

HEDIS® Measure

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

## Data collection method:

Administrative (Claims)

## Measure description:

The percentage of emergency department (ED) visits among enrollees 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:

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

## Numerator compliance:

**30-Day Follow-Up** - A follow-up visit or a pharmacotherapy dispensing event within 30 days after the ED visit (31 total days). Include visits and pharmacotherapy events that occur on the date of the ED visit.



**7-Day Follow-Up** - A follow-up visit or a pharmacotherapy dispensing event within 7 days after the ED visit (8 total days). Include visits and pharmacotherapy events that occur on the date of the ED visit.

For both indicators, any of the following meet criteria for a follow-up visit:

- Outpatient, Intensive outpatient, partial hospitalization, non-residential substance abuse treatment facility, community mental health center visit with any diagnosis of SUD, substance use or drug overdose or a mental health provider
- Peer support service with any diagnosis of SUD, substance use or drug overdose
- Opioid treatment service that bills monthly or weekly with any diagnosis of SUD, substance use or drug overdose
- Telehealth or Telephone visit with any diagnosis of SUD, substance use or drug overdose or with a mental health provider
- E-visit or virtual check-in with any diagnosis of SUD, substance use or drug overdose or with a mental health provider
- A substance uses disorder service
- A behavioral health screening or assessment for SUD or mental health disorders
- A substance uses service Pharmacotherapy dispensing event or medication treatment event

### **Best practices:**

- Schedule follow-up appointments as soon as possible, particularly those patients recently discharged from the ED.
- Train patients and staff on the “Teach Back Method” to ensure patients and caregivers review and understand discharge instructions and the next steps in their care for follow-up.
- Encourage the patient to bring their discharge paperwork to their first appointment.
- Educate the patient about the importance of follow-up and adherence to treatment recommendations.
- Outreach to patients who cancel appointments and assist them with rescheduling as soon as possible.
- Set flags if available in EHR or develop tracking method for patients due or past due for follow-up after discharge visits and require staff to follow up with patients that miss or cancel their appointment.
- Use the same diagnosis for substance use disorder each follow-up (a non-mental illness diagnosis code will not fulfill this measure).

### **Numerator codes:**

There is a large list of approved codes used to identify services included in this measure. For more information see [HEDIS Measures and Technical Resources at NCQA.org](https://www.ncqa.org/hedis-measures-and-technical-resources).

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