

Department of Vermont Health Access (DVHA)

Agency of Human Services

Clinical Practice Guidelines: Depression

Last Modified: May 2023

PURPOSE

The purpose of these guidelines is to help facilitate and assure quality and effective treatment and interventions for depression for Vermont Medicaid members.

These guidelines provide suggestions and flexible protocols for a member's care. Guidelines should not be considered as the only resource and are not intended to replace the professional judgment of providers. Guidelines may not apply to every member or clinical situation and some divergence from guidelines is expected. Further, guidelines do not determine insurance coverage of health care services or products. Coverage decisions are based on member eligibility, contractual benefits, and determination of medical necessity.

DEFINITION

The Diagnostic and Statistical Manual of Mental Disorders (5th edition), also known as the DSM-5, is a resource used by clinicians to diagnose mental health conditions. The 5th version of the DSM was released in 2013 and is the most current version. The DSM-5 was published by a professional body called the American Psychiatric Association (APA). The DSM-5 defines depression, also known as major depressive disorder (MDD) or clinical depression, as a "serious mood disorder" that affects mood, behavior, health, functioning, and overall quality of life. Depression affects emotional states (e.g., depression can result in persistent sadness) as well as physical states (e.g., depression can result in chronic pain). Per the DSM-5, to be diagnosed with depression, an individual must be experiencing five or more of the following symptoms during the same two-week period and at least one of the symptoms should be either depressed mood or loss of interest or pleasure:

- Depressed mood most of the day, nearly every day.
- Markedly diminished interest or pleasure in all, or almost all, activities most of the day, nearly every day.
- Significant weight loss when not dieting or weight gain or decrease or increase in appetite nearly every day.
- A slowing down of thought and a reduction of physical movement (observable by others, not merely subjective feelings of restlessness or being slowed down).
- Fatigue or loss of energy nearly every day.
- Feelings of worthlessness or excessive or inappropriate guilt nearly every day.
- Diminished ability to think or concentrate, or indecisiveness, nearly every day.

- Recurrent thoughts of death, recurrent suicidal ideation without a specific plan, or a suicide attempt or a specific plan [to die] by suicide.

Additionally, symptoms must cause the individual clinically significant distress or impairment in overall functioning and symptoms cannot be a result of substance abuse or another medical condition (American Psychiatric Association 2013).

CLINICAL PRACTICE GUIDELINES FOR DEPRESSION FOR CHILDREN, ADOLESCENTS & ADULTS *(adopted from APA 2019)*

The Department of Vermont Health Access (DVHA) adheres to national standards of care for depression, and accepts and endorses the Clinical Practice Guidelines of the American Psychiatric Association's (APA) for the Treatment of Depression. Please refer to this link for Clinical Practice Guidelines for Depression:

[Clinical Practice Guideline for the Treatment of Depression Across Three Age Cohorts \(apa.org\)](https://www.apa.org/clinical-guidelines)

REGULARORY BACKGROUND, MEDICAID RULE & MEDICAID POLICY, and STATE RESOURCES:

Providers are expected as part of their contract with VT Medicaid to understand VT Medicaid Rules, the aspects of the Provider Manuals that are applicable to their discipline, and any criteria and guidelines that are applicable to their discipline. Providers are encouraged to review section 5 of the DVHA Provider Manual, and the other State of Vermont resources documented below.

Vermont Medicaid as the Payer of Last Resort

Please refer to section 5.3.2.1 [Vermont Medicaid Provider Manual \(vtmedicaid.com\)](https://www.vtmedicaid.com) and section §1908 of [Vermont Laws](#) regarding Vermont Medicaid as the payer of last resort.

Medical Necessity

Please refer to the following link regarding the definition of medical necessity: [Medical Necessity HCAR 4.101.pdf \(vermont.gov\)](#)

Vermont Medicaid Manuals

Vermont Medicaid General Provider Manual:

[Vermont Medicaid Provider Manual \(vtmedicaid.com\)](https://www.vtmedicaid.com)

Vermont Medicaid Mental Health Services Supplement:

[Vermont Medicaid Provider Manual \(vtmedicaid.com\)](https://www.vtmedicaid.com)

Vermont Medicaid Billing & Forms Manual:

[Vermont Medicaid Provider Manual \(vtmedicaid.com\)](https://www.vtmedicaid.com)

REFERENCES

Guideline Development Panel for the Treatment of Depressive Disorders. (2019). *APA Clinical Practice Guideline for the Treatment of Depression Across Three Age Cohorts: (505892019-001)* [Data set]. American Psychological Association.
<https://doi.org/10.1037/e505892019-001>.

American Psychiatric Association. (2013). *Diagnostic and statistical manual of mental disorders* (5th ed. text rev).