

## CPT II Codes for Adult Depression

### Importance of CPT II Coding

Current Procedural Terminology (CPT) Category II codes were developed as a **supplemental performance tracking set of procedural codes** in addition to the Category I and III coding sets. They help identify information about the quality of care delivered by coding a number of services or test results that support quality measures. **Category II codes are optional, and cannot be used to replace Category I codes for billing purposes.**

All measures are to be submitted a minimum of **once per performance period** for patients seen during the period. **For auditing purposes, the last reading/result of the measurement year will be used for HEDIS reporting and performance rating for Diabetic HbA1c Control and Controlling Blood Pressure metrics.**

While they are for reporting use only, CPT II coding is strongly encouraged in order to decrease the need for provider data submission, record abstraction and chart review -- and faster payments!

### Commonly Used CPT II Codes for Depression

Measure	CPT II Code	Description
Depression <i>(use a standardized tool)</i>	3351F	Negative screen for depressive symptoms
	3352F	No significant depressive symptoms
	3353F	Mild-Moderate depressive symptoms
	3354F	Clinically significant depressive symptoms
	1040F	DSM-5 criteria for major depressive disorder documented at the initial evaluation