

Follow-up after hospitalization for mental illness (seven-day rate)

This HEDIS\* measure examines the percentage of patients 6 years and older who were hospitalized for treatment of select mental illness diagnoses and who follow up with a mental health practitioner within seven days.

## Follow-up includes one of the following:

Outpatient visit

- Partial hospitalization
- Intensive outpatient encounter

Discharge planning and outpatient provider support are critical to achieving a successful follow-up after an acute hospitalization.

## Here are some best practices we've identified:

- Discharge planning beginning upon admission, with discharge planners ensuring that appointments are scheduled within seven days
- Case management outreach to patients for assessment of possible barriers to a follow-up appointment and assistance if needed
- Reminder phone calls placed to patients before visits
- Providers working with hospitals to ensure access to visits within a specified timeframe

## Did you know?

- In 2012, one in four Michigan residents surveyed reported being diagnosed in their lifetime with either anxiety or depression.
- Patients discharged after hospitalization for mental illness who do not receive follow-up are more likely to be re-hospitalized.
- Less than half of initial appointments after hospitalization are kept.

## Tip

Coordination and member outreach are key to improving follow-up visit rates after hospitalization, lessening the chances of re-hospitalization.

<sup>\*</sup>HEDIS is a registered trademark of the National Committee for Quality Assurance.