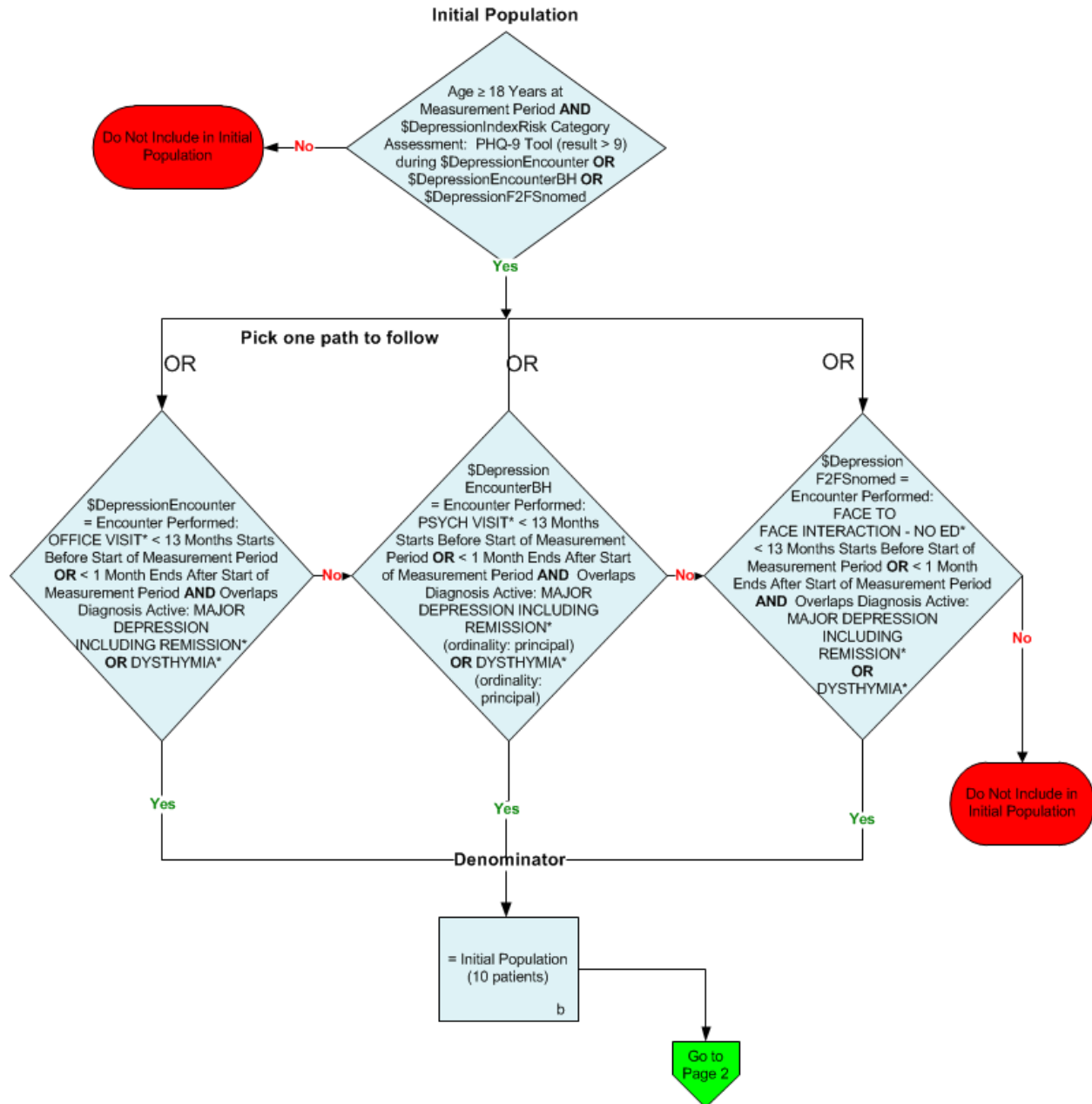
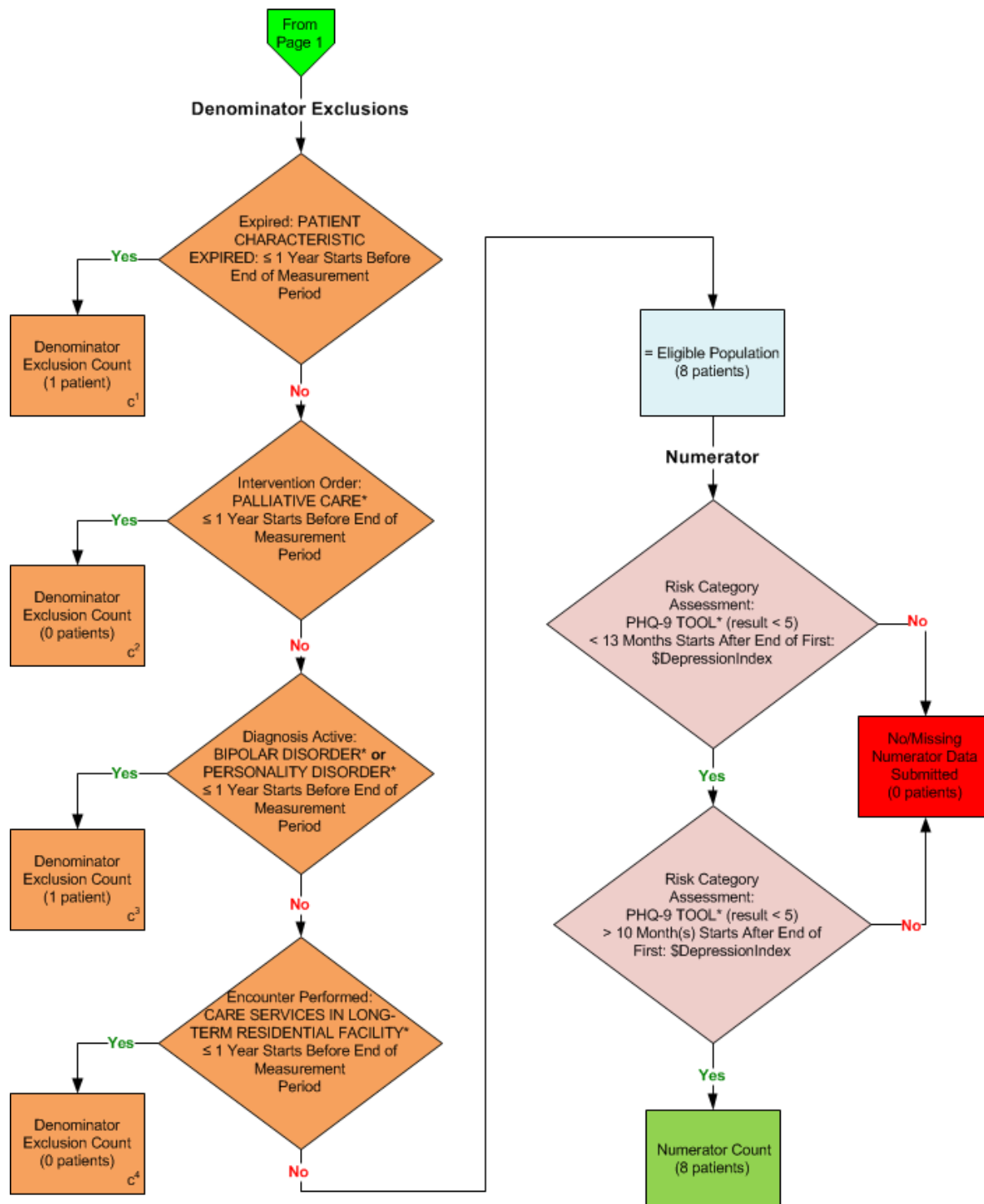


**2014 eCQM Flow**  
**Measure Identifier: CMS159v4**  
 NQF 0710: Depression Remission at Twelve Months



\*Please refer to the specific section of the eCQM to identify the QDM data elements and associated value sets for use in reporting this eCQM.

**2014 eCQM Flow**  
**Measure Identifier: CMS159v4**  
 NQF 0710: Depression Remission at Twelve Months



\*Please refer to the specific section of the eCQM to identify the QDM data elements and associated value sets for use in reporting this eCQM.

**2014 eCQM Flow**  
**Measure Identifier: CMS159v4**  
NQF 0710: Depression Remission at Twelve Months

**SAMPLE CALCULATION:**

**Performance Rate =**  
$$\frac{\text{Numerator (a=8 patients)}}{\text{Denominator (b=10 patients) - Denominator Exclusions (c}^1 + \text{c}^2 + \text{c}^3 + \text{c}^4 = 2 \text{ patients) - Denominator Exceptions (N/A)}} = 100.00\%$$

2014 eCQM Flows  
Measure Identifier: CMS159v4  
NQF 0710: Depression Remission at Twelve Months

Please refer to the specific section of the eCQM to identify the Population Criteria and associated value sets for use in reporting this eCQM.

1. Start Initial Population
2. Check AGE:
  - a. If the AGE greater than or equal to 18 years at measurement equals No, do not include in Initial Population. Stop Processing.
  - b. If AGE greater than or equal to 18 years at measurement period equals Yes, proceed to \$DepressionIndex.
3. Check \$DepressionIndex:
  - a. If the \$DepressionIndex QDM data element, PHQ-9 TOOL (result greater than 9), during \$DepressionEncounter (Encounter Performed QDM data element, OFFICE VISIT, less than 13 months starts before start of measurement period or less than 1 month ends after start of measurement period and overlaps Diagnosis Active QDM data element, MAJOR DEPRESSION INCLUDING REMISSION, or QDM data element, DYSTHMIA) or \$DepressionF2FSnomed (Encounter Performed QDM data element, FACE TO FACE INTERACTION – NO ED, less than 13 months starts before start of measurement period or less than 1 month ends after start of measurement period and overlaps Diagnosis Active QDM data element MAJOR DEPRESSION INCLUDING REMISSION, or QDM data element, DYSTHMIA) or \$DepressionEncounterBH (Encounter Performed QDM data element, PSYCH VISIT, less than 13 months starts before start of measurement period or less than 1 month ends after start of measurement period and overlaps Diagnosis Active QDM data element MAJOR DEPRESSION INCLUDING REMISSION, or QDM data element, DYSTHMIA) equals Yes, include in Initial Population and proceed to Denominator.
  - b. If the \$DepressionIndex QDM data element, PHQ-9 TOOL (result greater than 9), during \$DepressionEncounter (Encounter Performed QDM data element, OFFICE VISIT, less than 13 months starts before start of measurement period or less than 1 month ends after start of measurement period and overlaps Diagnosis Active QDM data element, MAJOR DEPRESSION INCLUDING REMISSION, or QDM data element, DYSTHMIA) or \$DepressionF2FSnomed (Encounter Performed QDM data element, FACE TO FACE INTERACTION – NO ED, less than 13 months starts before start of measurement period or less than 1 month ends after start of measurement period and overlaps Diagnosis Active QDM data element MAJOR DEPRESSION INCLUDING REMISSION, or QDM data element, DYSTHMIA) or \$DepressionEncounterBH (Encounter Performed QDM data element, PSYCH VISIT, less than 13 months starts before start of measurement period or less than 1 month ends after start of measurement period and overlaps Diagnosis Active QDM data element MAJOR DEPRESSION INCLUDING REMISSION, or QDM data element, DYSTHMIA) equals No, do not include in the Initial Population. Stop Processing.
4. Start Denominator

- a. Denominator equals the Initial Population. Denominator is represented by Letter b in the sample calculation listed at the end of this document. Letter b equals 10 patients in the sample calculation.
5. Start Denominator Exclusions
6. Check for Expired
  - a. If the Expired QDM data element, PATIENT CHARACTERISTIC EXPIRED, less than or equal to 1 year starts before end of measurement period equals Yes, include in Denominator Exclusions count. Denominator Exclusion is represented by Letter c<sup>1</sup> in the sample calculation listed at the end of this document. Letter c<sup>1</sup> equals 1 patient in the sample calculation.
  - b. If the Expired QDM data element, PATIENT CHARACTERISTIC EXPIRED, less than or equal to 1 year starts before end of measurement period equals No, go to check Intervention Order.
7. Check for Intervention Order:
  - a. If the Intervention Order QDM data element, PALLIATIVE CARE, less than or equal to 1 year starts before end of measurement period equals Yes, include in Denominator Exclusions count. Denominator Exclusion is represented by Letter c<sup>2</sup> in the sample calculation listed at the end of this document. Letter c<sup>2</sup> equals 0 patients in the sample calculation.
  - b. If the Intervention Order QDM data element, PALLIATIVE CARE, less than or equal to 1 year starts before end of measurement period equals No, go to check Diagnosis Active.
8. Check for Diagnosis Active:
  - a. If the Diagnosis Active QDM data element, BIPOLAR DISORDER, or the QDM data element, PERSONALITY DISORDER, less than or equal to 1 year starts before end of measurement period equals Yes, include in Denominator Exclusions count. Denominator Exclusion is represented by Letter c<sup>3</sup> in the sample calculation listed at the end of this document. Letter c<sup>3</sup> equals 1 patient in the sample calculation.
  - b. If the Diagnosis Active QDM data element, BIPOLAR DISORDER, or the QDM data element, PERSONALITY DISORDER, less than or equal to 1 year starts before end of measurement period equals No, go to check Encounter Performed.
9. Check for Encounter Performed:
  - a. If the Encounter Performed QDM data element, CARE SERVICES IN LONG-TERM RESIDENTIAL FACILITY, less than or equal to 1 year starts before end of measurement period, equals Yes, include in Denominator Exclusions count. Denominator Exclusion is represented by Letter c<sup>4</sup> in the sample calculation listed at the end of this document. Letter c<sup>4</sup> equals 0 patients in the sample calculation.
  - b. If the Encounter Performed QDM data element, CARE SERVICES IN LONG-TERM RESIDENTIAL FACILITY, less than or equal to 1 year starts before end of measurement period, equals No, include in eligible population and proceed to Numerator.
10. Start Numerator
11. Check Risk Category Assessment:

- a. If the Risk Category Assessment QDM data element, PHQ-9 TOOL (result less than 5), less than 13 months starts after end of First \$DepressionIndex QDM data element, PHQ-9 TOOL (result greater than 9), during \$DepressionEncounter (Encounter Performed QDM data element, OFFICE VISIT, less than 13 months starts before start of measurement period or less than 1 month ends after start of measurement period and overlaps Diagnosis Active QDM data element, MAJOR DEPRESSION INCLUDING REMISSION, or QDM data element, DYSTHMIA) or \$DepressionF2FSnomed (Encounter Performed QDM data element, FACE TO FACE INTERACTION – NO ED, less than 13 months starts before start of measurement period or less than 1 month ends after start of measurement period and overlaps Diagnosis Active QDM data element MAJOR DEPRESSION INCLUDING REMISSION, or QDM data element, DYSTHMIA) or \$DepressionEncounterBH (Encounter Performed QDM data element, PSYCH VISIT, less than 13 months starts before start of measurement period or less than 1 month ends after start of measurement period and overlaps Diagnosis Active QDM data element MAJOR DEPRESSION INCLUDING REMISSION, or QDM data element, DYSTHMIA) equals Yes, go to check Risk Category Assessment.
- b. If the Risk Category Assessment QDM data element, PHQ-9 TOOL (result less than 5), less than 13 months starts after end of First \$DepressionIndex (QDM data element, PHQ-9 TOOL (result greater than 9), during \$DepressionEncounter (Encounter Performed QDM data element, OFFICE VISIT, less than 13 months starts before start of measurement period or less than 1 month ends after start of measurement period and overlaps Diagnosis Active QDM data element, MAJOR DEPRESSION INCLUDING REMISSION, or QDM data element, DYSTHMIA) or \$DepressionF2FSnomed (Encounter Performed QDM data element, FACE TO FACE INTERACTION – NO ED, less than 13 months starts before start of measurement period or less than 1 month ends after start of measurement period and overlaps Diagnosis Active QDM data element MAJOR DEPRESSION INCLUDING REMISSION, or QDM data element, DYSTHMIA) or \$DepressionEncounterBH (Encounter Performed QDM data element, PSYCH VISIT, less than 13 months starts before start of measurement period or less than 1 month ends after start of measurement period and overlaps Diagnosis Active QDM data element MAJOR DEPRESSION INCLUDING REMISSION, or QDM data element, DYSTHMIA)), equals No, include in the No/Missing Data Submitted count. Stop Processing.

## 12. Check Risk Category Assessment:

- a. If the Risk Category Assessment QDM data element, PHQ-9 TOOL (result less than 5), greater than 10 months starts after end of First \$DepressionIndex (QDM data element, PHQ-9 TOOL (result greater than 9), during Encounter Performed QDM data element, OFFICE VISIT, less than 13 months starts before start of measurement period or less than 1 month ends after start of measurement period and overlaps Diagnosis Active QDM data element, MAJOR DEPRESSION INCLUDING REMISSION, or QDM data element, DYSTHMIA or First QDM data element, PHQ-9 TOOL (result greater than 9), during Encounter Performed QDM data element, PSYCH VISIT, less than 13 months starts before start of measurement period or less than 1 month ends after start of measurement period and overlaps Diagnosis Active QDM data element, MAJOR DEPRESSION INCLUDING REMISSION (ordinality: principal), or QDM data element, DYSTHMIA (ordinality: principal) or First QDM data element, PHQ-9 TOOL (result greater than 9), during Encounter Performed QDM data element, FACE TO FACE INTERACTION – NO ED, less than 13 months starts before start of measurement period or less than 1 month

ends after start of measurement period and overlaps Diagnosis Active QDM data element, MAJOR DEPRESSION INCLUDING REMISSION, or QDM data element, DYSTHMIA) equals Yes, include in Numerator Count. Numerator is represented by Letter a in the sample calculation listed at the end of this document. Letter a equals 8 patients in the sample population.

- b. If the Risk Category Assessment QDM data element, PHQ-9 TOOL (result less than 5), greater than 10 months starts after end of First \$DepressionIndex (QDM data element, PHQ-9 TOOL (result greater than 9), during Encounter Performed QDM data element, OFFICE VISIT, less than 13 months starts before start of measurement period or less than 1 month ends after start of measurement period and overlaps Diagnosis Active QDM data element, MAJOR DEPRESSION INCLUDING REMISSION, or QDM data element, DYSTHMIA or First QDM data element, PHQ-9 TOOL (result greater than 9), during Encounter Performed QDM data element, PSYCH VISIT, less than 13 months starts before start of measurement period or less than 1 month ends after start of measurement period and overlaps Diagnosis Active QDM data element, MAJOR DEPRESSION INCLUDING REMISSION (ordinality: principal), or QDM data element, DYSTHMIA (ordinality: principal) or First QDM data element, PHQ-9 TOOL (result greater than 9), during Encounter Performed QDM data element, FACE TO FACE INTERACTION – NO ED, less than 13 months starts before start of measurement period or less than 1 month ends after start of measurement period and overlaps Diagnosis Active QDM data element, MAJOR DEPRESSION INCLUDING REMISSION, or QDM data element, DYSTHMIA), equals No, include in the No/Missing Data Submitted count. Stop Processing.

#### SAMPLE CALCULATION:

Performance Rate =

$$\frac{\text{Numerator (a=8 patients)}}{\text{Denominator (b=10 patients) - Denominator Exclusions (c}^1\text{ + c}^2\text{ + c}^3\text{ + c}^4\text{ = 2 patients) - Denominator Exceptions (N/A)}} = 100.00\%$$