



Department of Health Care Policy and Financing

Behavioral Health: Focus on Depression

Tool Kit for Primary Care Providers

The Department of Health Care Policy and Financing is committed to improving the health of our clients through improved **screening, diagnosis, treatment, and referral**.

This tool kit is intended to provide guidance on how to document and address issues of depression for Medicaid clients in the primary care setting.

For clinical guidelines on advancing the diagnosis and treatment of depression in the primary care setting, visit:

[HealthTeamWorks Depression Guidelines](#)

SCREENING:

As of August 1, 2011, **CPT code 99420** will be used to reimburse Medicaid providers for administering standardized assessment tools to **screen annually for depression in adolescents ages 11-20**.

This code will be used in conjunction with a diagnostic code:

- **V40.9 (for a positive screen), or**
- **V79.8 (for a negative screen).**

For reimbursement levels, please refer to the [July 2011 Provider Bulletin](#).

Tested and validated instruments are recommended. Instructions and research supporting use of the PHQ-9, as well as Teen Screen, are available here:

[PHQ-9](#)

[Teen Screen PSC-Y](#)

DIAGNOSIS:

The prevalence of depression (including mood disorders) will be documented in the Medicaid population by tracking the ICD-9-CM codes included in the HEDIS Quality Measure definition of depression. **These are detailed in Appendix B.**

TREATMENT: (Reimbursement codes)

There are a number of clients who receive treatment for depression in the primary care setting. This is compensated as part of the standard Evaluation and Management (E&M) visit.

How you can help:

- ✓ REVIEW Clinical Guidelines
- ✓ SCREEN using Standardized Tools
- ✓ DIAGNOSE, recording specific ICD codes
- ✓ TREAT/ REFER, in the context of an E & M visit
- ✓ REFER to community resources
- ✓ TRACK Health Outcomes



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REFERRALS:

The following is the recommended process for referring a Medicaid client to a Behavioral Health Organization (BHO).

Medicaid clients only:

Resources for contacting BHOs are available online at [BHO Resources](#).

Access Behavioral Care	800-984-9133 (toll free)
Behavioral Healthcare, Inc.	877-349-7379 (toll free)
Colorado Health Networks	800-804-5008 (toll free)
Foothills Behavioral Health Partners	866-245-1959 (toll free)
Northeast Behavioral Health Partnership	888-296-5827 (toll free)

Clients or providers may call the customer service number and request a mental health assessment appointment, or may select a provider from the BHO's Provider Directory. Initial appointments should be offered within seven business days of the request. If a client has Medicare in addition to Medicaid, the BHO can assist the client to find a provider who takes both kinds of insurance. If a client has commercial or other insurance in addition to Medicaid, the client should first access mental health services under the primary insurance policy, as Medicaid is always the payer of last resort. It is also important to get a signed release of information from the client so that PCPs and BHO providers may share important treatment information.

CHP+ clients:

CHP+ members do not need a referral from their primary care provider for mental health services. CHP+ members receiving care through their HMO must receive care by a mental health provider who is part of that HMO provider network for the care to be covered. Members should call their HMO directly for an appointment.

PROVIDER RESOURCES:

For support in the diagnosis and treatment of clients with depression in the primary care setting, providers can refer to the [Depression Guide](#) from HealthTeamWorks.

For specific recommendations and guidelines on medications for depression during pregnancy and the postpartum period:

[Pregnancy and Postpartum Antidepressant Medication Chart](#)

COMMUNITY RESOURCES:

If a client has a mental health or substance abuse crisis, and cannot reach their BHO or Community Mental Health Center, they can call:

Metro Crisis Line at 888-885-1222.

If you are afraid that someone is at risk for suicide, call:

Colorado Lifeline 800-273-TALK 800-273-8255 - a 24 hour crisis line for depression/suicide.





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Appendix A

The Department is committed to improving the health outcomes of our clients. Performance measures used by the Department for tracking depression in Medicaid/ CHP+ clients are outlined in Appendix A. Appropriate coding will give us the information we need to track changes in health outcomes. The data is updated annually, and is available for review at [Healthy Living Performance Measures](#). For more information, please link to the [Healthy Living Initiatives](#).

Performance Measures for tracking Depression in the Medicaid/ CHP+ population:

The Department will document, track, and evaluate the diagnosis and treatment of depression based on the following measures.

Goal: Advance the diagnosis and treatment of depression for clients on Medicaid and CHP+

Outcome Measure:

- Percent of adolescents (12-17) who report a depressive episode in the past year *SAMHSA*
- Percent of clients diagnosed with depression *Medicaid/ CHP+ data*
 - Percent of adolescents (12-17) who have had a diagnosis of depression in the past year.
 - Percent of adults (18-65) who have had a diagnosis of depression in the past year.

Process Measure:

- Percent of youth 11-20 who receive depression screening
- Percent of Medicaid adults whose antidepressant medication was managed effectively
 - Acute Phase *HEDIS*
 - Continuation Phase *HEDIS*

SAMHSA: Substance Abuse and Mental Health Services Administration.

HEDIS: Healthcare Effectiveness Data and Information Set

Appendix B

ICD-9-CM codes for depression:

These codes are included in the HEDIS guidance on codes to identify depression:

- 296.20-296.25, Major depressive disorder, single episode
- 296.26, Major depressive disorder, single episode in full remission
- 296.30-296.35, Major depressive disorder, recurrent episode
- 296.36, Major depressive disorder, recurrent episode in full remission
- 296.4-296.9, Bipolar disorder, other nonspecified episodic mood disorder
- 298.0, Other non-organic psychoses
- 300.4, Dysthymic Disorder
- 309.0, Adjustment reaction
- 309.1, Prolonged depressive reaction
- 309.28, Adjustment disorder with mixed anxiety and depressed mood
- 311, Depressive disorder, not elsewhere classified

