2010 Follow-Up After Hospitalization for Mental Illness QI Fund Project Results

The purpose of the HMO Follow-up After Hospitalization for Mental Illness QI Fund Project is to increase the rate of behavioral health follow-up care for members age 6 and older who were hospitalized for treatment of selected mental health disorders. The results from 2010 are not comparable to 2006-2009 due to a change in the population. Members identified as having Medicare as their primary coverage are not included in the 2010 project population.

The 2010 project goal for the 7-day follow-up rate was ≥75%.

The following table displays the 2005-2009 Network results.

<table>
<thead>
<tr>
<th>Mental Health Indicator*</th>
<th>2006</th>
<th>2007</th>
<th>2008</th>
<th>2009</th>
<th>2010</th>
</tr>
</thead>
<tbody>
<tr>
<td>Follow-up visit with a Behavioral Health Practitioner within 7 days of Discharge</td>
<td>69.8% (1,637/2,344)</td>
<td>73.5% (1,734/2,359)</td>
<td>76.3% (1,771/2,320)</td>
<td>77.3% (1,827/2,364)</td>
<td>77.8% (1,799/2,312)</td>
</tr>
</tbody>
</table>

Identified Barriers to Follow-Up After Hospitalization for Mental Illness:

Members:
- May not be compliant with follow-up
- May not have an appointment with a Behavioral Health Specialist scheduled within seven days of discharge
- May not be aware that follow-up with a Behavioral Health Specialist is recommended within seven days of discharge
- May feel better after discharge and decide a follow-up appointment is not necessary
- May lack a support system to ensure appropriate follow-up care
- May believe there is a stigma related to having mental health diagnosis

Behavioral Health Specialist:
- May not have a previous relationship with the member in both inpatient and outpatient settings
- May not transition follow-up visits within 7 days of discharge with a Behavioral Health Specialist
- May not utilize home health services for members with a history of non-compliance
- May not use partial hospital programs or intensive outpatient programs for follow-up care

IPAs:
- May not be aware of the inpatient admission to set up a follow-up appointment, particularly when the admission is at a facility not affiliated with the IPA
- May not have a way to contact the member after hospital discharge to encourage follow-up care
- May not utilize home health services for members with a history of non-compliance
- May not use partial hospital programs or intensive outpatient programs for follow-up care
- May not arrange for follow-up visit with a Behavioral Health Specialist prior to discharge
- May not work with the hospital discharge planner to arrange for follow-up care

Interventions Implemented to Address Identified Barriers:

Members:
- Information on mental health issues is available on the bcbsil.com website:
  - BeSmart. BeWell®
  - Personal Health Manager
Physician:
- BCBSIL performed QI site visits for newly identified Behavioral Health Specialists.
- BCBSIL posted "Tips for Improving IPA Follow-Up After Hospitalization for Mental Illness Rate" on the BCBSIL Provider website.
- BCBSIL posted a sample letter on the BCBSIL Provider website for IPA use to educate members on the importance of follow-up treatment after hospitalization for mental illness.

IPAs:
- IPAs received a QI Fund payment for the 2009 project results that met or exceeded the established thresholds.
- IPAs received a patient-specific report with their 2009 Follow-Up After Hospitalization For Mental Illness QI Fund Project results and feedback was provided.
- BCBSIL included the Follow-Up After Hospitalization for Mental Illness QI Fund Project in the Blue StarSM Medical Group Report.
- As part of the BCBSIL HMO Utilization Management oversight, the nurse liaison audited HMO IPA case file documentation for mental health admissions and follow-up within 7 days. Feedback was provided to the IPAs for this indicator.
- The QI Department conducted HMO QI Fund Training in February 2010 and held quarterly QI Forums.
  - BCBSIL conducted individual IPA training as requested.
  - BCBSIL nurses conducted ongoing training for all IPAs during data collection for the project.

Analysis of the results for the 2010 Follow-Up after Hospitalization for Mental Illness QI Fund Project shows the QI Fund Project and the interventions implemented have had a positive effect on the 7-day follow-up rate. The goal for the 7-day follow-up rate of ≥75% was met.