

Closing the Gap on Follow-up Care After Discharge

Help patients get mental health services within 7 days after discharge

Primary care and mental health providers play an important role and can help patients receive appropriate follow-up care after discharge from an emergency room or acute hospitalization for a mental health (MH) diagnosis.

What's new for 2025:

After discharge from inpatient mental health stays:

- Follow-up appointment focus is now on mental health services rather than on the specialty of the provider delivering the service
- Mental health services conducted by medical providers and mental health providers count toward adherence using qualified billing and diagnostic codes
- Mental health condition diagnosis is required

After discharge from inpatient or emergency room stays

- Peer support and residential treatment services are now included

How Inpatient providers can help:

- Begin discharge planning upon admission and ensure it is specific to the patient's needs.
- Ensure the patient's aftercare appointment is scheduled prior to their discharge to facilitate a seamless transition to outpatient care.
- Engage the patient and their family in all stages of discharge planning to garner support and understanding.
- Attempt to alleviate any barriers to attending appointments before discharge. This includes obtaining accurate and current contact information and coordinating care with the health plan.
- Build a network of local outpatient providers who can see patients within seven days of their discharge.
- Help the patient set up a virtual care account and referral for a telehealth appointment to occur within seven days of discharge.
- Ensure discharge paperwork is sent to the outpatient provider and health plan within 24 hours to avoid delays in care.
- Invite care coordinators to meet with members to assist with aftercare planning and ensure all needs are addressed.
- Educate patients and family on the signs and symptoms of anxiety and when to call their outpatient provider versus going to the emergency room.

How Outpatient providers can help:

- Complete comprehensive assessments and evidence-based screening tools (i.e., PHQ-9, GAD-7) and know when to refer the patient to a behavioral health specialist.
- Ensure flexibility and appointment availability for patients who are being discharged from ED and acute hospital stays; the appointment should be scheduled within seven days of discharge. If a situation arises where a patient is unable to be seen within 7 days, you can schedule an appointment within 30 days of discharge.
- Reminder calls to members prior to appointment and after a missed appointment to reschedule.

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.

- Review medications with patients to ensure they understand the purpose, appropriate frequency, and method of administration.
- Educate office staff on local resources to assist with barriers such as lack of food, housing, and transportation needs.
- Educate patients and family on the signs and symptoms of anxiety and when to call you, the nurse advice line, or go to the emergency room.
- Establish communication pathways with inpatient discharge coordinators at local facilities.
- Submit claims in a timely manner with appropriate diagnoses, procedure and place of service codes.
- Offer psychiatric collaborative care, peer services and telehealth visits.

Example of aftercare services:

- Medication Management with a Psychiatrist/ARNP/PA with a mental health license or certificate
- Individual Therapy in the home or office in accordance with program specifications
- Electroconvulsive Therapy (ECT)
- Intensive Outpatient Program (IOP) or Partial Hospitalization Program (PHP)
- Mental Health and/or Substance Use Assessments, Screenings, Treatment Planning
- Community-Based Wrap-Around and/or Day Treatment Services
- Telehealth Services with a mental health provider or with any diagnosis of mental health disorder
- Psychiatric Collaborative Care Management
- Psychiatric Residential Treatment
- Peer Services with any diagnosis of mental health disorder
- Outpatient visits with any diagnosis of mental health disorder. In previous years, the visit had to be done with a mental health provider, beginning in 2025, only a mental health diagnosis is required for the outpatient visit.