

Major depression

Documentation and coding: Individual & Family Plans

October 2025

For coding education questions, email CignaHealthcareHCPEducation@CignaHealthcare.com.

It is important to accurately document and code diagnoses when submitting claims for your patients with Cigna Healthcare®-administered coverage. This helps ensure your diagnosis and coding practices comply with all applicable legal requirements,¹ while enabling us to provide our customers with the benefits and resources they need. For additional information and resources, visit the Cigna Healthcare Individual & Family Plans page at CignaforHCP.com/IFP.

The information that follows is designed to provide guidance for the documentation and coding of claims for your patients with a major depression diagnosis. It is not meant to replace your clinical judgment when caring for your patients.

Definitions

Major depression is diagnosed in patients with a history of at least one major depressive episode and no history of mania or hypomania, and the depressive episode is not caused by medications or concurrent general conditions.²

Other disease definitions include:

- Dysthymia: Chronic depression that lasts for more than two years; also known as neurotic depression
- Psychosis: Symptoms suggesting a loss of reality

Patient Health Questionnaire-9 (PHQ-9)

PHQ-9 is the most widely used tool for depression screening. For each of the nine questions, a patient may receive a score from 0–3 for a total score ranging from 0 (no depression) to 27 (severe depression).

Screening score	Interpretation
0 to 4	None, minimal depression
5 to 9	Mild depression
10 to 14	Moderate depression
15 to 19	Moderately severe depression
Greater than 20	Severe depression

Note: Use screening tools such as the PHQ-9A for adolescents or PHQ-9 Modified for Teens.

Major depression coding decision tree

According to the Diagnostic and Statistical Manual of Mental Disorders 5 (DSM-5), to qualify for an initial diagnosis of major depression patients must:³

- A. Exhibit five or more of the following nine symptoms (e.g., on the PHQ-9) during the same two-week period that represent a change from previous functioning,

with at least one of the symptoms being a depressed mood or loss of interest or pleasure in doing things.³

Note: Do not include symptoms that are clearly attributable to another medical condition.

1. Loss of interest or pleasure in doing things
 2. Feeling irritable, sad, or hopeless most of the day
 3. Significant weight loss when not dieting or weight gain, or a decrease or increase in appetite
 4. Insomnia or hypersomnia nearly every day
 5. Psychomotor agitation or retardation
 6. Fatigue or loss of energy
 7. Feelings of worthlessness or excessive or inappropriate guilt (which may be delusional)
 8. Diminished ability to think or concentrate, or indecisiveness
 9. Recurrent thoughts of death (not just fear of dying), recurrent suicidal ideation without a specific plan, a suicide attempt, or a specific plan for committing suicide
- B. Determine if the symptoms cause clinically significant distress or impairment in social, occupational, or other important areas of functioning.
- C. Be sure the episode is not attributable to the physiological effects of a substance or to another medical condition.
- D. Review social history to determine if alcohol or illicit drug use may be an etiological source for depression.

Notes: (1) Criteria A–C represent a major depressive episode. See the DSM-5 for complete criteria. (2) Interpretation of major depression is up to the clinician's judgment.

¹ Diagnosis inaccuracies that are not addressed can result in administrative sanctions and potential financial penalties.

² AJ Rush. "Unipolar major depression in adults: Choosing initial treatment." UpToDate. 28 November 2022. Retrieved from <https://www.uptodate.com/contents/unipolar-major-depression-in-adults-choosing-initial-treatment/print>.

³ American Psychiatric Association. Diagnostic and Statistical Manual of Mental Disorders. 5th ed., Text Revision, American Psychiatric Publishing, 2020.

Single versus recurrent major depressive disorder

Documentation and coding

Document the type of depression, severity status, and remission status.

Type of depression (ICD-10-CM codes⁴)

- Single episode (ICD-10 code F32): There is a depressed mood or loss of interest or pleasure in nearly all activities for at least two weeks.³
- Recurrent (ICD-10 code F33): There is an interval of at least two consecutive months between separate episodes in which criteria are not met or there is not a major depressive episode.³

Severity status

Additional fourth and fifth characters:

- 0 (mild): There are few, if any, symptoms in excess of those required to make the diagnosis.
- 1 (moderate): The number of symptoms is between those specified for "mild" and "severe."
- 2 or 3 (severe): The number of symptoms is substantially more than that required to make the diagnosis. *Also denote if there are psychotic or anxiety symptoms present.*

Remission status

- In partial remission: Symptoms of the immediate previous major depressive episode are present but full criteria are not met, or there is a period lasting less than two months without any significant symptoms of a major depressive episode following the end of such an episode.
- In full remission: During the past two months, no significant signs or symptoms of the disturbance were present.

Other considerations

- Make statements that are compatible with ICD-10 nomenclature.
- Document the treatment plan and follow-up. A treatment plan can be in the form of a medication, referral, diet, monitoring, and/or ordering a diagnostic exam.
- Confirm that a face-to-face or telehealth encounter is signed and dated by clinician, including printing out the clinician's full name and credentials (e.g., MD, DO, NP, PA).
- Refer to the alcohol and substance abuse coding categories, DSM-5, and guidelines for coding associated conditions.

Major depression

ICD-10 code	Description	Additional characters to use	
F32.-	Major depressive disorder, single episode	0 – Mild 1 – Moderate 2 – Severe without psychotic features 3 – Severe with psychotic features	4 – In partial remission 5 – In full remission, unspecified, major depressive disorder (MDD) NOS 81 – Premenstrual dysphoric disorder 89 – Other specified depressive episodes 9 – Major depression, unspecified A – Depression, unspecified
F33.-	Major depressive disorder, recurrent	0 – Mild 1 – Moderate 2 – Severe without psychotic features 3 – Severe with psychotic features 40 – In remission, unspecified	41 – In partial remission, unspecified, MDD NOS 42 – In full remission 8 – Other recurrent depressive disorders 9 – Unspecified, monopolar depression, NOS
F34.-	Persistent mood (affective) disorder	0 – Cyclothymic disorder 1 – Dysthymic disorder 81 – Disruptive mood dysregulation disorder 89 – Other specified persistent mood disorder 9 – Persistent mood disorder unspecified	
F39	Unspecified mood (affective) disorder (e.g., Affective psychosis, NOS)		

4. International Classification of Diseases, 10th Revision, Clinical Modification.