Suicide Risk Assessment

Coding Specifications

Codes required to document patient has major depressive disorder and a visit occurred:

A line item ICD-9-CM diagnosis code for MDD and a CPT service code are required to identify patients to be included in this measure.

All measure-specific coding should be reported ON THE SAME CLAIM.

MDD line item ICD-9-CM diagnosis codes

- 296.20, 296.21, 296.22, 296.23, 296.24 (major depressive disorder, single episode),
- 296.30, 296.31, 296.32, 296.33, 296.34 (major depressive disorder, recurrent episode)

AND

CPT service codes

- 90801 (psychiatric diagnostic interview examination),
- 90802 (interactive psychiatric diagnostic interview examination),
- 90804, 90805, 90806, 90807, 90808, 90809, 90810, 90811, 90812, 90813, 90814, 90815 (individual psychotherapy),
- 90845 (psychoanalysis),
- 90862 (pharmacologic management),
- 99201, 99202, 99203, 99204, 99205 (office new patient),
- 99212, 99213, 99214, 99215 (office established patient),
- 99241, 99242, 99243, 99244, 99245 (outpatient consult)

Quality codes for this measure:

CPT II Code descriptors

(Data collection sheet should be used to determine appropriate code.)

- *CPT II 3092F:* Major depressive disorder, in remission¹
- *CPT II 3085F*: Suicide risk assessed
- *CPT II 3085F-8P:* Suicide risk not assessed, reason not otherwise specified

¹If the patient has been assigned a line-item ICD-9 CM diagnosis code of either 296.20 or 296.30 (unspecified MDD) AND is in remission, code 3092F should be reported. Suicide risk does not need to be assessed for patients in remission, however all instances of 296.20 or 296.30 require that a CPT II code be reported. If the patient is in remission, report 3092F; if the patient is not in remission, then suicide risk should be assessed.

Physician Performance Measures (Measures) and related data specifications, developed by the Physician Consortium for Performance Improvement® (the Consortium), are intended to facilitate quality improvement activities by physicians.

These Measures are intended to assist physicians in enhancing quality of care. Measures are designed for use by any physician who manages the care of a patient for a specific condition or for prevention. These performance Measures are not clinical guidelines and do not establish a standard of medical care. The Consortium has not tested its Measures for all potential applications. The Consortium encourages the testing and evaluation of its Measures.

Measures are subject to review and may be revised or rescinded at any time by the Consortium. The Measures may not be altered without the prior written approval of the Consortium. Measures developed by the Consortium, while copyrighted, can be reproduced and distributed, without modification, for noncommercial purposes, e.g., use by health care providers in connection with their practices. Commercial use is defined as the sale, license, or distribution of the Measures for commercial gain, or incorporation of the Measures into a product or service that is sold, licensed or distributed for commercial gain. Commercial uses of the Measures require a license agreement between the user and American Medical Association, on behalf of the Consortium. Neither the Consortium nor its members shall be responsible for any use of these Measures.

THE MEASURES ARE PROVIDED "AS IS" WITHOUT WARRANTY OF ANY KIND

© 2007 American Medical Association. All Rights Reserved.

Limited proprietary coding is contained in the Measure specifications for convenience. Users of the proprietary code sets should obtain all necessary licenses from the owners of these code sets. The AMA, the Consortium and its members disclaim all liability for use or accuracy of any Current Procedural Terminology (CPT**) or other coding contained in the specifications.

THE SPECIFICATIONS ARE PROVIDED "AS IS" WITHOUT WARRANTY OF ANY KIND.

CPT® contained in the Measures specifications is copyright 2007 American Medical Association