

HEDIS Quality Measurements: HEDIS Depression Measures

Measures Title: HEDIS Depression Measures

Measures Description: NCQA has five depression care quality measures included in HEDIS. Two measures are focused on depression screening and follow-up during the [prenatal](#) and [postpartum](#) periods. We will focus on three measures that were adapted from existing provider and practice level depression measures for inclusion in HEDIS and are Depression Screening and Follow-Up for Adolescents and Adults (DSF), Utilization of the PHQ-9 to Monitor Depression Symptoms for Adolescents and Adults (DMS), and Depression Remission or Response for Adolescents and Adults.

Why focus on depression?

Depression significantly impacts both mental and physical health and is a leading cause of disability. There is a need to develop outcome measures that assess the quality of depression care. Patient reported outcome measures are needed to understand depression outcomes, and these data are challenging to collect.

Measure Title: [Depression Screening and Follow-up for Adolescents and Adults \(DSF\)](#)

First implemented in HEDIS 2018.

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

Denominator: All members age ≥ 12 .

Numerator: Screened for depression using a standardized tool and, if screened positive, received follow-up care within 30 days.

Exclusion: Individuals with any of the following:

- Bipolar disorder during the year prior to the Measurement Period.
- Depression during the year prior to the Measurement Period.
- In hospice or using hospice services during the Measurement Period.

Measure Title: [Utilization of the PHQ-9 to Monitor Depression Symptoms for Adolescents and Adults \(DMS\)](#)

First implemented in HEDIS 2016.

Measure Description: The percentage of members 12 years of age and older with a diagnosis of depression, who had an outpatient encounter with a PHQ-9 score present in their record in the same assessment period as the encounter.

Denominator: All members age ≥ 12 who had an encounter during a 4-month period with a diagnosis of major depressive disorder or dysthymia.

Numerator: Documented results of a PHQ-9 tool that was administered at least once during the 4-month period.

Exclusion: Individuals with any of the following at any time during the measurement year:

- Bipolar Disorder
- Personality Disorder
- Psychotic Disorder
- Autism Spectrum Disorder
- Hospice

Measure Title: [Depression Remission or Response for Adolescents and Adults](#)

First implemented in HEDIS 2017.

Measure Description: The percentage of members 12 years of age and older with a diagnosis of depression and an elevated PHQ-9 score, who had evidence of response or remission within 4–8 months of the elevated score.

- **Follow-Up PHQ-9.** The percentage of members who have a follow-up PHQ-9 score documented within 4–8 months after the initial elevated PHQ-9 score.
- **Depression Remission.** The percentage of members who achieved remission within 4–8 months after the initial elevated PHQ-9 score.
- **Depression Response.** The percentage of members who showed response within 4–8 months after the initial elevated PHQ-9 score.

Denominator: All members age ≥ 12 with a diagnosis of major depressive disorder or dysthymia who had an initial elevated PHQ-9 score of >9 .

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Numerator: A follow-up PHQ-9 score documented at 4-8 months after the initial elevated score; a PHQ-9 score <5 documented at 4-8 months following the initial elevated score; a $\geq 50\%$ reduction in the PHQ-9 score documented at 4-8 months following the initial elevated score.

Exclusion: patients with any of the following at any time from the start of the intake period through the end of the measurement period:

- Bipolar Disorder.
- Personality Disorder.
- Psychotic Disorder.
- Autism Spectrum Disorder.
- Hospice.