

Proposed PY 2018 Reporting Measure

Clinical Depression Screening and Follow-Up

Clinical Depression Screening and Follow-Up Reporting	
Measure Description	Facility reports in CROWNWeb one of the six conditions below for each qualifying patient once before February 1, 2017. Based on NQF #0418
Exclusions	<ol style="list-style-type: none"> 1. Patients who are younger than 12 years 2. Patients treated at the facility for fewer than 90 days 3. Facilities with a CCN open date after July 1, 2016
Data Sources	<ol style="list-style-type: none"> 1. REMIS, CROWNWeb, and other CMS ESRD administrative data
Additional Information	<ol style="list-style-type: none"> 1. Facilities must report one of the following conditions for each eligible patient: <ol style="list-style-type: none"> a) Screening for clinical depression is documented as being positive, and a follow-up plan is documented b) Screening for clinical depression documented as positive, and a follow-up plan not documented, and the facility possess documentation stating the patient is not eligible c) Screening for clinical depression documented as positive, the facility possesses no documentation of a follow-up plan, and no reason is given d) Screening for clinical depression is documented as negative, and a follow-up plan is not required e) Screening for clinical depression not documented, but the facility possesses documentation stating the patient is not eligible f) Clinical depression screening not documented, and no reason is given