



Depression Measures

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When depression strikes, it can feel like everyone and everything is against you. Depression is common and potentially incapacitating. Yet despite research about the problem, depression often goes unnoticed. Depression accounts for more than \$210 billion in health care costs annually. Screening for depression is the cornerstone of early recognition, diagnosis, and management (AAFP, 2018).

Measure: Screening for Clinical Depression and Follow Up Plan

Measure Detail: Percentage of patients aged 12 years and older screened for clinical depression using a standardized depression screening tool AND if positive, a follow-up plan is documented (i.e. Additional evaluation for depression, referral, or medications).

Exclusions:

- ◆ Patients with an active diagnosis of depression or bipolar disorder

Measure: Depression Remission at 12 Months

Measure Detail: Adult patients age 18 and older with major depression or dysthymia and an initial PHQ-9 score >9 who demonstrate remission at 12 months defined as a PHQ-9 score <5.

Exclusions:

- ◆ Patients who receive hospice, palliative care, or reside in a nursing home
- ◆ Patients with a diagnosis of bipolar disorder or personality disorder

Screening Tips

- ◆ Administer the Quality Measures Assessment Form
- ◆ If the PHQ-2 is positive, administer the PHQ-9
- ◆ If the PHQ-9 is >9, follow up is needed; additional evaluation for depression, referral, and/or pharmacological interventions.

Remission Tips

- ◆ Reports will be provided each month on patients that has major depression and screened >9 on the initial PHQ-9
- ◆ A repeat PHQ-9 must be administered twelve months after initial PHQ-9 (+/- 30 days)
- ◆ A PHQ-9 <5 is considered depression remission.