## Screening for Clinical Depression and Follow Up Plan

## **Coding Specifications**

Codes required to document a visit occurred:

A CPT code is required to identify patients to be included in this measure.

All measure specific coding should be reported on the claim(s) representing the eligible encounter.

## **CPT codes**

- 90801
- **90802**
- 90804, 90805, 90806, 90807, 90808, 90809
- 92557
- 92567
- 92568
- 92590
- 92625, 92626
- 96150, 96151
- **97003**

Quality codes for this measure:

## **G-code descriptors**

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

- *G8431:* Positive screen for of clinical depression using a standardized tool and a follow up plan documented
- *G8510:* Negative screen for clinical depression using a standardized tool, patient not eligible/appropriate for follow up plan documented
- *G8433:* Screening for clinical depression using a standardized tool not documented, patient not eligible/appropriate
- *G8432*: No documentation of clinical depression screening using a standardized tool
- *G8511:* Screen for clinical depression using a standardized tool documented, follow up plan not documented, reason not specified

These measures were developed by Quality Insights of Pennsylvania as a special project under the Quality Insights' Medicare Quality Improvement Organization (QIO) contract HHSM-500-2005-PA001C with the Centers for Medicare & Medicaid Services. These measures are in the public domain.