HEDIS Provider Guide:
Depression Screening and Follow-up for Adolescents and Adults (DSF-E)

Applicable to Blue Shield of California Commercial, Medicare, and Medi-Cal plans

Measure Description

Members 12 years of age and older who were screened for clinical depression using a 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 1st and December 1st of the measurement period. The list of standardized instruments is below.
- **Follow-Up After a Positive Screening:** The percentage of members who receive follow-up care within 30 days of a positive depression screening result. Measure is met by completing **any one of** the following actions:
  - 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 diagnosis of encounter for exercise counseling
  - A dispensed antidepressant medication
  - Documentation of additional depression screening on a full-length instrument indicating either no depression or no symptoms requiring follow-up (**i.e.**, a negative screen) on the same day as a positive screen on a brief screening instrument, e.g., a positive PHQ-2 followed by a negative PHQ-9.

Documentation Tips

- **When submitting depression screening data using LOINC codes, the screening score must be documented in the electronic health record (EHR) and submitted as supplemental data.**
- Use the person's age to select an age-appropriate depression screening instrument.
- The Patient Health Questionnaire 9 (PHQ-9) and PHQ-2 are the most widely used screening instruments.
- Depression screenings documented as part of other health assessments may be counted if the questions align with the approved, standardized instrument (see the list below). For example, if a health risk assessment includes PHQ-2 questions, the screening is acceptable if the patient completes the assessment and the total score is calculated and documented.

Exclusions

- Members receiving hospice care
- Members with a history of bipolar disorder at any time during the person's history through the last day of the year preceding the measurement period
- Members diagnosed with depression during the year preceding the measurement period

Billing Codes for Depression Screening in Adolescents and Adults

Standardized Instruments	Age ≤17	Age 18+	LOINC® Code	Positive Finding
Patient Health Questionnaire-2 (PHQ-2)	X	X	55758-7	Total Score ≥3
Patient Health Questionnaire (PHQ-9)	X	X	44261-6	Total Score ≥10
Patient Health Questionnaire Modified for Teens (PHQ-9M)	X		89204-2	Total Score ≥10
Beck Depression Inventory-Fast Screen (BDI-FS)	X	X	89208-3	Total Score ≥8

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Standardized Instruments	Age ≤17	Age 18+	LOINC® Code	Positive Finding
Center for Epidemiologic Studies Depression Scale – Revisited (CESD-R)	X	X	89205-9	Total Score ≥17
Edinburgh Postnatal Depression Scale (EPDS)	X	X	99046-5	Total Score ≥10
PROMIS Depression	X	X	71965-8	Total Score ≥60
PROMIS Emotional Distress—Depression—Short Form		X	77861-3	Total Score ≥60
Beck Depression Inventory (BDI-II)		X	89209-1	Total Score ≥20
Clinically Useful Depression Outcome Scale (CUDOS)		X	90221-3	Total Score ≥31
Duke Anxiety-Depression Scale (DUKE-AD)		X	90853-3	Total Score ≥30
Geriatric Depression Scale Short Form (GDS)		X	48545-8	Total Score ≥5
Geriatric Depression Scale Long Form (GDS)		X	48544-1	Total Score ≥10
My Mood Monitor (M-3)		X	71777-7	Total Score ≥5

Codes to Bill for Depression Follow-up for Adolescents and Adults

Description	Codes		
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		
Depression Case Management Encounter	**CPT:** 99366, 99492, 99493 **HCPCS:** G0512, T1016, T1017, T2022, T2023 **Note:** Depression case management encounter must include assessment for symptoms of depression (use SNOMED codes: 394924000 or 788976000) or a diagnosis of depression or other behavioral health condition (see below for ICD10CM codes).		
Encounter for Exercise Counseling	**ICD10CM:** Z71.82		
Follow Up Visit: (Outpatient, telephone, e-visit or virtual check-in. Must have a diagnosis of depression or other behavioral health condition)	**CPT:** 98000–98016, 98960-98962, 98966-98968, 98970-98972, 98979-98981, 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, 99470, 99483 **HCPCS:** G0071, G0463, G0544, G2010, G2012, G2250, G2251, G2252, T1015	**with**	**Depression or Other Behavioral Health Condition:** **ICD10CM:** F01.511, F01.518, F06.4, F10-F16, F18-F25, F28-F34, F39-F43, F44.89, F45.21, F51.5, F53.0, F53.1, F60.0–F60.7, F60.81, F60.89, F60.9, F63.0–F63.3, F63.81, F63.89, F63.9, F68.10–F68.13, F68.8, F68.A, F84.0, F84.2, F84.3, F84.5, F84.8, F84.9, F90-F91, F93.0, F93.8, F93.9, F94.0–F94.2, F94.8, F94.9, O90.6, O99.340–O99.345

Antidepressant Medications

Description	Prescription			
Miscellaneous antidepressants	Bupropion	Vilazodone	Vortioxetine	
Monoamine oxidase inhibitors	Isocarboxazid	Phenelzine	Selegiline	Tranyloypromine
Phenylpiperazine antidepressants	Nefazodone	Trazodone		
Psychotherapeutic combinations	Amitriptyline-chlordiazepoxide	Amitriptyline-perphenazine	Fluoxetine-olanzapine	
SNRI antidepressants	Desvenlafaxine	Duloxetine	Levomilnacipran	Venlafaxine
SSRI antidepressants	Citalopram	Fluoxetine	Paroxetine mesylate	
	Escitalopram	Fluvoxamine	Paroxetine	Sertraline
Tetracyclic antidepressants	Maprotiline	Mirtazapine		
Tricyclic antidepressants	Amitriptyline	Amoxapine	Clomipramine	Desipramine
	Doxepin	Imipramine	Imipramine pamoate	
	Nortriptyline	Protriptyline	Trimipramine	

Exclusion Codes

Description	Codes
Bipolar Disorder	**ICD10CM:** F30.10-F30.13, F30.2-F30.4, F30.8, F30.9, F31.0, F31.10-F31.13, F31.2, F31.30-F31.32, F31.4, F31.5, F31.60-F31.64, F31.70-F31.78
Other Bipolar Disorder	**ICD10CM:** F31.81, F31.89, F31.9
Depression	**ICD10CM:** F01.511, F01.518, F32.0-F32.5, F32.81, F32.89, F32.9, F32.A, F33.0-F33.3, F33.40-F33.42, F33.8, F33.9, F34.1, F34.81, F34.89, F43.21, F43.23, F53.0, F53.1, O90.6, O99.340-O99.345

How to Close the Follow-Up Gap

I. Screen	II. Identify Result	III. Complete Follow-Up	IV. Document & Submit Claim
Complete a standardized depression screening and record the total score.	If the screening is positive, start the 31-day follow-up window.	Complete eligible follow-up the same day or within 30 days.	Use a **PHQ-2** as the initial screening tool. If the screening result is positive, conduct a **PHQ-9 during the same visit** to support screening and follow-up compliance. Submit the depression screening using the appropriate **LOINC code,** and document both the screening score and date of service in the EHR. Submit as supplemental data through your data aggregator, such as **Cozeva** or **Arcadia.**

How to Improve HEDIS® Scores

- Use standardized clinical depression screening templates in charts and in electronic health records (EHRs). Ensure that these templates capture the score and screening result.
- If you are using the PHQ-2 assessment and the result is positive, conduct a PHQ-9. A positive PHQ-2 followed by a negative PHQ-9 counts toward the follow-up measure.
- Submit LOINC codes for depression screening to Blue Shield Promise via a supplemental data feed extracted from your EHR. Reach out to your assigned Blue Shield Promise Quality Program Manager for assistance or email HEDISSUPPDATA@blueshieldca.com for questions related to supplemental data feeds.
- If your practice/group uses a data aggregator, such as Cozeva® or Arcadia®, they can be used to capture the depression screening results with the LOINC codes.
- Avoid missed opportunities by taking advantage of every office visit to provide clinical depression screening.
- An outpatient visit, telephone visit, e-visit, or virtual check-in may be used to meet the follow-up requirements of this measure.
- The U.S. Preventive Services Task Force (USPSTF) recommends screening for depression among adolescents 12 to 18 years of age and the general adult population, including pregnant and postpartum women. They also recommend that screening is implemented with adequate systems in place to ensure an accurate diagnosis, effective treatment, and appropriate follow-up.
- Visit the Behavioral Health Services Program section on the Blue Shield Promise website for information on behavioral health referrals.

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