

HEDIS® MEASURE

Antidepressant Medication Management (AMM)



Measure Overview

According to the Centers for Disease Control (CDC), depression affects about 16 million American adults every year and can happen to anyone. Depression is common and affects people differently. Depression can change how a person feels, thinks, acts, and handles daily activities like sleeping, eating and working. People with depression may feel sad, hopeless, angry, irritable, tired and may lose interest in activities once enjoyed. Depression can lead to a variety of emotional and physical problems and can decrease a person's ability to function at work and at home. Sometimes individuals with depression may have suicidal thoughts and may even attempt suicide.

Measure Description

The AMM measure focuses on members 18 years of age and older who were treated with antidepressant medication, had a diagnosis of major depression and who remained on an antidepressant medication treatment. Two rates are reported:

- Effective Acute Phase Treatment. The percentage of members who remained on an antidepressant medication for at least 84 days (12 weeks).
- Effective Continuation Phase Treatment. The percentage of members who remained on an antidepressant medication for at least 180 days (six months).

How to Improve Measure Performance

- When speaking with patients, refer to depression as a medical condition. Depression often carries a stigma and may be viewed as a moral weakness or character flaw.
- Discuss that depression goes beyond simply feeling sad.
- Reinforce that depression is treatable and discuss an appropriate duration of treatment.
- Discuss efficacy of medications and side effects. Assure the patient that if the initial choice proves intolerable, changes in medication can be made.
- Remind patients of the delayed therapeutic effects of antidepressants, as they may stop taking their medication if they do not notice immediate improvement in their symptoms.





- Provide oral and written instructions: when (time of day) and how (with food) to take their medications as well as what to do if they miss a dose.
- Suggest the use of practical medication reminders (e.g., cell phone calendars, dose counters).
- Assess medication adherence at each patient visit.
- Schedule a follow-up appointment with patients one month after starting antidepressants to discuss efficacy and side effects.

Follow-Up Visit Compliance Codes

Using the following Behavioral Health Codes is one way to ensure our ability to capture this data and measure how we are doing in meeting this measure. Please use CPT®, HCPCs and ICD-10 to close care gaps.

TYPE OF VISIT	CODES
Antidepressant Medication Management	F32.0-F32.4, F32.9, F33.0-F33.3. F33.41, F33.9

Please Note: These codes in this document are derived from the NCQA HEDIS® 2022 Volume 2 Technical Specifications for Health Plans. These codes are examples of codes typically billed for this type of service and are subject to change. Submitting claims using these codes helps improve reporting of quality measure performance. Billing these codes does not guarantee payment.

Marketplace providers should refer to billing guidance from Centers for Medicare & Medicaid Services (CMS) prior to claims submission.

Antidepressant Medications

DESCRIPTION	PRESCRIPTION		
Miscellaneous antidepressants	Bupropion	 Vilazodone 	Vortioxetine
Monoamine oxidase inhibitors	IsocarboxazidTranylcypromine	Selegiline	Phenelzine
Phenylpiperazine antidepressants	Nefazodone	Trazodone	
Psychotherapeutic combinations	Amitriptyline- chlordiazepoxide	Amitriptyline- perphenazine	Fluoxtine- olanzapine
SNRI antidepresssants	DesvenlafaxineVenlafaxine	Levomilnacipran	Duloxetine
SSRI antidepresssants	Citalopram Escitalopram	FluoxetineFluvoxamine	ParoxetineSertaline
Tetracyclic antidepresssants	Maprotiline	Mirtazapine	
Tricyclic antidepresssants	AmitriptylineAmoxapineClomipramine	DesipramineDoxepin (>6 mg)Imipramine	NortriptylineProtriptylineTrimipramine

CareSource Resources

CareSource is here to help! CareSource has developed some initiatives to assist your patients in getting their medications filled:

CareSource App Push Notifications

Patients who have downloaded the CareSource app and are identified as a "new start" to an antidepressant medication will receive a notification that they have a medication refill due seven days prior to the medication running out.

Text Message Campaign

Patients who have opted in for text messages and have been identified as a "new start" to an antidepressant medication will receive a text that they have a medication refill due seven days prior to the medication running out.

Provider Training

CareSource offers trainings and webinars to our providers. Learn more about major depression, HEDIS, and how to meet quality standards for the Antidepressant Medication Management (AMM) measure when treating members with this condition.

Visit our website at **CareSource.com** > Providers > Education > <u>Training & Events</u> to review the AMM HEDIS Measure presentation.

Visit our Depression Toolkit at **CareSource.com** > Providers > Education > Behavioral Health > <u>Depression</u> Toolkit.

Integrated Care Management Program

A Case Manager can assist members with finding the resources needed to be healthy. If a member does not have a Case Manager and would like to participate in this program, they can be referred by their provider or can self-refer by calling Member Services at **1-844-607-2829** (TTY: 1-800-743-3333 or 711).

References

NCQA HEDIS® MY 2022, HEDIS®

AMM HEDIS Measure

https://www.ncga.org/hedis/measures/antidepressant-medication-management/

CDC Mental Health Conditions: Depression and Anxiety

https://www.cdc.gov/tobacco/campaign/tips/diseases/depression-anxiety.html

