

CBE ID

1885

Title

Depression Response at Twelve Months- Progress Towards Remission

Project

Behavioral Health and Substance Use

Endorsement Status

Endorsement Removed

Is Under Review

No

Previous Endorsement Cycle

Spring 2022

Removal Date

Wed, 12/14/2022 - 00:00

Initial Endorsement

Tue, 03/04/2014 - 05:15

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

The percentage of adolescent patients (12 to 17 years of age) and adult patients (18 years of age or older) with major depression or dysthymia who are progressing towards remission by achieving a response (PHQ-9 or PHQ-9M score reduced by 50% or greater) twelve months (+/- 60 days) after an index visit.

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 twelve months as demonstrated by a twelve 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, Instrument-Based Data, 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), Regulatory and Accreditation Programs

6.1.3 Current Use(s)

Payment Program, Public Reporting, Regulatory and Accreditation Programs

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

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

Steward POC email

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