

Input Data

| PHQ9 Table | | | | | | Diagnosis Table | | | | Demographic Table | | | | Insurance Table | | | | |
|--|-----------|------|-----------|----|--|--|-----------|--------|--|---|-----------------------|---------------------|--|--|-----------|------------|------------|--|
| Description: A history of all patients PHQ9s | | | | | | Description: All the diagnoses patients have received. | | | | Description: Patients' race and ethnical background for stratification | | | | Description: A history of patients' insurances | | | | |
| Required Column Names | | | | | | Required Column Names | | | | Required Column Names | | | | Required Column Names | | | | |
| Basic Descriptions | | | | | | Basic Descriptions | | | | Basic Descriptions | | | | Basic Descriptions | | | | |
| Unique Patient Identifier: - (YES duplicates allowed) - (Must be related to other Patient IDs) | | | | | | Unique Patient Identifier: - (YES duplicates allowed) - (Must be related to other Patient IDs) | | | | Unique Patient Identifier: - (NO duplicates allowed) - (Must be related to other Patient IDs) | | | | Unique Patient Identifier: - (YES duplicates allowed) - (Must be related to other Patient IDs) | | | | |
| Patients' Date of Birth to determine age at time of PHQ9 encounter | | | | | | Any date at which patients had any diagnosis | | | | Patients Race | | | | Insurance Name. - Will only be classified as Medicaid if "medicaid" in name | | | | |
| Unique Identifier Per administered PHQ9 - (NO duplicates allowed) | | | | | | ICD10 Codes to determine whether patients are excluded from the measure | | | | Patients ethnicity | | | | Start Date of Insurance - (Blanks fill be filled with today) | | | | |
| Date PHQ9 was administered | | | | | | | | | | | | | | | | | | |
| Total Score of PHQ9 | | | | | | | | | | | | | | | | | | |
| 1001 | 7/15/1985 | 5001 | 1/10/2023 | 5 | | 1001 | 1/10/2023 | F32.0 | | 1001 | White | Not Hispanic/Latino | | 1001 | Medicaid | 1/1/2022 | 12/31/2024 | |
| 1001 | 7/15/1985 | 5002 | 8/12/2023 | 10 | | 1001 | 8/12/2023 | F33.1 | | 1002 | Black or African Amer | Hispanic/Latino | | 1002 | Medicaid | 6/15/2021 | 6/14/2023 | |
| 1002 | 3/22/1992 | 5003 | 5/18/2022 | 8 | | 1002 | 5/18/2022 | F41.1 | | 1003 | Asian | Not Hispanic/Latino | | 1003 | Private | 3/1/2023 | 2/28/2025 | |
| 1002 | 3/22/1992 | 5004 | 12/5/2022 | 12 | | 1002 | 12/5/2022 | F32.1 | | 1004 | Native American | Not Hispanic/Latino | | 1004 | Uninsured | 8/10/2022 | 8/9/2023 | |
| 1003 | 9/30/1978 | 5005 | 2/14/2023 | 15 | | 1003 | 2/14/2023 | F33.2 | | 1005 | Other | Hispanic/Latino | | 1005 | Medicaid | 11/20/2020 | 11/19/2024 | |
| 1003 | 9/30/1978 | 5006 | 9/1/2023 | 18 | | 1003 | 9/1/2023 | F32.9 | | | | | | | | | | |
| 1004 | 6/10/2000 | 5007 | 7/21/2022 | 3 | | 1004 | 7/21/2022 | F40.10 | | | | | | | | | | |
| 1004 | 6/10/2000 | 5008 | 3/2/2023 | 7 | | 1004 | 3/2/2023 | F41.9 | | | | | | | | | | |
| 1005 | 11/5/1995 | 5009 | 9/15/2021 | 20 | | 1005 | 9/15/2021 | F32.2 | | | | | | | | | | |
| 1005 | 11/5/1995 | 5010 | 5/20/2022 | 16 | | 1005 | 5/20/2022 | F33.3 | | | | | | | | | | |



Output Data

| Depression Remission Numerator and Denominator | | | | | | | | Depression Remission Stratification | | | |
|---|-----------|------|-----|-------|-------|--------------|--|---|---------------------------|---------------------|--|
| Table Name: DEP_REM_sub_1 | | | | | | | | Table Name: DEP_REM_sub_1_stratification | | | |
| Required Column Names | | | | | | | | Required Column Names | | | |
| Basic Descriptions | | | | | | | | Basic Descriptions | | | |
| Unique Patient Identifier: - (YES duplicates allowed) - (Must be related to other Patient IDs) | | | | | | | | Unique Patient Identifier: - (NO duplicates allowed) - (Must be related to other Patient IDs) | | | |
| An ID created to match patients to the year in which their index visit occurred. Since a patient can have multiple index visits. | | | | | | | | Patients' ethnicity | | | |
| Unique Identifier for the PHQ9 administered at the index visit. This is kept so that there's still an option to connect back to the encounter in which it occurred for more info. | | | | | | | | Patients' race | | | |
| Whether the patient was a child or adult at the time of PHQ9 Administration. | | | | | | | | | | | |
| Whether the patient was on Medicaid only at the time of the index visit | | | | | | | | | | | |
| Whether they satisfied the conditions to be included in the numerator | | | | | | | | | | | |
| An explanation of the numerator. For example, "No Remission" or " No PHQ-9 Follow Up" | | | | | | | | | | | |
| 1001 | 1001-2023 | 5002 | 18+ | TRUE | FALSE | No Remission | | 1001 | White | Not Hispanic/Latino | |
| 1002 | 1002-2022 | 5004 | 18+ | TRUE | FALSE | No Remission | | 1002 | Black or African American | Hispanic/Latino | |
| 1003 | 1003-2023 | 5005 | 18+ | FALSE | FALSE | No Remission | | 1003 | Asian | Not Hispanic/Latino | |
| 1005 | 1005-2021 | 5009 | 18+ | TRUE | FALSE | No Remission | | 1004 | Native American | Not Hispanic/Latino | |
| 1005 | 1005-2022 | 5010 | 18+ | TRUE | FALSE | No Remission | | 1005 | Other | Hispanic/Latino | |