

## Adolescent Mental Health and/or Depression Screening in 2020

### OVERVIEW

2020 was a year like no other, with the COVID-19 pandemic having dramatic impacts on most aspects of life including how patients sought care and how health care providers delivered it.

This issue brief presents statewide data for 2020 for the Adolescent Mental Health and/or Depression Screening measure, with comparison to 2019 as context for understanding the disruptions experienced in 2020. In many respects, however, 2020 should be considered a new baseline from which recovery should be measured. Although MNCM is also publishing 2020 quality measures for individual medical groups\*, we urge caution in using this data or changes in rates for specific medical groups between 2019 and 2020 to draw general conclusions about quality of care. Organizations faced different types of challenges, that are likely reflected in the data in ways that are not typical of overall quality of care. However, MNCM stakeholders strongly supported continuing to make the data publicly transparent.

### KEY FINDINGS

- There was a 20.6% decline in the number of patients included in this measure in 2020.
- Among adolescents who did receive care in 2020, the percentage who were screened for mental health and/or depression increased from 88.7% to 89.8%. Performance on this measure has increased each year since it was first reported in 2015.
- The group who experienced a significant worsening in their existing disparities for adolescent mental health and/or depression screening was patients with Medicare insurance. Additionally, disparities worsened in some regions more than others.

### ADOLESCENT MENTAL HEALTH AND/OR DEPRESSION SCREENING

The percentage of adolescents between 12-17 years of age who had at least one eligible office or telehealth well child visit between 1/1/2020 and 12/21/2020 and who were screened for mental health and/or depression using any of the following screening tools:



- ✓ Patient Health Questionnaire – 9 item version (PHQ-9)
- ✓ PHQ-9M Modified for Teens and Adolescents
- ✓ Kutcher Depression Scale (KADS)
- ✓ Beck Depression Inventory II (BDI-II)
- ✓ Beck Depression Inventory Fast Screen (BDI-FS)
- ✓ Child Depression Inventory (CDI)
- ✓ Child Depression Inventory II (CDI-2)
- ✓ Patient Health Questionnaire – 2 item version (PHQ-2)
- ✓ Pediatric Symptom Checklist – 17 item version (PSC-17) – parent version
- ✓ Pediatric Symptom Checklist – 35 item version (PSC-35) – parent version
- ✓ Pediatric Symptom Checklist – 35 item Youth Self-Report (PSC Y-SR)
- ✓ Global Appraisal of Individual Needs Screens for Mental Health and Abuse (GAIN-SS)

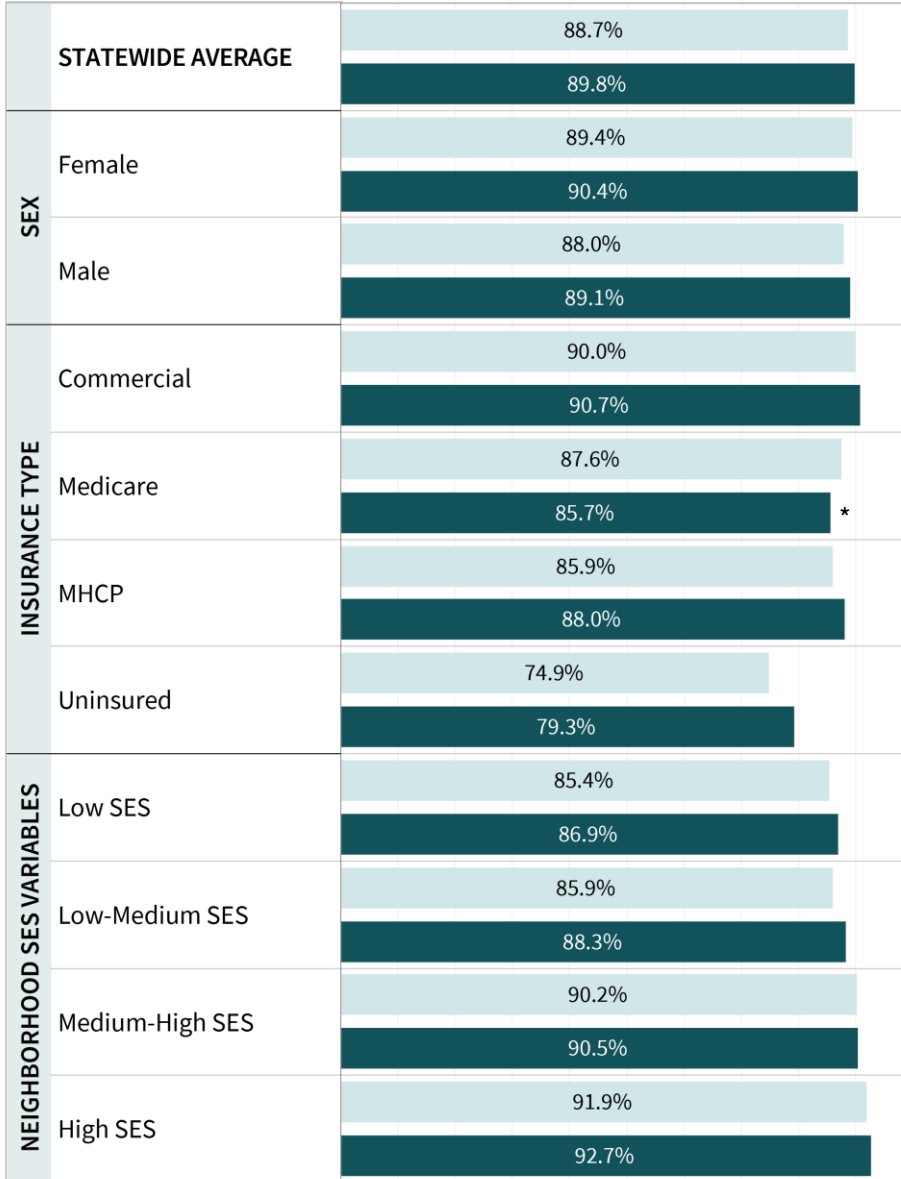
\*Quality measures for individual clinic locations will not be public for 2020



### RATE CHANGES

#### Sex, Age Group, Insurance Type, Neighborhood Socioeconomic (SES) Variables

Comparison of 2020 to 2019



2019  
2020

Screening rates increased across almost all demographic groups. The largest significant increases in rates occurred in the following groups within each demographic category:

- Males (+1.1 percentage points)
- Uninsured (+4.4 percentage points)
- Low-medium SES (+2.3 percentage points)

Additionally, in 2020, patients with Medicare insurance had a significant worsening of their existing disparities for adolescent mental health and/or depression screening.

Socioeconomic status (SES) variables represent quartiles of distribution of SES data from the Census Bureau, which is based on zip codes in which patients reside.

\* Disparity between the rate for this category and the statewide average increased in 2020

MHCP = Minnesota Health Care Program

2019 = care delivered in 2019 and reported in 2020

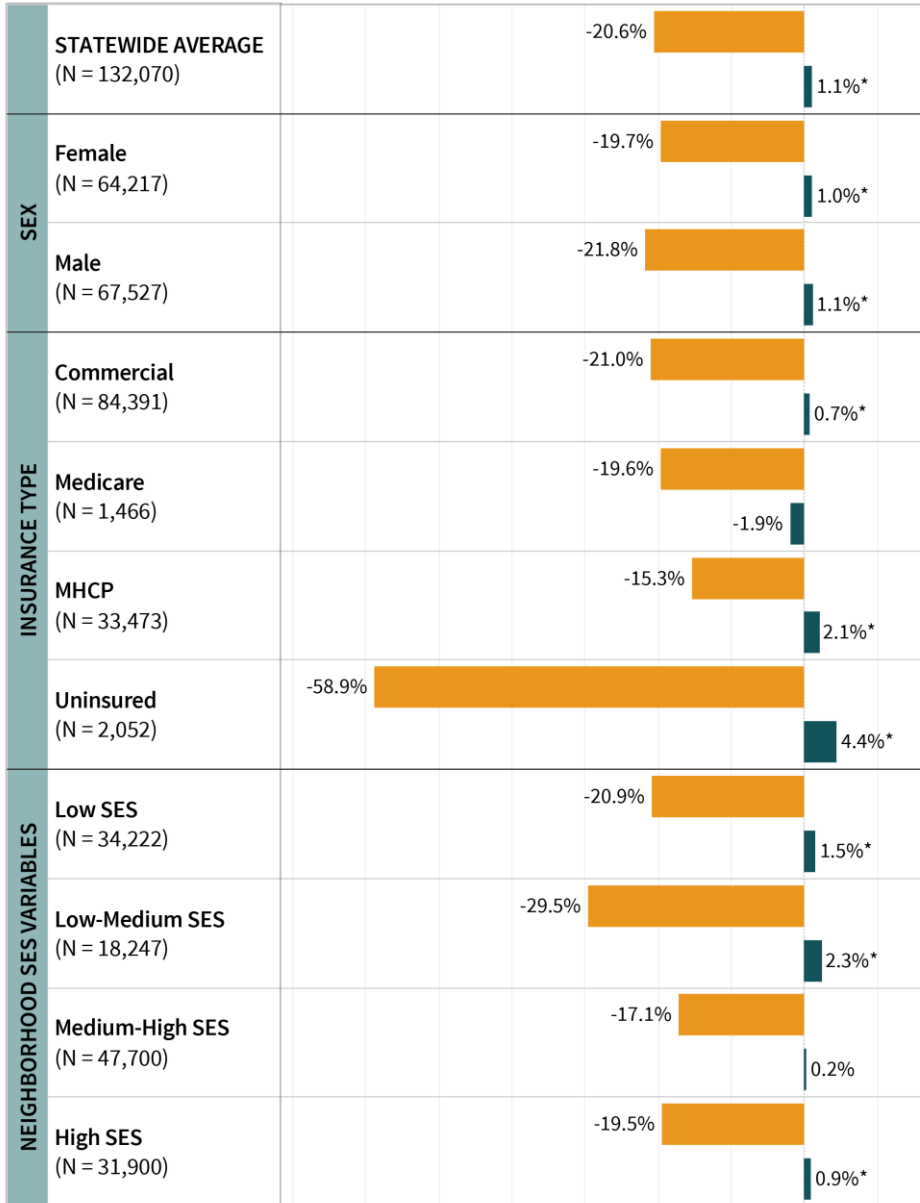
2020 = care delivered in 2020 and reported in 2021



### POPULATION & RATE CHANGES

#### Sex, Age, Insurance Type, Neighborhood Socioeconomic (SES) Variables

Comparison of 2020 to 2019



■ Patients (Percent change)  
■ Rate (Percentage point change)

In general, all groups across the demographic categories showed a decline in patient volume. The largest decline in patient volume was shown in the uninsured population (-58.9%).

Socioeconomic status (SES) variables represent quartiles of distribution of SES data from the Census Bureau, which is based on zip codes in which patients reside.

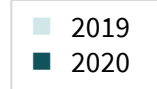
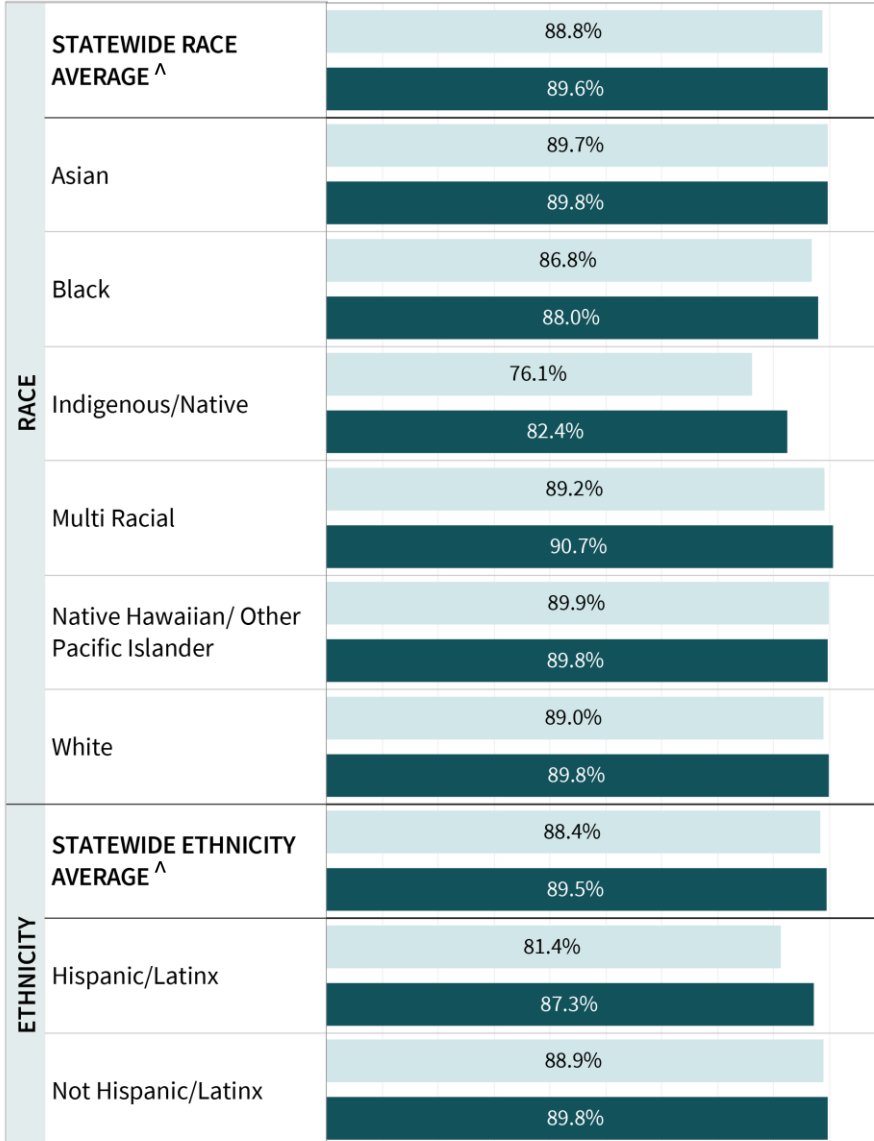
\*Significant rate change from 2019  
 Note: Ns in chart are 2020 denominators



### RATE CHANGES

#### Race/Ethnicity

Comparison of 2020 to 2019



Within the adolescent population, patients from almost all races and ethnicities experienced higher rates of optimal care in 2020. The following groups showed significant increases:

- Indigenous/Native (+6.3 percentage points)
- Black (+1.2 percentage points)
- White (+0.9 percentage points)
- Hispanic/Latinx (+5.9 percentage points)
- Not Hispanic/Latinx (+0.8 percentage points)

2019 = care delivered in 2019 and reported in 2020

2020 = care delivered in 2020 and reported in 2021

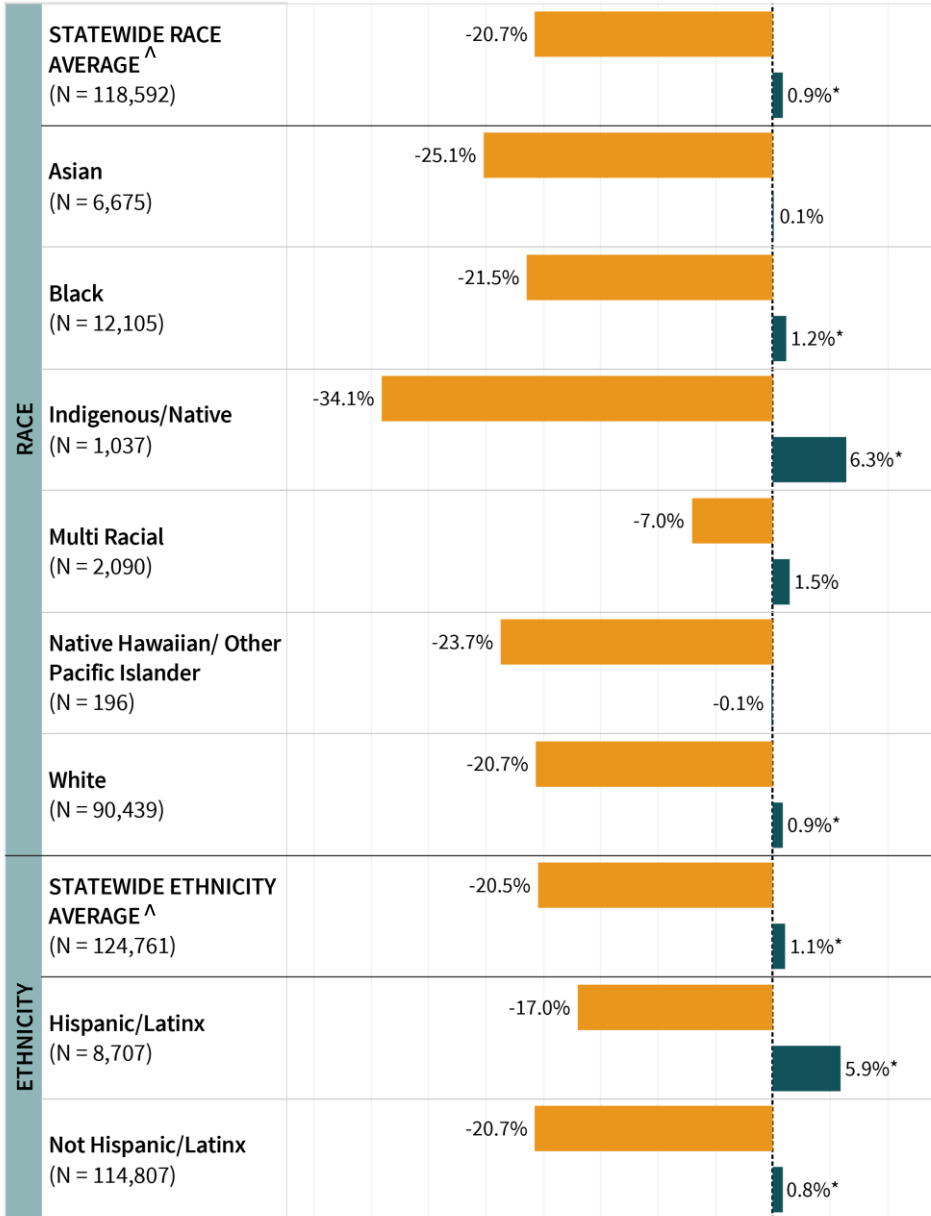
^Statewide race/ethnicity averages are averages for patients with race/ethnicity information available



### POPULATION & RATE CHANGES

#### Race/ethnicity

Comparison of 2020 to 2019



■ Patients (Percent change)  
■ Rate (Percentage point change)

The number of adolescent patients declined across all race/ethnicity categories. The largest decline in population was found in the Indigenous/Native population (-34.1%).

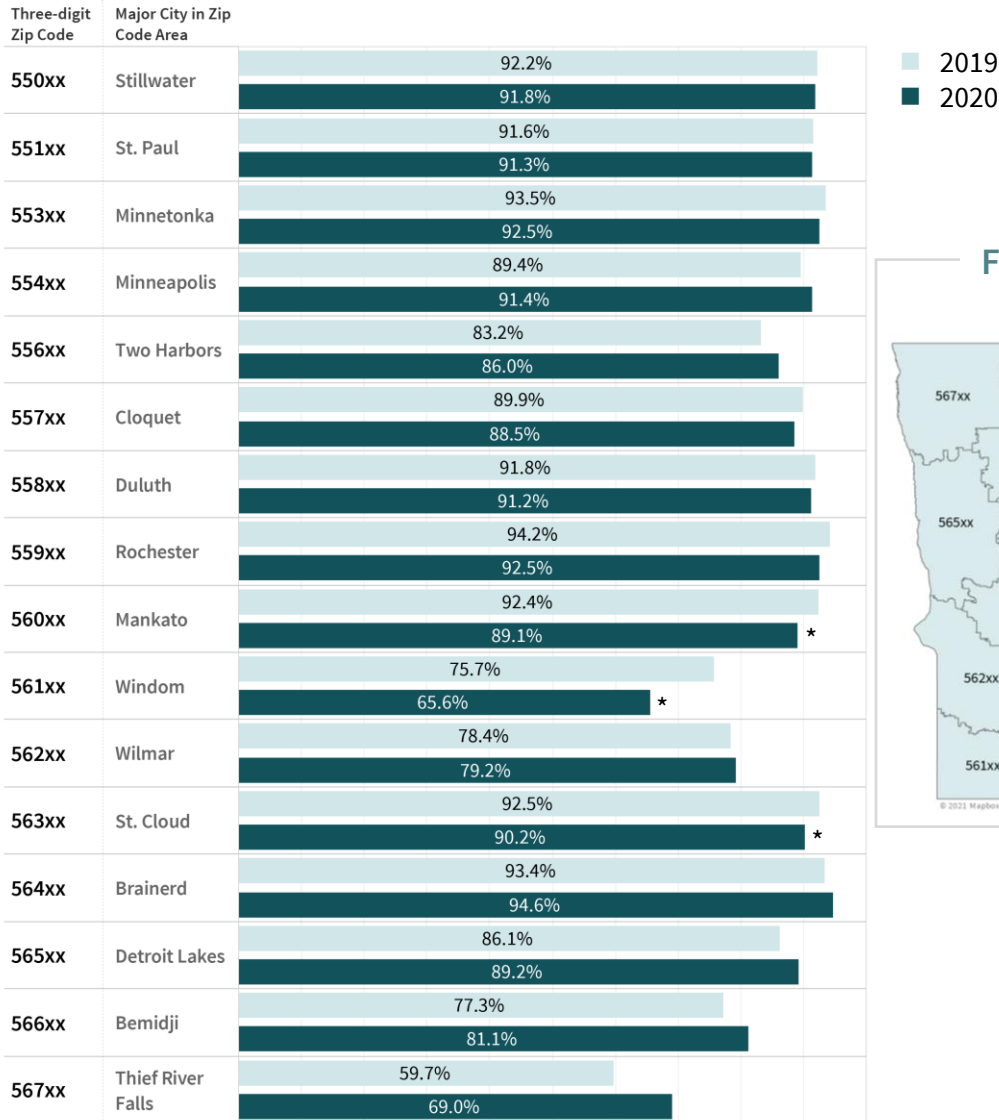
\*Significant rate change from 2019

<sup>^</sup>Statewide race/ethnicity averages are averages for patients with race/ethnicity information available

Note: Ns in chart are 2020 denominators



### THREE-DIGIT ZIP CODE



\* Disparity between the rate for this category and the statewide average increased in 2020  
 2019 = care delivered in 2019 and reported in 2020  
 2020 = care delivered in 2020 and reported in 2021

From 2019 to 2020, the rates of adolescent mental health and/or depression screening in some three-digit zip code areas decreased while rates increased other areas. In 2020, the 560 (Mankato area), 561 (Windom area) and 563 (St. Cloud area) regions showed a significant worsening of their existing disparities for adolescent mental health and/or depression screening.



### ISSUE BRIEF SERIES

This issue brief is one of a series of issue briefs that summarizes the impact of COVID-19 at the demographic level for each of the measures. The measures featured in the summary report and in the issue briefs are measures collected by MNCM directly from medical groups and clinics. Below are links to each of the other measure issue briefs as well as the spotlight report which summarizes the overall rate changes and findings.

- [Spotlight Report](#)
- [Optimal Diabetes Care](#)
- [Optimal Vascular Care](#)
- [Optimal Asthma Control](#)
- [Colorectal Cancer Screening](#)
- [Depression Care](#)

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