

Depression Guide

The nine items of the PHQ-9 come directly from the nine DSM-IV signs and symptoms of major depression and is a reliable assessment tool for the diagnosis of depression in primary care. Patients should not be diagnosed solely on the basis of a PHQ-9 score. The physician should corroborate the score with clinical determination that a significant depressive syndrome is present. After making a provisional diagnosis with the PHQ-9, there are additional clinical considerations that may affect decisions about management and treatment.

PHQ-9	Over the last 2 weeks (or other agreed time period) how often have you been bothered by any of the following problems?	not at all	several days	more than half the days	nearly every day
1.	Little interest or pleasure in doing things	0	1	2	3
2.	Feeling down, depressed, or hopeless	0	1	2	3
3.	Trouble falling or staying asleep, or sleeping too much	0	1	2	3
4.	Feeling tired or having little energy	0	1	2	3
5.	Poor appetite or overeating	0	1	2	3
6.	Feeling bad about yourself — or that you are a failure or have let yourself or your family down	0	1	2	3
7.	Trouble concentrating on things, such as reading the newspaper or watching television	0	1	2	3
8.	Moving or speaking so slowly that other people could have noticed? Or the opposite — being so fidgety or restless that you have been moving around a lot more than usual	0	1	2	3
9.	Thoughts that you would be better off dead or of hurting yourself in some way	0	1	2	3
	PHQ-9 total score =				

- Note a diagnosis of “major depressive episode” requires that questions 1 or 2 **and** five or more of questions 3 to 9 are scored at “more than half the days” or “nearly every day” (question 9 is counted if present at all).
- Provider needs to determine if initial presentation or recurrent. Also, is there another reason why the patient is depressed? If the patient has depression are they in remission or partial remission?
 - **Partial Remission:** Symptoms of a major depressive episode are present but full criteria are not met, or there is a period without any significant symptoms lasting less than 2 months following the end of the major depressive episode.
 - **Full Remission:** During the past 2 months, no significant signs or symptoms of the disturbance were present.
 - A diagnosis of partial or full remission can be made if the patient is currently taking antidepressants and/or participating in other treatment, such as psychotherapy, as long as the above symptom timeframe criteria are met.

DIAGNOSTIC CATEGORIES FOR DEPRESSION

PHQ-9 Symptoms & Impairment	PHQ-9 Severity	Provisional Diagnosis	Treatment Recommendations	Follow-up
1 to 4 symptoms, functional impairment	< 10	Mild or Minimal Depressive Symptoms	- Reassurance and/or supportive counseling - Education to call if deteriorates	Every other month
2 to 4 symptoms and positive response to questions 1 or 2, functional impairment	10-14	Moderate Depressive Symptoms (Minor Depression)*	- Watchful waiting - Supportive counseling - If no improvement after one or more months, consider use of antidepressant or brief psychological counseling	Monthly
5 symptoms and positive response to questions 1 or 2, functional impairment	15-19	Moderately Severe Major Depression	- Patient preference for antidepressant and/or psychological counseling	Every 2-4 weeks
5 symptoms and positive response to questions 1 or 2, functional impairment	≥ 20	Severe Major Depression	- Antidepressants alone or in combination with psychological counseling	1-2 weeks until PHQ-9 improves ≥ 5 points

- If symptoms present for > 2 years, Chronic Depression, or functional impairment is severe, remission with watchful waiting is unlikely, immediate active treatment indicated for moderate depressive symptoms (minor depression)
- Referral or co-management with mental health specialty clinician if patient is a high suicide risk or has bipolar disorder, and inadequate treatment response, or complex psychosocial needs and/or other active mental disorders.

Major Depressive, Bipolar, and Paranoid Disorders Included in 2018 HCC

Diagnosis Code	Description	HCC Category	Community RAF
Major Depression - Single Episode			
F32.0	Major depressive disorder, single episode, mild	58	0.330
F32.1	Major depressive disorder, single episode, moderate	58	0.330
F32.2	Major depressive disorder, single episode, severe without psychotic features	58	0.330
F32.3	Major depressive disorder, single episode, severe with psychotic features	58	0.330
F32.4	Major depressive disorder, single episode, in partial remission	58	0.330
F32.5	Major depressive disorder, single episode, in full remission	58	0.330
Major Depression - Recurrent			
F33.0	Major depressive disorder, recurrent, mild	58	0.330
F33.1	Major depressive disorder, recurrent, moderate	58	0.330
F33.2	Major depressive disorder, recurrent severe without psychotic features	58	0.330
F33.3	Major depressive disorder, recurrent, severe with psychotic symptoms	58	0.330
F33.40	Major depressive disorder, recurrent, in remission, unspecified	58	0.330
F33.41	Major depressive disorder, recurrent, in partial remission	58	0.330
F33.42	Major depressive disorder, recurrent, in full remission	58	0.330
F33.8	Other recurrent depressive disorders	58	0.330
F33.9	Major depressive disorder, recurrent, unspecified	58	0.330
Other Mood/Affective Disorders			
F34.89	Other persistent mood [affective] disorders <i>(no RAF in Athena)</i>	58	0.330
F34.9	Persistent mood [affective] disorder, unspecified	58	0.330
F39	Unspecified mood [affective] disorder	58	0.330