

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 ethical background for stratification				Description: A history of patients' insurances					
Required Column Names	patient_id	patient DOB	encounter_id	encounter datetime	total score	Required Column Names	patient_id	diagnosis_start_datetime	diagnosis_end_datetime	diagnosis	Required Column Names	patient_id	race	ethnicity	Required Column Names	patient_id	insurance	start_datetime	end_datetime
Basic Descriptions	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	Unique Identifier for PHQ9 administered - (NO duplicates allowed)	Date PHQ9 was administered	Total Score of PHQ9	Basic Descriptions	Unique Patient Identifier: - (YES duplicates allowed) - (Must be related to other Patient IDs)	Date when the patient was given a diagnosis	Date when the patient no longer had the diagnosis - If the diagnosis has no end date, it will be considered as if it is still and active diagnosis - This field is only needed for Major Depression or Dysthymia Diagnoses	ICD10 Codes to determine whether patients are excluded from the measure	Basic Descriptions	Unique Patient Identifier: - (NO duplicates allowed) - (Must be related to other Patient IDs)	Patients Race	Patients ethnicity	Basic Descriptions	Unique Patient Identifier: - (YES duplicates allowed) - (Must be related to other Patient IDs)	Insurance Name: - Will only be classified as "Medicaid" in name	Start Date of Insurance	End Date of Insurance: - (Blanks fill be filled with today)
	1001	7/15/1985	5001	1/10/2023	5		1001	1/10/2023	6/10/2023	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	5/5/2024	F33.1		1002	Black or African American	Hispanic/Latino		1002	Medicaid	6/15/2021	6/14/2023
	1002	3/22/1992	5003	5/18/2022	8		1002	5/18/2022	12/26/2022	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	7/12/2023	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	1/6/2024	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	2/31/2025	F32.9									
	1004	6/10/2000	5007	7/21/2022	3		1004	7/21/2022	7/21/2023	F40.10									
	1004	6/10/2000	5008	3/2/2023	7		1004	3/2/2023	9/12/2023	F41.9									
	1005	11/5/1995	5009	9/15/2021	20		1005	9/15/2021	9/15/2025	F32.2									
	1005	11/5/1995	5010	5/20/2022	16		1005	5/20/2022	7/20/2027	F33.3									

Output Data

Depression Remission Numerator and Denominator								
Table Name: DEP_REM_sub_1								
Required								
Column Names	patient_id	patient_measurement_year_id	encounter_id	age	medicaid	numerator	numerator_reason	delta_phq9
Basic Descriptions	Unique Patient Identifier: - (YES 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.	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.	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"	The difference between the patient's index PHQ-9 and the last PHQ-9 in the remission period. If the last PHQ-9 is higher, the delta will be negative.
	1001	1001-2023	5002	18+	TRUE	FALSE	No Remission	
	1002	1002-2022	5004	18+	TRUE	FALSE	No Remission	
	1003	1003-2023	5005	18+	FALSE	FALSE	No Remission	
	1005	1005-2021	5009	18+	TRUE	FALSE	No Remission	
	1005	1005-2022	5010	18+	TRUE	FALSE	No Remission	

Depression Remission Stratification			
Table Name: DEP_REM_sub_1_stratification			
Required Column Names	patient_id	ethnicity	race
Basic Descriptions	Unique Patient Identifier: - (NO duplicates allowed) - (Must be related to other Patient IDs)	Patients' ethnicity	Patients' race
	1001	White	Not Hispanic/Latino
	1002	Black or African American	Hispanic/Latino
	1003	Asian	Not Hispanic/Latino
	1004	Native American	Not Hispanic/Latino
	1005	Other	Hispanic/Latino