

Strategies to Improve Antidepressant Medication Management, Follow-Up After Hospitalization for Mental Illness and Initiation and Engagement for Substance Use Disorders:

# Optimizing the Impact of the Behavioral Health AMM, FUH, and IET HEDIS® Measures

### **Purpose of the Training**

 For medical and behavioral health providers to recognize the intent of the behavioral health measures and share strategies to impact quality care and outcomes for our members.



#### What is HEDIS®?

- Healthcare Effectiveness Data and Information Set
- A set of standardized performance measures designed by the National Committee for Quality Assurance (NCQA)
- One of healthcare's most widely used performance improvement tools
- Helps to identify gaps in care and develop programs to improve quality and health outcomes



#### Why is HEDIS® Important to Providers?

- Value-Based Service and other Pay for Performance incentive programs.
- Focuses on preventative care and supports better patient outcomes.
- The focus on quality outcomes can help members get the most from their benefits, which ultimately means better use of limited resources.
- It is a validated set of measurements by which one can measure the effectiveness of treatment interventions.



#### **BH HEDIS® Measures**

### **AMM**

Antidepressant Medication Management

### **FUH**

Follow-Up
After
Hospitalization
for Mental
Illness

#### **IET**

Initiation and
Engagement of
Substance Use
Disorder
Treatment



### **Key Factors of Depression**

- An estimated 5% of adults suffer from depression
- One of the Leading cause of disability across the world
- Patients may describe feeling sad, irritable, loss of pleasure, sleep issues, hopelessness about the future, and have thoughts of suicide
- Common treatments may include psychological treatments and/or antidepressant medication

(Global Health Data Exchange, 2019; World Health Organization [WHO], 2021)



### **Antidepressant Medication Management**

### AMM Measure Components

- Ages 18 years and older
- Principal diagnosis of Major Depression
- Were prescribed an antidepressant
- Acute and Continuation rates

#### Meeting the Acute Phase

 Remain on antidepressant for at least 84 days/12 weeks

### Meeting the Continuation Phase

 Remain on antidepressant for at least 180 days/6 months

#### Intent

 To assist provider with monitoring patients' use of antidepressant medication and provide follow-up care to help monitor clinical worsening and risk of suicidality.



#### **Strategies to Impact Medication Management**

#### **Encourage the patient to:**

- Fill out evidence-based screenings
- Consider psychotherapy and telehealth options
- Ask questions and engage in a crisis plan
- Sign release of information forms for coordination of care

#### Complete a comprehensive medical exam, including lab testing to:

- Rule out other medical, developmental, or mental disorders before diagnosing major depression.
- Explore various treatment options before prescribing medication.
  - Medication is not typically felt to be the first line intervention for Mild Depression.
     Moderate to Severe "Major" Depression typically necessitates medication (or sometimes other forms of) treatment intervention.



### **Strategies to Impact Medication Management**

Be available to collaborate care

Proactively outreach

Engage the pharmacist



### The Importance of Mental Health Follow Up Care

- Helps patients adjust back to home, work, or school
- Provides extra support
- Increases the chances of medication/treatment adherence
- Leads to fewer emergency room visits and re-hospitalization



### Follow-Up After Hospitalization for Mental Illness (FUH)

### Measure Components:

- Ages 6 years and older.
- Hospitalized for mental illness or intentional self harm.
- 7-day and 30-day follow-up rates are reported.

### Meeting the Measure

- When the member attends a 7-day follow-up visit with an approved mental health provider, the 30-day visit is also met.
- The visit must occur after discharge.



### **Approved Mental Health Providers per NCQA**

- Licensed Clinical Social Worker
- Licensed Master of Social Work
- Registered Nurse (RN) with Psychiatric Specialty
- Licensed Marriage and Family Therapist
- Licensed Professional Counselor
- Psychiatric Nurse

- Psychiatrist
- Psychologist
- MD/DO Certified as a Psychiatrist
- Certified Physician Assistant in Psychiatry
- Certified Community Mental Health Center (CMHC)
- Certified Community Behavioral Health Clinic (CCBHC)



### **Approved Mental Health Follow-Up Visits**

Outpatient visit with a mental health provider.

Telehealth visit with a mental health provider.

Telephone visit with a mental health provider.

Intensive outpatient encounter or Partial hospitalization

Transitional care management services with a mental health provider.

Certified Community Mental Health Centers

A visit in a behavioral healthcare setting

An observation visit *with* a mental health provider.

Electroconvulsive therapy

Psychiatric collaborative care management (new for 2022)



### Strategies to Impact Follow-Up Care for Mental Illness

#### **Engage the patient and guardian in their treatment:**

- Discuss discharge, medications, side effects, crisis plan
- Use teach back methods
- Encourage questions
- Assess social, mental, and physical health
- Refer to case management
- Ask for signed release of information forms



### Strategies to Impact Follow-Up Care for Mental Illness

- Offer telehealth and phone visits.
- Proactively outreach your patients.
- Code mental health related diagnoses and visits correctly on claims.
- Partner with the health plan and other providers to secure appointments.
- Work with PCP offices to offer Psychiatric Collaborative Care Management when applicable.



### The Importance of Substance Use Disorder Treatment

- Stop or reduce harmful substance misuse
- Improve patients' overall health
- Increases overall quality of an individual's life
- Positive economic impact

(Substance Abuse and Mental Health Service Administration, 2016)



### **Use Disorder (SUD) Treatment (IET)**

### Measure Components:

- Ages 13 years and older
- Received a new SUD
   episode/diagnosis from any
   provider, including medical.
- Initiation of SUD treatment and ongoing Engagement of SUD treatment rates are reported.

### Meeting the Initiation of SUD Treatment:

 When the member initiates an SUD visit or medication dispensing event within 14days of the SUD episode date.

### Meeting the Engagement of SUD Treatment:

 When the member engages in at least two (any combination of) SUD visits or medication treatment events on the day after the initiation encounter through
 34-days after.



## The visit(s) must include a diagnosis of Alcohol Use Disorder, Opioid Use Disorder, or Other Substance Use Disorder

### **Approved Visits for IET**

- Acute and nonacute Inpatient
- Telehealth, Telephone, or Virtual visit
- Outpatient Visit
- An Observation visit
- Intensive outpatient encounter or Partial hospitalization
- Non-Residential SUD facility
- Community Mental Health Center visit
- Opioid Treatment
- Substance Use service
- Medication Assisted Treatment for Alcohol or Opioid



### Strategies to Impact Substance Use Disorder Treatment

#### Express empathy and engage the patient and guardian;

- Encourage questions
- Assess willingness to change
- Validate concerns
- Educate on relapse prevention and treatment options
- Ask for signed release of information forms



### Strategies to Impact Follow-Up Care for SUD

#### **Encourage Providers and staff to:**

- Offer telehealth and phone visits.
- Schedule the first visit within 7 days.
- Code substance related diagnoses and visits correctly on claims.
- Partner with the health plan and assess for peer support and care management referrals.
- Coordinate care between physical and mental health providers.



#### The Role of the Provider in HEDIS®

Demonstrate commitment to quality care and improved patient outcomes Know the BH HEDIS®

measure requirements

and provide appropriate

care or referrals within the

designated timeframes

Accurately code all claims and document clearly ALL services provided

Collaborate with the health plan for effective programs and interventions

Play an active role in coordinating care for our members



**Quality** is never an accident; it is always the result of high intention, sincere effort, intelligent direction and skillful execution; it represents the wise choice of many alternatives."

- William A. Foster



### Thank You!



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