

**2026 Measurement Year**  
**MCAS MEASURE: PRENATAL DEPRESSION SCREENING  
AND FOLLOW-UP (PND-E)**

Measure Steward: National Committee for Quality Assurance (NCQA)

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 provides the key components to the MCAS measure, "Prenatal Depression Screening and Follow-Up (PND-E)."

**Measure Description:** This measures the percentage of members with deliveries who were screened for clinical depression while pregnant, and if screened positive, received follow-up care.

- ▶ Depression Screening: The percentage of members with deliveries who were screened for clinical depression during pregnancy using an age-appropriate standardized screening instrument.
- ▶ Follow-Up on Positive Screen: The percentage of members with deliveries who received follow-up care within 30 days of a positive depression screen finding.

**Data Collection Method:** Electronic Clinic Data Systems (ECDS)<sup>1</sup>

**Standardized Instruments:**

- A standard assessment instrument that has been normalized and validated for the appropriate patient population. Eligible screening instruments with thresholds for positive findings include:

| Standardized Instruments   | Age ≤ 17 | Age 18+ | Positive Finding | LOINC Code |
|--|----------|---------|------------------|------------|
| Patient Health Questionnaire Modified for Teens (PHQ- 9M) <sup>®</sup> | X        |         | Total Score ≥ 10 | 89204-2    |
| Patient Health Questionnaire (PHQ-9) <sup>®</sup>                      | X        | X       | Total Score ≥ 10 | 44261-6    |
| Patient Health Questionnaire-2 (PHQ-2) <sup>®2</sup>                   | X        | X       | Total Score ≥ 3  | 55758-7    |
| Beck Depression Inventory-Fast Screen (BDI-FS) <sup>®2,3</sup>         | X        | X       | Total Score ≥ 8  | 89208-3    |
| Center for Epidemiologic Studies Depression Scale—Revised (CESD-R)     | X        | X       | Total Score ≥ 17 | 89205-9    |
| Edinburgh Postnatal Depression Scale (EPDS)                            | X        | X       | Total Score ≥ 10 | 99046-5    |
| PROMIS Depression  | X        | X       | Total Score ≥ 60 | 71965-8    |
| Beck Depression Inventory (BDI-II)                                     |          | X       | Total Score ≥ 20 | 89209-1    |
| Duke Anxiety-Depression Scale (DUKE-AD) <sup>®2</sup>                  |          | X       | Total Score ≥ 30 | 90853-3    |
| My Mood Disorder (M-3) <sup>®</sup>                                    |          | X       | Total Score ≥ 5  | 71777-7    |
| Clinically Useful Depression Outcome Scale (CUDOS)                     |          | X       | Total Score ≥ 31 | 90221-3    |
| PROMIS Emotional Distress Depression Short Form                        |          | X       | Total Score ≥ 60 | 77861-3    |

**PND-E Clinical Code Set**

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

**Methods to identify a follow-up on a positive screening within 30-Days:**

- ▶ A clinic encounter (outpatient, telephone, e-visit, virtual check-in, depression case management, behavioral health encounter, exercise counseling).
- ▶ A dispensed antidepressant 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.
- ▶ Encounter for exercise counseling.

**PND-E Clinical Code Set**

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

**Codes to identify follow-up on positive screening.**

| Description   | ICD-10-CM | CPT   | HCPCS  | UBREV  |
|---|-----------|---|--|--|
| An outpatient, telephone, e-visit, or virtual check-in with a diagnosis of depression or behavioral health condition. <a href="#">Click here</a> for the list of diagnosis codes. |           | 98000, 98001, 98002, 98003, 98004, 98005, 98006, 98007, 98008, 98009, 98010, 98011, 98012, 98013, 98014, 98015, 98016, 98960, 98961, 98962, 98966, 98967, 98968, 98970, 98971, 98972, 98979, 98980, 98981, 99078, 99202, 99203, 99204, 99205, 99211, 99212, 99213, 99214, 99215, 99242, 99243, 99244, 99245, 99341, 99342, 99344, 99345, 99347, 99348, 99349, 99350, 99381, 99382, 99383, 99384, 99385, 99386, 99387, 99391, 99392, 99393, 99394, 99395, 99396, 99397, 99401, 99402, 99403, 99404, 99411, 99412, 99421, 99422, 99423, 99441, 99442, 99443, 99457, 99458, 99470, 99483 | G0071, G0463, G0544, G2010, G2012, G2250, G2251, G2252, T1015  | 0510, 0513, 0516, 0517, 0519, 0520, 0521, 0522, 0523, 0526, 0527, 0528, 0529, 0982, 0983 |
| Depression case management encounter with a diagnosis of depression or behavioral health condition. Click the link above for a complete list of diagnosis codes.                  |           | 99366, 99492, 99493   | G0512, T1016, T1017, T2022, T2023  |  |
| Behavioral Health Encounter   |           | 90791, 90792, 90832, 90833, 90834, 90836, 90837, 90838, 90839, 90845, 90846, 90847, 90849, 90853, 90865, 90867, 90868, 90869, 90870, 90875, 90876, 90880, 90887, 99484, 99492, 99493  | G0155, G0176, G0177, G0409, G0410, G0411, G0511, G0512, H0002, H0004, H0031, H0034, H0035, H0036, H0037, H0039, H0040, H2000, H2001, H2010, H2011, H2012, H2013, H2014, H2015, H2016, H2017, H2018, H2019, H2020, S0201, S9480, S9484, S9485 | 0900, 0901, 0902, 0903, 0904, 0905, 0907, 0911, 0912, 0913, 0914, 0915, 0916, 0917, 0919 |
| Encounter for exercise counseling   | Z71.82    |   |  |  |



**Evidence of an antidepressant medication dispensing event.**

[Click here](#) for the list of antidepressant medication.

**Exclusion Criteria – Members with the following conditions are excluded from the PND-E measure:**

- ▶ Deliveries that occurred at less than 37 weeks gestation.
- ▶ Deliveries in which members were in hospice or using hospice services any time during the measurement period.
- ▶ Members who die anytime during the measurement period.

**Best Practices:**

- ▶ Use the Inovalon® Provider Enablement Quality Gap Insights to identify members with gaps in care.
- ▶ Make outreach calls and/or send letters to advise members of the need for a visit.
- ▶ Clinical Recommendations:
  - The U.S. Preventive Services Task Force (USPSTF) recommends screening for depression among adolescents and adults, including pregnant and postpartum women.
  - The American College of Obstetricians and Gynecologists (ACOG) recommends that clinicians screen patients at least once during pregnancy or the postpartum period for depression and anxiety symptoms using a standardized, validated tool.
  - The USPSTF and ACOG also recommend that screening be implemented with adequate systems in place to ensure accurate diagnosis, effective treatment, and appropriate follow-up.
- ▶ Members of the care team understand the importance of depression screening and to recognize the risk factors for depression in pregnancy.
- ▶ Work with a care manager or team member to coordinate care and follow-up for members with a positive screening.
- ▶ Behavioral health referrals can be made through Carelon Behavioral Health (formerly Beacon Health Options). Providers may also use this link to access valuable information, forms and documents: [Click Here](#)
- ▶ GCHP's Care Management Team is made up of registered nurses, care management coordinators, and social workers who are ready to help GCHP members manage their health. GCHP Care Management referrals can be made by submitting the referral form available on the GCHP website or by contacting the Care Management team by phone or email.
  - Care Management Contact: 1-805-437-5656
  - Care Management Email: [CareManagement@goldchp.org](mailto:CareManagement@goldchp.org)
  - English Referral Form: [Click Here](#)
  - Spanish Referral Form: [Click Here](#)
  - Ensure your documentation is clear and concise.
  - Use proper coding for conditions evaluated and services provided.

<sup>1</sup> MECDS is a HEDIS® reporting standard that uses structured data systems (e.g., administrative claims, clinical registries, health information exchanges, electronic health records, disease/cases management systems) to report rates on ECDS designated measures.

<sup>2</sup> Brief screening instruments. All other instruments are full-length.

<sup>3</sup> Proprietary; may be cost or licensing requirement associated with use.