

Antidepressant Medication During Acute Phase for Patients with New Episode of Major Depression

*This measure is to be reported for **each occurrence** of MDD during the reporting period for all patients aged 18 years and older.*

Measure description

Percentage of patients aged 18 years and older diagnosed with new episode of major depressive disorder (MDD) and documented as treated with antidepressant medication during the entire 84-day (12-week) acute treatment phase

What will you need to report for each occurrence of MDD for this measure?

If you select this measure for reporting, you will need to determine:

- Whether or not the patient is being seen for a new episode¹ of MDD

If the patient is being seen for a new episode of MDD, you will then need to report:

- Whether or not you prescribed (or the patient completed) an 84-day (12-week) acute treatment of antidepressant medication

What if this process or outcome of care is not appropriate for your patient?

There may be times when it is not appropriate to complete an 84-day (12-week) acute treatment of antidepressant medication, due to:

- Documented reasons (eg, patient with a new episode of MDD was not an eligible candidate for antidepressant medication treatment)

In these cases, you will need to indicate that a documented reason applies, and specify the reason on the worksheet and in the medical chart. The office/billing staff will then report the G-code that represents these valid reasons (also called exclusions).

¹A “new episode” is defined as a patient with major depression who has not been seen or treated for major depression by any practitioner in the prior 4 months. A new episode can either be a recurrence for a patient with prior major depression or a patient with a new onset of major depression.

Major Depressive Disorder (MDD)

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PQRI Data Collection Sheet

Patient's Name	Practice Medical Record Number (MRN)	Birth Date (mm/dd/yyyy) / /	Gender <input type="checkbox"/> Male <input type="checkbox"/> Female
National Provider Identifier (NPI)		Date of Service	

Clinical Information			Billing Information
Step 1 Is patient eligible for this measure?			
	Yes	No	Code Required on Claim Form
Patient is aged 18 years and older.	<input type="checkbox"/>	<input type="checkbox"/>	Verify date of birth on claim form.
Patient has a diagnosis of major depressive disorder.	<input type="checkbox"/>	<input type="checkbox"/>	Refer to coding specifications document for list of applicable codes.
There is a CPT E/M Service Code for this visit.	<input type="checkbox"/>	<input type="checkbox"/>	
If No is checked for any of the above, STOP. Do not report a G-code.			
Step 2 Does patient also have the other requirements for this measure?			
	Yes	No	Code to be Reported on Line 24D of Paper Claim Form (or Service Line 24 of Electronic Claim Form)
Is this patient being seen for a new episode ¹ of MDD?	<input type="checkbox"/>	<input type="checkbox"/>	If No , report G8128 and STOP. If Yes , proceed to Step 3.
Step 3 Does patient meet or have an acceptable reason for not meeting the measure?			
Acute Treatment with Antidepressant Medication	Yes	No	Code to be Reported on Line 24D of Paper Claim Form, if Yes (or Service Line 24 of Electronic Claim Form)
Prescribed or completed	<input type="checkbox"/>	<input type="checkbox"/>	G8126
Not prescribed or completed for the following reason: • Documented reasons (eg, patient with a new episode of MDD was not an eligible candidate for antidepressant medication treatment)	<input type="checkbox"/>	<input type="checkbox"/>	G8128
Document reason here and in medical chart. _____ _____			If No is checked for all of the above, report G8127 (Patient with new episode of MDD not documented as being treated with antidepressant medication during the entire 12 week acute treatment phase.)

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Coding Specifications

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

An ICD-9 diagnosis code for major depressive disorder and a CPT E/M service code are required to identify patients to be included in this measure.

Major depressive disorder ICD-9 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)
- 298.0 (other nonorganic psychoses),
- 300.4 (dysthymic disorder),
- 309.1 (prolonged depressive reaction),
- 311 (major depression)

AND

CPT E/M service codes

- 90801 (psychiatric diagnostic interview examination),
- 90802 (interactive psychiatric diagnostic interview examination),
- 90804, 90805, 90806, 90807, 90808, 90809 (individual psychotherapy),
- 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),
- 99341, 99342, 99343, 99344, 99345, 99347, 99348, 99349, 99350 (home visit)

Quality codes for this measure (one of the following for every eligible patient):

G-Code descriptors

(Data Collection sheet should be used to determine appropriate combination of codes.)

- **G8126:** Patient with new episode of MDD documented as being treated with antidepressant medication during the entire 12 week acute treatment phase
- **G8128:** Clinician documented that patient with a new episode of MDD was not an eligible candidate for antidepressant medication treatment or patient did not have a new episode of MDD
- **G8127:** Patient with new episode of MDD not documented as being treated with antidepressant medication during the entire 12 week acute treatment phase

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