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Orange County Depression Screening and Follow-up User Story - Jordan Gomez

- Age: 16
- Health Concerns: No chronic conditions, mild seasonal allergies
- Social Needs: Low-income family, native Spanish speaker
- Location: Orange County
- Occupation: Student in a public high school and part-time employee
- Insurance: Medi-Cal Plan
- Pronouns: They/them, Elle

About Jordan:

- Jordan lives with their mother and two younger siblings (ages 14 and 12)
- Jordan's mother works two jobs, and to help her make ends meet, they also work part-time at McDonald's
- Jordan is excited and nervous to join the varsity track and field team this year

Goals and Expectations from the CA Health and Social Care System:

- Would like access to more fresh produce; the food pantry that has produce is two bus rides away
- Wants a safe, gender-affirming, and inclusive care environment
- Wants understanding and confidential mental health support
- Wants a trusted person they can go to access resources and services

Challenges from Jordan's Perspective

- My mother has a history of anxiety, but she doesn't believe she needs medication or therapy to help with her symptoms. Because of this, I don't feel comfortable opening up about how I'm feeling
- I keep myself busy, but sometimes I get overwhelmed when tasks pile up
- I like my siblings but now that I'm 16, I wish I could have my own bedroom

Typical Routine & Interactions

- Jordan relies on public transportation to get around
- Jordan visits their primary care provider once a year for a sports physical before the track and field season

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- Jordan works at McDonald's on weekends and, when possible, picks up extra shifts during the week
- Jordan picks up non-perishable food at a local pantry once a week

Orange County Depression Screening and Follow-up Use Case Scene Breakdown

- Use Case 1: Office Visit for Sports Physical
    - Scene 1A: Depression Screening
- Use Case 2: Data Submission and Reconciliation for Depression Screening and Followup Measure
    - Use Case 2A: Submitting Depression Screening Results
    - Use Case 2B: Follow up after positive screening

Assumptions:

- Jordan is a native Spanish speaker but can get along in English.
- Jordan identifies as non-binary and uses the pronouns they/them.
- Jordan is here for their sports physical so they can join the varsity track and field team at their high school.
- Jordan experiences some stress due to having to help their single-mom with expenses as well as navigating the world as a non-binary person.
- Jordan is a Medi-Cal member.
- The practice submits data for quality reporting on a monthly basis on the 10th of the month for the previous month. For example, November 10th for screenings completed October 1st - 31st.
- Manny Jah, the Practice Administrator, also functions as the quality manager for the practice and oversees the EPT program for the practice including all quality data submissions.
- The practice is a member of two Independent Physician Associations (IPAs) each of which holds a contract with the same Medi-Cal plan.

Use Case 1: Office Visit for Sports Physical

Scene 1A: Depression Screening

- **Jordan** enters the reception area and checks in with **Dana Lewis**, the Receptionist, who seeing that Jordan is a native Spanish speaker, hands them a tablet with a Spanish version of the PHQ-2 Brief Screening.
    - The tablet is connected with the practice EHR.
- As Jordan answers the questions, the EHR calculates their score which is a "3" indicating a positive screening.
- **Ann**, **Dr. Turner's** assistant, takes Jordan back to the treatment room. After getting her vitals, she reviews Jordan's chart and notices the positive result for the PHQ-2.

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- **Ann** asks Jordan if they are ok doing a more comprehensive Depression Screening with 9 questions instead of 2. Jordan agrees.
- Since Jordan is a native Spanish Speaker, **Ann** reads from the Spanish version of the PHQ-9M (PHQ-9 Modified for teens) and enters Jordan's responses into the PHQ-9M assessment tool within her EHR.
    - The PHQ-9M Assessment tool automatically calculates Jordan's score which is "9" indicating a negative screen.

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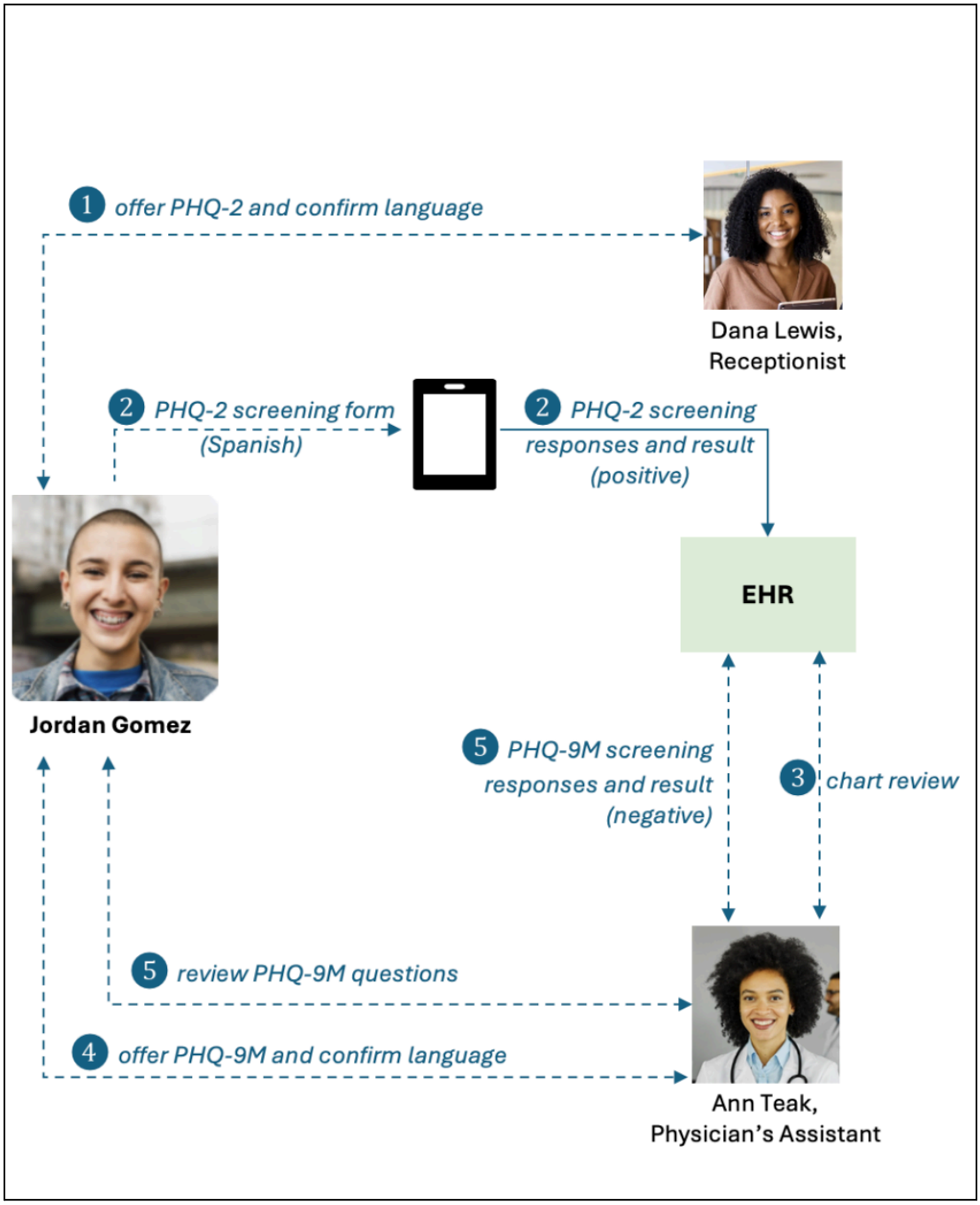

Use Case 1: Office Visit for Sports Physical

Steps for Use Case 1

1. Dana, seeing Jordan is a native Spanish speaker, hands Jordan a tablet with a Spanish version of the PHQ-2 Brief Screening.
2. As Jordan answers the questions, the EHR calculates their score indicating a positive

screening ("3").

3. Ann reviews Jordan's chart and notices the positive result for the PHQ-2.
4. Ann offers Jordan a more comprehensive Depression Screening with nine questions (instead of two) and Jordan agrees.
5. Ann reads from the Spanish version of the PHQ-9 Modified for teens (PHQ-9M) and enters Jordan's responses into the PHQ9 assessment tool within the EHR. The EHR PHQ9M Assessment tool automatically calculates Jordan's score ("9") indicating a negative screen.

Use Case 2: Data Submission and Reconciliation for Depression Screening and Follow-up Measure

Use Case 2A: Submitting Depression Screening Results

- **Manny Jah**, the Practice Administrator and Quality Manager, runs a Screening Results report of all depression screenings performed for the previous month for patients delegated to his practice through the IPA.
- The report contains patient identifying information, the date the assessment was completed, the LOINC code for the assessment tool used and the patient's total score.
    - LOINC codes:
        - 44261-6
            - Patient Health Questionnaire (PHQ-9)®
            - Positive Finding = Total Score ≥10
        - 89204-2
            - Patient Health Questionnaire Modified for Teens (PHQ-9M)®
            - Positive Finding = Total score ≥10
        - 55758-7
            - Patient Health Questionnaire-2 (PHQ-2)®
            - Positive Finding = Total score ≥3

Current Workflow	New Proposed Workflow
• **Manny** logs into the Population Health tool provided by the IPA and manually enters the assessment information for each patient in the report.	• **Manny** uploads the report of all of the depression screenings completed last month to the Managed Care Plan secure File Transfer Protocol (sFTP) site.
• Since his EHR is integrated with the IPA's Population Health tool, encounter notes are automatically uploaded into the population health tool. These notes are needed to validate the results since the population health	• **Manny** went through Primary Source Verification (PSV) when he set up the Standard Supplemental Data feed with the Managed Care Plan so doesn't need to upload documented evidence each time a depression

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tool is a non-standard supplemental data source. ○ The encounter note has the screening information embedded within it since the practice uses the Depression Screening widget within the EHR ○ If his EHR were not integrated with the Population Health tool, **Manny** would need to manually upload each note into the tool.	screening is performed.
● The IPA sends the information entered by **Manny** to the Managed Care Plan which processes it through their HEDIS engine to calculate measure results.	● The Managed Care Plan picks up the file from the sFTP site and runs the data through their HEDIS engine to calculate measure results.

- The Managed Care Plan sends updated information to their Population Health tool which synchronizes with the IPA's Population Health Tool.
    - Assumption is that both the Managed Care Plan and the IPA use the same Population Health vendor and that the vendor has a bridge function to keep all versions in sync.
- To see updated Manny can log into either the Managed Care Plans or Health Network's Population Health tool to see updated gap information or log into the Managed Care Plan provider portal and download a gap report.

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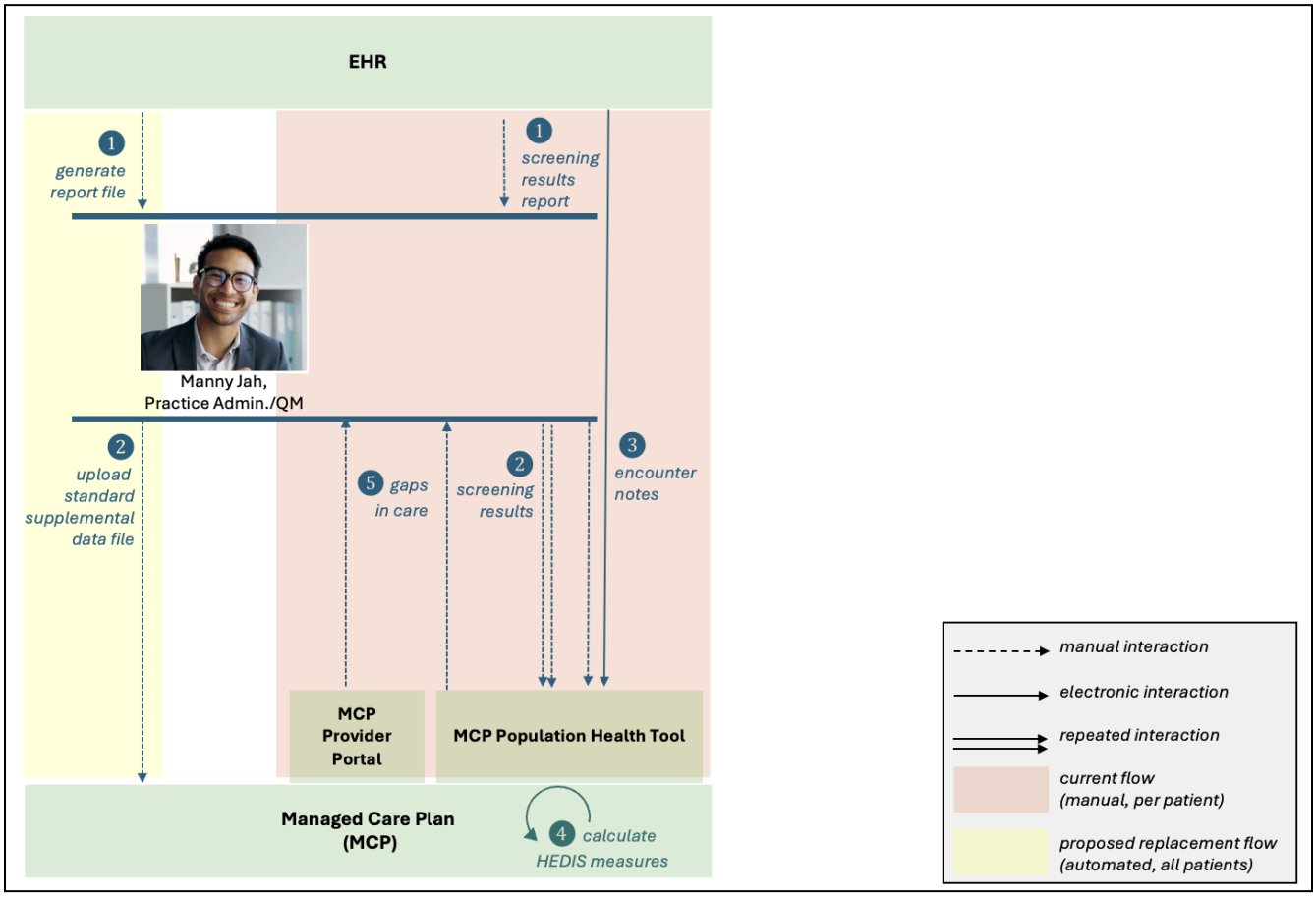

Use Case 2A: Workflow for Measure Data Submission: Managed Care Plan has Cozeva

Steps for Use Case 2A: Current flow (manual, per patient)

1. Manny uses his EHR to run a report of all depression screenings administered last month.
2. One patient at a time, he manually enters the depression screen tool used and result into the Managed Care Plan's Population Health Tool.
3. If his EHR is integrated with the MCP's Population Health tool, encounter notes are automatically uploaded. If not, he manually uploads the note that contains the depression screening result for each patient.
4. The MCP's HEDIS engine calculates measure results. New gaps are updated in Managed Care Plan's Population Health tool and Provider Portal.
5. Manny can log into the MCP's Population Health tool to see updated gap information or log into the MCP's Provider Portal and download a gap report.

Steps for Use Case 2A: Proposed replacement flow (automated, all patients)

1. Manny uses his EHR to run a standard supplemental data file extract for all depression

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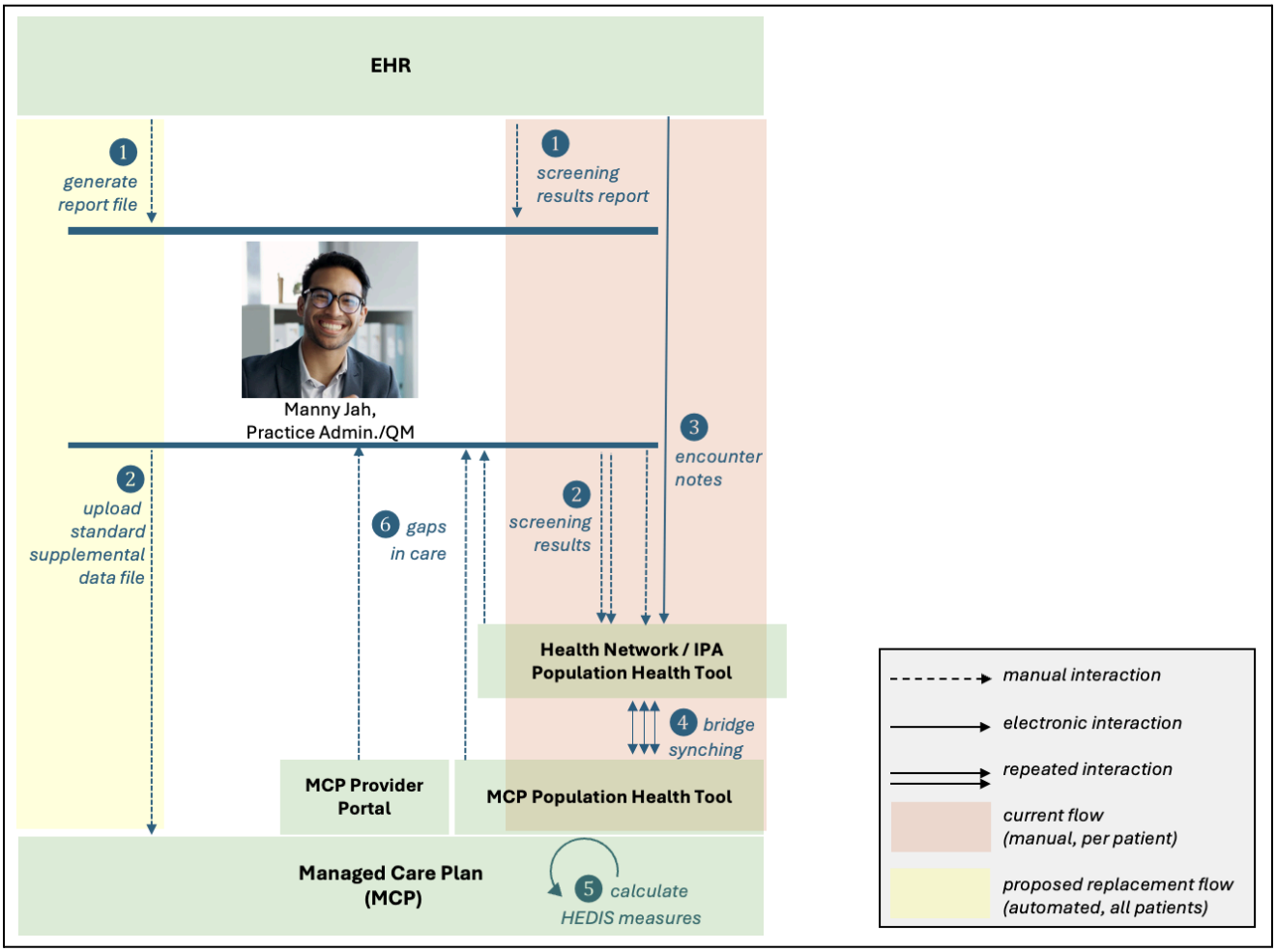
screenings administered last month.

2. Manny uploads the report to the MCP's shared drive (e.g., sFTP)
3. The MCP's HEDIS engine calculates measure results. New gaps are updated in Managed Care Plan's Population Health tool and Provider Portal.
5. Manny can log into the MCP's Population Health tool to see updated gap information or log into the MCP's Provider Portal and download a gap report.



Use Case 2A: Workflow for Measure Data Submission: Managed Care Plan and Health Network/IPA have Cozeva

Steps for Use Case 2A: Current flow (manual, per patient)

1. Manny uses his EHR to run a report of all depression screenings administered last month.
2. One patient at a time, he manually enters the depression screen tool used and result into the MCP's Population Health Tool.
3. If his EHR is integrated with the MCP's Population Health tool, encounter notes are

automatically uploaded. If not, he manually uploads notes that contains the depression screening result for each patient.

4. MCP's Population Health tool and Health Network Population Health tool synchronize (bridge) results.
5. The MCP's HEDIS engine calculates measure results and updates the Managed Care Plan's Population Health tool and provider portal with new gaps.
6. Manny can log into either the MCP or Health Network's Population Health tool to see updated gap information or log into the MCP's Provider Portal and download a gap report.

Steps for Use Case 2A: Proposed replacement flow (automated, all patients)

1. Manny uses his EHR to run a standard supplemental data file extract for all depression screenings administered last month.
2. Manny uploads the standard supplemental data file to the MCP's shared drive (e.g., sFTP).
4. MCP's Population Health tool and Health Network Population Health tool synchronize (bridge) results.
5. The MCP's HEDIS engine calculates measure results and updates the MCP's Population Health tool and Provider Portal with new gaps.
6. Manny can either log into the MCP or Health Network's Population Health tool to see updated gap information or log into the MCP's Provider Portal and download a gap report.

Use Case 2B: Follow up after positive screening

- The Managed Care Plan's HEDIS Engine notes Jordan's PHQ-2 score as positive since the result was ≥3 and adds their record to be tracked for a Followup after a Positive Screen.
- The Population Health Tool then notes Jordan's PHQ-9M score is < 10 and that it happened on the same day as the positive PHQ-2 score and removes Jordan from the list of patients with a positive score and gives the practice credit for closing the Follow up after a Positive Screening measure.

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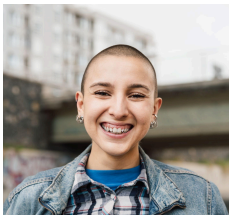
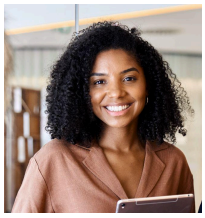
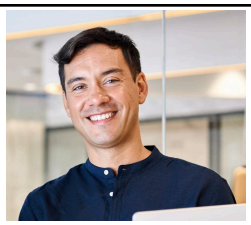
Personas referenced in this document:

Name	Photo	Human Actor	Business Actor	System Actor
Jordan Gomez		Patient		
Dana Lewis		Receptionist	FQHC Two	FQHC EHR
Dr. Caleb Turner		Primary Care Provider (PCP)	FQHC Two	FQHC EHR
Ann Teak		Physician's Assistant	FQHC Two	FQHC EHR
Manny Jah		Practice Administrator / Quality Manager	FQHC Two	FQHC EHR
Tim Russell		Quality Improvement Project Manager	Managed Care Plan (MCP)	