

Text Description for PCPI eSpecification

Clinical Topic	Child and Adolescent Major Depressive Disorder
Measure Title	Diagnostic Evaluation
Measure #	PCPI # CA.MDD-2 / NQF # 1364
Measure Description	Percentage of patients aged 6 through 17 years with a diagnosis of major depressive disorder with documented evidence that they met the DSM-IV criteria [at least 5 elements with symptom duration of two weeks or longer, including 1) depressed mood (<i>can be irritable mood in children and adolescents</i>) or 2) loss of interest or pleasure] during the visit in which the new diagnosis or recurrent episode was identified
Measurement Period	12 consecutive months
Initial Patient Population	All patients aged 6 through 17 years with a diagnosis of major depressive disorder
Denominator Statement	Equals Initial Patient Population
Denominator Exclusions	None
Numerator Statement	Patients with documented evidence that they met the DSM-IV criteria [at least 5 elements with symptom duration of two weeks or longer, including 1) depressed mood (<i>can be irritable mood in children and adolescents</i>) or 2) loss of interest or pleasure] during the visit in which the new diagnosis or recurrent episode was identified Definition: The criteria for an MDD episode include five (or more) of nine specific symptoms: - depressed mood (<i>Note: in children and adolescents, can be irritable mood</i>) - marked diminished interest/pleasure; - significant weight loss or gain; (<i>Note: in children, consider failure to make expected weight gains</i>) - insomnia or hypersomnia; - psychomotor agitation or retardation; - fatigue or loss of energy; - feelings of worthlessness; - diminished ability to concentrate; and - recurrent suicidal ideation which have been present during the same two-week period and represent a change from previous functioning; at least one of the symptoms is either 1) depressed mood or 2) loss of interest or pleasure. <i>Note: The essential feature of a major depressive disorder is a period of at least two weeks during which there is either depressed mood or irritability or the loss of interest or pleasure in nearly all activities. In children and adolescents, can be irritable or cranky mood.</i>
Denominator Exceptions	None

Child and Adolescent Major Depressive Disorder
Data Requirements Table for PCPI eSpecification

[1364] Child and Adolescent Major Depressive Disorder: Diagnostic Evaluation

Measure Component	QDM* Standard Category	QDM* Data Type	Value Set Name	Standard Terminology	OID	Constraints	Comments/Rationale
Supplemental Data Elements	Individual Characteristic	Patient Characteristic	ONC Administrative Sex	HL7 (2.16.840.1.113883.5.1)	2.16.840.1.113762.1.4.1	during measurement period	This data element is collected for the purpose of stratifying results in an effort to highlight disparities.
	Individual Characteristic	Patient Characteristic	Race	CDC	2.16.840.1.114222.4.11.836	during measurement period	This data element is collected for the purpose of stratifying results in an effort to highlight disparities.
	Individual Characteristic	Patient Characteristic	Ethnicity	CDC	2.16.840.1.114222.4.11.837	during measurement period	This data element is collected for the purpose of stratifying results in an effort to highlight disparities.
	Individual Characteristic	Patient Characteristic	Preferred Language	CDC	2.16.840.1.114222.4.11.831	during measurement period	This data element is collected for the purpose of stratifying results in an effort to highlight disparities.
	Individual Characteristic	Patient Characteristic	Payer	Source of Payment Typology	2.16.840.1.113883.221.5	during measurement period	This data element is collected for the purpose of stratifying results in an effort to highlight disparities.
Initial Patient Population	Measure Timing	n/a	Measurement Start Date	n/a	n/a	TBD by Measure Implementer	
	Measure Timing	n/a	Measurement End Date	n/a	n/a	TBD by Measure Implementer	
	Individual Characteristic	Patient Characteristic	Birth Date	LOINC	2.16.840.1.113883.3.560.100.4	starts before the start of measurement period >= 6 starts before the start of measurement period	
	Individual Characteristic	Patient Characteristic	age	Calculation	n/a	AND < 18 starts before the start of measurement period	Measurement start date minus Birth Date must be greater than or equal to 6 years AND less than 18 years to meet initial patient population (denominator) inclusion criteria.
	Encounter	Encounter, Performed	Office Visit [Occurrence A]	GROUPING CPT	2.16.840.1.113883.3.464.1003.101.12.1001 2.16.840.1.113883.3.464.1003.101.11.1005	during measurement period COUNT >=2	99201, 99202, 99203, 99204, 99205, 99212, 99213, 99214, 99215
	Encounter	Encounter, Performed	Outpatient Consultation [Occurrence A]	GROUPING CPT	2.16.840.1.113883.3.464.1003.101.12.1008 2.16.840.1.113883.3.464.1003.101.11.1040	during measurement period COUNT >=2	99241, 99242, 99243, 99244, 99245
	Encounter	Encounter, Performed	Psych Visit - Diagnostic Evaluation [Occurrence A]	GROUPING CPT	500053	during measurement period COUNT >=2	90791, 90792
	Encounter	Encounter, Performed	Psych Visit - Psychotherapy [Occurrence A]	GROUPING CPT	500054	during measurement period COUNT >=2	90832, 90834, 90837
	Encounter	Encounter, Performed	Psychoanalysis [Occurrence A]	GROUPING CPT	2.16.840.1.113883.3.526.3.1141 2.16.840.1.113883.3.526.2.1243	during measurement period COUNT >=2	90845
	Encounter	Encounter, Performed	Psych Visit - Family Psychotherapy [Occurrence A]	GROUPING CPT	2.16.840.1.113883.3.526.3.1018 2.16.840.1.113883.3.526.2.1058	during measurement period COUNT >=2	90846, 90847
	Encounter	Encounter, Performed	Psych Visit - Group Psychotherapy [Occurrence A]	GROUPING CPT	500055	during measurement period COUNT >=2	90853
	Encounter	Encounter, Performed	Face-to-Face Interaction [Occurrence A]	GROUPING SNOMED-CT	2.16.840.1.113883.3.464.1003.101.12.1048 2.16.840.1.113883.3.464.1003.101.11.1216	during measurement period	The values included in this value set are used to collect the initial patient population (denominator) eligible encounters.
	Encounter	Encounter, Performed	Patient Provider Interaction	GROUPING SNOMED-CT	2.16.840.1.113883.3.526.3.1012 2.16.840.1.113883.3.526.2.1049	during measurement period COUNT >=2	The values included in the value set 'Patient Provider Interaction' qualify for the measure requirement requiring a COUNT of >= 2 visits for the measure -- these values are not eligible visits for denominator inclusion.
	Condition / Diagnosis / Problem	Diagnosis, Active	Major Depressive Disorder-Active [Occurrence A]	GROUPING ICD-9-CM ICD-10-CM SNOMED-CT	500024	starts during [Encounter, Performed - Occurrence A]	
Denominator	Equals Initial Patient Population						
	Condition / Diagnosis / Problem	Diagnosis, Active	Major Depressive Disorder-Remission	GROUPING ICD-9-CM ICD-10-CM SNOMED-CT	500056	starts before start of [Encounter, Performed - Occurrence A] <= 180 days	This value set will only include those with a status in remission (unspecified, partial, full). For a patient to be considered as having MDD in remission, they must exhibit absence of symptoms for 180 days.
	Condition / Diagnosis / Problem	Diagnosis, Inactive	Major Depressive Disorder-Active [Occurrence B]	GROUPING ICD-9-CM ICD-10-CM SNOMED-CT	500024	starts before start of [Encounter, Performed - Occurrence A] <= 180 days	If the patient had an inactive diagnosis of MDD within 180 days prior to [Encounter, Performed - Occurrence A], they will be included in the measure denominator. This is another way to capture a patient in remission.
Denominator Exclusions	None						
Numerator	Symptom	Symptom, Active	Depressed Mood	GROUPING SNOMED-CT	500026	during [Encounter, Performed - Occurrence A]	To meet DSM-IV-TR criteria, the patient must display five of nine symptoms, with one of the five being either depressed mood OR loss of interest/pleasure. For a full listing of the nine symptoms, please reference the measure worksheets.
	Symptom	Symptom, Active	Loss of Interest or Pleasure	GROUPING SNOMED-CT	500025	during [Encounter, Performed - Occurrence A]	
	Symptom	Symptom, Active	Weight Change or Appetite Change	GROUPING SNOMED-CT	500027	during [Encounter, Performed - Occurrence A]	
	Symptom	Symptom, Active	Sleep Disturbances, Hypersomnia or Insomnia	GROUPING SNOMED-CT	500028	during [Encounter, Performed - Occurrence A]	All data elements in the numerator, with a QDM Data Type of 'Symptom, Active' are symptoms that would meet the DSM-IV-TR criteria and be applied as one of the 5/9 symptoms requirement. The combinations and quantity of symptom types will be captured in the HQMF logic using the function 'Count'.
	Symptom	Symptom, Active	Psychomotor Agitation or Retardation	GROUPING SNOMED-CT	500029	during [Encounter, Performed - Occurrence A]	
	Symptom	Symptom, Active	Fatigue or Loss of Energy	GROUPING SNOMED-CT	500030	during [Encounter, Performed - Occurrence A]	The evaluation of symptoms should be conducted at the first visit of a new or recurrent episode during the measurement period; it is not expected to be conducted at every visit during the episode.
	Symptom	Symptom, Active	Feelings of Worthlessness or Guilt	GROUPING SNOMED-CT	500031	during [Encounter, Performed - Occurrence A]	
	Symptom	Symptom, Active	Diminished Ability to Think or Concentrate or Indecisiveness	GROUPING SNOMED-CT	500032	during [Encounter, Performed - Occurrence A]	
Denominator Exceptions	None						
			Recurrent Thoughts of Death or Suicidal Ideation	GROUPING SNOMED-CT	500033	during [Encounter, Performed - Occurrence A]	

Measure Performance Rate Calculation:

$$\frac{N}{(D - EXCL - EXCEP)} = \text{Performance Rate}$$

(D- EXCL – EXCEP)

The PCPI strongly recommends that exception rates also be computed and reported alongside performance rates as follows:

Measure Exception Rate Calculation:

$$\frac{EXCEP}{(D - EXCL)} = \text{Exception Rate}$$

Exception Types:

EXCEP= E1 (Medical Exceptions) + E2 (Patient Exceptions) + E3 (System Exceptions)

For patients who have more than one valid exception, only one exception should be counted when calculating the exception rate.

Initial Patient Population (IPP)	Denominator (D)	Exclusions (EXCL)	Numerator (N)	Exceptions (EXCEP)
Definition: The group of patients that a set of performance measures is designed to address; usually focused on a specific clinical condition (e.g., coronary artery disease, asthma). For example, a patient aged 18 years and older with a diagnosis of CAD who has at least 2 visits during the measurement period.	Definition: The specific group of patients for inclusion in a specific performance measure based on specific criteria (e.g., patient's age, diagnosis, prior MI). In some cases, the denominator may be identical to the initial patient population.	Definition: The specific group of patients who should be subtracted from the measure population and denominator before determining if the numerator criteria are met.	Definition: The group of patients in the denominator for whom a process or outcome of care occurs (e.g., flu vaccine received).	Definition: The valid reasons why patients who are included in the denominator population did not receive a process or outcome of care (described in the numerator). Patients may have Exceptions for medical reasons (e.g., patient has an egg allergy so they did not receive flu vaccine); patient reasons (e.g., patient declined flu vaccine); or system reasons (e.g., patient did not receive flu Vaccine due to vaccine shortage). These cases are subtracted from the denominator population for the performance calculation, however the number of patients with valid exceptions should be calculated and reported. This group of patients constitutes the Exception reporting population – patients for whom the numerator was not achieved and a there is a valid Exception.
Find the patients who meet the Initial Patient Population criteria (IPP)	Find the patients who qualify for the Denominator (D): From the patients within the Patient Population criteria (IPP) select those people who meet Denominator selection criteria. (In some cases the IPP and D are identical).	Find the patients who qualify for the Exclusion: (EXCL): From the patients within the Denominator criteria, select those patients who meet Exclusion criteria. The patients meeting exclusion criteria should be removed from the Denominator.	Find the patients who qualify for the Numerator (N): From the patients within the Denominator (D) criteria, select those people who meet Numerator selection criteria. Validate that the number of patients in the numerator is less than or equal to the number of patients in the denominator.	From the patients who did not meet the Numerator criteria, determine if the patient meets any criteria for the Exception (E1 + E2+E3). If they meet any criteria, they should be removed from the Denominator for performance calculation. As a point of reference, these cases are removed from the denominator population for the performance calculation, however the number of patients with valid exceptions should be calculated and reported.

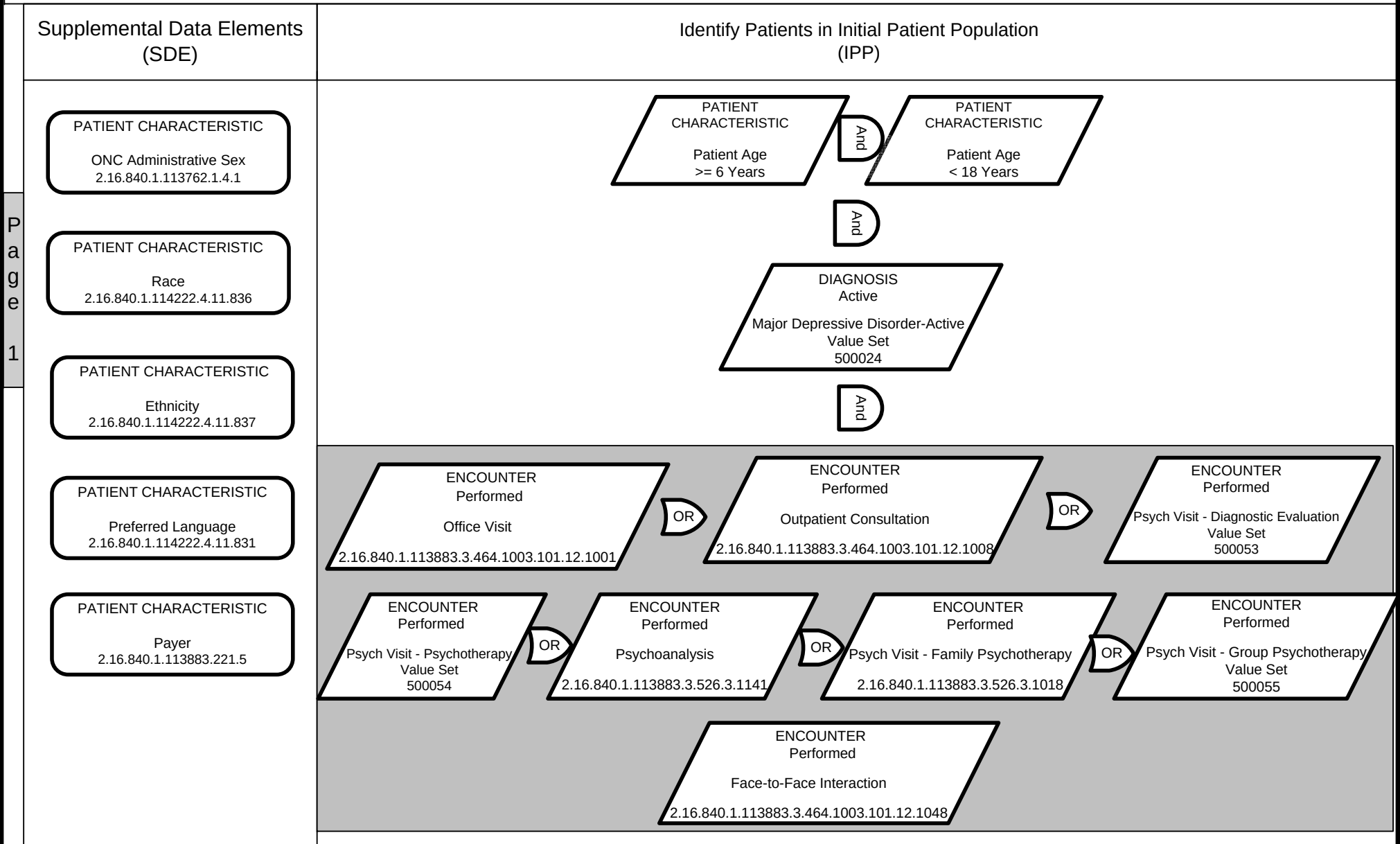
Visual Representation for PCPI eSpecification

Measure Logic for Child and Adolescent Major Depressive Disorder: Diagnostic Evaluation

Measure Description: Percentage of patients aged 6 through 17 years with a diagnosis of major depressive disorder with documented evidence that they met the DSM-IV criteria [at least 5 elements with symptom duration of two weeks or longer, including 1) depressed mood (*can be irritable mood in children and adolescents*) or 2) loss of interest or pleasure] during the visit in which the new diagnosis or recurrent episode was identified

Measurement Period: 12 Consecutive Months

PCPI Measure #: CA.MDD-2 / NQF # 1364



See Data Requirements Table for timing constraints and relationship between data elements.

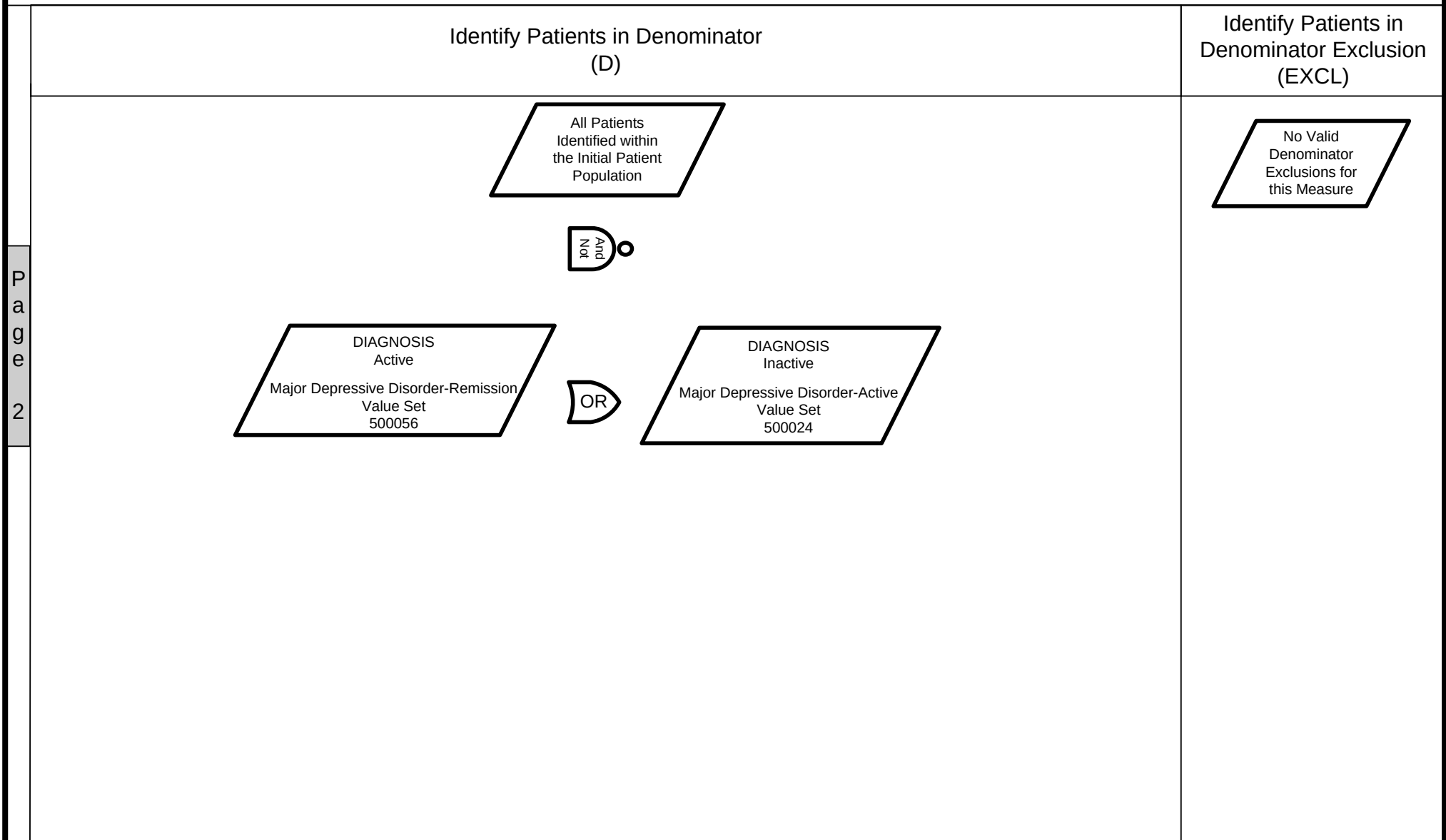
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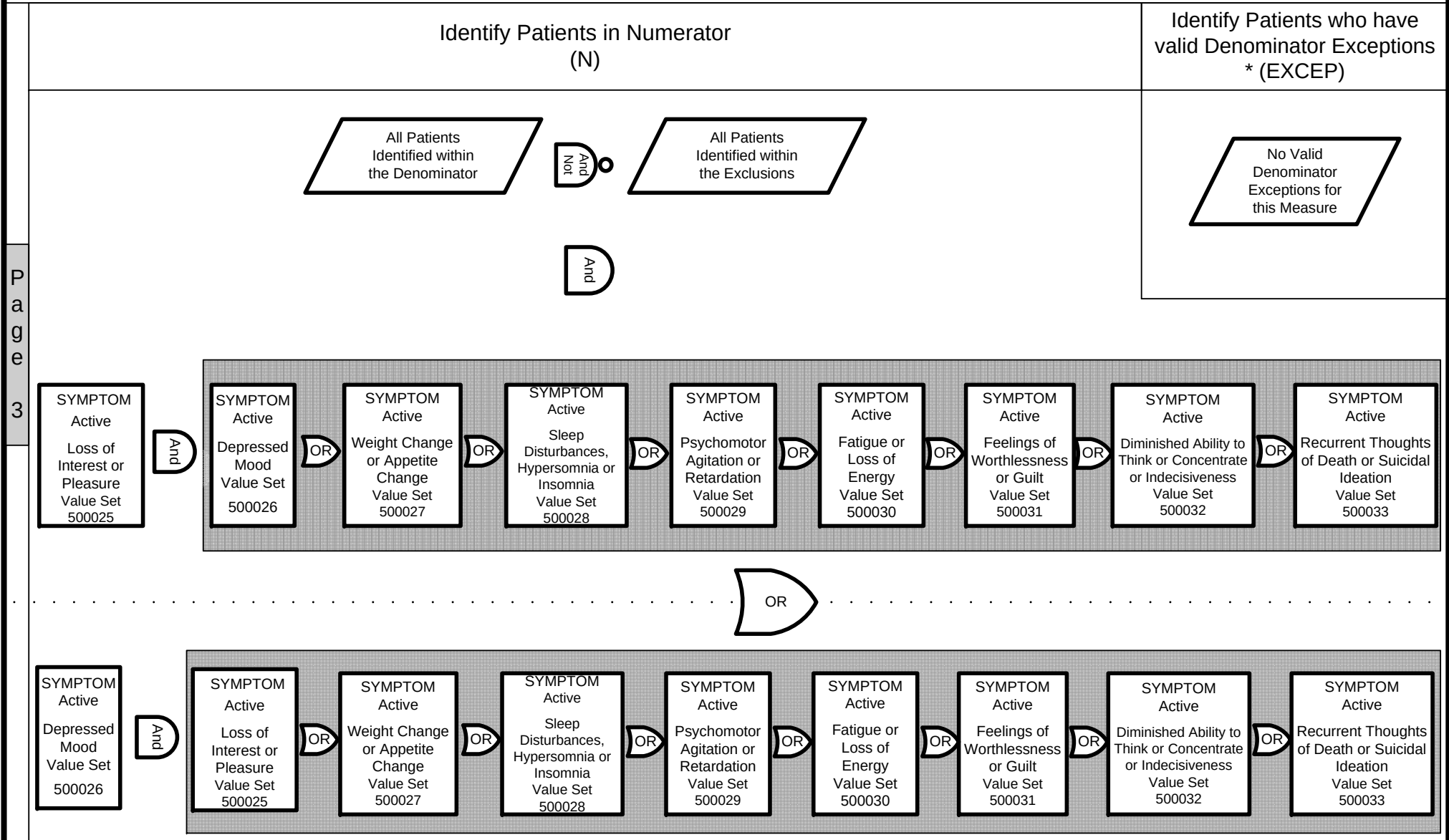
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See Data Requirements Table for timing constraints and relationship between data elements.

*Coded examples for exceptions are NOT intended to be an exhaustive list. Exceptions will vary for each patient and situation.

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Value Set Spreadsheet for PCPI eSpecification
 [1364] Child and Adolescent Major Depressive Disorder: Diagnostic Evaluation

Value Set ID	Clinical Topic	Topic Indicator	Measure Component	Value Set Title	QDM Standard Category	Taxonomy	Code	Code Descriptor
2.16.840.1.113883.3.560.100.4	CA.MDD	2	IPP	Birth Date	Individual Characteristic	LOINC	21112-8	Birth date
500024	CA.MDD	2	IPP	Major Depressive Disorder-Active	Condition / Diagnosis / Problem	ICD-9-CM	296.20	Major depressive disorder, single episode, unspecified degree
500024	CA.MDD	2	IPP	Major Depressive Disorder-Active	Condition / Diagnosis / Problem	ICD-9-CM	296.21	Major depressive disorder, single episode, mild degree
500024	CA.MDD	2	IPP	Major Depressive Disorder-Active	Condition / Diagnosis / Problem	ICD-9-CM	296.22	Major depressive disorder, single episode, moderate degree
500024	CA.MDD	2	IPP	Major Depressive Disorder-Active	Condition / Diagnosis / Problem	ICD-9-CM	296.23	Major depressive disorder, single episode, severe degree, without mention of psychotic behavior
500024	CA.MDD	2	IPP	Major Depressive Disorder-Active	Condition / Diagnosis / Problem	ICD-9-CM	296.24	Major depressive disorder, single episode, severe degree, specified as with psychotic behavior
500024	CA.MDD	2	IPP	Major Depressive Disorder-Active	Condition / Diagnosis / Problem	ICD-9-CM	296.30	Major depressive disorder, recurrent episode, unspecified degree
500024	CA.MDD	2	IPP	Major Depressive Disorder-Active	Condition / Diagnosis / Problem	ICD-9-CM	296.31	Major depressive disorder, recurrent episode, mild degree
500024	CA.MDD	2	IPP	Major Depressive Disorder-Active	Condition / Diagnosis / Problem	ICD-9-CM	296.32	Major depressive disorder, recurrent episode, moderate degree
500024	CA.MDD	2	IPP	Major Depressive Disorder-Active	Condition / Diagnosis / Problem	ICD-9-CM	296.33	Major depressive disorder, recurrent episode, severe degree, without mention of psychotic behavior
500024	CA.MDD	2	IPP	Major Depressive Disorder-Active	Condition / Diagnosis / Problem	ICD-9-CM	296.34	Major depressive disorder, recurrent episode, severe degree, specified as with psychotic behavior
500024	CA.MDD	2	IPP	Major Depressive Disorder-Active	Condition / Diagnosis / Problem	ICD-10-CM	F32.0	Major depressive disorder, single episode, mild
500024	CA.MDD	2	IPP	Major Depressive Disorder-Active	Condition / Diagnosis / Problem	ICD-10-CM	F32.1	Major depressive disorder, single episode, moderate
500024	CA.MDD	2	IPP	Major Depressive Disorder-Active	Condition / Diagnosis / Problem	ICD-10-CM	F32.2	Major depressive disorder, single episode, severe without psychotic features
500024	CA.MDD	2	IPP	Major Depressive Disorder-Active	Condition / Diagnosis / Problem	ICD-10-CM	F32.3	Major depressive disorder, single episode, severe with psychotic features
500024	CA.MDD	2	IPP	Major Depressive Disorder-Active	Condition / Diagnosis / Problem	ICD-10-CM	F32.9	Major depressive disorder, single episode, unspecified
500024	CA.MDD	2	IPP	Major Depressive Disorder-Active	Condition / Diagnosis / Problem	ICD-10-CM	F33.0	Major depressive disorder, recurrent, mild
500024	CA.MDD	2	IPP	Major Depressive Disorder-Active	Condition / Diagnosis / Problem	ICD-10-CM	F33.1	Major depressive disorder, recurrent, moderate
500024	CA.MDD	2	IPP	Major Depressive Disorder-Active	Condition / Diagnosis / Problem	ICD-10-CM	F33.2	Major depressive disorder, recurrent severe without psychotic features
500024	CA.MDD	2	IPP	Major Depressive Disorder-Active	Condition / Diagnosis / Problem	ICD-10-CM	F33.3	Major depressive disorder, recurrent, severe with psychotic symptoms
500024	CA.MDD	2	IPP	Major Depressive Disorder-Active	Condition / Diagnosis / Problem	ICD-10-CM	F33.9	Major depressive disorder, recurrent, unspecified
500024	CA.MDD	2	IPP	Major Depressive Disorder-Active	Condition / Diagnosis / Problem	SNOMED-CT	832007	Moderate major depression (disorder)
500024	CA.MDD	2	IPP	Major Depressive Disorder-Active	Condition / Diagnosis / Problem	SNOMED-CT	2618002	Chronic recurrent major depressive disorder (disorder)
500024	CA.MDD	2	IPP	Major Depressive Disorder-Active	Condition / Diagnosis / Problem	SNOMED-CT	14183003	Chronic major depressive disorder, single episode (disorder)
500024	CA.MDD	2	IPP	Major Depressive Disorder-Active	Condition / Diagnosis / Problem	SNOMED-CT	15193003	Severe recurrent major depression with psychotic features, mood-incongruent (disorder)
500024	CA.MDD	2	IPP	Major Depressive Disorder-Active	Condition / Diagnosis / Problem	SNOMED-CT	15639000	Moderate major depression, single episode (disorder)
500024	CA.MDD	2	IPP	Major Depressive Disorder-Active	Condition / Diagnosis / Problem	SNOMED-CT	18818009	Moderate recurrent major depression (disorder)
500024	CA.MDD	2	IPP	Major Depressive Disorder-Active	Condition / Diagnosis / Problem	SNOMED-CT	20250007	Severe major depression, single episode, with psychotic features, mood-incongruent (disorder)
500024	CA.MDD	2	IPP	Major Depressive Disorder-Active	Condition / Diagnosis / Problem	SNOMED-CT	25922000	Major depressive disorder, single episode with postpartum onset (disorder)
500024	CA.MDD	2	IPP	Major Depressive Disorder-Active	Condition / Diagnosis / Problem	SNOMED-CT	28475009	Severe recurrent major depression with psychotic features (disorder)
500024	CA.MDD	2	IPP	Major Depressive Disorder-Active	Condition / Diagnosis / Problem	SNOMED-CT	33078009	Severe recurrent major depression with psychotic features, mood-congruent (disorder)
500024	CA.MDD	2	IPP	Major Depressive Disorder-Active	Condition / Diagnosis / Problem	SNOMED-CT	33736005	Severe major depression with psychotic features, mood-congruent (disorder)
500024	CA.MDD	2	IPP	Major Depressive Disorder-Active	Condition / Diagnosis / Problem	SNOMED-CT	36474008	Severe recurrent major depression without psychotic features (disorder)
500024	CA.MDD	2	IPP	Major Depressive Disorder-Active	Condition / Diagnosis / Problem	SNOMED-CT	36923009	Major depression, single episode (disorder)
500024	CA.MDD	2	IPP	Major Depressive Disorder-Active	Condition / Diagnosis / Problem	SNOMED-CT	38694004	Recurrent major depressive disorder with atypical features (disorder)
500024	CA.MDD	2	IPP	Major Depressive Disorder-Active	Condition / Diagnosis / Problem	SNOMED-CT	39809009	Recurrent major depressive disorder with catatonic features (disorder)
500024	CA.MDD	2	IPP	Major Depressive Disorder-Active	Condition / Diagnosis / Problem	SNOMED-CT	40379007	Mild recurrent major depression (disorder)
500024	CA.MDD	2	IPP	Major Depressive Disorder-Active	Condition / Diagnosis / Problem	SNOMED-CT	42925002	Major depressive disorder, single episode with atypical features (disorder)
500024	CA.MDD	2	IPP	Major Depressive Disorder-Active	Condition / Diagnosis / Problem	SNOMED-CT	60099002	Severe major depression with psychotic features, mood-incongruent (disorder)
500024	CA.MDD	2	IPP	Major Depressive Disorder-Active	Condition / Diagnosis / Problem	SNOMED-CT	63778009	Major depressive disorder, single episode with melancholic features (disorder)
500024	CA.MDD	2	IPP	Major Depressive Disorder-Active	Condition / Diagnosis / Problem	SNOMED-CT	66344007	Recurrent major depression (disorder)
500024	CA.MDD	2	IPP	Major Depressive Disorder-Active	Condition / Diagnosis / Problem	SNOMED-CT	69392006	Major depressive disorder, single episode with catatonic features (disorder)
500024	CA.MDD	2	IPP	Major Depressive Disorder-Active	Condition / Diagnosis / Problem	SNOMED-CT	71336009	Recurrent major depressive disorder with postpartum onset (disorder)
500024	CA.MDD	2	IPP	Major Depressive Disorder-Active	Condition / Diagnosis / Problem	SNOMED-CT	73867007	Severe major depression with psychotic features (disorder)
500024	CA.MDD	2	IPP	Major Depressive Disorder-Active	Condition / Diagnosis / Problem	SNOMED-CT	75084000	Severe major depression without psychotic features (disorder)
500024	CA.MDD	2	IPP	Major Depressive Disorder-Active	Condition / Diagnosis / Problem	SNOMED-CT	76441001	Severe major depression, single episode, without psychotic features (disorder)
500024	CA.MDD	2	IPP	Major Depressive Disorder-Active	Condition / Diagnosis / Problem	SNOMED-CT	77911002	Severe major depression, single episode, with psychotic features, mood-congruent (disorder)
500024	CA.MDD	2	IPP	Major Depressive Disorder-Active	Condition / Diagnosis / Problem	SNOMED-CT	79298009	Mild major depression, single episode (disorder)
500024	CA.MDD	2	IPP	Major Depressive Disorder-Active	Condition / Diagnosis / Problem	SNOMED-CT	87512008	Mild major depression (disorder)
500024	CA.MDD	2	IPP	Major Depressive Disorder-Active	Condition / Diagnosis / Problem	SNOMED-CT	191610000	Recurrent major depressive episodes, mild (disorder)
500024	CA.MDD	2	IPP	Major Depressive Disorder-Active	Condition / Diagnosis / Problem	SNOMED-CT	191611001	Recurrent major depressive episodes, moderate (disorder)
500024	CA.MDD	2	IPP	Major Depressive Disorder-Active	Condition / Diagnosis / Problem	SNOMED-CT	191613003	Recurrent major depressive episodes, severe, with psychosis (disorder)
500024	CA.MDD	2	IPP	Major Depressive Disorder-Active	Condition / Diagnosis / Problem	SNOMED-CT	268621008	Recurrent major depressive episodes (disorder)
500024	CA.MDD	2	IPP	Major Depressive Disorder-Active	Condition / Diagnosis / Problem	SNOMED-CT	319768000	Recurrent major depressive disorder with melancholic features (disorder)
500024	CA.MDD	2	IPP	Major Depressive Disorder-Active	Condition / Diagnosis / Problem	SNOMED-CT	320751009	Major depression, melancholic type (disorder)
500024	CA.MDD	2	IPP	Major Depressive Disorder-Active	Condition / Diagnosis / Problem	SNOMED-CT	370143000	Major depressive disorder (disorder)
500024	CA.MDD	2	IPP	Major Depressive Disorder-Active	Condition / Diagnosis / Problem	SNOMED-CT	430852001	Severe major depression, single episode, with psychotic features (disorder)
2.16.840.1.113883.3.464.1003.101.12.1001	CA.MDD	2	IPP	Office Visit	Encounter	GROUPING	2.16.840.1.113883.3.464.1003.101.11.1005	"Office Visit" CPT value set
2.16.840.1.113883.3.464.1003.101.11.1005	CA.MDD	2	IPP	Office Visit	Encounter	CPT	99201	Office or other outpatient visit for the evaluation and management of a new patient, which requires these 3 key components: A problem focused history; A problem focused examination; Straightforward medical decision making. Counseling and/or coordination of care with other providers or agencies are provided consistent with the nature of the problem(s) and the patient's and/or family's needs. Usually, the presenting problem(s) are self limited or minor. Physicians typically spend 10 minutes face-to-face with the patient and/or family.

Value Set ID	Clinical Topic	Topic Indicator	Measure Component	Value Set Title	QDM Standard Category	Taxonomy	Code	Code Descriptor
2.16.840.1.113883.3.464.1003.101.11.1005	CA.MDD	2	IPP	Office Visit	Encounter	CPT	99202	Office or other outpatient visit for the evaluation and management of a new patient, which requires these 3 key components: An expanded problem focused history; An expanded problem focused examination; Straightforward medical decision making. Counseling and/or coordination of care with other providers or agencies are provided consistent with the nature of the problem(s) and the patient's and/or family's needs. Usually, the presenting problem(s) are of low to moderate severity. Physicians typically spend 20 minutes face-to-face with the patient and/or family.
2.16.840.1.113883.3.464.1003.101.11.1005	CA.MDD	2	IPP	Office Visit	Encounter	CPT	99203	Office or other outpatient visit for the evaluation and management of a new patient, which requires these 3 key components: A detailed history; A detailed examination; Medical decision making of low complexity. Counseling and/or coordination of care with other providers or agencies are provided consistent with the nature of the problem(s) and the patient's and/or family's needs. Usually, the presenting problem(s) are of moderate severity. Physicians typically spend 30 minutes face-to-face with the patient and/or family.
2.16.840.1.113883.3.464.1003.101.11.1005	CA.MDD	2	IPP	Office Visit	Encounter	CPT	99204	Office or other outpatient visit for the evaluation and management of a new patient, which requires these 3 key components: A comprehensive history; A comprehensive examination; Medical decision making of moderate complexity. Counseling and/or coordination of care with other providers or agencies are provided consistent with the nature of the problem(s) and the patient's and/or family's needs. Usually, the presenting problem(s) are of moderate to high severity. Physicians typically spend 45 minutes face-to-face with the patient and/or family.
2.16.840.1.113883.3.464.1003.101.11.1005	CA.MDD	2	IPP	Office Visit	Encounter	CPT	99205	Office or other outpatient visit for the evaluation and management of a new patient, which requires these 3 key components: A comprehensive history; A comprehensive examination; Medical decision making of high complexity. Counseling and/or coordination of care with other providers or agencies are provided consistent with the nature of the problem(s) and the patient's and/or family's needs. Usually, the presenting problem(s) are of moderate to high severity. Physicians typically spend 60 minutes face-to-face with the patient and/or family.
2.16.840.1.113883.3.464.1003.101.11.1005	CA.MDD	2	IPP	Office Visit	Encounter	CPT	99212	Office or other outpatient visit for the evaluation and management of an established patient, which requires at least 2 of these 3 key components: A problem focused history; A problem focused examination; Straightforward medical decision making. Counseling and/or coordination of care with other providers or agencies are provided consistent with the nature of the problem(s) and the patient's and/or family's needs. Usually, the presenting problem(s) are self limited or minor. Physicians typically spend 10 minutes face-to-face with the patient and/or family.
2.16.840.1.113883.3.464.1003.101.11.1005	CA.MDD	2	IPP	Office Visit	Encounter	CPT	99213	Office or other outpatient visit for the evaluation and management of an established patient, which requires at least 2 of these 3 key components: An expanded problem focused history; An expanded problem focused examination; Medical decision making of low complexity. Counseling and coordination of care with other providers or agencies are provided consistent with the nature of the problem(s) and the patient's and/or family's needs. Usually, the presenting problem(s) are of low to moderate severity. Physicians typically spend 15 minutes face-to-face with the patient and/or family.
2.16.840.1.113883.3.464.1003.101.11.1005	CA.MDD	2	IPP	Office Visit	Encounter	CPT	99214	Office or other outpatient visit for the evaluation and management of an established patient, which requires at least 2 of these 3 key components: A detailed history; A detailed examination; Medical decision making of moderate complexity. Counseling and/or coordination of care with other providers or agencies are provided consistent with the nature of the problem(s) and the patient's and/or family's needs. Usually, the presenting problem(s) are of moderate to high severity. Physicians typically spend 25 minutes face-to-face with the patient and/or family.
2.16.840.1.113883.3.464.1003.101.11.1005	CA.MDD	2	IPP	Office Visit	Encounter	CPT	99215	Office or other outpatient visit for the evaluation and management of an established patient, which requires at least 2 of these 3 key components: A comprehensive history; A comprehensive examination; Medical decision making of high complexity. Counseling and/or coordination of care with other providers or agencies are provided consistent with the nature of the problem(s) and the patient's and/or family's needs. Usually, the presenting problem(s) are of moderate to high severity. Physicians typically spend 40 minutes face-to-face with the patient and/or family.
2.16.840.1.113883.3.464.1003.101.12.1008	CA.MDD	2	IPP	Outpatient Consultation	Encounter	GROUPING	2.16.840.1.113883.3.464.1003.101.11.1040	"Outpatient Consultation" CPT value set
2.16.840.1.113883.3.464.1003.101.11.1040	CA.MDD	2	IPP	Outpatient Consultation	Encounter	CPT	99241	Office consultation for a new or established patient, which requires these 3 key components: A problem focused history; A problem focused examination; and Straightforward medical decision making. Counseling and/or coordination of care with other providers or agencies are provided consistent with the nature of the problem(s) and the patient's and/or family's needs. Usually, the presenting problem(s) are self limited or minor. Physicians typically spend 15 minutes face-to-face with the patient and/or family.

Value Set ID	Clinical Topic	Topic Indicator	Measure Component	Value Set Title	QDM Standard Category	Taxonomy	Code	Code Descriptor
2.16.840.1.113883.3.464.1003.101.11.1040	CA.MDD	2	IPP	Outpatient Consultation	Encounter	CPT	99242	Office consultation for a new or established patient, which requires these 3 key components: An expanded problem focused history; An expanded problem focused examination; and Straightforward medical decision making. Counseling and/or coordination of care with other providers or agencies are provided consistent with the nature of the problem(s) and the patient's and/or family's needs. Usually, the presenting problem(s) are of low severity. Physicians typically spend 30 minutes face-to-face with the patient and/or family.
2.16.840.1.113883.3.464.1003.101.11.1040	CA.MDD	2	IPP	Outpatient Consultation	Encounter	CPT	99243	Office consultation for a new or established patient, which requires these 3 key components: A detailed history; A detailed examination; and Medical decision making of low complexity. Counseling and/or coordination of care with other providers or agencies are provided consistent with the nature of the problem(s) and the patient's and/or family's needs. Usually, the presenting problem(s) are of moderate severity. Physicians typically spend 40 minutes face-to-face with the patient and/or family.
2.16.840.1.113883.3.464.1003.101.11.1040	CA.MDD	2	IPP	Outpatient Consultation	Encounter	CPT	99244	Office consultation for a new or established patient, which requires these 3 key components: A comprehensive history; A comprehensive examination; and Medical decision making of moderate complexity. Counseling and/or coordination of care with other providers or agencies are provided consistent with the nature of the problem(s) and the patient's and/or family's needs. Usually, the presenting problem(s) are of moderate to high severity. Physicians typically spend 60 minutes face-to-face with the patient and/or family.
2.16.840.1.113883.3.464.1003.101.11.1040	CA.MDD	2	IPP	Outpatient Consultation	Encounter	CPT	99245	Office consultation for a new or established patient, which requires these 3 key components: A comprehensive history; A comprehensive examination; and Medical decision making of high complexity. Counseling and/or coordination of care with other providers or agencies are provided consistent with the nature of the problem(s) and the patient's and/or family's needs. Usually, the presenting problem(s) are of moderate to high severity. Physicians typically spend 80 minutes face-to-face with the patient and/or family.
500053	CA.MDD	2	IPP	Psych Visit - Diagnostic Evaluation	Encounter	CPT	90791	Psychiatric diagnostic evaluation
500053	CA.MDD	2	IPP	Psych Visit - Diagnostic Evaluation	Encounter	CPT	90792	Psychiatric diagnostic evaluation with medical services
500054	CA.MDD	2	IPP	Psych Visit - Psychotherapy	Encounter	CPT	90832	Psychotherapy, 30 minutes with patient and/or family member
500054	CA.MDD	2	IPP	Psych Visit - Psychotherapy	Encounter	CPT	90834	Psychotherapy, 45 minutes with patient and/or family member
500054	CA.MDD	2	IPP	Psych Visit - Psychotherapy	Encounter	CPT	90837	Psychotherapy, 60 minutes with patient and/or family member
2.16.840.1.113883.3.526.3.1141	CA.MDD	2	IPP	Psychoanalysis	Encounter	GROUPING	2.16.840.1.113883.3.526.2.1243	"Psychoanalysis" CPT value set
2.16.840.1.113883.3.526.2.1243	CA.MDD	2	IPP	Psychoanalysis	Encounter	CPT	90845	Psychoanalysis
2.16.840.1.113883.3.526.3.1018	CA.MDD	2	IPP	Psych Visit - Family Psychotherapy	Encounter	GROUPING	2.16.840.1.113883.3.526.2.1058	"Psych Visit - Family Psychotherapy" CPT value set
2.16.840.1.113883.3.526.2.1058	CA.MDD	2	IPP	Psych Visit - Family Psychotherapy	Encounter	CPT	90846	Family psychotherapy (without the patient present)
2.16.840.1.113883.3.526.2.1058	CA.MDD	2	IPP	Psych Visit - Family Psychotherapy	Encounter	CPT	90847	Family psychotherapy (conjoint psychotherapy) (with patient present)
500055	CA.MDD	2	IPP	Psych Visit - Group Psychotherapy	Encounter	CPT	90853	Group psychotherapy (other than of a multiple-family group)
2.16.840.1.113883.3.464.1003.101.12.1048	CA.MDD	2	IPP	Face-to-Face Interaction	Encounter	GROUPING	2.16.840.1.113883.3.464.1003.101.11.1216	"Face-to-Face Interaction" SNOMED-CT value set
2.16.840.1.113883.3.464.1003.101.11.1216	CA.MDD	2	IPP	Face-to-Face Interaction	Encounter	SNOMED-CT	4525004	emergency department patient visit (procedure)
2.16.840.1.113883.3.464.1003.101.11.1216	CA.MDD	2	IPP	Face-to-Face Interaction	Encounter	SNOMED-CT	12843005	subsequent hospital visit by physician (procedure)
2.16.840.1.113883.3.464.1003.101.11.1216	CA.MDD	2	IPP	Face-to-Face Interaction	Encounter	SNOMED-CT	18170008	subsequent nursing facility visit (procedure)
2.16.840.1.113883.3.464.1003.101.11.1216	CA.MDD	2	IPP	Face-to-Face Interaction	Encounter	SNOMED-CT	19681004	nursing evaluation of patient and report (procedure)
2.16.840.1.113883.3.464.1003.101.11.1216	CA.MDD	2	IPP	Face-to-Face Interaction	Encounter	SNOMED-CT	87790002	follow-up inpatient consultation visit (procedure)
2.16.840.1.113883.3.464.1003.101.11.1216	CA.MDD	2	IPP	Face-to-Face Interaction	Encounter	SNOMED-CT	90526000	initial evaluation and management of healthy individual (procedure)
2.16.840.1.113883.3.464.1003.101.11.1216	CA.MDD	2	IPP	Face-to-Face Interaction	Encounter	SNOMED-CT	185349003	encounter for "check-up" (procedure)
2.16.840.1.113883.3.464.1003.101.11.1216	CA.MDD	2	IPP	Face-to-Face Interaction	Encounter	SNOMED-CT	185463005	visit out of hours (procedure)
2.16.840.1.113883.3.464.1003.101.11.1216	CA.MDD	2	IPP	Face-to-Face Interaction	Encounter	SNOMED-CT	185465003	weekend visit (procedure)
2.16.840.1.113883.3.464.1003.101.11.1216	CA.MDD	2	IPP	Face-to-Face Interaction	Encounter	SNOMED-CT	207195004	history and physical examination with evaluation and management of nursing facility patient (procedure)
2.16.840.1.113883.3.464.1003.101.11.1216	CA.MDD	2	IPP	Face-to-Face Interaction	Encounter	SNOMED-CT	270427003	patient-initiated encounter (procedure)
2.16.840.1.113883.3.464.1003.101.11.1216	CA.MDD	2	IPP	Face-to-Face Interaction	Encounter	SNOMED-CT	270430005	provider-initiated encounter (procedure)
2.16.840.1.113883.3.464.1003.101.11.1216	CA.MDD	2	IPP	Face-to-Face Interaction	Encounter	SNOMED-CT	308335008	patient encounter procedure (procedure)
2.16.840.1.113883.3.464.1003.101.11.1216	CA.MDD	2	IPP	Face-to-Face Interaction	Encounter	SNOMED-CT	390906007	follow-up encounter (procedure)
2.16.840.1.113883.3.464.1003.101.11.1216	CA.MDD	2	IPP	Face-to-Face Interaction	Encounter	SNOMED-CT	406547006	urgent follow-up (procedure)
2.16.840.1.113883.3.464.1003.101.11.1216	CA.MDD	2	IPP	Face-to-Face Interaction	Encounter	SNOMED-CT	439708006	home visit (procedure)
2.16.840.1.113883.3.526.3.1012	CA.MDD	2	IPP	Patient Provider Interaction	Encounter	GROUPING	2.16.840.1.113883.3.526.2.1049	"Patient Provider Interaction" SNOMED-CT value set
2.16.840.1.113883.3.526.2.1049	CA.MDD	2	IPP	Patient Provider Interaction	Encounter	SNOMED-CT	4525004	emergency department patient visit (procedure)
2.16.840.1.113883.3.526.2.1049	CA.MDD	2	IPP	Patient Provider Interaction	Encounter	SNOMED-CT	11797002	telephone call by physician to patient or for consultation (procedure)
2.16.840.1.113883.3.526.2.1049	CA.MDD	2	IPP	Patient Provider Interaction	Encounter	SNOMED-CT	12843005	subsequent hospital visit by physician (procedure)
2.16.840.1.113883.3.526.2.1049	CA.MDD	2	IPP	Patient Provider Interaction	Encounter	SNOMED-CT	18170008	subsequent nursing facility visit (procedure)
2.16.840.1.113883.3.526.2.1049	CA.MDD	2	IPP	Patient Provider Interaction	Encounter	SNOMED-CT	19681004	nursing evaluation of patient and report (procedure)
2.16.840.1.113883.3.526.2.1049	CA.MDD	2	IPP	Patient Provider Interaction	Encounter	SNOMED-CT	87790002	follow-up inpatient consultation visit (procedure)
2.16.840.1.113883.3.526.2.1049	CA.MDD	2	IPP	Patient Provider Interaction	Encounter	SNOMED-CT	90526000	initial evaluation and management of healthy individual (procedure)
2.16.840.1.113883.3.526.2.1049	CA.MDD	2	IPP	Patient Provider Interaction	Encounter	SNOMED-CT	185316007	indirect encounter (procedure)
2.16.840.1.113883.3.526.2.1049	CA.MDD	2	IPP	Patient Provider Interaction	Encounter	SNOMED-CT	185317003	telephone encounter (procedure)
2.16.840.1.113883.3.526.2.1049	CA.MDD	2	IPP	Patient Provider Interaction	Encounter	SNOMED-CT	185318008	third party encounter (procedure)
2.16.840.1.113883.3.526.2.1049	CA.MDD	2	IPP	Patient Provider Interaction	Encounter	SNOMED-CT	185320006	encounter by computer link (procedure)
2.16.840.1.113883.3.526.2.1049	CA.MDD	2	IPP	Patient Provider Interaction	Encounter	SNOMED-CT	185321005	letter encounter to patient (procedure)
2.16.840.1.113883.3.526.2.1049	CA.MDD	2	IPP	Patient Provider Interaction	Encounter	SNOMED-CT	185349003	encounter for "check-up" (procedure)
2.16.840.1.113883.3.526.2.1049	CA.MDD	2	IPP	Patient Provider Interaction	Encounter	SNOMED-CT	185463005	visit out of hours (procedure)
2.16.840.1.113883.3.526.2.1049	CA.MDD	2	IPP	Patient Provider Interaction	Encounter	SNOMED-CT	185465003	weekend visit (procedure)
2.16.840.1.113883.3.526.2.1049	CA.MDD	2	IPP	Patient Provider Interaction	Encounter	SNOMED-CT	207195004	history and physical examination with evaluation and management of nursing facility patient (procedure)
2.16.840.1.113883.3.526.2.1049	CA.MDD	2	IPP	Patient Provider Interaction	Encounter	SNOMED-CT	270424005	letter encounter from patient (procedure)
2.16.840.1.113883.3.526.2.1049	CA.MDD	2	IPP	Patient Provider Interaction	Encounter	SNOMED-CT	270427003	patient-initiated encounter (procedure)

Value Set ID	Clinical Topic	Topic Indicator	Measure Component	Value Set Title	QDM Standard Category	Taxonomy	Code	Code Descriptor
2.16.840.1.113883.3.526.2.1049	CA.MDD	2	IPP	Patient Provider Interaction	Encounter	SNOMED-CT	270430005	provider-initiated encounter (procedure)
2.16.840.1.113883.3.526.2.1049	CA.MDD	2	IPP	Patient Provider Interaction	Encounter	SNOMED-CT	308335008	patient encounter procedure (procedure)
2.16.840.1.113883.3.526.2.1049	CA.MDD	2	IPP	Patient Provider Interaction	Encounter	SNOMED-CT	308720009	letter encounter (procedure)
2.16.840.1.113883.3.526.2.1049	CA.MDD	2	IPP	Patient Provider Interaction	Encounter	SNOMED-CT	386473003	telephone follow-up (procedure)
2.16.840.1.113883.3.526.2.1049	CA.MDD	2	IPP	Patient Provider Interaction	Encounter	SNOMED-CT	390906007	follow-up encounter (procedure)
2.16.840.1.113883.3.526.2.1049	CA.MDD	2	IPP	Patient Provider Interaction	Encounter	SNOMED-CT	401267002	telephone triage encounter (procedure)
2.16.840.1.113883.3.526.2.1049	CA.MDD	2	IPP	Patient Provider Interaction	Encounter	SNOMED-CT	401271004	e-mail sent to patient (procedure)
2.16.840.1.113883.3.526.2.1049	CA.MDD	2	IPP	Patient Provider Interaction	Encounter	SNOMED-CT	406547006	urgent follow-up (procedure)
2.16.840.1.113883.3.526.2.1049	CA.MDD	2	IPP	Patient Provider Interaction	Encounter	SNOMED-CT	438515009	E-mail encounter from carer (procedure)
2.16.840.1.113883.3.526.2.1049	CA.MDD	2	IPP	Patient Provider Interaction	Encounter	SNOMED-CT	438516005	E-mail encounter to carer (procedure)
2.16.840.1.113883.3.526.2.1049	CA.MDD	2	IPP	Patient Provider Interaction	Encounter	SNOMED-CT	439708006	home visit (procedure)
2.16.840.1.113883.3.526.2.1049	CA.MDD	2	IPP	Patient Provider Interaction	Encounter	SNOMED-CT	445450000	encounter by short message service text messaging (procedure)
2.16.840.1.113883.3.526.2.1049	CA.MDD	2	IPP	Patient Provider Interaction	Encounter	SNOMED-CT	448337001	telemedicine consultation with patient (procedure)
500056	CA.MDD	2	D	Major Depressive Disorder-Remission	Condition / Diagnosis / Problem	ICD-9-CM	296.25	Major depressive disorder, single episode, in partial or unspecified remission
500056	CA.MDD	2	D	Major Depressive Disorder-Remission	Condition / Diagnosis / Problem	ICD-9-CM	296.26	Major depressive disorder, single episode, in full remission
500056	CA.MDD	2	D	Major Depressive Disorder-Remission	Condition / Diagnosis / Problem	ICD-9-CM	296.35	Major depressive disorder, recurrent episode, in partial or unspecified remission
500056	CA.MDD	2	D	Major Depressive Disorder-Remission	Condition / Diagnosis / Problem	ICD-9-CM	296.36	Major depressive disorder, recurrent episode, in full remission
500056	CA.MDD	2	D	Major Depressive Disorder-Remission	Condition / Diagnosis / Problem	ICD-10-CM	F32.4	Major depressive disorder, single episode, in partial remission
500056	CA.MDD	2	D	Major Depressive Disorder-Remission	Condition / Diagnosis / Problem	ICD-10-CM	F32.5	Major depressive disorder, single episode, in full remission
500056	CA.MDD	2	D	Major Depressive Disorder-Remission	Condition / Diagnosis / Problem	ICD-10-CM	F33.40	Major depressive disorder, recurrent, in remission, unspecified
500056	CA.MDD	2	D	Major Depressive Disorder-Remission	Condition / Diagnosis / Problem	ICD-10-CM	F33.41	Major depressive disorder, recurrent, in partial remission
500056	CA.MDD	2	D	Major Depressive Disorder-Remission	Condition / Diagnosis / Problem	ICD-10-CM	F33.42	Major depressive disorder, recurrent, in full remission
500056	CA.MDD	2	D	Major Depressive Disorder-Remission	Condition / Diagnosis / Problem	SNOMED-CT	19527009	major depression, single episode, in complete remission (disorder)
500056	CA.MDD	2	D	Major Depressive Disorder-Remission	Condition / Diagnosis / Problem	SNOMED-CT	42810003	major depression in remission (disorder)
500056	CA.MDD	2	D	Major Depressive Disorder-Remission	Condition / Diagnosis / Problem	SNOMED-CT	46244001	recurrent major depression in complete remission (disorder)
500056	CA.MDD	2	D	Major Depressive Disorder-Remission	Condition / Diagnosis / Problem	SNOMED-CT	63412003	major depression in complete remission (disorder)
500056	CA.MDD	2	D	Major Depressive Disorder-Remission	Condition / Diagnosis / Problem	SNOMED-CT	191615005	recurrent major depressive episodes, in full remission (disorder)
500025	CA.MDD	2	N	Loss of Interest or Pleasure	Symptom	SNOMED-CT	162719003	On examination - apathetic (finding)
500025	CA.MDD	2	N	Loss of Interest or Pleasure	Symptom	SNOMED-CT	20602000	Indifference (finding)
500025	CA.MDD	2	N	Loss of Interest or Pleasure	Symptom	SNOMED-CT	225468007	Resigned tolerance (finding)
500025	CA.MDD	2	N	Loss of Interest or Pleasure	Symptom	SNOMED-CT	225470003	Unenthusiastic (finding)
500025	CA.MDD	2	N	Loss of Interest or Pleasure	Symptom	SNOMED-CT	247753000	Loss of interest (finding)
500025	CA.MDD	2	N	Loss of Interest or Pleasure	Symptom	SNOMED-CT	247755007	Withdrawn (finding)
500025	CA.MDD	2	N	Loss of Interest or Pleasure	Symptom	SNOMED-CT	247796005	Loss of capacity for enjoyment (finding)
500025	CA.MDD	2	N	Loss of Interest or Pleasure	Symptom	SNOMED-CT	417523004	Loss of interest in previously enjoyable activity (finding)
500025	CA.MDD	2	N	Loss of Interest or Pleasure	Symptom	SNOMED-CT	430641005	Markedly diminished pleasure (finding)
500026	CA.MDD	2	N	Depressed Mood	Symptom	SNOMED-CT	272022009	Complaining of feeling depressed (finding)
500026	CA.MDD	2	N	Depressed Mood	Symptom	SNOMED-CT	366979004	Depressed mood (finding)
500027	CA.MDD	2	N	Weight Change or Appetite Change	Symptom	SNOMED-CT	102492002	Failure to maintain weight (finding)
500027	CA.MDD	2	N	Weight Change or Appetite Change	Symptom	SNOMED-CT	161831008	Weight increasing (finding)
500027	CA.MDD	2	N	Weight Change or Appetite Change	Symptom	SNOMED-CT	161832001	Weight decreasing (finding)
500027	CA.MDD	2	N	Weight Change or Appetite Change	Symptom	SNOMED-CT	161833006	Abnormal weight gain (finding)
500027	CA.MDD	2	N	Weight Change or Appetite Change	Symptom	SNOMED-CT	224994002	Excessive weight gain (finding)
500027	CA.MDD	2	N	Weight Change or Appetite Change	Symptom	SNOMED-CT	248332009	Weight fluctuates (finding)
500027	CA.MDD	2	N	Weight Change or Appetite Change	Symptom	SNOMED-CT	262285001	Weight decreased (finding)
500027	CA.MDD	2	N	Weight Change or Appetite Change	Symptom	SNOMED-CT	262286000	Weight increased (finding)
500027	CA.MDD	2	N	Weight Change or Appetite Change	Symptom	SNOMED-CT	267024001	Abnormal weight loss (finding)
500027	CA.MDD	2	N	Weight Change or Appetite Change	Symptom	SNOMED-CT	309257005	Excessive weight loss (finding)
500027	CA.MDD	2	N	Weight Change or Appetite Change	Symptom	SNOMED-CT	416528001	Intentional weight loss (finding)
500027	CA.MDD	2	N	Weight Change or Appetite Change	Symptom	SNOMED-CT	426977000	Recent weight loss (finding)
500027	CA.MDD	2	N	Weight Change or Appetite Change	Symptom	SNOMED-CT	427572007	Recent weight gain (finding)
500027	CA.MDD	2	N	Weight Change or Appetite Change	Symptom	SNOMED-CT	430237002	Abnormal intentional weight loss (finding)
500027	CA.MDD	2	N	Weight Change or Appetite Change	Symptom	SNOMED-CT	89362005	Weight loss finding (finding)
500027	CA.MDD	2	N	Weight Change or Appetite Change	Symptom	SNOMED-CT	8943002	Weight gain finding (finding)
500028	CA.MDD	2	N	Sleep Disturbances, Hypersomnia or Insomnia	Symptom	SNOMED-CT	162204000	Late insomnia (disorder)
500028	CA.MDD	2	N	Sleep Disturbances, Hypersomnia or Insomnia	Symptom	SNOMED-CT	191997003	Persistent insomnia (disorder)
500028	CA.MDD	2	N	Sleep Disturbances, Hypersomnia or Insomnia	Symptom	SNOMED-CT	191999000	Persistent hypersomnia (disorder)
500028	CA.MDD	2	N	Sleep Disturbances, Hypersomnia or Insomnia	Symptom	SNOMED-CT	192000006	Work shift change (disorder)
500028	CA.MDD	2	N	Sleep Disturbances, Hypersomnia or Insomnia	Symptom	SNOMED-CT	192004002	Repeated rapid eye movement sleep interruptions (disorder)
500028	CA.MDD	2	N	Sleep Disturbances, Hypersomnia or Insomnia	Symptom	SNOMED-CT	192008004	Reversed sleep-wake cycle (disorder)
500028	CA.MDD	2	N	Sleep Disturbances, Hypersomnia or Insomnia	Symptom	SNOMED-CT	192454004	Nonorganic insomnia (disorder)
500028	CA.MDD	2	N	Sleep Disturbances, Hypersomnia or Insomnia	Symptom	SNOMED-CT	193042000	Cataplexy and narcolepsy (disorder)
500028	CA.MDD	2	N	Sleep Disturbances, Hypersomnia or Insomnia	Symptom	SNOMED-CT	193462001	Insomnia (disorder)
500028	CA.MDD	2	N	Sleep Disturbances, Hypersomnia or Insomnia	Symptom	SNOMED-CT	194439006	Disorders of excessive somnolence (disorder)
500028	CA.MDD	2	N	Sleep Disturbances, Hypersomnia or Insomnia	Symptom	SNOMED-CT	230488004	Hypersomnia of non-organic origin (disorder)
500028	CA.MDD	2	N	Sleep Disturbances, Hypersomnia or Insomnia	Symptom	SNOMED-CT	230489007	Excessive daytime sleepiness - normal night sleep (disorder)

Value Set ID	Clinical Topic	Topic Indicator	Measure Component	Value Set Title	QDM Standard Category	Taxonomy	Code	Code Descriptor
500028	CA.MDD	2	N	Sleep Disturbances, Hypersomnia or Insomnia	Symptom	SNOMED-CT	230490003	Excessive day and night-time sleepiness (disorder)
500028	CA.MDD	2	N	Sleep Disturbances, Hypersomnia or Insomnia	Symptom	SNOMED-CT	230491004	Postviral excessive daytime sleepiness (disorder)
500028	CA.MDD	2	N	Sleep Disturbances, Hypersomnia or Insomnia	Symptom	SNOMED-CT	230492006	Excess daytime sleepiness with sleep paralysis (disorder)
500028	CA.MDD	2	N	Sleep Disturbances, Hypersomnia or Insomnia	Symptom	SNOMED-CT	230495008	Transient sleep-wake rhythm disorder (disorder)
500028	CA.MDD	2	N	Sleep Disturbances, Hypersomnia or Insomnia	Symptom	SNOMED-CT	248256006	Not getting enough sleep (disorder)
500028	CA.MDD	2	N	Sleep Disturbances, Hypersomnia or Insomnia	Symptom	SNOMED-CT	248258007	Circumstances interfere with sleep (disorder)
500028	CA.MDD	2	N	Sleep Disturbances, Hypersomnia or Insomnia	Symptom	SNOMED-CT	248260009	Unrefreshed by sleep (disorder)
500028	CA.MDD	2	N	Sleep Disturbances, Hypersomnia or Insomnia	Symptom	SNOMED-CT	248261008	Oversleeps (disorder)
500028	CA.MDD	2	N	Sleep Disturbances, Hypersomnia or Insomnia	Symptom	SNOMED-CT	248262001	Always sleepy (disorder)
500028	CA.MDD	2	N	Sleep Disturbances, Hypersomnia or Insomnia	Symptom	SNOMED-CT	268652009	Transient insomnia (disorder)
500028	CA.MDD	2	N	Sleep Disturbances, Hypersomnia or Insomnia	Symptom	SNOMED-CT	268653004	Transient hypersomnia (disorder)
500028	CA.MDD	2	N	Sleep Disturbances, Hypersomnia or Insomnia	Symptom	SNOMED-CT	268722008	Non-organic disorder of the sleep-wake schedule (disorder)
500028	CA.MDD	2	N	Sleep Disturbances, Hypersomnia or Insomnia	Symptom	SNOMED-CT	271793004	Irregular sleep-wake pattern (disorder)
500028	CA.MDD	2	N	Sleep Disturbances, Hypersomnia or Insomnia	Symptom	SNOMED-CT	271794005	Disorder of sleep-wake cycle (disorder)
500028	CA.MDD	2	N	Sleep Disturbances, Hypersomnia or Insomnia	Symptom	SNOMED-CT	31537005	Sleep-wake schedule disorder, advanced phase type (disorder)
500028	CA.MDD	2	N	Sleep Disturbances, Hypersomnia or Insomnia	Symptom	SNOMED-CT	36124002	Primary hypersomnia (disorder)
500028	CA.MDD	2	N	Sleep Disturbances, Hypersomnia or Insomnia	Symptom	SNOMED-CT	370971007	Somnolence syndrome (disorder)
500028	CA.MDD	2	N	Sleep Disturbances, Hypersomnia or Insomnia	Symptom	SNOMED-CT	3745000	Sleep-wake schedule disorder (disorder)
500028	CA.MDD	2	N	Sleep Disturbances, Hypersomnia or Insomnia	Symptom	SNOMED-CT	3972004	Primary insomnia (disorder)
500028	CA.MDD	2	N	Sleep Disturbances, Hypersomnia or Insomnia	Symptom	SNOMED-CT	39898005	Sleep disorder (disorder)
500028	CA.MDD	2	N	Sleep Disturbances, Hypersomnia or Insomnia	Symptom	SNOMED-CT	401236004	Early morning waking (disorder)
500028	CA.MDD	2	N	Sleep Disturbances, Hypersomnia or Insomnia	Symptom	SNOMED-CT	41975002	Insomnia with sleep apnea (disorder)
500028	CA.MDD	2	N	Sleep Disturbances, Hypersomnia or Insomnia	Symptom	SNOMED-CT	425832009	Psychophysiologic insomnia (disorder)
500028	CA.MDD	2	N	Sleep Disturbances, Hypersomnia or Insomnia	Symptom	SNOMED-CT	426257002	Idiopathic insomnia (disorder)
500028	CA.MDD	2	N	Sleep Disturbances, Hypersomnia or Insomnia	Symptom	SNOMED-CT	426451004	Recurrent hypersomnia (disorder)
500028	CA.MDD	2	N	Sleep Disturbances, Hypersomnia or Insomnia	Symptom	SNOMED-CT	426943005	Hypersomnia disorder related to menstruation (disorder)
500028	CA.MDD	2	N	Sleep Disturbances, Hypersomnia or Insomnia	Symptom	SNOMED-CT	44186003	Dyssomnia (disorder)
500028	CA.MDD	2	N	Sleep Disturbances, Hypersomnia or Insomnia	Symptom	SNOMED-CT	442292004	Idiopathic hypersomnia without long sleep time (disorder)
500028	CA.MDD	2	N	Sleep Disturbances, Hypersomnia or Insomnia	Symptom	SNOMED-CT	442416002	Idiopathic hypersomnia associated with long sleep time (disorder)
500028	CA.MDD	2	N	Sleep Disturbances, Hypersomnia or Insomnia	Symptom	SNOMED-CT	44455001	Hypersomnia disorder related to a known organic factor (disorder)
500028	CA.MDD	2	N	Sleep Disturbances, Hypersomnia or Insomnia	Symptom	SNOMED-CT	50702007	Sleep-wake schedule disorder, disorganized type (disorder)
500028	CA.MDD	2	N	Sleep Disturbances, Hypersomnia or Insomnia	Symptom	SNOMED-CT	54230003	Mixed insomnia (disorder)
500028	CA.MDD	2	N	Sleep Disturbances, Hypersomnia or Insomnia	Symptom	SNOMED-CT	54532007	Sleep-wake schedule disorder, frequently changing type (disorder)
500028	CA.MDD	2	N	Sleep Disturbances, Hypersomnia or Insomnia	Symptom	SNOMED-CT	59050008	Initial insomnia (disorder)
500028	CA.MDD	2	N	Sleep Disturbances, Hypersomnia or Insomnia	Symptom	SNOMED-CT	60380001	Narcolepsy (disorder)
500028	CA.MDD	2	N	Sleep Disturbances, Hypersomnia or Insomnia	Symptom	SNOMED-CT	67062000	Terminal insomnia (disorder)
500028	CA.MDD	2	N	Sleep Disturbances, Hypersomnia or Insomnia	Symptom	SNOMED-CT	67233009	Middle insomnia (disorder)
500028	CA.MDD	2	N	Sleep Disturbances, Hypersomnia or Insomnia	Symptom	SNOMED-CT	77692006	Hypersomnia (disorder)
500028	CA.MDD	2	N	Sleep Disturbances, Hypersomnia or Insomnia	Symptom	SNOMED-CT	79280005	Hypersomnia with sleep apnea (disorder)
500028	CA.MDD	2	N	Sleep Disturbances, Hypersomnia or Insomnia	Symptom	SNOMED-CT	80623000	Sleep-wake schedule disorder, delayed phase type (disorder)

Value Set ID	Clinical Topic	Topic Indicator	Measure Component	Value Set Title	QDM Standard Category	Taxonomy	Code	Code Descriptor
500028	CA.MDD	2	N	Sleep Disturbances, Hypersomnia or Insomnia	Symptom	SNOMED-CT	83157008	Fatal familial insomnia (disorder)
500028	CA.MDD	2	N	Sleep Disturbances, Hypersomnia or Insomnia	Symptom	SNOMED-CT	88982005	Rebound insomnia (disorder)
500028	CA.MDD	2	N	Sleep Disturbances, Hypersomnia or Insomnia	Symptom	SNOMED-CT	89415002	Hypersomnia disorder related to another mental disorder (disorder)
500029	CA.MDD	2	N	Psychomotor Agitation or Retardation	Symptom	SNOMED-CT	247911008	Constant movement (finding)
500029	CA.MDD	2	N	Psychomotor Agitation or Retardation	Symptom	SNOMED-CT	247913006	Aimless movement (finding)
500029	CA.MDD	2	N	Psychomotor Agitation or Retardation	Symptom	SNOMED-CT	247914000	Aimless overactivity (finding)
500029	CA.MDD	2	N	Psychomotor Agitation or Retardation	Symptom	SNOMED-CT	300989001	Agitated wandering (finding)
500029	CA.MDD	2	N	Psychomotor Agitation or Retardation	Symptom	SNOMED-CT	398991009	Motor retardation (finding)
500029	CA.MDD	2	N	Psychomotor Agitation or Retardation	Symptom	SNOMED-CT	416909000	Impaired psychomotor performance (finding)
500029	CA.MDD	2	N	Psychomotor Agitation or Retardation	Symptom	SNOMED-CT	47295007	Psychomotor agitation (finding)
500030	CA.MDD	2	N	Fatigue or Loss of Energy	Symptom	SNOMED-CT	13791008	Asthenia (finding)
500030	CA.MDD	2	N	Fatigue or Loss of Energy	Symptom	SNOMED-CT	161874006	Heavy feeling (finding)
500030	CA.MDD	2	N	Fatigue or Loss of Energy	Symptom	SNOMED-CT	18726006	Senile asthenia (finding)
500030	CA.MDD	2	N	Fatigue or Loss of Energy	Symptom	SNOMED-CT	224960004	Tired (finding)
500030	CA.MDD	2	N	Fatigue or Loss of Energy	Symptom	SNOMED-CT	248269005	Tired on least exertion (finding)
500030	CA.MDD	2	N	Fatigue or Loss of Energy	Symptom	SNOMED-CT	248278004	Attacks of weakness (finding)
500030	CA.MDD	2	N	Fatigue or Loss of Energy	Symptom	SNOMED-CT	248279007	Frailty (finding)
500030	CA.MDD	2	N	Fatigue or Loss of Energy	Symptom	SNOMED-CT	267031002	Tiredness symptom (finding)
500030	CA.MDD	2	N	Fatigue or Loss of Energy	Symptom	SNOMED-CT	267032009	Tired all the time (finding)
500030	CA.MDD	2	N	Fatigue or Loss of Energy	Symptom	SNOMED-CT	272036004	Complaining of debility and malaise (finding)
500030	CA.MDD	2	N	Fatigue or Loss of Energy	Symptom	SNOMED-CT	272060000	Fatigue - symptom (finding)
500030	CA.MDD	2	N	Fatigue or Loss of Energy	Symptom	SNOMED-CT	272062008	Complaining of "tired all the time" (finding)
500030	CA.MDD	2	N	Fatigue or Loss of Energy	Symptom	SNOMED-CT	314109004	Feeling tired (finding)
500030	CA.MDD	2	N	Fatigue or Loss of Energy	Symptom	SNOMED-CT	373931001	Sensation of heaviness in limbs (finding)
500030	CA.MDD	2	N	Fatigue or Loss of Energy	Symptom	SNOMED-CT	442099003	Psychogenic fatigue (finding)
500030	CA.MDD	2	N	Fatigue or Loss of Energy	Symptom	SNOMED-CT	444042007	Excessive postexertional fatigue (finding)
500030	CA.MDD	2	N	Fatigue or Loss of Energy	Symptom	SNOMED-CT	84229001	Fatigue (finding)
500031	CA.MDD	2	N	Feelings of Worthlessness or Guilt	Symptom	SNOMED-CT	225472006	Feels life is meaningless (finding)
500031	CA.MDD	2	N	Feelings of Worthlessness or Guilt	Symptom	SNOMED-CT	225473001	Feels everything is futile (finding)
500031	CA.MDD	2	N	Feelings of Worthlessness or Guilt	Symptom	SNOMED-CT	247757004	Purposeless (finding)
500032	CA.MDD	2	N	Diminished Ability to Think or Concentrate or Indecisiveness	Symptom	SNOMED-CT	130965009	Persistence (finding)
500032	CA.MDD	2	N	Diminished Ability to Think or Concentrate or Indecisiveness	Symptom	SNOMED-CT	163616009	On examination - easily distractable (finding)
500032	CA.MDD	2	N	Diminished Ability to Think or Concentrate or Indecisiveness	Symptom	SNOMED-CT	22058002	Inattention (finding)
500032	CA.MDD	2	N	Diminished Ability to Think or Concentrate or Indecisiveness	Symptom	SNOMED-CT	247761005	Reduced concentration (finding)
500032	CA.MDD	2	N	Diminished Ability to Think or Concentrate or Indecisiveness	Symptom	SNOMED-CT	247762003	Reduced concentration span (finding)
500032	CA.MDD	2	N	Diminished Ability to Think or Concentrate or Indecisiveness	Symptom	SNOMED-CT	247764002	Easily distracted (finding)
500032	CA.MDD	2	N	Diminished Ability to Think or Concentrate or Indecisiveness	Symptom	SNOMED-CT	248235009	Preoccupied (finding)
500032	CA.MDD	2	N	Diminished Ability to Think or Concentrate or Indecisiveness	Symptom	SNOMED-CT	25124003	Selective inattention (finding)
500032	CA.MDD	2	N	Diminished Ability to Think or Concentrate or Indecisiveness	Symptom	SNOMED-CT	26329005	Poor concentration (finding)
500032	CA.MDD	2	N	Diminished Ability to Think or Concentrate or Indecisiveness	Symptom	SNOMED-CT	28102002	Distractibility (finding)
500032	CA.MDD	2	N	Diminished Ability to Think or Concentrate or Indecisiveness	Symptom	SNOMED-CT	425248002	Scattered attention (finding)
500032	CA.MDD	2	N	Diminished Ability to Think or Concentrate or Indecisiveness	Symptom	SNOMED-CT	46991000	Absent minded (finding)
500032	CA.MDD	2	N	Diminished Ability to Think or Concentrate or Indecisiveness	Symptom	SNOMED-CT	60032008	Unable to concentrate (finding)
500032	CA.MDD	2	N	Diminished Ability to Think or Concentrate or Indecisiveness	Symptom	SNOMED-CT	76039005	Disturbance of attention (finding)
500032	CA.MDD	2	N	Diminished Ability to Think or Concentrate or Indecisiveness	Symptom	SNOMED-CT	86713007	Nonpersistence (finding)
500033	CA.MDD	2	N	Recurrent Thoughts of Death or Suicidal Ideation	Symptom	SNOMED-CT	225457007	Feeling suicidal (finding)
500033	CA.MDD	2	N	Recurrent Thoughts of Death or Suicidal Ideation	Symptom	SNOMED-CT	267073005	Suicidal (finding)
500033	CA.MDD	2	N	Recurrent Thoughts of Death or Suicidal Ideation	Symptom	SNOMED-CT	304594002	Suicidal intent (finding)
500033	CA.MDD	2	N	Recurrent Thoughts of Death or Suicidal Ideation	Symptom	SNOMED-CT	425104003	Suicidal behavior (finding)
500033	CA.MDD	2	N	Recurrent Thoughts of Death or Suicidal Ideation	Symptom	SNOMED-CT	6471006	Suicidal thoughts (finding)