

Suicide Risk Assessment

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

Measure description

Percentage of patients aged 18 years and older with a new diagnosis or recurrent episode of MDD who had a suicide risk assessment completed at each visit during the measurement period

What will you need to report for each visit for patients with MDD for this measure?

If you select this measure for reporting, you will report:

- Whether or not you assessed for suicide risk

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

Some measures provide an opportunity for the physician or eligible health professional to document when a process or outcome of care is not appropriate for a given patient (also called performance exclusions). Because this measure is applicable to most if not all patients, there are no allowable performance exclusions.

Major Depressive Disorder (MDD)

Suicide Risk Assessment

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?			Code Required on Claim Form
	Yes	No	
Patient is aged 18 years and older on date of encounter.	<input type="checkbox"/>	<input type="checkbox"/>	Verify date of birth on claim form.
Patient has a line item diagnosis of new or recurrent episode of MDD.	<input type="checkbox"/>	<input type="checkbox"/>	Refer to coding specifications document for list of applicable codes. Codes determining a patient's eligibility must be reported on the same claim as the quality code(s) identified below.
There is a CPT 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 CPT category II code.			
Step 2 Does patient also have the other requirements for this measure?			Code to be Reported on Line 24D of Paper Claim Form (or Service Line 24 of Electronic Claim Form)
	Yes	No	
Does the patient meet the full criteria for MDD (ie, patient is not in remission ¹)?	<input type="checkbox"/>	<input type="checkbox"/>	If No (ie, patient is in remission), report only 3092F ² and STOP. If Yes , proceed to Step 3.
Step 3 Does patient meet the measure?			Code to be Reported on Line 24D of Paper Claim Form, if Yes (or Service Line 24 of Electronic Claim Form)
Suicide Risk	Yes	No	
Assessed	<input type="checkbox"/>	<input type="checkbox"/>	3085F
			If No is checked for the above, report 3085F-8P (Suicide risk not assessed, reason not otherwise specified.)

¹According to DSM-IV criteria, full remission requires no symptoms of depression over at least 2 months, and partial remission is the presence of depressive symptoms without meeting full MDD criteria, or no significant symptoms for a period of less than 2 months.

²If 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. This measure does not require suicide risk assessment to be reported 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 report a code to identify whether or not you assessed for suicide risk.

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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.

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