

## 2022 MCAS MEASURE: SCREENING FOR DEPRESSION AND FOLLOW-UP PLAN (CDF)

Measure Steward: Centers for Medicare and Medicaid Services (CMS)

Gold Coast Health Plan's (GCHP) goal is to help its providers gain compliance with their annual Managed Care Accountability Set (MCAS) scores by providing guidance and resources. This tip sheet will provide the key components to the MCAS measure, "Screening for Depression and Follow-Up Plan (CDF)."

**Measure Description:** Measures the percentage of beneficiaries ages 12 and older screened for depression on the date of the encounter using an age-appropriate standardized depression screening tool and, if positive, a follow-up plan documented on the date of the positive screen.

**Data Collection Method:** Administrative<sup>1</sup>

### Compliant screening tools for members ages 12-17.

Adolescent Screening Tools	<ul style="list-style-type: none"> <li>• Patient Health Questionnaire for Adolescents (PHQ-A)</li> <li>• Beck Depression Inventory-Primary Care Version (BDI-PC)</li> <li>• Mood Feeling Questionnaire (MFQ)</li> <li>• Center for Epidemiologic Studies Depression Scale (CES-D)</li> <li>• Patient Health Questionnaire (PHQ-9)</li> <li>• Pediatric Symptom Checklist (PSC-17)</li> <li>• PRIME MD-PHQ2</li> </ul>
Perinatal Screening Tools	<ul style="list-style-type: none"> <li>• Edinburgh Postnatal Depression Scale</li> <li>• Postpartum Depression Screening Scale</li> <li>• Patient Health Questionnaire 9 (PHQ-9)</li> <li>• Beck Depression Inventory</li> <li>• Beck Depression Inventory-II</li> <li>• Center for Epidemiologic Studies Depression Scale</li> <li>• Zung Self-Rating Depression Scale</li> </ul>

### Compliant screening tools for members ages 18 and older.

Adult Screening Tools	<ul style="list-style-type: none"> <li>• Patient Health Questionnaire (PHQ-9)</li> <li>• Beck Depression Inventory (BDI or BDI-II)</li> <li>• Center for Epidemiologic Studies Depression Scale (CES-D)</li> <li>• Computerized Adaptive Diagnostic Screener (CAD-MDD)</li> <li>• Computerized Adaptive Testing Depression Inventory (CAT-DI)</li> <li>• Depression Scale (DEPS)</li> <li>• Duke Anxiety-Depression Scale (DADS)</li> <li>• Geriatric Depression Scale (GDS)</li> <li>• Cornell Scale for Depression in Dementia (CSDD)</li> <li>• PRIME MD-PHQ2</li> <li>• Hamilton Rating Scale for Depression (HAM-D)</li> <li>• Quick Inventory of Depressive Symptomatology Self-Report (QID-SR)</li> </ul>
Perinatal Screening Tools	<ul style="list-style-type: none"> <li>• Edinburgh Postnatal Depression Scale</li> <li>• Postpartum Depression Screening Scale</li> <li>• Patient Health Questionnaire 9 (PHQ-9)</li> <li>• Beck Depression Inventory</li> <li>• Beck Depression Inventory-II</li> <li>• Center for Epidemiologic Studies Depression Scale</li> <li>• Zung Self-Rating Depression Scale</li> </ul>

**Follow-up for a positive depression screening must include one or more of the following:**

Follow-Up Plan	<ul style="list-style-type: none"> <li>• Additional evaluation for depression.</li> <li>• Suicide risk assessment.</li> <li>• Referral to a practitioner who is qualified to diagnose and treat depression.</li> <li>• Pharmacological interventions.</li> <li>• Other interventions or follow-up for the diagnosis or treatment of depression.</li> </ul>
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**CDF Clinical Code Sets**

- For billing, reimbursement, and reporting of services completed, submit claims in a timely manner with the appropriate medical codes for all clinical conditions evaluated and services completed.

**Codes used to identify depression screening using a standardized assessment tool in the outpatient setting.**

Description	CPT	HCPCS
Office / Outpatient visits	59400, 59510, 59610, 59618, 90791, 90792, 90832, 90834, 90837, 92625, 96105, 96110, 96112, 96116, 96125, 96136, 96138, 96156, 96158, 97161, 97162, 97163, 97165, 97166, 97167, 99078, 99201, 99202, 99203, 99204, 99205, 99212, 99213, 99214, 99215, 99304, 99305, 99306, 99307, 99308, 99309, 99310, 99315, 99316, 99318, 99324, 99325, 99326, 99327, 99328, 99334, 99335, 99336, 99337, 99339, 99340, 99401, 99402, 99403, 99483, 99484, 99492, 99493, 99384, 99385, 99386, 99387, 99394, 99395, 99396, 99397	G0101, G0402, G0438, G0439, G0444
Positive depression screening with follow-up plan documented		G8431
Negative depression screening with no follow-up plan required		G8510

**Exceptions and Exclusionary Criteria: Members with the following conditions can be removed from the CDF measure.**

Exceptions Criteria: A depression screening was not completed due to one of the following reasons.

Description of Exceptions	HCPCS
Member refuses to participate.	G8433
Member is in an urgent or emergency situation where time is of the essence and delaying treatment would jeopardize the member's health status.	
The member's functional capacity or motivation to improve may impact the accuracy of results of nationally recognized standardized depression assessment tools.	

**Exclusionary Criteria: The member has an active diagnosis of depression or bipolar disorder.**

Description	ICD-10-CM Code	HCPCS
Diagnosis of Active Depression	F01.51, F32.0-F32.9, F33.0-F33.9, F34.1-F34.89, F43.21, F43.23, F53.0, F53.1, 090.6, 099.340- 099.345	G9717
Diagnosis of Bipolar Disorder	F31.10 -F31.13, F31.2, F31.30-F31.2, F31.4, F31.5, F31.60-F31.64, F31.70 -F31.78, F31.81-F31.89, F31.9	G9717



**Best Practices:**

- ▶ Establish policies for routine depression screening that include developing clear roles and responsibilities for staff members.
- ▶ If screening is positive, establish a clear follow-up care plan.
- ▶ Members who test positive on PHQ-2 or PHQ-9 can be referred to Beacon Health Options by calling 1-855-765-9702. Providers can also visit the Beacon [website](#).
- ▶ For patients who are actively suicidal, contact the Ventura County Crisis Line at 1-866-998-2243. Providers can also visit the Ventura County Behavioral Health (VCBH) [website](#).

<sup>1</sup> Measures reported using the *administrative* data collection method report on the entire eligible population and use only administrative data sources (e.g. claims, encounter, lab, immunization registries) to evaluate if services were performed.