Medicare National Coverage Determination

Topic
Medicare Coverage of Screening for Depression in Adults

Decision
Medicare will cover annual screening for depression for Medicare beneficiaries in primary care settings that have staff-assisted depression care supports in place to assure accurate diagnosis, effective treatment and follow-up.

What this means:
1. The Centers for Medicare & Medicaid Services (CMS) has determined that the evidence is adequate to conclude that screening for depression in adults is reasonable and necessary for the prevention or early detection of illness or disability and is appropriate for individuals entitled to benefits under Part A or enrolled under Part B.
2. Medicare will cover one screening test for depression in adults annually. There are a number of acceptable screening tests available to clinicians. Clinicians can choose screening strategies that are appropriate for their clinical population and setting.

Primary care setting defined:

- One in which there is provision of integrated, accessible health care services by clinicians who are accountable for addressing a large majority of personal health care needs, developing a sustained partnership with patients, and practicing in the context of family and community. Emergency departments, inpatient hospital settings, ambulatory surgical centers, independent diagnostic testing facilities, skilled nursing facilities, inpatient rehabilitation facilities and hospice are not considered primary care settings under this definition.
- At a minimum level, staff-assisted depression care supports consist of clinical staff (e.g., nurse, physician assistant) in the primary care setting who can advise physician of screening results and who can facilitate and coordinate referrals to mental health treatment.

Effective date: October 14, 2011

This announcement can be found at: