

Major Depressive Disorder

Major depressive disorder (MDD) is characterized by sadness that is severe or persistent enough to cause significant impairment or distress in daily life (social, occupational, or other important areas of functioning).

TYPES OF DEPRESSION ICD-10-CM CODES

F32.0	Major depressive disorder, single episode, mild	F33.0	Major depressive disorder, recurrent, mild
F32.1	Major depressive disorder, single episode, moderate	F33.1	Major depressive disorder, recurrent, moderate
F32.2	Major depressive disorder, single episode, severe -without psychotic features	F33.2	Major depressive disorder, recurrent, severe -without psychotic features
F32.3	Major depressive disorder, single episode, severe -with psychotic features	F33.3	Major depressive disorder, recurrent, severe -with psychotic features
F32.4	Major depressive disorder, single episode, in partial remission	F33.40	Major depressive disorder, recurrent, in remission, unspecified
F32.5	Major depressive disorder, single episode, in full remission	F33.41	Major depressive disorder, recurrent, in partial remission
F32.81	Premenstrual dysphoric disorder	F33.42	Major depressive disorder, recurrent, in full remission
F32.89	Other specified depressive episodes	F33.8	Other recurrent depressive disorders
F32.9	Major depressive disorder, single episode, unspecified	F33.9	Major depressive disorder, recurrent, unspecified
F32.A	Depression, unspecified		

CLINICAL CRITERIA FOR MAJOR DEPRESSIVE DISORDER

Must have 5 or more of the following symptoms during the same two week period that are a change from previous functioning:

- Depressed mood
 - Most of the day, nearly everyday
 - Can be subjective or observed by others
- Loss of interest/pleasure
 - Markedly diminished interest/pleasure in all (or almost all) activities most of the day, nearly every day
 - Can be subjective or observed by others
- Weight loss or gain
 - Significant weight loss (without dieting) or gain (>5% body weight in a month), or decrease/increase in appetite nearly every day
- Insomnia or hypersomnia
 - Nearly every day
- Psychomotor agitation or retardation
 - Nearly everyday and observable by others (not merely subjectively restless or slow)
- Fatigue
 - Fatigue or loss of energy, nearly every day
- Feelings of worthlessness or excessive/inappropriate guilt
 - Nearly everyday
- Decreased concentration
 - Nearly everyday, may be indecisiveness
 - Can be subjective or observed by others
- Thoughts of death/suicide
 - Recurrent thoughts of death (not just fear of dying), recurrent suicidal ideation without specific plan, recurrent suicidal ideation with a specific plan for suicide, or suicide attempts

Must have all of the following depressive symptoms:

- Symptoms cause clinically significant distress or impairment in social, occupational, or other important areas of functioning
- Episode not attributable to physiological effects of a substance or another medical condition
- Episode not better explained by schizoaffective disorder, schizophrenia, schizophreniform disorder, delusional disorder, or other specified and unspecified schizophrenia spectrum and other psychotic disorder
- No history of manic or hypomanic episodes

DOCUMENTATION ELEMENTS FOR MDD

- Specificity is key! Always indicate the episode of major depressive disorder, the severity, and the status of the condition along with the method of control.
- DSP should be applied to show clinical evidence by incorporating tests, signs and symptoms, treatments along with the corresponding final diagnosis.
- Avoid using uncertain or historical terms when describing present and active conditions.
- If MDD is not active it is important to document this as in remission as it may impact future care.
- Documentation of 'depression' without further specificity is not equivalent to a diagnosis of major depressive disorder.

DETERMINING SINGLE VS RECURRENT EPISODE

- **MDD single episode:** Describes the first and only episode of MDD.
- **MDD recurrent:** For an episode to be considered recurrent, there must be an interval of at least 2 consecutive months between separate episodes during which criteria for a major depressive episode are met. If a clinician is unable to determine if an episode is recurrent based on patient history then consider documenting as a single episode.

DETERMINING LEVEL OF MDD SEVERITY

- The PHQ-9 is used to aid in evaluating the severity of MDD.
- If a patient meets the criteria of MDD then please proceed with completing a PHQ-9 to accurately determine severity level.
- Do not code for major depressive disorder severe unless you are able to validate the code in your documentation.

REMISSION STATUS

- **MDD full remission:** Defined as a decrease or complete resolution of symptoms (5 of 9 symptoms not met) for greater than two months. This is regardless of treatment/medication status. A patient can be on treatment for MDD and still in full remission. This can be measured objectively through the PHQ 9 and also subjectively by how the patient reports they are feeling.
- **MDD Partial remission:** Symptom reduction (5 of 9 criteria) are not met or for less than 2 months.

Level of Depressive	PHQ -9 Score	Coding
None	0-4	-Partial
Mild	5-9	MDD mild
Moderate	10-14	MDD
Moderately	15-19	MDD
Severe	20-27	MDD severe

ADDITIONAL RESOURCES



MD CALC DSM-5 Criteria tool:

<https://www.mdcalc.com/calc/10195/dsm-5-criteria-major-depressive-disorder>

MD CALC PHQ-9 tool:

<https://www.mdcalc.com/calc/1725/phq9-patient-health-questionnaire9>

Oscar Clinical Documentation Resources:

<https://www.hioscar.com/providers/resources>

