

## Attachment

### Depression Screening and Follow-Up for Adolescents and Adults (DSF) for the 2024 Measures Under Consideration MERIT Submission

This attachment contains data for the Follow-Up on Positive Screen indicator for the DSF measure.

| Subsection          | Row | Field Label | Guidance   | ADD YOUR CONTENT HERE  |
|---------------------|-----|-------------|--|--|
| Measure Information | 016 | *Numerator  | The upper portion of a fraction used to calculate a rate, proportion, or ratio. An action to be counted as meeting a measure's requirements. | <p><b>Follow-up on Positive Screen</b></p> <p>Members age 12 and older who received follow-up care on or up to 30 days after the date of the first positive screen (31 total days).</p> <p>Any of the following on or up to 30 days after the first positive screen:</p> <ul style="list-style-type: none"> <li>• An outpatient, telephone, e-visit or virtual check-in follow-up visit with a diagnosis of depression or other behavioral health condition.</li> <li>• A depression case management encounter that documents assessment for symptoms of depression or a diagnosis of depression or other behavioral health condition.</li> <li>• A behavioral health encounter, including assessment, therapy, collaborative care or medication management.</li> <li>• A dispensed antidepressant medication.</li> </ul> <p>OR</p> <ul style="list-style-type: none"> <li>• Documentation of additional depression screening on a full-length instrument indicating either no depression or no symptoms that require follow-up (i.e., a negative screen)</li> </ul> |

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|  |     |   |   | on the same day as a positive screen on a brief screening instrument.  |
| Measure Information                                    | 018 | *Denominator                                | The lower part of a fraction used to calculate a rate, proportion, or ratio. The denominator is associated with a given population that may be counted as eligible to meet a measure's inclusion requirements.  | <p><b>Follow-up on Positive Screen</b></p> <p>Members 12 years of age and older at the start of the measurement period who also meet criteria for participation with a positive depression screen finding between January 1 and December 1 of the measurement period.</p> <p>Members 12 years of age and older at the start of the measurement period who were enrolled throughout the period with no more than one gap in enrollment of up to 45 days with a positive depression screen finding between January 1 and December 1 of the measurement period.</p> |
| Measure Score Level (Accountable Entity Level) Testing | 036 | *Signal-to-Noise: Median Statistical result | Indicate the median result for the signal-to-noise analysis used to assess accountable entity level reliability. Results should range from 0.00 to 1.00. Calculate reliability as the measure is intended to be implemented (e.g., after applying minimum denominator requirements, appropriate type of setting, provider, etc.). | <p><b>Follow-up on Positive Screen</b></p> <p>Min: 0.76<br/>Median: 0.96<br/>Max: 0.99</p>   |
| Measure Performance                                    | 064 | *Number of persons                          | Provide the number of persons included in the analysis of the distribution of performance scores  | <p><b>Follow-up on Positive Screen</b></p> <p>Number of persons: 36,755</p>  |
| Measure Performance                                    | 065 | *10th percentile                            | <p>Provide the performance score at the 10th percentile for the testing sample that is relevant to the intended use of the measure.</p> <p>If this is a proportion measure, provide the 10th percentile score in percentage form, without the symbol. For example, if the 10th</p>  | <p><b>Follow-up on Positive Screen</b></p> <p>54.0%</p>  |

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|                     |     |   | <p>percentile performance score is 21.2%, enter 21.2 and not 0.212.</p> <p>If a 10th percentile performance score is not available, enter 9999.</p>   |  |
| Measure Performance | 066 | *50th percentile (median)                   | <p>Provide the median performance score (50th percentile) for the testing sample that is relevant to the intended use of the measure.</p> <p>Please enter only one value in the response field and do not enter a range of values.</p> <p>If this is a proportion measure, provide the median performance score in percentage form, without the symbol. For example, if the median performance score is 85.6%, enter 85.6 and not 0.856.</p> <p>If a median performance score is not available, enter 9999.</p> | <p><b>Follow-up on Positive Screen</b></p> <p>74.4%</p>        |
| Measure Performance | 067 | *90th percentile                            | <p>Provide the performance score at the 90th percentile for the testing sample that is relevant to the intended use of the measure.</p> <p>If this is a proportion measure, provide the 90th percentile score in percentage form, without the symbol. For example, if the 90th percentile performance score is 85.6%, enter 85.6 and not 0.856.</p> <p>If a 90th percentile performance score is not available, enter 9999.</p>   | <p><b>Follow-up on Positive Screen</b></p> <p>94.9%</p>        |
| Measure Performance | 068 | *Additional measure performance information | <p>Provide the following additional measure performance information, as applicable:</p> <ul style="list-style-type: none"> <li>- Mean performance score across accountable entities in the test</li> </ul>  | <p><b>Follow-up on Positive Screen</b></p> <p>74.2% (mean)</p> |

|                         |     |                              |   |  |
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|                         |     |                              | <p>sample that is relevant to the intended use of the measure.</p> <ul style="list-style-type: none"> <li>- Minimum and maximum performance score for the testing sample that is relevant to the intended use of the measure.</li> <li>- Standard deviation of performance scores for the testing sample that is relevant to the intended use of the measure.</li> <li>- Passing score for the performance measure.</li> <li>- Performance score's defined interval, including upper and lower limit of the performance score.</li> </ul> |  |
| General Characteristics | 103 | *Evidence of performance gap | <p>Evidence of a performance gap among the units of analysis in which the measure will be implemented. Provide analytic evidence that the units of analysis have room for improvement and, therefore, that the implementation of the measure would be meaningful.</p> <p>If you have lengthy text add the evidence as an attachment, named to clearly indicate the related form field.</p>  | <p><b>Follow-up on Positive Screen</b></p> <p>The following data are extracted from HEDIS data collection reflecting the most recent year of measurement (2022) for DSF-E. Performance data is summarized at the health plan level and summarized by mean performance and performance at the 10<sup>th</sup>, 25<sup>th</sup>, 50<sup>th</sup>, and 90<sup>th</sup> percentiles.</p> <p>Mean: 74.2%</p> <p>10<sup>th</sup> Percentile: 54.0%</p> <p>25<sup>th</sup> Percentile: 64.0%</p> <p>50<sup>th</sup> Percentile: 74.4%</p> <p>75<sup>th</sup> Percentile: 88.2%</p> <p>90<sup>th</sup> Percentile: 94.9%</p> |