



## Procedure Codes Allowed for the HEDIS® Follow-up After Hospitalization for Mental Illness (FUH) Measure

<b>Codes that do <u>not</u> require a mental health practitioner, mental health diagnosis or a place of service code</b>	<b><u>Behavioral Healthcare Setting:</u></b> REV: 0513, 0900-0905, 0907, 0911-0917, 0919, 1001 <b><u>Intensive outpatient or partial hospitalization:</u></b> REV: 905, 907, 912, 913; HCPC: G0410, G0411, H0035, H2001, H2012, S0201, S9480, S9484, S9485 <b><u>Psychiatric Collaborative Care Management:</u></b> CPT: 99492, 99493, 99494; HCPCS: G0512 <b><u>Residential Behavioral Health Treatment:</u></b> HCPC: H0017, H0018, H0019, T2048			
<b>Codes that require a mental health provider OR a mental health diagnosis OR place of service 53 (CMHC)</b>	<b><u>Behavioral health outpatient visit with a mental health provider OR with any diagnosis of mental health disorder:</u></b> REV: 0510, 0515-0517, 0519-0523, 0526-0529, 0982, 0983 NOTE: (0513, 900, 902, 903, 904, 911, 914, 915, 916, 917, 919: does not require POS or mental health provider)  CPT: 98960-98962, 99078, 99202-99205, 99211-99215, 99242-99245, 99341, 99342, 99344, 99345, 99347-99350, 99381-99387, 99391-99397, 99401-99404, 99411, 99412, 99483, 99492-99494, 99510  HCPC: G0155, G0176, G0177, G0409, G0463, G0512, H0002, H0004, H0031, H0034, H0036, H0037, H0039, H0040, H2000, H2010, H2011, H2013-H2020, T1015  <b><u>Transitional Care Management Services:</u></b> CPT: 99495, 99496			
<b>Codes that require place of service</b>	<b><u>Electroconvulsive Therapy (ECT):</u></b> CPT: 90870; ICD-10PCS: GZB0ZZZ, GZB1ZZZ, GZB2ZZZ, GZB3ZZZ, GZB4ZZZ <b><u>AND (Outpatient Place of Service Codes*, or POS 24, 52 or 53)</u></b>			
	<b><u>*Outpatient visit with a mental health provider OR with any diagnosis of mental health disorder:</u></b> CPT: 90791, 90792, 90832-90834, 90836-90840, 90845, 90847, 90849, 90853, 90875, 90876, 99221-99223, 99231-99233, 99238, 99239, 99252-99255 <b><u>AND with the appropriate service code (Outpatient Place of Service Codes*, or POS 2, 10, 52, 53 or 56)</u></b>			
<b>Codes that require a mental health diagnosis</b>	<b><u>Peer Support Services</u></b> HCPC: G0140, G0177, H0024, H0025, H0038, H0039, H0040, H0046, H2014, H2023, S9445; T1012, T1016  <b><u>Telephone Visits:</u></b> CPT: 98966-98968, 99441-99443 (Note: these codes are for existing patients who initiate calls to provider)			
<b>*Outpatient Place of Service Codes:</b>			<b>Other Place of Service Codes:</b>	
<b>03</b> School	<b>14</b> Group Home	<b>22</b> On-campus outpatient hospital	<b>2</b> Telehealth provided other than in patient's home	
<b>05</b> Indian health service free-standing facility	<b>15</b> Mobile Unit	<b>33</b> Custodial care facility	<b>10</b> Telehealth provided in patient's home	
<b>07</b> Tribal 638 free-standing facility	<b>16</b> Temporary lodging	<b>49</b> Independent clinic	<b>24</b> Ambulatory surgical center	
<b>09</b> Prison/correctional facility	<b>17</b> Walk-in retail health clinic	<b>50</b> Federally qualified health center	<b>52</b> Psychiatric facility – partial hospitalization	
<b>11</b> Office	<b>18</b> Place of employment – worksite	<b>71</b> Public health clinic	<b>53</b> Community Mental Health Center	
<b>12</b> Home	<b>19</b> Off-campus outpatient hospital	<b>72</b> Rural health clinic	<b>56</b> Psychiatric residential treatment center	
<b>13</b> Assisted living facility	<b>20</b> Urgent care facility			