General

Title

Substance use disorders: percentage of patients aged 18 years and older with a diagnosis of current substance abuse or dependence who were screened for depression within the 12 month reporting period.

Source(s)


Measure Domain

Primary Measure Domain

Process

The validity of measures depends on how they are built. By examining the key building blocks of a measure, you can assess its validity for your purpose. For more information, visit the Measure Validity page.

Secondary Measure Domain

Does not apply to this measure

Brief Abstract

Description

This measure is used to assess the percentage of patients aged 18 years and older with a diagnosis of current substance abuse or dependence who were screened for depression within the 12 month reporting period.

Rationale

Depression is one of the most common co-occurring psychiatric conditions in patients with substance use disorders and a condition for which a variety of screening methods have proven effective. Identifying depression and other co-occurring psychiatric disorders in patients with substance use disorders is essential for proper management and key to developing an integrated treatment approach, which is associated with better outcomes. Despite its importance, research has shown that more than 30% of patients with risk factors for depression, including alcohol or other drug abuse, were not asked about the presence or absence of depression or depressive symptoms.
The following clinical recommendation statements are quoted verbatim from the referenced clinical guidelines (from the American Psychiatric Association [APA]) and represent the evidence base for the measure:

All patients with a substance use disorder should be carefully assessed for the presence of co-occurring psychiatric disorders, including additional substance use disorders. (APA, 2006)

All positive screening tests should trigger full diagnostic interviews that use standard diagnostic criteria (i.e., those from the fourth edition of Diagnostic and Statistical Manual of Mental Disorders [DSM-IV]) to determine the presence or absence of specific depressive disorders, such as major depression and/or dysthymia. The severity of depression and comorbid psychological problems (e.g., anxiety, panic attacks, or substance abuse) should be addressed. (U.S. Preventive Services Task Force [USPSTF], 2002)

In general, treatment of depressive symptoms of moderate to severe intensity should begin concurrently or soon after initiating treatment of the co-occurring substance use disorder, particularly if there is evidence of prior mood episodes. In individuals without prior episodes of depression or a family history of mood disorders, it may be appropriate to delay the treatment of mild to moderate depressive symptoms for the purpose of diagnostic clarification. Clinicians are advised to monitor symptoms, assess and reasses for suicidal ideation, provide education, encourage abstinence from substances, and observe changes in mental status during the substance-free period while actively considering whether antidepressant intervention is indicated. (APA, 2006)

Primary Clinical Component

Substance abuse or dependence; screening for depression

Denominator Description

All patients aged 18 years and older with a diagnosis of current substance abuse or dependence (see the related "Denominator Inclusions/Exclusions" field)

Numerator Description

Patients who were screened for depression within the 12 month reporting period

Evidence Supporting the Measure

Evidence Supporting the Criterion of Quality

A clinical practice guideline or other peer-reviewed synthesis of the clinical evidence

One or more research studies published in a National Library of Medicine (NLM) indexed, peer-reviewed journal

Evidence Supporting Need for the Measure

Need for the Measure

Overall poor quality for the performance measured

Use of this measure to improve performance

Evidence Supporting Need for the Measure


State of Use of the Measure
State of Use
Current routine use

Current Use
Internal quality improvement

Application of Measure in its Current Use

Care Setting
Ambulatory Care
Community Health Care
Physician Group Practices/Clinics

Professionals Responsible for Health Care
Physicians
Psychologists/Non-physician Behavioral Health Clinicians
Social Workers

Lowest Level of Health Care Delivery Addressed
Individual Clinicians

Target Population Age
Age greater than or equal to 18 years

Target Population Gender
Either male or female

Stratification by Vulnerable Populations
Unspecified

Characteristics of the Primary Clinical Component

Incidence/Prevalence
See the "Rationale" field.
Association with Vulnerable Populations
Unspecified

Burden of Illness
Unspecified

Utilization
Unspecified

Costs
Unspecified

Institute of Medicine (IOM) Healthcare Quality Report Categories

IOM Care Need
Getting Better
Living with Illness

IOM Domain
Effectiveness

Data Collection for the Measure

Case Finding
Users of care only

Description of Case Finding
Patients aged 18 years and older with a diagnosis of current substance abuse or dependence

Denominator Sampling Frame
Patients associated with provider

Denominator Inclusions/Exclusions
Inclusions
All patients aged 18 years and older with a diagnosis of current substance abuse or dependence
Exclusions
Documentation of medical reason(s) for not screening for depression

Relationship of Denominator to Numerator
All cases in the denominator are equally eligible to appear in the numerator

Denominator (Index) Event
Clinical Condition
Encounter

Denominator Time Window
Time window is a single point in time

Numerator Inclusions/Exclusions
Inclusions
Patients who were screened for depression within the 12 month reporting period
Exclusions
None

Measure Results Under Control of Health Care Professionals, Organizations and/or Policymakers
The measure results are somewhat or substantially under the control of the health care professionals, organizations and/or policymakers to whom the measure applies.

Numerator Time Window
Encounter or point in time

Data Source
Administrative data
Medical record

Level of Determination of Quality
Individual Case

Pre-existing Instrument Used
Unspecified
Computation of the Measure

Scoring
Rate

Interpretation of Score
Better quality is associated with a higher score

Allowance for Patient Factors
Unspecified

Standard of Comparison
Internal time comparison

Evaluation of Measure Properties

Extent of Measure Testing
Unspecified

Identifying Information

Original Title
Measure #3: screening for depression among patients with substance abuse or dependence.

Measure Collection Name
The Physician Consortium for Performance Improvement® Measurement Sets

Measure Set Name
Substance Use Disorders Physician Performance Measurement Set

Submitter
American Medical Association on behalf of the American Psychiatric Association, Physician Consortium for Performance Improvement®, and National Committee for Quality Assurance - Medical Specialty Society

Developer
American Psychiatric Association - Medical Specialty Society

National Committee for Quality Assurance - Health Care Accreditation Organization

Physician Consortium for Performance Improvement® - Clinical Specialty Collaboration

Funding Source(s)

Unspecified

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Financial Disclosures/Other Potential Conflicts of Interest

Conflicts, if any, are disclosed in accordance with the Physician Consortium for Performance Improvement® conflict of interest policy.

Included in

Ambulatory Care Quality Alliance

Adaptation

Measure was not adapted from another source.

Release Date

2008 May

Revision Date

2008 Jul

Measure Status
This is the current release of the measure.

The Physician Consortium for Performance Improvement reaffirmed the currency of this measure in November 2010.

Source(s)


Measure Availability

The individual measure, "Measure #3: Screening for Depression Among Patients with Substance Abuse or Dependence," is published in the 'Substance Use Disorders Physician Performance Measurement Set." This document and technical specifications are available in Portable Document Format (PDF) from the American Medical Association (AMA)-convened Physician Consortium for Performance Improvement® Web site: www.physicianconsortium.org.

For further information, please contact AMA staff by e-mail at cqi@ama-assn.org.

NQMC Status

This NQMC summary was completed by ECRI Institute on June 25, 2008. The information was verified by the measure developer on August 13, 2008. The information was reaffirmed by the measure developer on November 17, 2010.

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