
CBE ID

3489

Title

Follow-Up After Emergency Department Visit for Mental Illness

Endorsement Status

Endorsed by Extension

Is Under Review

No

Next Maintenance Cycle

Spring 2027

Previous Endorsement Cycle

Spring 2019

Initial Endorsement

Thu, 10/24/2019 - 09:46

Steward

National Committee for Quality Assurance

1.0 New or Maintenance

Maintenance

1.1 Measure Structure

Single Measure

1.3 Electronic Clinical Quality Measure (eCQM)

No

1.6 Measure Description

The percentage of emergency department (ED) visits for members 6 years of age and older with a principal diagnosis of mental illness or intentional self-harm, who had a follow-up visit for mental illness. Two rates are reported:

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

1.7 Measure Type

Process

1.8 Level of Analysis

Health Plan

1.13 Data Dictionary

Not attached. I attest that all information will be provided where codes and/or value sets are needed (1.14a - 1.15c).

1.14 Numerator

The numerator consists of two rates:- 30-day follow-up: The percentage of ED visits for which the member received follow-up within 30 days of the ED visit (31 total days).- 7-day follow-up: The percentage of ED visits for which the member received follow-up within 7 days of the ED visit (8 total days).

1.15 Denominator

Emergency department (ED) visits for members 6 years of age and older with a principal diagnosis of mental illness or intentional self-harm on or between January 1 and December 1 of the measurement year.

1.20 Types of Data Sources

Claims Data

6.1.2 Current or Planned Use(s)

Public Reporting, Regulatory and Accreditation Programs, Quality Improvement with Benchmarking (external benchmarking to multiple organizations)

6.1.3 Current Use(s)

Public Reporting, Regulatory and Accreditation Programs, Quality Improvement with Benchmarking (external benchmarking to multiple organizations)

Exclusions

Patients in hospice.

Measure Disclaimer

This HEDIS® performance measure is not a clinical guideline and does not establish a standard of medical care and has not been tested for all potential applications.

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Planned Use

Public Reporting

Risk Adjustment

No risk adjustment or risk stratification

Target Population

Populations at Risk

The measure developer is different from the measure steward

No

Steward Organization

National Committee for Quality Assurance

Steward POC email

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