



Perinatal Depression Screening (PDS)

Measurement Year 2021 Performance Measures

This measure captures the percentage of deliveries between October 8 of the year prior to the measurement year and October 7 of the measurement year where a depression screening was completed during the prenatal and postpartum treatment periods.

The Following Prenatal Depression Screening Rates Are to Be Reported

Screenings during the time frame of the first two prenatal care visits

- Using a validated screening tool
- Positive findings should have further evaluation, treatment, or referral for further treatment

If the member is not screened during the first two prenatal visits, it is important to screen during any prenatal visit.

The following Postpartum Depression Screening Rates Are to Be Reported

Screenings during a postpartum care visit. (7-84 days after delivery)

- Using a validated depression screening tool.
- Positive findings should have further evaluation, treatment, or referral for further treatment

Examples of Validated Tools Include

- The Edinburgh Postnatal Depression Scale (EPDS)
- Beck Depression Inventory (BDI 1a, II)
- Patient Health Questionnaire (PHQ)-2 Tool
- Patient Health Questionnaire (PHQ)-9 Tool
- Hamilton Rating Scale for Depression (HRSD)
- General Health Questionnaire (GHQ-D)
- Postpartum Depression Screening Scale (PDSS)
- Hospital Anxiety and Depression Scale (HADS)
- Generalized Contentment Scale

Please note that the following do not meet criteria for a screening:

- *Screenings that occurred prior to the pregnancy*
- *Screenings that occurred in the hospital*
- *General education on depression*
- *Screening for another behavioral health condition*
- *Prescription for antidepressants for smoking cessation*

Quality Measure Toolkit

[AetnaBetterHealth.com/Pennsylvania](https://www.aetna.com/betterhealth/pennsylvania)

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Strategies for Improvement

- If your office does not have a validated tool, alternative methods of screening for depression, such as simple questions related to perinatal depression, or questions about the enrollee's depression status/symptoms are also indicative of depression screening. Some examples include:
 - Over the past two weeks, have you felt down, depressed, or hopeless?
 - Have you felt little interest or pleasure in doing things?
 - How has your overall "mood" been for the past two weeks?
 - How's your concentration?
 - Do you feel like life is not worth living?
 - Have you been feeling down on yourself?
 - Do you have any plans to hurt yourself?
 - Evidence of active treatment for depression
 - Notations about sadness or "Baby Blues"
- Members of the care team understand the importance of depression screening and to recognize the risk factors for depression in pregnancy.
 - All staff receives training on depression screening and care.
 - All staff recognizes the following risks factors: being a young mother (under the age of 20); having poor social support; living alone; experiencing marital conflict or being divorced or widowed; having experienced trauma in the past year.
 - Staff will be versed in strategies to engage patients on completing and understanding the tool.
- Work with a care manager or team member to coordinate care and follow-up for members with a positive screening. Examples of a positive screening include:
 - Affirmative answers to questions about self-harm, thoughts about death, or suicidal ideation
 - Affirmative answers on a depression assessment or suicide risk assessment checklist
 - Evidence of current active treatment for depression including medications