

Depression Screening and Follow-Up for Adolescents and Adults (DSF-E)

The percentage of members 12 years of age and older who were screened for clinical depression using a standardized instrument and, if screened positive, received follow-up care.

Measure	Numerator(s)	Follow-Up Visit Coding
<p>1 The percentage of members who were screened for clinical depression using a standardized instrument.</p>	<p>Depression Screening Members with a documented result for depression screening, using an age-appropriate standardized instrument, performed between January 1 and December 1 of the measurement period.</p>	<p>Outpatient Visit (CPT) 98960-98962, 98966-98968, 98970-98972, 98980, 98981, 99078, 99202-99205, 99211-99215, 99242-99245, 99341, 99342, 99344, 99345, 99347-99350, 99381-99387, 99391-99397, 99401-99404, 99411, 99412, 99421-99423, 99441-99443, 99457, 99458, 99483 (HCPCS) G0071, G0463, G2010, G2012, G2250-G2252, T1015 (REV) 0510, 0513, 0516, 0517, 0519-0523, 0526-0529, 0982, 0983</p>
<p>2 The percentage of members who received follow-up care within 30 days of a positive depression screen finding.</p>	<p>Follow-Up on Positive Screen Members who received follow-up care on or up to 30 days after the date of the first positive screen (31 total days).</p>	<p>Depression Case Management Encounter (CPT) 99366, 99492, 99493, 99494 (HCPCS) G0512, T1016, T1017, T2022, T2023</p> <p>Behavioral Health Encounter (CPT) 90791-90834, 90836-90839, 90845-90847, 90849, 90853, 90865, 90867-90870, 90875, 90876, 90880, 90887, 99484, 99492, 99493</p> <p>Dispensed anti-depression medication Documentation of additional depression screening on a full-length instrument indicating either no depression or no symptoms that require follow-up (i.e., a negative screen) on the same day as a positive screen on a brief screening instrument.</p>

Depression Screening Instruments

INSTRUMENTS FOR ADOLESCENTS (≤17 YEARS)	TOTAL SCORE LOINC CODES	POSITIVE FINDING
Patient Health Questionnaire (PHQ-9) [®]	44261-6	Total score ≥ 10
Patient Health Questionnaire Modified for Teens (PHQ-9M) [®]	89204-2	Total score ≥ 10
Patient Health Questionnaire-2 (PHQ-2) ^{®1}	55758-7	Total score ≥ 3
Beck Depression Inventory-Fast Screen (BDI-FS) ^{®1,2}	89208-3	Total score ≥ 8
Center for Epidemiologic Studies Depression Scale - Revised (CESD-R)	89205-9	Total score ≥ 17
Edinburgh Postnatal Depression Scale (EPDS)	71354-5	Total score ≥ 10
PROMIS Depression	71965-8	Total score (T Score) ≥ 60
INSTRUMENTS FOR ADULTS (18+ YEARS)	TOTAL SCORE LOINC CODES	POSITIVE FINDING
Patient Health Questionnaire (PHQ-9) [®]	44261-6	Total score ≥ 10
Patient Health Questionnaire-2 (PHQ-2) ^{®1}	55758-7	Total score ≥ 3
Beck Depression Inventory-Fast Screen (BDI-FS) ^{®1,2}	89208-3	Total score ≥ 8
Beck Depression Inventory (BDI-II)	89209-1	Total score ≥ 20
Center for Epidemiologic Studies Depression Scale - Revised (CESD-R)	89205-9	Total score ≥ 17
Duke Anxiety—Depression Scale (DUKE-AD) ^{®2}	90853-3	Total score ≥ 30
Geriatric Depression Scale Short Form (GDS) ¹	48545-8	Total score ≥ 5
Geriatric Depression Scale Long Form (GDS)	48544-1	Total score ≥ 10
Edinburgh Postnatal Depression Scale (EPDS)	48544-1	Total score ≥ 10
My Mood Monitor (M-3) [®]	71777-7	Total score ≥ 5
PROMIS Depression	71965-8	Total score (T Score) ≥ 60
Clinically Useful Depression Outcome Scale (CUDOS)	90221-3	Total score ≥ 31

Notes

- The code set above is used by HEDIS to determine compliance. Not all codes are necessarily covered by Medi-Cal.
- Members with a history of bipolar disorder are excluded from this measure.
- Members with depression that starts during the year prior are excluded from this measure.
- Members in hospice or using hospice services are excluded from this measure.
- Members who died in the measurement year are excluded from this measure.

Best Practices

- Educate the patient about the importance of follow-up and adherence to treatment recommendations.
- Discuss the importance of timely, recommended follow-up visits.
- Schedule follow-up appointments as soon as possible, particularly those patients recently discharged.
- Coordinate care with behavioral health practitioners by sharing progress notes and updates.
- Outreach patients who cancel appointments and assist them with rescheduling as soon as possible.
- Consider telemedicine visit when in-person visits are not available.
- Discuss the importance of seeking follow-up with a mental health provider.
- Develop outreach internal team and/or assign care/case managers to members to ensure members keep follow-up appointments or reschedule missed appointments.
- Set flags if available in EHR or develop tracking method for patients who may need screenings and follow-up visits.