HEDIS® Tip Sheet

Prenatal Depression Screening and Follow-Up (PND-E)

Measure Description

The percentage of deliveries in which members were screened for clinical depression while pregnant and, if screened positive, received follow-up care.

- **Depression Screening:** The percentage of deliveries in which members were screened for clinical depression during pregnancy using a standardized instrument.
 - Deliveries between January 1 and December 1 of the measurement period: Screening should be performed between the pregnancy start date and the delivery date (including on the delivery date).
 - o Deliveries between December 2 and December 31 of the measurement period: Screening should be performed between the pregnancy start date and December 1 of the measurement period.
- **Follow-Up on Positive Screen**: The percentage of deliveries in which members received follow-up care within 30 days of a positive depression screen finding.
 - Any of the following on or up to 30 days after the first positive screen meets criteria:
 - An outpatient, telephone, e-visit, or virtual check-in follow-up visit with a diagnosis of depression or other behavioral health condition.
 - A depression case management encounter that documents assessment for symptoms of depression or a diagnosis of depression or other behavioral health condition.
 - A behavioral health encounter, including assessment, therapy, collaborative care, or medication management.
 - A dispensed antidepressant medication.

or

 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.

Note: For example, if there is a positive screen resulting from a PHQ-2 score, documentation of a negative finding from a PHQ-9 performed on the same day qualifies as evidence of follow-up.

Product Lines: Commercial, Medicaid

Codes Included in the Current HEDIS® Measure

Codes to Identify Gestation and Deliveries

Description	Code
Weeks Gestation Less than 37	ICD-10: Z3A.01, Z3A.08-Z3A.36 (Exclusion Codes)
37 Weeks Gestation	ICD-10: Z3A.37
38 Weeks Gestation	ICD-10: Z3A.38
39 Weeks Gestation	ICD-10: Z3A.39
40 Weeks Gestation	ICD-10: Z3A.40
41 Weeks Gestation	ICD-10: Z3A.41
42 Weeks Gestation	ICD-10: Z3A.42
43 Weeks Gestation	ICD-10: Z3A.49
Deliveries	ICD-10: 10D00Z0-10D00Z2, 10D07Z3-10D07Z8, 10E0XZZ
	CPT: 59400, 59409, 59410, 59510, 59514, 59515, 59610, 59612, 59614, 59618,

Senior Whole Health BY MOLINA HEALTHCARE

59620, 59622

Codes to Identify Depression and Follow-Up Visits

Description	Code		
Behavioral Health Encounter	CPT: 90791, 90792, 90832-90834, 90836-90839, 90845-90847, 90849, 90853,		
	90865, 90867-90870, 90875, 90876, 90880, 90887, 99484, 99492, 99493		
	HCPCS: G0155, G0176, G0177, G0409-G0411, G0511, G0512, H0002, H0004,		
	H0031, H0034-H0037, H0039, H0040, H2000, H2001, H2010-H2020, S0201, S9480,		
	S9484, S9485		
	UBREV: 0900-0905, 0907, 0911-0917, 0919		
Depression Case Management	CPT: 99366, 99492-99494		
Encounter	HCPCS: G0512, T1016, T1017, T2022, T2023		
Depression or Other Behavioral	ICD-10: F01.511, F01.518, F06.4, F10.xxx-F16.xxx, F18.xxx, 19.xxx, F20.0-F20.5,		
Health Condition	F20.81, F20.89, F21-F24, F25.x, F28, F29, F30.xx, F30.x, F31.x, F31.xx, F32.x, F32.xx,		
	F33.x, F33.xx, F34.x, F34.xx, F40.xx, F40.xxx, F40.x, F41.x-F43.x, F43.xx, F44.89,		
	F45.21, F51.5, F53.0, F53.1, F60.x, F60.xx, F63.x, F63.xx, F68.xx, F68.x, F84.x, F90.x,		
	F91.x, F93.x, F94.x, O90.6, O99.340-O99.345		
Follow-Up Visit	CPT: 98960-98962, 98966-98968, 98970-98972, 98980, 98981, 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		
	HCPCS: G0071, G0463, G2010, G2012, G2250-G2252, T1015		
	UBREV : 0510, 0513, 0516, 0517, 0519-0523, 0526-0529, 0982, 0983		

Depression Screening Instruments

Instruments for Adolescents (≤17 years)	Total Score	Positive Finding
	LOINC Codes	
Patient Health Questionnaire (PHQ-9)°	44261-6	Total score ≥10
Patient Health Questionnaire Modified for Teens (PHQ-9M)°	89204-2	Total score ≥10
Patient Health Questionnaire-2 (PHQ-2)®1	55758-7	Total score ≥3
Beck Depression Inventory-Fast Screen (BDI-FS)*1,2	89208-3	Total score ≥8
Center for Epidemiologic Studies Depression Scale—Revised (CESD-	89205-9	Total score ≥17
R)		
Edinburgh Postnatal Depression Scale (EPDS)	99046-5	Total score ≥10
PROMIS Depression	71965-8	Total score (T Score)
		≥60

¹Brief screening instrument. All other instruments are full-length. ²Proprietary; may be cost or licensing requirement associated with use.

Instruments for Adults (18+ years)	Total Score LOINC Codes	Positive Finding
Patient Health Questionnaire (PHQ-9)®	44261-6	Total score ≥10
Patient Health Questionnaire-2 (PHQ-2)*1	55758-7	Total score ≥3
Beck Depression Inventory-Fast Screen (BDI-FS) ^{®1,2}	89208-3	Total score ≥8
Beck Depression Inventory (BDI-II)	89209-1	Total score ≥20
Center for Epidemiologic Studies Depression Scale-Revised (CESD-R)	89205-9	Total score ≥17
Duke Anxiety-Depression Scale (DUKE-AD) ^{*2}	90853-3	Total score ≥30
Edinburgh Postnatal Depression Scale (EPDS)	71354-5	Total score ≥10
My Mood Monitor (M-3) [®]	71777-7	Total score ≥5
PROMIS Depression	71965-8	Total score (T Score)
		≥60



Ways Providers can Improve HEDIS® Performance

- Screen patients at new visits, annual well-care visits, or when clinically indicated.
- Document in the medical record the encounter date of a referral.
- Ensure the patient's age is used to select the appropriate depression screening instrument.
- Utilize synchronous telehealth visits when in-person visits are not available.

Ways Health Plans can Improve HEDIS® Performance

- Ensure your member (and member's family) understands the local community support resources and what to do in an event of a crisis.
- Educate providers to utilize PHQ9 or other standardized depression screening tools 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.
- Audit, identify, and educate top 10 providers with open gaps
- Educating members on the importance of prenatal care and timely visits.
- Utilize collaborative care interventions involving multifaceted care team approaches (e.g. primary care physician, case manager with mental health background, psychiatrist, etc.).
- Outreach patients who cancel appointments and assist them with rescheduling as soon as possible. Consider telemedicine visits when in-person visits are not available, or access barriers exist.

Exclusions

- Deliveries that occurred at less than 37 weeks gestation. Length of gestation in weeks is identified by one of two
 methods:
 - Gestational age assessment (SNOMED CT code 412726003; value <37 weeks), or
 - Gestational age diagnosis (Weeks of Gestation Less Than 37 Value Set).
- 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.



¹Brief screening instrument. All other instruments are full-length. ²Proprietary; may be cost or licensing requirement associated with use.

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