

HEDIS® Tip Sheet

Depression Screening and Follow-Up for Adolescents and Adults (DSF-E)

CarePartners of Connecticut's HEDIS Tip Sheets outline key features of specific HEDIS measures. These best practices and tips can optimize HEDIS scores and identify opportunities to improve patient care.



The DSF-E measure assesses the percentage of patients 12 years of age and older (18+ for Medicare) who were screened for clinical depression using a standardized instrument and, if screened positive, received follow-up care. Two rates are reported:

- **Depression Screening:** The percentage of patients who were screened for clinical depression using an age-appropriate, standardized instrument between Jan. 1 and Dec. 1 of the measurement year
- **Follow-Up on Positive Screen:** The percentage of patients who received follow-up care on or up to 30 days after the date of the first positive screen (31 total days)



Provider Best Practices

- **Select** age-appropriate, standardized instruments when screening patients for depression.
- **Inform** patients that they can complete the PHQ-9 during in-person appointments, telehealth or telephone visits, or via web-based portals/applications. (Avoid missed opportunities by taking advantage of office visits to provide clinical depression screening.)
- **Use** standardized clinical depression screening templates in charts and EMRs. Submit EMR data in supplemental data files to the health plan including depression screening tool LOINC codes, dates, and results, along with appropriate codes and dates for follow-up after positive screenings.
- **Educate** patients on the importance of mental health and wellness and of follow-up care and adherence to depression treatment recommendations.
- **Contact** patients who cancel or miss appointments for reassessment.
- **Coordinate** care with behavioral health practitioners by sharing progress notes and updates.
- **Set** alerts in EMRs for patients who need follow-up visits and screenings.
- **Be sure** to code for exclusions.

Measure Description Exclusions

- Patients diagnosed with bipolar disorder **anytime** during the patient's history through the end of the year prior to the measurement year
- Patients diagnosed with depression that **starts** during the year prior to the measurement year

Please note that depression screening captured in health risk assessments or other types of health assessments are allowed if the questions align with an instrument that is validated for depression screening.

For example, if a health risk assessment includes all questions from the PHQ-2, it counts as screening if the patient answered the questions, and a total score is calculated.

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The following meet the criteria for follow-up within 30 days:

- An outpatient, telephone, e-visit or virtual check-in 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 (ICD-10-CM code X71.82)
- A dispensed antidepressant medication
- Documentation of an additional full-length depression screening 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

Did you know?



The U.S. Preventive Services Task Force (USPSTF) recommends screening for depression among adolescents 12-18 years of age and the general adult population, including pregnant and post-partum women.

The USPSTF also recommends that screening be implemented with adequate systems in place to ensure accurate diagnosis, effective treatment, and appropriate follow-up.

Eligible screening instruments with thresholds for positive findings include:

Standardized Instruments	Age		LOINC Code	Positive Finding (Total Score)
	≤ 17	18+		
Patient Health Questionnaire Modified for Teens (PHQ-9M)	x		89204-2	≥ 10
Patient Health Questionnaire (PHQ-9)	x	x	44261-6	≥ 10
Patient Health Questionnaire 2 (PHQ-2) ¹	x	x	55758-7	≥ 3
Beck Depression Inventory-Fast Screen (BDI-FS) ^{1,2}	x	x	89208-3	≥ 8
Center for Epidemiologic Studies Depression Scale - Revisited (CESD-R)	x	x	89205-9	≥ 17
Edinburgh Postnatal Depression Scale (EPDS)	x	x	99046-5	≥ 10
PROMIS Depression	x	x	71965-8	≥ 60
Beck Depression Inventory (BDI-II)		x	89209-1	≥ 20
Duke Anxiety-Depression Scale (DUKE-AD) ²		x	90853-3	≥ 30
My Mood Monitor (M-3)		x	71777-7	≥ 5
Clinically Useful Depression Outcome Scale (CUDOS)		x	90221-3	≥ 31
Geriatric Depression Scale Short Form (GDS) ¹		x	48545-8	≥ 5
Geriatric Depression Scale Long Form (GDS)		x	48544-1	≥ 10
PROMIS Emotional Distress-Depression-Short Form		x	77861-3	≥ 60

¹ Brief screening instrument. All other instruments are full-length.

² Proprietary: May be cost or licensing requirement associated with use.



Additional Resources

Learn more by visiting the [Anxiety & Depression Association of America](https://www.anxietyanddepression.org/).