

CBE ID

1884

Title

Depression Response at Six Months- Progress Towards Remission

Project

Behavioral Health and Substance Use

Endorsement Status

Endorsed

Is Under Review

No

Next Maintenance Cycle

Spring 2028

Previous Endorsement Cycle

Spring 2022

Initial Endorsement

Tue, 03/04/2014 - 05:05

Steward

MN Community Measurement

1.0 New or Maintenance

Maintenance

1.1 Measure Structure

Single Measure

1.3 Electronic Clinical Quality Measure (eCQM)

No

1.6 Measure Description

Adult patients age 18 and older with major depression or dysthymia and an initial PHQ-9 score > 9 who demonstrate a response to treatment at six months defined as a PHQ-9 score that is reduced by 50% or greater from the initial PHQ-9 score. This measure applies to both patients with newly diagnosed and existing depression identified during the defined measurement period whose current PHQ-9 score indicates a need for treatment. This measure additionally promotes ongoing contact between the patient and provider as patients who do not have a follow-up PHQ-9 score at six months (+/- 30 days) are also included in the denominator.

1.7 Measure Type

Patient-reported Outcome Performance Measure (PRO-PM)

1.8 Level of Analysis

Clinician: Group/Practice, Facility

1.9 Care Setting

Outpatient Services

1.14 Numerator

Adults age 18 and older with a diagnosis of major depression or dysthymia and an initial PHQ-9 score greater than nine who achieve a response at six months as demonstrated by a six month (+/- 30 days) PHQ-9 score that is reduced by 50% or greater from the initial PHQ-9 score.

1.15 Denominator

Adults age 18 and older with a diagnosis of major depression or dysthymia and an initial PHQ-9 score greater than nine.

1.20 Types of Data Sources

Electronic Health Records, Electronic Health Records: Electronic Health Records, Other, Paper Patient Medical Records

6.1.2 Current or Planned Use(s)

Payment Program, Public Reporting, Quality Improvement (Internal to the specific organization), Quality Improvement with Benchmarking (external benchmarking to multiple organizations)

6.1.3 Current Use(s)

Public Reporting

Exclusions

Patients who die, are a permanent resident of a nursing home or are enrolled in hospice or palliative care services are excluded from this measure. Additionally, patients who have a diagnosis (in any position) of bipolar or personality disorder are excluded.

Measure Disclaimer

N/A

Planned Use

Payment Program, Public Reporting, Quality Improvement (Internal to the specific organization), Quality Improvement with Benchmarking (external benchmarking to multiple organizations)

Risk Adjustment

Statistical risk model

Target Population

Adults (Age \geq 18), Children (Age $<$ 18), Elderly (Age \geq 65), Populations at Risk:
Populations at Risk

Steward Organization

MN Community Measurement

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