

Memorandum

To: Gold Coast Health Plan Primary Care Providers

From: Kim Osajda, RN, MSN
Director of Quality Improvement

Re: **Screening for Clinical Depression and Follow-up Plan**

Date: September 27, 2016

The Department of Health Care Services (DHCS) selects a set of performance measures, referred to as External Accountability Set (EAS) measures, to evaluate the quality of care delivered by Medi-Cal managed care health plans (MCP) to its members. DHCS selects most EAS measures from the Healthcare Effectiveness Data and Information Set (HEDIS[®]), which provides DHCS with a standardized method to objectively evaluate an MCP's delivery of services. MCPs must collect and report rates for EAS measures annually.

DHCS has notified Gold Coast Health Plan (GCHP) of recent changes to these requirements, which are effective immediately for HEDIS[®] measurement years 2016 and 2017.

One of these new measures is Screening for Clinical Depression and Follow-Up Plan (CDF). The CDF is not a HEDIS[®] measure, but is on the CMS Core Measure Set.

Depression is a leading cause of disability in the United States. It affects individuals, families and society and is commonly treated in the primary care setting. Major depressive disorder in children and adolescents is strongly associated with recurrent depression by young adulthood, increased risk of suicide attempts and suicide completion. Depression causes suffering, decreases quality of life, and causes impairment in social and occupational functioning. It is associated with increased health care costs and higher rates of many chronic medical conditions.

The United States Preventive Services Task Force (USPSTF) recommends screening for major depressive disorder in adolescents who are between the ages of 12 and 18 as well as screening for depression in the general adult population, including pregnant and postpartum women.

Measure Description

The percentage of patients ages 12 and older screened for clinical depression on the date of the encounter using an age appropriate standardized depression screening tool AND if positive, a follow-up plan is documented on the date of the positive screen.

The name of the age-appropriate standardized depression screening tool that is used must be documented in the medical record.

Examples of depression screening tools include, but are not limited to:

- **Adolescent Screening Tools (12-17 years)**
Patient Health Questionnaire for Adolescents (PHQ-A), Beck Depression Inventory-Primary Care Version (BDI-PC)
- **Adult Screening Tools (18 years and older)**
Patient Health Questionnaire (PHQ-9), Beck Depression Inventory (BDI or BDI-II), Geriatric Depression Scale (GDS), and Edinburgh Postnatal Depression Scale (EPDS) in postpartum and pregnant women

Follow-Up Plan – Documented follow-up for a positive depression screening *must* include one or more of the following:

- Additional evaluation for depression
- Suicide Risk Assessment
- Referral to a practitioner who is qualified to diagnose and treat depression
- Pharmacological interventions
- Other interventions or follow-up for the diagnosis or treatment of depression

Coding for the CDF Measure

CDF Population Identification: The following CPT and HCPCS/ Quality Data Codes (QDC) are used to select members for the CDF measure:

Table 1	Code	Definition
Codes Reimbursed by Medi-cal	90791	Psychiatric Diagnostic Evaluation
	90792	Psychiatric Diagnostic Evaluation with Medical Services
	90832	Psychiatric Treatment (Patient & Family); 30 minutes
	90834	Psychiatric Treatment (Patient & Family); 45 minutes
	90837	Psychiatric Treatment (Patient & Family); 60 minutes
	90839	Initial Psychiatric Treatment; 60 minutes
	92625	Tinnitus Assessment
	96116	Neurobehavioral Status Exam
	96118	Neuropsychological test by Psychologist/Physician
	96150	Health/Behavioral Assessment, Initial Visit
	96151	Health/Behavioral Assessment, Subsequent Visit
	97003	Occupational Therapy Evaluation
	99201	Office/Outpatient Visit, New
	99202	Office/Outpatient Visit, New
	99203	Office/Outpatient Visit, New
	99204	Office/Outpatient Visit, New
	99205	Office/Outpatient Visit, New
	99212	Office/Outpatient Visit, Established

Table 1	Code	Definition
HCPCS/QDC Codes for Quality Reporting (Not Reimbursable)	99213	Office/Outpatient Visit, Established
	99214	Office/Outpatient Visit, Established
	99215	Office/Outpatient Visit, Established
	G0101	Cervical or vaginal cancer screening
	G0402	Initial preventive physical examination; face-to-face visit, services limited to new beneficiary during the first 12 months of Medicare enrollment
	G0438	Annual wellness visit; includes a personalized prevention plan of service (PPS), initial visit
	G0439	Annual wellness visit, includes a personalized prevention plan of service (PPS), subsequent visit
	G0444	Annual depression screening, 15 minutes

Identification of Services Performed: The following HCPCS/QDC codes are used to identify the presence or absence of a clinical depression screening and follow-up plan in the members selected for the CDF measure.

Table 2	Code	Definition
HCPCS/QDC Codes for Quality Reporting (Not Reimbursable)	G8431	Screening for clinical depression is documented as being positive AND a follow-up plan is documented.
	G8510	Screening for clinical depression is documented as negative and a follow-up plan is not required.
	G8433	Screening for clinical depression is not documented; documentation states patients is not eligible.
	G8940	Screening for clinical depression is documented as positive AND a follow-up plan is not documented because documentation states patient is not eligible.
	G8432	Screening for clinical depression is not documented; reason not given.
	G8511	Screening for clinical depression is documented as positive and follow-up plan is not documented; reason not given.

NOTE: To minimize the volume of medical records requested for auditing the outcome of the CDF measure, it is advisable that providers use one of the HCPCS/QDC codes listed in **Table 2** to document the presence or absence of a clinical depression screening and follow-up plan.

If you have any questions, please contact GCHP's Quality Improvement Department at 1-805-437-5592 or hedis@goldchp.org.

Thank you for your commitment to improving the health of GCHP's members.