits correctly.

### How is FUI Adherence/Compliance Met?

- The measure is met when the member adheres to a 7-day follow-up visit or event with any practitioner for a principal diagnosis of SUD. If follow-up did not occur within 7 days, it must occur within 30 days after discharge.

*ICD-10 Diagnosis Codes		
<b>Substance Use Disorders:</b> F10.XX-F19.XX (excludes remission codes)		
**CPT® and HCPCS Visit Codes		
<b>Outpatient (Unspecified):</b> 90791-90792, 90832-90834, 90836-90840, 90845, 90847, 90849, 90853, 90875-90876, 99221-99223, 99231-99233, 99238-99239, 99251-99255	<b>BH Outpatient:</b> 98960-98962, 99078, 99201-99205, 99211-99215, 99241-99245, 99341- 99345, 99347-99350, 99381-99387, 99391-99397, 99401-99404, 99411- 99412, 99483, 99492-99494, 99510	<b>Partial Hospitalization/            Intensive Outpatient:</b> G0410-G0411, H0035, H2001, H2012, S0201, S9480, S9484- S9485
<b>Telephone Visit:</b> 98966-98968, 99441-99443	<b>Online Assessment            (virtual/e-visit):</b> 98969, 98970, 98971, 98972, 99421, 99422, 99423, 99444, 99457, G0071, G2010, G2012, G2061, G2062, G2063	<b>Observation Visit:</b> 99217, 99218, 99219, 99220
<b>Substance Use Disorder            Services:</b> 99408, 99409, G0396, G0397, G0443, H0001, H0005, H0007, H0015, H0016, H0022, H0047, H0050, H2035, H2036, T1006, T1012	<b>Medication-Assisted Treatment:</b> H0033, J0570-J0575, J2315, Q9991, Q9992, G2077, G2080, G2086- G2087	<b>Residential Behavioral Health:</b> H0017, H0018, H0019, T2048
POS Visit Codes:		
<b>Outpatient:</b> 03, 05, 07, 09, 11, 12-20, 22, 33, 49-50, 71-72	<b>Community Mental Health Center:</b> 53	<b>Partial Hospitalization:</b> 52
<b>Telehealth:</b> 02	<b>Ambulatory Surgical Center:</b> 24	<b>Non-residential Substance Use            Facility:</b> 57, 58

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### Additional Support:

- Substance Abuse and Mental Health Services Administration (SAMHSA)
  - [samhsa.gov](https://www.samhsa.gov)
- Provider Clinical Support Systems (PCSS)
  - [pcssnow.org](https://www.pcssnow.org)
  - Answers from clinicians in real time.

We are committed to the care and wellbeing of our members. We are also committed to working with you as a partner to develop the best possible treatment plans for all patients.

For additional tools and resources, visit [iowatotalcare.com/providers.html](https://iowatotalcare.com/providers.html) or [contact \(iowatotalcare.com/territory-maps.html\)](https://iowatotalcare.com/territory-maps.html) a provider relations or quality improvement specialist for assistance.

### References:

1. Care Coordination. Content last reviewed August 2018. Agency for Healthcare Research and Quality, Rockville, MD. <https://www.ahrq.gov/ncepcr/care/coordination.html>
2. National Committee for Quality Assurance. (n.d.b.). *HEDIS® and performance measurement*. <https://www.ncqa.org/HEDIS/>

**This document is an informational resource designed to assist licensed healthcare practitioners in caring for their patients.** Healthcare practitioners should use their professional judgment in using the information provided. HEDIS® measures are not a substitute for the care provided by licensed healthcare practitioners and patients are urged to consult with their healthcare practitioner for appropriate treatment. HEDIS® is a registered trademark of the National Committee for Quality Assurance (NCQA).

\*2023 ICD-10 Diagnosis Codes

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