# IT-1.9: Depression management: Depression Remission at Twelve Months

| **Measure Title** | **IT-1.9 Depression Remission at Twelve Months** |
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| **Description** | Adult patients age 18 and older with major depression or dysthymia and an initial PHQ-9 score > 9 who demonstrate remission at twelve months defined as a PHQ-9 score less than 5. This measure applies to both patients with newly diagnosed and existing depression whose current PHQ-9 score indicates a need for treatment. |
| **NQF Number** | 0710 |
| **Measure Steward** | Minnesota Community Measurement |
| **Link to measure citation** | <http://www.qualityforum.org/QPS/0710> |
| **Measure type** | Stand-alone (SA) |
| **Performance and Achievement Type** | Pay for Performance (P4P) – Improvement Over Self (IOS)   |  |  |  | | --- | --- | --- | |  | DY4 | DY5 | | Achievement Level Calculation | Baseline + 5% \*(performance gap)  =  Baseline + 5% \*(100% – Baseline rate) | Baseline + 10% \*(performance gap)  =  Baseline + 10% \*(100% – Baseline rate) | |
| **DSRIP-specific modifications to Measure Steward’s specification** | None |
| **Denominator Description** | Adults age 18 and older with a diagnosis of major depression or dysthymia and an initial PHQ-9 score greater than nine (including, patients who do not have a follow-up PHQ-9 score at twelve months (+/- 30 days) |
| **Denominator Inclusions** | The Measure Steward does not identify specific denominator inclusions beyond what is described in the denominator description. |
| **Denominator Exclusions** | Patients who die, are a permanent resident of a nursing home or are enrolled in hospice are excluded from this measure. Additionally, patients who have a diagnosis (in any position) of bipolar or personality disorder are excluded. |
| **Denominator Size** | Providers must report a minimum of 30 cases per measure during a 12-month measurement period (15 cases for a 6-month measurement period)   * For a measurement period (either 6 or 12 months) where the denominator size is less than or equal to 75, providers must report on all cases. No sampling is allowed. * For a measurement period (either 6 or 12 months) where the denominator size is less than or equal to 380 but greater than 75, providers must report on all cases (preferred, particularly for providers using an electronic health record) or a random sample of not less than 76 cases. * For a measurement period (either 6 or 12-months) where the denominator size is greater than 380, providers must report on all cases (preferred, particularly for providers using an electronic health record) or a random sample of cases that is not less than 20% of all cases; however, providers may cap the total sample size at 300 cases. |
| **Numerator Description** | Adults age 18 and older with a diagnosis of major depression or dysthymia and an initial PHQ-9 score greater than nine who achieve remission at twelve months as demonstrated by a twelve month (+/- 30 days) PHQ-9 score of less than five. |
| **Numerator Inclusions** | The Measure Steward does not identify specific numerator inclusions beyond what is described in the numerator description. |
| **Numerator Exclusions** | Patients who die, are a permanent resident of a nursing home or are enrolled in hospice are excluded from this measure. Additionally, patients who have a diagnosis (in any position) of bipolar or personality disorder are excluded. |
| **Setting** | Ambulatory |
| **Data Source** | Electronic Clinical Data, Electronic Health Record, Registry, Paper Medical Records |
| **Allowable Denominator Sub-sets** | All denominator subsets are permissible for this outcome |