

MUC2024-088 Depression Screening and Follow-Up for Adolescents and Adults (DSF)

AAFP comments

Recommendation: Do not support

The American Academy of Family Physicians (AAFP) appreciates the intent of this measure. As stated in our position paper, "[Mental and Behavioral Health Care Services by Family Physicians](#)," screening for depression is integral to ensuring appropriate treatment (follow-up care) and reducing complications. We understand that measurement is one way to push toward health plan and system improvement. However, we do not support the addition of this measure for use in the CMS Medicare Advantage Star Rating Program. We would like to note the following concerns:

- Most health plans do not provide clinical care. They do not serve as the actual care provider for patients. Thus, a process measure like this that is specific to care delivery should not be used for health plans.
 - It may encourage health plans to reach out to patients and try to screen them for depression without involving the patient's primary care physician (PCP) or other usual source of care. This further fragments care and may lead to unnecessary duplication of services and confusion and frustration for patients, among other unintended consequences.
- For physicians and other clinicians, this measure adds administrative burden. Some electronic health records (EHRs) do not have standardized depression screening tools automatically built into their baseline product. The screening may therefore need to be a paper-based workflow (i.e. not generate discrete reportable data elements) and/or require resource-intensive IT/HER build and a change in workflows to gather the information.
- Follow-up after a positive screen is not always documented discretely in EHR data fields, and thus a clinic would have to build a special field in their EHR system to accommodate that.
- There is risk to unfairly penalize health plans and therefore clinicians who are adequately treating depression and providing high-quality care but are not generating a discrete data element to receive "credit."
- There is already a depression screening and follow-up measure available in MIPS (Quality ID 134) for clinicians and groups.
- The measure is not endorsed, and it is not an eCQM.