

FOCUS ON: MAJOR DEPRESSION

AUGUST 2011

WHAT IS MAJOR DEPRESSION?

Major depression causes a combination of symptoms that interfere with the ability to work, study, sleep, eat and enjoy once pleasurable activities. The prevalence of major depression ranges from 0.9% to 9.4% in private households, from 14% to 42% in institutional living and from 1% to 16% among elderly living in private households or in institutions.¹ Major depression is a clinical syndrome which has at least five symptoms that cluster together. Major depression lasts for at least two weeks and it causes impairment in functioning. Episodes of depression may start suddenly or slowly and can occur multiple times throughout a person's life.

SCREENING FOR DEPRESSION

Depression severity can be screened using the patient health questionnaire (PHQ-9). Scores on the PHQ-9 range for 0-27 and a score of 15 or greater warrants further evaluation for depression.

CRITERIA FOR MAJOR DEPRESSION

The DSM-IV-TR (Diagnostic and Statistical Manual edition IV) criteria for diagnosing a major depressive disorder states that one or both of the following conditions need to be present:

- Depressed mood, or
- Loss of interest/pleasure

Either one or both of these conditions, in conjunction with at least four of the symptoms below, strongly points to a diagnosis of major depression:

- Feelings of overwhelming sadness or fear, or seeming inability to feel emotion
- Marked decrease of interest in pleasurable activities
- Changing appetite and marked weight gain or weight loss
- Disturbed sleep patterns, either insomnia or sleeping more than normal
- Changes in activity levels, restless or moving significantly slower than normal
- Fatigue, both mental and physical
- Feelings of guilt, helplessness, anxiety and/or fear
- Lowered self-esteem
- Decreased ability to concentrate or make decisions
- Thinking about death or suicide

The information presented herein is for informational purposes only. It is not intended, nor is it to be used, to define a standard of care or otherwise substitute for informed medical evaluation, diagnosis and treatment which can only be performed by a qualified medical professional. Ingenix, Inc. does not warrant or represent that the information contained herein is accurate or free from defects.

This information is for informational purposes only and does not replace the professional judgment and expertise of the individual performing coding based on numerous factors including, but not limited to, documentation in the medical record and other industry recognized coding guidance. Because codes, coding requirements and standards can and do change, the individual assigning codes is reminded to verify the accuracy, specificity, currency and acceptability of such codes and coding methods used.

For more information on Ingenix and the products and services we offer, contact us at www.ingenix.com or call (800) 765-6713. If you have questions or wish to be removed from this fax, please contact your local Ingenix Market Consultant.

Always Remember...

- Major depressive disorders are classified in ICD-9-CM as episodic mood disorders with category **296**²
- The fourth digit, **296.2x** and **296.3x**, is coded to define a single or recurrent episode respectively²
- The fifth digit is coded to define the severity of the current major depressive episode if full criteria is met:³
 - 1 - mild
 - 2 - moderate
 - 3 - severe, without mention of psychotic behavior
 - 4 - severe, specified as with psychotic behavior
- If the criteria are not currently met for major depressive episode, the fifth digit indicates the current clinical status:³
 - 5 - in partial or unspecified remission
 - 6 - in full remission
- Other specifiers that may be included in the documentation but are not coded e.g., with melancholic features and with seasonal pattern³
- Both **296.2x** and **296.3x** exclude the following: circular type, if previous attack was of manic type (**296.5x**), depression NOS (311), reactive depression (neurotic) (300.4) and psychotic reactive depression (298.0)²

Documentation and Coding Tips

- When assigning **296.2x**, *major depressive disorder, single episode*, the documentation can include a single or unspecified episode of:²
 - depressive psychosis
 - endogenous depression
 - involuntal melancholia
 - manic-depressive psychosis or reaction, depressed type
 - monopolar depression and
 - psychotic depression

Q: What is the code assignment for "major depression" that is not further specified in the documentation by the provider?

A: Assign code **296.20**, *major depressive disorder, single episode, unspecified*. For "major depression," subcategory 296.2 may be indexed in the following manner:

Depression, major **296.2x**

- When assigning **296.3x** *major depressive disorder, recurrent episode* the documentation can include any condition classifiable to **296.2x** stated to be recurrent
 - Example:** Major depressive disorder, recurrent, moderate, with atypical features, with seasonal pattern, with full interepisode recovery is coded **296.32**³
- Don't forget the possible E-codes, **E950-E959**, for suicide and self-inflicted injury as a result of major depression²

Optum is an information and technology-enabled health services business platform serving the broad health marketplace, including care providers, plan sponsors, life sciences companies and consumers. Its business units – OptumInsight, OptumHealth and OptumRx – employ more than 30,000 people worldwide who are committed to enabling Sustainable Health Communities.

1 Djernes JK. Prevalence and predictors of depression in populations of elderly: a review. *Acta Psychiatr Scand* 2006; 113: 372–387.

2 2011 Ingenix Professional ICD-9-CM for Physicians. 6th ed. 2 vols. Chicago, IL: Ingenix, 2010. Print.

3 Diagnostic and Statistical Manual of Mental Disorders: DSM-IV, 4th ed. text rev. 345-348, Arlington, VA: American Psychiatric Association, 2000. Print