**Gold Coast Health Plan℠**
A Public Entity

## 2025 Measurement Year

# MCAS MEASURE: DEPRESSION SCREENING AND FOLLOW-UP FOR ADOLESCENTS AND ADULTS (DSF-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, *"Depression Screening and Follow-Up for Adolescents and Adults (DSF-E)."*

*Measure Description: The percentage of members 12 years of age and older who were screened for clinical depression using an age-appropriate standardized instrument and, if screened positive, received follow-up care.*

▶ Depression Screening: The percentage of members who were screened for clinical depression using a standardized instrument between January 1 and December 1 of the measurement year.
▶ Follow-Up on Positive Screen: The percentage of members who received follow-up care on or within 30 days of a positive depression screening.

**Data Collection Method:** Electronic Clinic Data Systems (ECDS)[1]

**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)® | X | | Total Score ≥ 10 | 89204-2 |
| Patient Health Questionnaire (PHQ-9)® | X | X | Total Score ≥ 10 | 44261-6 |
| Patient Health Questionnaire-2 (PHQ-2)®[2] | X | X | Total Score ≥3 | 55758-7 |
| Beck Depression Inventory-Fast Screen (BDI-FS)®[2,3] | 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)®[2] | | X | Total Score ≥ 30 | 90853-3 |
| My Mood Disorder (M-3)® | | X | Total Score ≥ 5 | 71777-7 |
| Clinically Useful Depression Outcome Scale (CUDOS) | | X | Total Score ≥ 31 | 90221-3 |
| Geriatric Depression Scale Short Form (GDS)[1] | | X | Total Score ≥ 5 | 48545-8 |
| Geriatric Depression Scale Long Form (GDS) | | X | Total Score ≥ 10 | 48544-1 |

**DSF-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 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.

**Codes used to identify clinic encounters.**

| 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. Click here for list of the diagnosis codes. | | 98960, 98961, 98962, 98966, 98967, 98968, 98970, 98971, 98972, 99078, 98980, 98981, 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, 99483 | G0071, G0463, 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, 99494 | 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 medications.

**Exclusion Criteria – Members with any of the following conditions are excluded from the DSF-E measure:**
- ▶ Members with history of bipolar disorder any time until the end of the year prior to the measurement year.
- ▶ Depression that started in the prior measurement year.
- ▶ Members in hospice or using hospice services anytime during the measurement year.
- ▶ Members who die any time 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 12–18 years of age and the general adult population, including pregnant and postpartum women.
   • The USPSTF also recommends 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.

▶ Patients are screened at new visits, on an annual basis at well care visits, or when clinically indicated.

▶ 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
   • English Referral Form: Click Here
   • Spanish Referral Form: Click Here

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[1] ECDS 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.

[2] Brief screening instruments. All other instruments are full-length.

[3] Proprietary; may be cost or licensing requirement associated with use.