

Utilization of the PHQ-9 to Monitor Depression Symptoms for Adolescents and Adults (DMS-E)

Measure Description

The percentage of members 12 years of age and older with a diagnosis of major depression or dysthymia, who had an outpatient encounter with a Patient Health Questionnaire (PHQ-9) score present in their record in the same assessment period as the encounter.

- Members may have an eligible encounter in any or all three assessment periods and may be included in the measure up to three times during the measurement period.
 - Assessment period 1: January 1–April 30.
 - Assessment period 2: May 1–August 31.
 - Assessment period 3: September 1–December 31.

Note: The PHQ-9 assessment does not need to occur during a face-to-face encounter; it may be completed over the telephone or through a web-based portal.

Product Lines: Commercial, Medicaid, Medicare

Codes Included in the Current HEDIS® Measure

Codes to Identify Major Depression/Dysthymia and Interactive Outpatient Encounter

Description	Code
Major Depression or Dysthymia	ICD-10: F32.0-F32.5, F32.9, F33.0-F33.3, F33.40-F33.42, F33.9, F34.1
Interactive Outpatient Encounter	CPT: 90791, 90792, 90832, 90834, 90837, 98960-98962, 98966-98968, 98970-98972, 99080, 99081, 99078, 99202-99205, 99211-99215, 99242-99245, 99341, 99342, 99344, 99345, 99347-99350, 99381-99387, 99391-99397, 99401-99404, 99411, 99412, 99421-99423, 99441-99443, 99457, 99458, 99483, 99492-99494, 99510 HCPCS: G0071, G0155, G0176, G0177, G0409-G0411, G0463, G0512, G2010, G2012, G2250-G2252, H0002, H0004, H0031, H0034-H0037, H0039, H0040, H2000, H2001, H2010-H2020, S0201, S9480, S9484, S9485, T1015 UBREV: 0510, 0513, 0516, 0517, 0519, 0520-0523, 0526-0529, 0900-0905, 0907, 0911-0917, 0919, 0982, 0983

Codes to Identify PHQ-9 Total Score

Direct Reference Code Display	Code
Patient Health Questionnaire 9 item (PHQ-9) total score [Reported]	LOINC: 44261-6
Patient Health Questionnaire-9: Modified for Teens total score [Reported.PHQ.Teen]	LOINC: 89204-2, 44261-6

Ways Providers can Improve HEDIS® Performance

- Administer the PHQ-9 at every patient visit. Monitor for any increases in scores in addition to the presence of clinical symptoms.
- Rule-out medical conditions (including substance use or medication overuse) that may be mimic, mask, or affecting patient's mood.
- Educate patients on the following:
 - Provide reassurance that depression is common and can be treated.

- Identification of and recognition of triggers.
 - Review with patient's self-identified healthy coping management techniques.
 - What to do if the patient's mood worsens, has a crisis, or has thoughts of self-harm.
- Ensure necessary releases are in place to include Parents/Caregivers and enable key providers (Psychiatrists, Therapist/Counselor, etc.) to collaborate on overall patient care and member's ability to improve/maintain physical and emotional health.
- Connect with local crisis services immediately for an evaluation if a patient is experiencing current suicidal ideations.
- Ensure your patient (and patient's family) understands the local community support resources and what to do in an event of a crisis.
- Refer patient/family/caregiver for Care Coordination/Case Management by contacting Molina Healthcare for additional support.

Ways Health Plans can Improve HEDIS® Performance

- Ensure your member (and member's family) understands the local community's support resources and what to do in an event of a crisis.
- Refer member/family/caregiver for Care Coordination/Case Management.
- Educate providers to utilize PHQ9 form in EMR to ensure included in electronic measure
- Connect with local crisis services immediately for an evaluation if a member is experiencing current suicidal ideations.

Exclusions

- Members who use hospice services or elect to use a hospice benefit any time during the measurement period.
- Members who die any time during the measurement period.
- Members with any of the following any time during the member's history through the end of the measurement period (January 1 – December 31):
 - Bipolar disorder
 - Personality disorder
 - Psychotic disorder
 - Pervasive developmental disorder

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