



Postpartum Depression Screening

CHILD AND TEEN CHECKUPS (C&TC) FACT SHEET FOR PRIMARY CARE PROVIDERS

Postpartum depression (PPD) screening is recommended during C&TC visits up to 13 months. Mental health concerns in the postpartum period (up to one year from the end of pregnancy) are a leading cause of maternal mortality; universal screening and quality follow-up make a meaningful difference for families.

C&TC standards

General

Universal PPD screening is recommended for any accompanying caregiver at the 0-1 month, 2-month, 4-month, and 6-month visits. Screening may be offered more frequently or at other infant visits as needed up to 13 months of age, as outlined in the Minnesota Health Care Programs (MHCP) Provider Manual – C&TC Section.

Personnel

Screening personnel qualifications are instrument-specific; refer to each instrument's instruction manual for more information.

A licensed health care provider must interpret the results and ensure appropriate follow-up: physician, nurse practitioner, physician assistant, or registered or public health nurse (RN, PHN) who has completed the C&TC Comprehensive Screening training through the Minnesota Department of Health.

Documentation

Record the name of the completed screening instrument and that you performed the screening as a "risk assessment" in the child's medical record. Including the screening score results or a copy of the screening instrument in the child's record is not required.

Refer to the <u>C&TC Provider Documentation</u> <u>Forms</u> for documentation examples or to use as a template with your electronic medical record.

Procedure

Refer to <u>Perinatal Mental Health –</u> <u>Information for Health Professionals.</u>

Use one of three approved screening tools:

- Edinburgh Postnatal Depression Scale (EPDS)
- Patient Health Questionnaire-9 (PHQ-9)
- Beck Depression Inventory (BDI)

Review screening results with the caregiver. When concerns are identified, prompt referral for management is indicated.

Referral

<u>Pregnancy and Postpartum Support</u> <u>Minnesota</u> offers resources and training for health care professionals.

The National Perinatal Psychiatric Consult Line for medical professionals offers free consultations with a reproductive psychiatrist.

When a screen generates a serious concern, the health care provider should do more than provide a referral. They should actively facilitate the next level of care for the individual. Emergency mental health interventions are necessary for concerns such as suicidal ideation or risk of harm to the infant (American College of Obstetricians and Gynecologists, 2023).

Indicate a referral with the appropriate HIPAA-compliant referral code on the claim.

Importance of screening

Mental health concerns in the postpartum period are a leading cause of maternal mortality (Centers for Disease Control and Prevention, 2024). Twenty-five percent of birthing persons with low incomes report PPD symptoms, and rates are likely higher. Up to 25% of partners suffer from PPD. Early intervention of PPD is urgent as long-term effects on the child include adverse health, social, and educational outcomes (Earls, Yogman, Mattson, & Rafferty, 2019).

Professional recommendations

American Academy of Pediatrics

Postpartum depression screening is recommended at the 1-month, 2-month, 4-month, and 6-month well-child visits.

The EPDS and PHQ-9 are feasible and effective measures (Earls, Yogman, Mattson, & Rafferty, 2019).

United States Preventive Services Task Force

Postpartum depression screening is recommended for pregnant and postpartum birthing persons (United States Preventive Services Task Force, 2023).

Resources

Minnesota Department of Human Services

- <u>C&TC Schedule of Age-Related</u> <u>Screening Standards</u>
- Minnesota Health Care Programs
 (MHCP) Provider Manual C&TC Section

Minnesota Department of Health

- Child and Teen Checkups (C&TC)
- Depression or Anxiety During and After Pregnancy

Other resources

Mother-Baby Hope Line at Hennepin County Medical Center

 Statewide phone services: 612-873-5692. In-person services are only available in Hennepin County.

Perinatal support

 <u>National Maternal Health Hotline</u>: call or text 1-833-943-5746 (1-833-9-HELP4MOMS).

For more information

The Child and Teen Checkups (C&TC) program is administered through a partnership between the Minnesota Department of Human Services and the Minnesota Department of Health.

For questions about this fact sheet or to obtain this information in a different format, call 651-201-3650 or email health.childteencheckups@state.mn.us.

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Resource links

- Minnesota Health Care Programs (MHCP)
 Provider Manual C&TC Section
 (www.dhs.state.mn.us/main/idcplg?IdcServ ice=GET_DYNAMIC_CONVERSION&Revision
 SelectionMethod=LatestReleased&dDocName=dhs16_150092#maternal)
- <u>C&TC Provider Documentation Forms</u>
 (https://mn.gov/dhs/partners-and-providers/policies-procedures/minnesota-health-care-programs/provider/types/ctc-resources)
- Perinatal Mental Health Information for Health Professionals
 (https://www.health.state.mn.us/people/w omeninfants/pmad/professionals.html)
- Edinburgh Postnatal Depression Scale
 (EPDS)
 (capp.ucsf.edu/sites/g/files/tkssra6871/f/Ed
 inburgh%20Postpartum%20Depression%20
 Scale%20(English).pdf)
- Patient Health Questionnaire-9 (PHQ-9)
 (www.phqscreeners.com)
- Beck Depression Inventory (BDI)
 (www.ismanet.org/doctoryourspirit/pdfs/B
 eck-Depression-Inventory-BDI.pdf)
- Pregnancy and Postpartum Support Minnesota (PPSM) (https://ppsupportmn.org)
- The National Perinatal Psychiatric Consult
 <u>Line</u>
 (https://www.postpartum.net/professional
 s/perinatal-psychiatric-consult-line/)

- C&TC Schedule of Age-Related Screening <u>Standards</u>
 (https://edocs.dhs.state.mn.us/lfserver/Pub lic/DHS-3379-ENG)
- Minnesota Health Care Programs (MHCP) Provider Manual - C&TC Section (www.dhs.state.mn.us/main/idcplg?IdcServ ice=GET_DYNAMIC_CONVERSION&Revision SelectionMethod=LatestReleased&dDocNa me=dhs16_150092)
- Child and Teen Checkups (C&TC)
 (www.health.state.mn.us/divs/cfh/program/ctc/index.cfm)
- Depression or Anxiety During and After
 Pregnancy
 (www.health.state.mn.us/people/womenin fants/pmad/pmadsfs.html)
- National Maternal Health Hotline (https://mchb.hrsa.gov/national-maternal-mental-health-hotline)

References

American College of Obstetricians and Gynecologists. (2023). Screening and Diagnosis of Mental Health Conditions. *Obstetrics & Gynecology*, 1232-1261.

Centers for Disease Control and Prevention. (2024, May). Pregnancy-Related Deaths: Data From Maternal Mortality Review Committees in 38 U.S. States, 2020. Retrieved from Centers for Disease Control and Prevention: https://www.cdc.gov/maternal-mortality/php/data-research/index.html

Earls, M., Yogman, M., Mattson, G., & Rafferty, J. (2019). Incorporating Recognition and Management of Perinatal Depression Into Pediatric Practice. *Pediatrics*, *143*(1). doi:10.1542/peds.2018-3259

United States Preventive Services Task Force. (2023). Screening for Depression and Suicide Risk in Adults. *JAMA*, 2057-2067.