

# Mental Health Service Jawda Guidance

## Version 3

## **Table of Contents**

Executive Summary	3
About this Guidance	4
Glossary	5
MH Performance Indicators	6
Unplanned Readmissions for Mental Health Disorders	6
Mortality Rate Within 30 Days After Discharge	7
Follow-Up Appointment After Inpatient Hospitalization for Mental Health Disorders	8
Follow-Up visit After inpatient Hospitalization for mental health disorders	9
Rate of Inpatient Falls Resulting in Any Injury Per 1,000 Mental Health Disorder Inpatient Days	10
Percentage of Patients with Completed Investigation Before Initiating the Lithium Therapy	11
Percentage of Patients with Completed Assessment and Investigation Before Initiating the Clozapine Treatment	12
Rate of Seclusion	13
Hours of physical restraint use	14
Average length of acute inpatient stay	15
Appendix A – ICD10-2021 Codes Mental Health	16
Summary of Revisions 2025	18

#### **Executive Summary**

The Department of Health– Abu Dhabi (DOH) is the regulatory body of the healthcare sector in the Emirate of Abu Dhabi and ensures excellence in healthcare for the community by monitoring the health status of its population.

The Emirate of Abu Dhabi is experiencing a substantial growth in the number of hospitals, centers and clinics. This is ranging from school clinics and mobile units to internationally renowned specialist and tertiary academic centers. Although, access and quality of care has improved dramatically over the last couple of decades, mirroring the economic upturn and population boom of the Abu Dhabi Emirate, however challenges remain in addressing further improvements.

The main challenges that are presented with increasingly dynamic population include an aging population with increased expectation for treatment, utilization of technology and diverse workforce leading to increased complexity of healthcare provision in Abu Dhabi. All of this results in an increased and inherent risk to quality and patient safety.

DOH has developed dynamic and comprehensive quality framework in order to bring about improvements across the health sector. This guidance relates to the quality indicators that DOH is mandating the quarterly reporting against by the operating general and specialist hospitals in Abu Dhabi.

The guidance sets out the full definition and method of calculation for patient safety and clinical effectiveness indicators. For enquiries about this guidance, please contact jawda@doh.gov.ae

This document is subject for review and therefore it is advisable to utilize online versions available on the DOH website at all times.

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Effective From: Q1 2025 Version 3

#### About this Guidance

The guidance sets out the definitions and reporting frequency of JAWDA mental health performance indicators. Department of Health (DoH) with consultation of local and international Mental Health treatment quality of care expertise developed mental health performance indicators that are aimed for assessing the degree to which a provider competently and safely delivers the appropriate clinical services to the patient within the optimal time period.

The mental health performance indictors in this guidance include measures to monitor clinical effectiveness, and outcomes among patients with mental health I.e., (readmission, ... Healthcare providers are the most qualified professionals to develop and evaluate quality of care measures for Mental Health treatment. Therefore, it is crucial that clinicians retain a leadership position in defining mental health quality of care.

#### Who is this guidance for?

All DoH licensed healthcare facilities providing mental health treatment in the Emirate of Abu Dhabi.

#### How do I follow this guidance?

Each provider will nominate one member of staff to coordinate, collect, monitor and report mental health quality performance indicators data as per communicated dates. The nominated healthcare facility lead must in the first instance e-mail their contact details (if different from previous submission) to <u>jawda@doh.gov.ae</u> and submit the required quarterly quality performance indicators through Jawda online portal.

#### What are the Regulation related to this guidance?

- Legislation establishing the Health Sector
- DOH Standard for Mental Health Services and Treatment
- As per DoH Policy for Quality and Patient Safety issued January 15th 2017, this guidance applies to all DOH Licensed Hospital Healthcare Facilities in the Emirate of Abu Dhabi in accordance with the requirements set out in this Standard.

#### Glossary

**INPATIENT:** Is a beneficiary registered and admitted to a hospital for bed occupancy for purposes of receiving healthcare services and is medically expected to remain confined overnight and for a period in excess of 12 consecutive hours.

- Daycase admission is not included in INPATIENT.
- Beds *excluded* from the inpatient bed complement:
  - Beds/cots for healthy newborns
  - Beds in Day Care units, such as surgical, medical, pediatric day care, interventional radiology
  - o Beds in Dialysis units
  - Beds in Labor Suites (e.g. birthday beds, birthing chairs)
  - Beds in Operating Theatre
  - Temporary beds such as stretchers
  - Chairs, Cots or Beds used to accommodate sitters, parents, guardians accompanying patients or sick children and healthy baby accompanying a hospitalized breast-feeding mother
  - Beds closed during renovation of patient care areas when approved by the competent authority

**DAYCASE**: Daycase beds, also known as observation beds, are beds used in Day Care units such as surgical, medical, pediatric day care interventional radiology. They are not included in the inpatient bed complement.

**LONG TERM CARE PATIENTS**: They will be reported under LTCF Jawda Guidance. *Service codes (not limited to)*: 17-13, 17-14, 17-15, 17-16, 17-27, 17-28, 17-30, 17-31, self-pay LTC, etc.

**CRITICAL CARE AREA:** A patient is in a Critical Care Area if they are receiving active cardiac monitoring (including telemetry) in an Intensive Care Unit, Emergency Room, Urgent Care Centre, Operating Room, Procedure Room, Anesthetic Induction Room or Recovery Area.

#### **MH Performance Indicators**

Type: MH Quality Indica	tor Number: MH001
KPI Description (title):	Unplanned Readmissions for Mental Health Disorders
Domain	Effectiveness
Indicator Type	Outcome
Definition:	Percentage of psychiatric (mental health or addiction) discharges that are followed within 28 days by another mental health or addiction hospital admission.
	<ul> <li>Numerator: Total number of inpatients (all ages) who had another admission to the same or another mental health facility within 28 days from index discharge.</li> <li>Numerator Exclusion: If a patient has more than one</li> </ul>
	readmission within 28 days of discharge from the index admission, only the first is considered as readmission
Calculation:	<b>Denominator:</b> Total number of inpatients (all ages) who were discharged after a mental care/ addiction (primary diagnosis) inpatient admission during the reporting period.
	<ul> <li>Denominator Exclusion:</li> <li>Discharged against medical advice</li> <li>Patients transferred to another acute inpatient hospital or psychiatric inpatient hospital</li> <li>Police Cases</li> <li>Readmissions within 28 days from the index discharge</li> <li>Calculation: Numerator/denominator *100</li> </ul>
	Calculation. Numerator/denominator 100
<b>Reporting Frequency:</b>	Quarterly
Unit of Measure:	Percentage
International	Australian Institute for Health and Welfare
comparison if available	Mental health services in Australia, Summary of Key
	<u>Performance Indicators - Australian Institute of Health and</u> <u>Welfare (aihw.gov.au)</u>
Desired direction:	Lower is better
	Notes for all facilities
Data Source/ Report Name:	Administrative and medical records numbers (or unique
Name	patient identifier)

KPI Description (title):	Mortality Rate Within 30 Days After Discharge.
Domain	Effectiveness
Indicator Type	Outcome
Definition:	Percentage of adult inpatients who died, from any cause, within 30 days of discharge from mental health facility
Calculation:	<ul> <li>Numerator: Patients that died, from any cause, within 30-days of mental health facility discharge.</li> <li>Denominator: Total adult (≥ 18 years) inpatients discharged alive from mental health facility during the reporting period. (If a patient has more than one admission in the reporting quarter, only include the last discharge encounter.)</li> <li>Denominator Exclusion: <ul> <li>Discharged against medical advice</li> <li>Patients transferred to another acute or psychiatric inpatient hospital.</li> <li>Police Cases</li> </ul> </li> </ul>
	Calculation; Numerator/denominator *100
<b>Reporting Frequency:</b>	Quarterly
Unit of Measure:	Percentage
International comparison if available	CMS <u>https://www.cms.gov/files/document/draft-</u> <u>specification-30-day-risk-standardized-all-cause-</u> <u>mortality-following-ipf-discharge-measure.pdf</u>
Desired direction:	Lower is better
	Notes for all facilities
Data Source/ Report Name:	Administrative and medical records numbers (or unique patient identifier)

KPI Description (title):	Follow-Up Appointment After Inpatient Hospitalization for Mental Health Disorders
Domain	Patient-centeredness
Indicator Type	Process
Definition:	The percentage of discharged inpatients after inpatient psychiatric hospitalization, who were offered a follow-up appointment with a mental health practitioner within 9 days of discharge.
Calculation:	<ul> <li>Numerator 1: Number of discharges for inpatients (all ages) who were hospitalized for treatment of mental health or addiction as a principal diagnosis and who had a follow-up appointment with a mental health practitioner within 9 days of discharge.</li> <li>Denominator 1: Total number of inpatients (all ages) discharged from mental health facility or addiction as a principal diagnosis during the reporting period.</li> <li>Guidance: Patients getting discharged from inpatient psychiatric facility to PAR \ Acute care setting in the same facility are included in the discharged against medical advice</li> <li>Patients transferred to another acute or psychiatric inpatient hospital</li> <li>Patient refuses to follow up in the same facility</li> <li>Repatriated, discharged directly to airport.</li> <li>Discharged Police Cases who follow up with a psychiatrist in the prison</li> <li>Patients who are not eligible for ABM coverage or insurance coverage.</li> <li>Patients referred for Home Mental health Services</li> <li>Calculation: Numerator/denominator *100</li> </ul>
<b>Reporting Frequency:</b>	Quarterly
Unit of Measure:	Percentage
International comparison if available	Australian Institute for Health and Welfare
Desired direction:	High is better
	Notes for all facilities
Data Source/ Report Name:	<ul> <li>Administrative and medical records numbers (or unique patient identifier)</li> </ul>

KPI Description (title):	Follow-Up visit After inpatient Hospitalization for mental health disorders
Domain	Patient-centeredness
Indicator Type	Process
Definition:	The percentage of discharged inpatients after inpatient psychiatric hospitalizations who are seen by mental health practitioners within 9 days after discharge (physically or virtually).
Calculation:	<ul> <li>Numerator 2: Number of discharged patients after inpatients psychiatric hospitalization who are seen by mental health practitioners within 9 days after discharge (physically or virtually)</li> <li>Denominator 2: Total number of patients who offered appointment to outpatient mental health practitioner within 9 days of discharge.</li> <li>Guidance: Patients getting discharged from inpatient psychiatric facility to PAR \ Acute care setting in the same facility are included in the discharged population</li> <li>Denominator Exclusion: <ul> <li>Discharged against medical advice</li> <li>Patients transferred to another acute inpatient or psychiatric inpatient hospital</li> <li>Patient refuses to follow up in the same facility</li> <li>Repatriated, discharged directly to airport.</li> <li>Discharged Police Cases who follow up with a psychiatrist in the prison</li> <li>Patients who are not eligible for ABM coverage or insurance coverage</li> <li>Patients who choose to wait longer than 9 days for their follow up appointment</li> <li>Patients referred for Home Mental health Services</li> </ul> </li> </ul>
<b>Reporting Frequency:</b>	Quarterly
Unit of Measure:	Percentage
International comparison if available	Australian Institute for Health and Welfare
Desired direction:	High is better
	Notes for all facilities
Data Source/ Report Name:	- Administrative and medical records numbers (or unique patient identifier)

## Mental Health Service Performance Indicators

## Type: MH Quality Indicator

KPI Description (title):	Rate of Inpatient Falls Resulting in Any Injury Per 1,000 Mental Health Disorder Inpatient Days
Domain	Safety
Indicator Type	Outcome
Definition:	Rate of mental health and addiction inpatient falls resulting in any injury per 1000 mental health and addiction inpatient days.
Calculation:	<b>Numerator:</b> Total number of mental health and addiction inpatient falls resulting in injury (minor, moderate, major, or death) to the patient in the measurement quarter
	Numerator Inclusions: Mental health and addiction Inpatients in a mental health facility falls: minor, moderate, major, or death.A fall is an unplanned descent to the floor. Include falls when a patient lands on a surface where you wouldn't expect to find a patient.All unassisted and assisted falls are to be included whether they 
	<ul> <li>The National Database of Nursing Quality Indicators NDNQI definitions for injury follow: <ul> <li>None -patient had no injuries (no signs or symptoms) resulting from the fall, if an x-ray, CT scan or other post fall evaluation results in a finding of no injury.</li> <li>"Minor- resulted in application of a dressing, ice, cleaning of a wound, limb elevation, topical medication, bruise or abrasion.</li> <li>Moderate-resulted in suturing, application of steri-strips/skin glue, splinting or muscle/joint strain.</li> <li>Major- resulted in surgery, casting, traction, required consultation for neurological (basilar skull fracture, small subdural hematoma) or internal injury (rib fracture, small liver laceration) or patients with coagulopathy who receive blood products as a result of the fall.</li> <li>Death-the patient died as a result of injuries sustained from the fall (not from physiologic events causing the fall)."</li> </ul> </li> </ul>
	Patient falls, but no harm was evident          Denominator:         Total number of mental health and addiction inpatients days for the mental health facility during the reporting period.         Denominator Exclusion:         • Healthy newborn (See glossary)
	<ul> <li>Specialized and Generalized hospitals</li> <li>All Long-term care, home care and Post-acute Rehab patients</li> <li>Rate: Calculation: [numerator / denominator] x 1000</li> </ul>
Reporting Frequency:	Quarterly
Unit of Measure:	Rate per 1000 mental health and addiction inpatient days
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## Mental Health Service Performance Indicators

International comparison if available	Developed locally by modifying similar indicators used by AHRQ, OECD and CQC following local discussion and taking local culture and setting into consideration.
Desired direction:	Lower is better
Notes for all facilities	
Data Source/ Report Name:	- Administrative and medical records numbers (or unique patient identifier).

#### Type: MH Quality Indicator

KPI Description (title):	Percentage of Patients with Completed Investigation Before Initiating the Lithium Therapy
Domain	Effectiveness
Indicator Type	Process
Definition:	The percentage of patients ≥ 18 years of age with confirmed completed investigations within 28 days. prior to commencing Lithium Treatment.
<b>Calculation</b> :	<ul> <li>Numerator: Number of patients ≥ 18 years of age who completed their basic investigations within 28 days before commencing lithium treatment.</li> <li>Basic investigations: <ul> <li>Cardiac function (ECG recommended in those with risk factors or existing problems)</li> <li>Renal Function Tests (Urea, creatinine and eGFR)</li> <li>Thyroid Function Tests</li> <li>Calcium</li> <li>Full blood count</li> </ul> </li> <li>Denominator: Total number of patients commencing Lithium Treatment in the same reporting period</li> <li>Denominator Inclusion: <ul> <li>Inpatient.</li> <li>Outpatient</li> </ul> </li> <li>Denominator Exclusion: Pregnancy confirmed by the lab.</li> </ul>
Reporting Frequency:	Quarterly
Unit of Measure:	Percentage
International comparison if available	Developed locally by modifying similar indicators used by The NICE guidelines
Desired direction:	100 %
	Notes for all facilities
Data Source/ Report Name:	Administrative and medical records numbers (or unique patient identifier)

KPI Description (title):	Percentage of Patients with Completed Assessment and Investigation Before Initiating the Clozapine Treatment
Domain	Effectiveness
Indicator Type	Process
Definition:	The percentage of patients with confirmed completed investigations within 28 days prior to commencing Clozapine Treatment.
Calculation:	<ul> <li>Numerator: Number of patients completing basic investigations within 28 days before commencing Clozapine Treatment.</li> <li>Basic investigations: <ul> <li>Complete blood count that includes an absolute neutrophil count (ANC)</li> <li>Fasting blood sugar (or HbA1c)</li> <li>Electrocardiogram</li> <li>Fasting lipids</li> <li>Pregnancy test in women of childbearing age</li> </ul> </li> <li>Denominator: Total number of patients in mental health facility commencing Clozapine Treatment in the same reporting period.</li> <li>Denominator Inclusion: <ul> <li>Inpatient.</li> <li>Outpatient</li> </ul> </li> </ul>
<b>Reporting Frequency:</b>	Quarterly
Unit of Measure:	Percentage
International comparison if available	Developed locally by modifying similar indicators used by the NICE guidelines
Desired direction:	100%
	Notes for all facilities
Data Source/ Report Name:	Administrative and medical records numbers (or unique patient identifier)

## Mental Health Service Performance Indicators

## Type: MH Quality Indicator

KPI Description (title):	Rate of Seclusion
Domain	Effectiveness
Indicator Type	Process
Definition:	The number of seclusion events per 1,000 inpatient days within mental health facility
Calculation:	<ul> <li>Numerator: Count number of seclusion events occurring in mental health facility during the reporting period.</li> <li>Denominator: Total number of mental health inpatients' days for the same reporting period. </li> <li>Calculation: (Numerator ÷ Denominator) x 1,000</li> </ul>
<b>Reporting Frequency:</b>	Quarterly
Unit of Measure:	Rate per 1000 mental health inpatient days.
International comparison if available	Australian institute of health and welfare https://www.aihw.gov.au/reports/mental-health- services/mental-health-services-in-australia/report- contents/mental-health-indicators/summary-of-key- performance-indicators
Desired direction:	Lower is better
	Notes for all facilities
Data Source/ Report Name:	- Administrative and medical records numbers (or unique patient identifier).

KPI Description (title):	Hours of physical restraint use
Domain	Effectiveness
Indicator Type	Process
Definition:	The total number of hours that all inpatients admitted to a hospital-based inpatient psychiatric setting were maintained in physical restraint
Calculation:	Numerator:Total number of hours that all psychiatric inpatients were maintained in physical restraintDenominator: Number of psychiatric inpatient days (in hours) in a mental health facilityCalculation: (Numerator ÷ Denominator) x 1,000
Reporting Frequency:	Quarterly
Unit of Measure:	Per 1,000 hours
International comparison if available	https://manual.jointcommission.org/releases/TJC2019A/MIF0 117.html
Desired direction:	Lower is better
Notes for all facilities	
Data Source/ Report Name:	<ul> <li>Administrative and medical records numbers (or unique patient identifier).</li> </ul>

KPI Description (title):	Average length of acute inpatient stay
Domain	Effectiveness
Indicator Type	Process
Definition:	Average length of acute inpatient stay within mental health facility
Calculation:	<ul> <li>Numerator: Total number of inpatient days in the mental health facility's acute psychiatric inpatient unit(s) during the reference period.</li> <li>Length of stay is measured in patient days. A same-day patient is allocated a length of stay of one patient day. (Discharge date and time – Admission date and time (day-day)</li> <li>Denominator: Total number of discharged inpatients in mental health facility</li> <li>Denominator Exclusion:         <ul> <li>Discharge against medical advice</li> <li>Patient transfer to another acute or psychiatric inpatient hospital.</li> <li>Discharged Police Cases who follow up with a</li> </ul> </li> </ul>
Reporting Frequency:	psychiatrist in the prison. Quarterly
Unit of Measure:	Days
International comparison if available	Australian institute of health and welfare <u>https://www.aihw.gov.au/reports/mental-health-</u> <u>services/mental-health-services-in-australia/report-</u> <u>contents/mental-health-indicators/summary-of-key-</u> <u>performance-indicators</u>
Desired direction:	
Notes for all facilities	
Data Source/ Report Name:	<ul> <li>Administrative and medical records numbers (or unique patient identifier).</li> </ul>

	1	1	1	1				
F01.50	F11.14	F13.151	F14.951	F16.950	F19.20	F31.72	F44.7	F65.1
F01.51	F11.150	F13.159	F14.959	F16.951	F19.21	F31.73	F44.81	F65.2
F02.80	F11.151	F13.180	F14.980	F16.959	F19.220	F31.74	F44.89	F65.3
F02.81	F11.159	F13.181	F14.981	F16.980	F19.221	F31.75	F44.9	F65.4
F03.90	F11.181	F13.182	F14.982	F16.983	F19.222	F31.76	F45.0	F65.50
F03.91	F11.182	F13.188	F14.988	F16.988	F19.229	F31.77	F45.1	F65.51
F04.	F11.188	F13.19	F14.99	F16.99	F19.230	F31.78	F45.20	F65.52
F05.	F11.19	F13.20	F15.10	F17.200	F19.231	F31.81	F45.21	F65.81
F06.0	F11.20	F13.21	F15.11	F17.201	F19.232	F31.89	F45.22	F65.89
F06.1	F11.21	F13.220	F15.120	F17.203	F19.239	F31.9	F45.29	F65.9
F06.2	F11.220	F13.221	F15.121	F17.208	F19.24	F32.0	F45.41	F66.
F06.30	F11.221	F13.229	F15.122	F17.209	F19.250	F32.1	F45.42	F68.10
F06.31	F11.222	F13.230	F15.129	F17.210	F19.251	F32.2	F45.8	F68.11
F06.32	F11.229	F13.231	F15.13	F17.211	F19.259	F32.3	F45.9	F68.12
F06.33	F11.23	F13.232	F15.14	F17.213	F19.26	F32.4	F48.1	F68.13
F06.34	F11.24	F13.239	F15.150	F17.218	F19.27	F32.5	F48.2	F68.8
F06.4	F11.250	F13.24	F15.151	F17.219	F19.280	F32.81	F48.8	F68.A
F06.8	F11.251	F13.250	F15.159	F17.220	F19.281	F32.89	F48.9	F69.
F07.0	F11.259	F13.251	F15.180	F17.221	F19.282	F32.9	F50.00	F70.
F07.81	F11.281	F13.259	F15.181	F17.223	F19.288	F33.0	F50.01	F71.
F07.89	F11.282	F13.26	F15.182	F17.228	F19.29	F33.1	F50.02	F72.
F07.9	F11.288	F13.27	F15.188	F17.229	F19.90	F33.2	F50.2	F73.
F09.	F11.29	F13.280	F15.19	F17.290	F19.920	F33.3	F50.81	F78.
F10.10	F11.90	F13.281	F15.20	F17.291	F19.921	F33.40	F50.82	F79.
F10.11	F11.920	F13.282	F15.21	F17.293	F19.922	F33.41	F50.89	F80.0
F10.120	F11.921	F13.288	F15.220	F17.298	F19.929	F33.42	F50.9	F80.1
F10.121	F11.922	F13.29	F15.221	F17.299	F19.930	F33.8	F51.01	F80.2
F10.129	F11.929	F13.90	F15.222	F18.10	F19.931	F33.9	F51.02	F80.4
F10.130	F11.93	F13.920	F15.229	F18.11	F19.932	F34.0	F51.03	F80.81
F10.131	F11.94	F13.921	F15.23	F18.120	F19.939	F34.1	F51.04	F80.82
F10.132	F11.950	F13.929	F15.24	F18.121	F19.94	F34.81	F51.05	F80.89
F10.139	F11.951	F13.930	F15.250	F18.129	F19.950	F34.89	F51.09	F80.9
F10.14	F11.959	F13.931	F15.251	F18.14	F19.951	F34.9	F51.11	F81.0
F10.150	F11.981	F13.932	F15.259	F18.150	F19.959	F39.	F51.12	F81.2
F10.151	F11.982	F13.939	F15.280	F18.151	F19.96	F40.00	F51.13	F81.81
F10.159	F11.988	F13.94	F15.281	F18.159	F19.97	F40.01	F51.19	F81.89
F10.180	F11.99	F13.950	F15.282	F18.17	F19.980	F40.02	F51.3	F81.9
F10.181	F12.10	F13.951	F15.288	F18.180	F19.981	F40.10	F51.4	F82.
F10.182	F12.11	F13.959	F15.29	F18.188	F19.982	F40.11	F51.5	F84.0
F10.188	F12.120	F13.96	F15.90	F18.19	F19.988	F40.210	F51.8	F84.2
F10.19	F12.121	F13.97	F15.920	F18.20	F19.99	F40.218	F51.9	F84.3
F10.20	F12.122	F13.980	F15.921	F18.21	F20.0	F40.220	F52.0	F84.5
F10.21	F12.129	F13.981	F15.922	F18.220	F20.1	F40.228	F52.1	F84.8
F10.220	F12.13	F13.982	F15.929	F18.221	F20.2	F40.230	F52.21	F84.9
. 10.220		1 10.002	1 10:020	1 101221	. 20.2			10410

Appendix A – ICD10-2021 Codes Mental Health

Mental Health Service Performance Indicators

F10.221F12.150F13.988F15.93F18.229F20.3F40.231F52.22F88.F10.229F12.151F13.99F15.94F18.24F20.5F40.232F52.31F89.F10.230F12.159F14.10F15.950F18.250F20.81F40.233F52.32F90.0F10.231F12.180F14.11F15.951F18.251F20.89F40.240F52.4F90.1F10.232F12.188F14.120F15.959F18.259F20.9F40.241F52.5F90.2F10.232F12.19F14.121F15.959F18.257F21.F40.242F52.6F90.2F10.239F12.19F14.121F15.980F18.27F21.F40.242F52.6F90.2F10.24F12.20F14.122F15.981F18.280F22.F40.243F52.8F90.2F10.250F12.21F14.129F15.982F18.288F23.F40.248F52.9F91.0F10.251F12.220F14.13F15.988F18.29F24.F40.290F53.0F91.2F10.259F12.221F14.14F15.99F18.90F25.0F40.291F53.1F91.2F10.26F12.222F14.150F16.10F18.920F25.1F40.298F54.F91.3F10.26F12.23F14.159F16.120F18.929F25.9F40.8F55.0F91.8F10.280F12.23F14.159F16.120F18.929F25.9F40.9F55.1F91.9F
F10.230F12.159F14.10F15.950F18.250F20.81F40.233F52.32F90.0F10.231F12.180F14.11F15.951F18.251F20.89F40.240F52.4F90.1F10.232F12.188F14.120F15.959F18.259F20.9F40.241F52.5F90.2F10.239F12.19F14.121F15.980F18.27F21.F40.242F52.6F90.8F10.24F12.20F14.122F15.981F18.280F22.F40.243F52.8F90.9F10.250F12.21F14.129F15.982F18.288F23.F40.248F52.9F91.0F10.251F12.220F14.13F15.988F18.29F24.F40.290F53.0F91.2F10.259F12.221F14.14F15.99F18.90F25.0F40.291F53.1F91.2F10.26F12.222F14.150F16.10F18.920F25.1F40.298F54.F91.3F10.27F12.229F14.151F16.11F18.921F25.8F40.8F55.0F91.8F10.280F12.23F14.159F16.120F18.929F25.9F40.9F55.1F91.8F10.280F12.23F14.159F16.120F18.929F25.9F40.9F55.1F91.8F10.280F12.23F14.159F16.120F18.929F25.9F40.9F55.1F91.8F10.280F12.23F14.159F16.120F18.929F25.9F40.9F55.1F91.8F10.
F10.231F12.180F14.11F15.951F18.251F20.89F40.240F52.4F90.1F10.232F12.188F14.120F15.959F18.259F20.9F40.241F52.5F90.2F10.239F12.19F14.121F15.980F18.27F21.F40.242F52.6F90.8F10.24F12.20F14.122F15.981F18.280F22.F40.243F52.8F90.9F10.250F12.21F14.129F15.982F18.288F23.F40.248F52.9F91.0F10.251F12.220F14.13F15.988F18.29F24.F40.290F53.0F91.2F10.259F12.221F14.14F15.99F18.90F25.0F40.291F53.1F91.2F10.26F12.222F14.150F16.10F18.920F25.1F40.298F54.F91.3F10.27F12.229F14.151F16.11F18.921F25.8F40.9F55.1F91.8F10.280F12.23F14.159F16.120F18.929F25.9F40.9F55.1F91.8
F10.232F12.188F14.120F15.959F18.259F20.9F40.241F52.5F90.2F10.239F12.19F14.121F15.980F18.27F21.F40.242F52.6F90.8F10.24F12.20F14.122F15.981F18.280F22.F40.243F52.8F90.8F10.250F12.21F14.129F15.982F18.288F23.F40.248F52.9F91.0F10.251F12.220F14.13F15.988F18.29F24.F40.290F53.0F91.1F10.259F12.221F14.14F15.99F18.90F25.0F40.291F53.1F91.2F10.26F12.222F14.150F16.10F18.920F25.1F40.298F54.F91.3F10.27F12.229F14.151F16.11F18.921F25.8F40.8F55.0F91.8F10.280F12.23F14.159F16.120F18.929F25.9F40.9F55.1F91.8
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F10.250F12.21F14.129F15.982F18.288F23.F40.248F52.9F91.0F10.251F12.220F14.13F15.988F18.29F24.F40.290F53.0F91.1F10.259F12.221F14.14F15.99F18.90F25.0F40.291F53.1F91.2F10.26F12.222F14.150F16.10F18.920F25.1F40.298F54.F91.3F10.27F12.229F14.151F16.11F18.921F25.8F40.8F55.0F91.8F10.280F12.23F14.159F16.120F18.929F25.9F40.9F55.1F91.8
F10.251F12.220F14.13F15.988F18.29F24.F40.290F53.0F91.1F10.259F12.221F14.14F15.99F18.90F25.0F40.291F53.1F91.2F10.26F12.222F14.150F16.10F18.920F25.1F40.298F54.F91.3F10.27F12.229F14.151F16.11F18.921F25.8F40.8F55.0F91.8F10.280F12.23F14.159F16.120F18.929F25.9F40.9F55.1F91.8
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F10.26F12.222F14.150F16.10F18.920F25.1F40.298F54.F91.3F10.27F12.229F14.151F16.11F18.921F25.8F40.8F55.0F91.8F10.280F12.23F14.159F16.120F18.929F25.9F40.9F55.1F91.8
F10.27F12.229F14.151F16.11F18.921F25.8F40.8F55.0F91.8F10.280F12.23F14.159F16.120F18.929F25.9F40.9F55.1F91.8
F10.280         F12.23         F14.159         F16.120         F18.929         F25.9         F40.9         F55.1         F91.9
E10 281 E12 250 E14 180 E16 121 E18 04 E28 E41 0 E55 2 E02 0
10.201   12.200   14.100   10.121   10.34   120.   141.0   155.2   193.0
F10.282 F12.251 F14.181 F16.122 F18.950 F29. F41.1 F55.3 F93.8
F10.288 F12.259 F14.182 F16.129 F18.951 F30.10 F41.3 F55.4 F93.9
F10.29 F12.280 F14.188 F16.14 F18.959 F30.11 F41.8 F55.8 F94.0
F10.920 F12.288 F14.19 F16.150 F18.97 F30.12 F41.9 F59. F94.1
F10.921 F12.29 F14.20 F16.151 F18.980 F30.13 F42.2 F60.0 F94.2
F10.929 F12.90 F14.21 F16.159 F18.988 F30.2 F42.3 F60.1 F94.8
F10.930 F12.920 F14.220 F16.180 F18.99 F30.3 F42.4 F60.2 F94.9
F10.931 F12.921 F14.221 F16.183 F19.10 F30.4 F42.8 F60.3 F95.0
F10.932 F12.922 F14.222 F16.188 F19.11 F30.8 F42.9 F60.4 F95.1
F10.939         F12.929         F14.229         F16.19         F19.120         F30.9         F43.0         F60.5         F95.2
F10.94         F12.93         F14.23         F16.20         F19.121         F31.0         F43.10         F60.6         F95.8
F10.950         F12.950         F14.24         F16.21         F19.122         F31.10         F43.11         F60.7         F95.9
F10.951         F12.951         F14.250         F16.220         F19.129         F31.11         F43.12         F60.81         F98.0
F10.959         F12.959         F14.251         F16.221         F19.130         F31.12         F43.20         F60.89         F98.1
F10.96         F12.980         F14.259         F16.229         F19.131         F31.13         F43.21         F60.9         F98.2
F10.97         F12.988         F14.280         F16.24         F19.132         F31.2         F43.22         F63.0         F98.23
F10.980         F12.99         F14.281         F16.250         F19.139         F31.30         F43.23         F63.1         F98.33
F10.981         F13.10         F14.282         F16.251         F19.14         F31.31         F43.24         F63.2         F98.4
F10.982         F13.11         F14.288         F16.259         F19.150         F31.32         F43.25         F63.3         F98.5
F10.988         F13.120         F14.29         F16.280         F19.151         F31.4         F43.29         F63.81         F98.8
F10.99         F13.121         F14.90         F16.283         F19.159         F31.5         F43.8         F63.89         F98.9
F11.10         F13.129         F14.920         F16.288         F19.16         F31.60         F43.9         F63.9         F99
F11.11         F13.130         F14.921         F16.29         F19.17         F31.61         F44.0         F64.0
F11.120         F13.131         F14.922         F16.90         F19.180         F31.62         F44.1         F64.1
F11.121         F13.132         F14.929         F16.920         F19.181         F31.63         F44.2         F64.2
F11.122         F13.139         F14.93         F16.921         F19.182         F31.64         F44.4         F64.8
F11.129         F13.14         F14.94         F16.929         F19.188         F31.70         F44.5         F64.9
F11.13         F13.150         F14.950         F16.94         F19.19         F31.71         F44.6         F65.0

KPI #	Changes			
Glossary	Added Glossary in page 5			
MH001-MH010	<ul> <li>Added numerator exclusion: If a patient has more than one readmission within 28 days of discharge from the index admission, only the first is considered as readmission</li> <li>Added all numerator and denominator definitions "inpatient"</li> </ul>			
MH003-MH004	<ul> <li>Added denominator Guidance.</li> <li>Added in the denominator exclusions: Patients who choose to wait longer than 9 days for their follow up appointment Patients referred for Home Mental health Services</li> </ul>			
MH006	<ul> <li>Change the numerator exclusion to denominator exclusion:</li> <li>Pregnancy confirmed by the lab.</li> </ul>			
MH010	Added denominator exclusion: Discharged Police Cases who follow up with a psychiatrist in the prison			
APPENDIX A	Updated Appendix A codes to new 2021 ICD-10 CM code set.			
APPENDIX B	Removed			

## Summary of Revisions 2025