

What is HEDIS®?

HEDIS® (Healthcare Effectiveness Data Information Set) is a comprehensive set of performance measures used widely in the managed care industry, developed by NCQA. Use of the HEDIS measures helps ensure high-quality care by measuring outcomes and guiding improvement efforts.

What is the HEDIS® DSF measure looking at?

The percentage of 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.*
- *Follow-Up on Positive Screen. The percentage of members who received follow-up care within 30 days of a positive depression screen finding.*

Why is the HEDIS® DSF measure important?

Screening to identify depression for 12 years and older general adult population, including pregnant and postpartum women. Routine screening for depression allows healthcare providers to identify individuals who may be experiencing depression earlier, which can lead to timely intervention and treatment. Early detection is crucial as it can prevent the condition from worsening and reduce the risk of associated complications such as suicide, substance abuse, and diminished quality of life.

Who is included in the measure?

- Members 12 years of age and older at the start of the measurement period
- Meet criteria for participation: The member enrolled with a medical benefit throughout the measurement period with no more than 45 of gap in enrollment and must be enrolled on the last day of measurement period.

Which Members are excluded?

- Members with a history of bipolar disorder through the end of the previous year.
- Members with depression that starts during the year prior to the measurement period.
- Members using hospice services at any time during the year
- Members who die any time during the measurement period

When does the Member 'pass' the measure?

- **Depression Screening:** Members with a documented result for depression screening, using an age-appropriate standardized instrument, performed between January 1 and December 1 of the measurement period.
- **Follow-up on Positive Screening:** Members who received follow-up care on or up to 30 days after the date of the first positive screen (31 total days).

What counts as a follow up visit?

Follow-up care must occur within 31 days of a member's first positive depression screen. This can include any of the following actions:

- An outpatient, telephone, e-visit, or virtual check-in specifically addressing a diagnosis of depression or another behavioral health condition.
- An encounter for depression case management that includes either a symptoms assessment or a documented

diagnosis of depression or another behavioral health condition.

- Engagement in a behavioral health session involving assessment, therapy, collaborative care, or medication management.
- Dispensing of an antidepressant medication to the member.
- Documentation of an additional depression screening using a full-length instrument on the same day as a brief positive screen, which indicates no depression or symptoms not requiring follow-up (i.e., a negative screen).

What can providers do to help improve HEDIS® DSF rates?

- Use appropriate documentation and correct coding
- Explain the importance of follow-up to your patients
- Schedule a follow-up appointment within 31 days if screened positive for depression.
- Reach out to patients who do not keep initial appointments and reschedule them as soon as possible.
- Utilize telehealth and home based therapy where appropriate
- Provide timely submission of claims and encounter data.
- New for 2025: Coordinate lab result communication with PCP for patients with infrequent contact
- New for 2025: Evaluate and refer patients for Case Management when necessary
- New for 2025: Document all exam elements, response to medication, and test results
- New for 2025: Schedule appropriate lab screenings for patients

Standard assessment instrument:

Instruments for adolescents (≤17 years)	Total Score LOINC Codes	Positive Finding
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)® ¹²	89208-3	Total score ≥8
Center for Epidemiologic Studies Depression Scale - Revised (CESD-R)	89205-9	Total score ≥17
Edinburgh Postnatal Depression Scale (EPDS)	71354-5	Total score ≥10
PROMIS Depression	71965-8	Total score (T Score) ≥60

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) ^{®12}	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
Geriatric Depression Scale Short Form (GDS) ¹	48545-8	Total score ≥5
Geriatric Depression Scale Long Form (GDS)	48544-1	Total score ≥10
My Mood Monitor (M-3) [®]	71777-7	Total score ≥5
PROMIS Depression	71965-8	Total score (T Score) ≥60
Clinically Useful Depression Outcome Scale (CUDOS)	90221-3	Total score ≥31

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