



Depression Screening Program Description

Nevada Behavioral Health Systems (NBH) Depression Screening Program has been designed to outline methods for identifying members with possible behavioral health (mental health) disorders and provide guidance for decisions to refer for specialized behavioral health treatment. The Screening Program has been developed to assist both members and providers who are seeking assistance in identifying and treating potential co-occurring disorders. Unidentified and consequently untreated coexisting mental health and substance abuse problems can create a myriad of problems that are often related to the highest treatment costs.

It is not uncommon for individuals who are being treated for substance use disorders to have coexisting mental health conditions. Mueser, et al. (2006) report that in clinic samples as many as 40-60% of individuals presenting in mental health settings have a co-occurring substance use diagnosis, and 60-80% of individuals presenting in a substance abuse facility have a co-occurring mental illness diagnosis. Some members/patients use substances as a primary reason to self-medication due to underlying mental health issues.

A Clinician or LADC may assess the presenting substance use but may not screen for coexisting mental health condition because it is out of their scope of treatment. However, the screen for such coexisting conditions can help to better link the member to other specialty care for further assessment and treatment which can make a significant difference in the member's whole person care.

Nevada Behavioral Health's Depression Screening Program is based on the US Preventive Services Task Force recommendation to screen adults for depression in primary care when staff-assisted depression care supports are in place to assure accurate diagnosis, effective treatment, and follow-up. The recommended tools are straightforward and allow for both practitioners use or member self-screening to maximize identification of symptoms.

One of the most common and recommended screening tools for depression is the **PHQ-9**:

- **Patient Health Questionnaire-9 (PHQ-9)** – A nine question depression scale that is based on the nine diagnostic criteria for major depressive disorders in the Diagnostic and Statistical Manual Fifth Edition (DSM-5). It is helpful in diagnosing depression and monitoring response to treatment.

Eligible Members

Any NBH member who is at risk for a co-occurring Substance Related Disorder who presents for assessment and/or treatment is eligible for the screening. NBH may also use data such as psychosocial assessment, treatment records, PCP or psychiatric referrals, diagnosis codes,

care coordination, complex case management, or member self-referral to identify members who may be eligible for the screening.

Frequency

The PHQ-9 was designed to be conducted primarily upon initial screening; however, due to the shifting nature of psychiatric symptoms compounded by alcohol and or other drug use, this screening program may be conducted at any time during the course of treatment for diagnostic purposes, level of care needs, on-going treatment/length of stay, and discharge readiness purposes. All positive screenings should be followed up with a full psychosocial assessment using standard diagnostic criteria such as those listed in the American Psychiatric Association. (2013). *Diagnostic and statistical manual of mental disorders* (5th ed.). Arlington, VA: American Psychiatric Publishing, also known as DSM-5.

- **Ongoing Monitoring of Depression in Adults**
 - **Engagement Education:** Provide education and document that the member and his/her family are actively engaged in self-management practices, based on understanding of the diagnosis, risk/benefits of treatment options, and consideration of member preferences.
 - **Ongoing Contacts:** Implement a system to assure ongoing contacts with the member during the first 6-12 months of care (scheduled follow-up appointments, phone calls, etc.) and based on use of the PHQ-9 or other standardized screening tool used at each contact to track response to treatment.

Conditions

The Depression Screening is indicated whenever there is suspicious of depression is displayed by a member, when the practitioner suspects a co-occurring mental health disorder is present, or as a matter of routine screening to determine diagnosis and treatment planning.

Practitioner Input

The above screening tool has been reviewed and recommended by NBH's Quality Improvement Committee representing provider and practitioners within the Network.

Promotion

NBH's Depression Screening Program is promoted to practitioners via the NBH website, where the tools may be accessed freely by both members and providers.