### Health Partners Plans HPP



### Pennsylvania Performance Measures

**Perinatal Depression Screening (PDS)** 

#### Perinatal Depression Screening (PDS)

- What Does Perinatal Depression Screening (PDS) Measure?
- Examples of Depression Screening Tools
- Questions Used to Screen for Depression
- Use of the Obstetrical Needs Assessment Form (ONAF)
- Examples of Accepted Documentation
- How HPP Can Help
- Questions

#### What Does Perinatal Depression Screening (PDS) Measure?

The PDS measure assesses the percentage of members who were screened for depression:

- During a prenatal care visit
- During a prenatal care visit using a validated depression screening tool.
- During the time frame of the first two prenatal care visits
- Screened positive for depression during a prenatal care visit.
- Screened positive for depression during a prenatal care visit and had evidence of further evaluation or treatment or referral for further treatment
- During a postpartum care visit.
- During a postpartum care visit using a validated depression screening tool.
- Screened positive for depression during a postpartum care visit.
- Screened positive for depression during a postpartum care visit and had evidence of further evaluation or treatment or referral for further treatment.

#### What Does Perinatal Depression Screening (PDS) Measure?

- Medical records will be collected by Health Partners Plans for chart review. This measure is <u>a chart</u> review measure, which means that coding submitted on a claim will not be counted.
- All documentation in the medical record must be:
  - Dated
  - Signed by the practitioner (MD, DO, PA, CRNP)
- Visits may be face-to-face, e-visit or telehealth.
- The sample for this measure is all women who had a viable birth between October 8 of the year prior to the measurement year and October 7 of the measurement year.
- The time period for the post partum visit is 7 to 84 days after delivery.



#### Examples of Depression Screening Tool

Validated depression screening tools examples:

- The Edinburgh Postnatal Depression Scale (EPDS)\*
- Patient Health Questionnaire (PHQ)-2 and PHQ-9 Tools\*
- Beck Depression Inventory (BDI 1a, II)
- Hamilton Rating Scale for Depression (HRSD)
- General Health Questionnaire (GHQ-D)
- Postpartum Depression Screening Scale (PDSS)
- Hospital Anxiety and Depression Scale (HADS)
- Generalized Contentment Scale
- \* The most frequently seen tools being used in medical records



#### Questions Used to Screen for Depression

Questions maybe used in lieu of using a validated depression tool. Some examples of questions are:

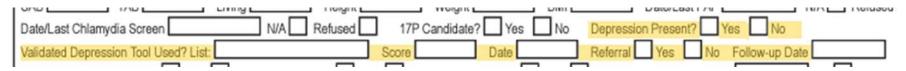
- Over the past two weeks, have you felt down, depressed, or hopeless?
- Have you felt little interest or pleasure in doing things?
- How has your overall mood been for the past two weeks?
- How's your concentration?
- Do you feel like life is not worth living?
- Have you been feeling down on yourself?
- Do you have any plans to hurt yourself?
- Evidence of active treatment for depression
- Notations about sadness or "Baby Blues"

#### Use of the Obstetrical Needs Assessment Form (ONAF)

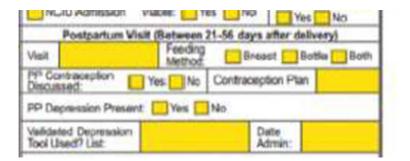
- The Obstetrical Needs Assessment Form (ONAF) is acceptable evidence that screenings and/or referrals, advice, or counseling were performed.
- The documentation must include:
  - The date of the screening;
  - The tool used;
  - The score of the tool
- The information documented in the ONAF <u>must be recorded</u> in the medical record.

#### Use of the Obstetrical Needs Assessment Form (ONAF)

- The ONAF has areas that can be used to document depression screenings:
  - Prenatal the top of the ONAF form:



Postpartum – the lower right area of the form:



#### Examples of Positive Findings for Depression Documentation

- The following findings could be indicative of a positive screening for depression:
  - Diagnostic confirmation; or
  - Documentation that the depression screening tool scores are above the threshold; or
  - Documentation that the member is at risk for depression, hx of depression alone will not count, documentation must state that the member is currently at risk for depression.
- Affirmative answers to self-harm questions, thoughts about death, or suicidal ideation or a suicide risk assessment checklist.
- Evidence that the member is being actively treated for depression.
  - If the member is actively being treated for depression this counts as:
    - Screening
    - Positive screening
    - Evidence of treatment/referral for treatment

# Examples of Documentation That <u>Does Not</u> Count for Positive Depression Screenings

- Mental health assessment for other conditions (ADHD, anxiety, bipolar),
- An assessment for depression conducted prior to the pregnancy or after the postpartum period,
- Use of "psychiatric" or "mental health" check boxes or global statements of "normal" without indication that depression screening was specifically included.
- Use of a checklist indicating mental health was addressed without specific reference to depression.
- Prescription of antidepressant medication for smoking cessation.

## Examples of Documentation That Could Count as Treatment or Referral for Depression

- Notation that the provider discussed treatment options for depression with the member
- Prescription of an antidepressant after a positive screening
- Documentation that the member is in psychotherapy,
- Recommendations for lifestyle changes such as exercise for the purpose of addressing depressive,
- Evidence of active treatment for depression.

#### How HPP Can Help

- HPP has a perinatal case management program call Baby Partners
  - https://www.healthpartnersplans.com/providers/plan-info/baby-partners
- The Baby Partners clinical team works with our pregnant members to provider telephonic care management during the prenatal and postpartum period.
  - Staffed by nurses and social workers
  - Can coordinate appointments for mom and newborn
  - Can assist with transpiration to medical and behavioral health appointments
- You can refer your pregnant patients to Baby Partners two ways:
  - Call 215-845-4797
  - Email <u>ClinicalConnections@hpplans.com</u>



#### Questions?

Please contact <a href="mailto:ProviderEducation@hpplans.com">ProviderEducation@hpplans.com</a>

or

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