

2024 HEDIS Measure Tips



One in a series of tip sheets that look at key Healthcare Effectiveness Data and Information Set measures, commonly referred to as HEDIS® measures.

This measure applies to both commercial and Medicare members.

Antidepressant Medication Management (AMM)

Effectiveness of Care HEDIS® Measure*

Measure description

The percentage of adults with a diagnosis of major depression, who were treated with and remained on an antidepressant medication.

Measure population (denominator)

Adults 18 years and older who had a diagnosis of major depression and were dispensed an antidepressant medication from May 1 of the prior year through April 30 of the measurement year.

Measure compliance (numerator)

Two rates reported:

- 1. Effective acute phase treatment:** The percentage of patients who remained on an antidepressant medication for at least 84 days (12 weeks).
 - At least 84 days of treatment beginning on the earliest dispensing date through 114 days after (115 total days).
- 2. Effective continuation phase treatment:** The percentage of patients who remained on an antidepressant medication for at least 180 days (6 months).
 - At least 180 days of treatment beginning on the earliest dispensing date through 231 days after (232 total days).

Exclusions

- Received hospice services anytime during the measurement year
- Deceased during the measurement year

Helpful HEDIS hints

- **Provide** National Suicide Prevention Lifeline number, 1-800-273-TALK, to all patients.
- **Educate** and provide 988 *Suicide & Crisis Lifeline* number (call or text).
- **Treat** with a combination of medication and therapy — particularly important in cases of severe depression.
- **Discuss** and inquire specifically about potential side effects at follow-up visits.

continued

Did you know?

- Depression is one of the most common behavioral health conditions in the United States.
- Half of all patients on antidepressant therapy discontinue medications prematurely.
- Continued therapy with antidepressants is usually needed for 6 to 12 months after the resolution of an acute episode to prevent a relapse.

Helpful HEDIS hints *continued*

- **Educate** patients on the importance of taking medication as prescribed for optimal effectiveness.
- **Explain** how to take antidepressants, their benefits, when they can expect to feel better, and the typical duration of treatment.
- **Emphasize** the importance of continuing the medication even after they begin to feel better.
- **Stress** the importance of proper sleep, stress management, social and spiritual support, and diet and exercise to enhance the effectiveness of antidepressants.
- **Encourage** patients to call or schedule a follow-up visit and educate them on what to do if they have questions or concerns related to their medication or side effects.
- **Make** follow-up telephone calls to check on patients and remind them of upcoming visits.
- **Monitor** response to treatment with a standardized tool such as the Patient Healthcare Questionnaire (PHQ-9).
- **Consider** non-adherence or inadequate dosing as contributing factors if there is limited or no response to treatment.
- **Be Aware** that medication samples, discount programs, or VA benefits are not captured through BCBSM pharmacy claims and therefore will not close gaps.

Antidepressant medications

Description	Prescriptions		
Miscellaneous antidepressants	• Bupropion	• Vilazodone	• Vortioxetine
Monoamine oxidase Inhibitors	• Isocarboxazid • Phenelzine	• Selegiline	• Tranylcypromine
Phenylpiperazine antidepressants	• Nefazodone	• Trazodone	
Psychotherapeutic combinations	• Amitriptyline - chlordiazepoxide	• Amitriptyline - perphenazine	• Fluoxetine – olanzapine
SNRI antidepressants (Serotonin and Norepinephrine Reuptake Inhibitor)	• Desvenlafaxine • Duloxetine	• Levomilnacipran	• Venlafaxine
SSRI antidepressants (Selective Serotonin Reuptake Inhibitor)	• Citalopram • Escitalopram	• Fluoxetine • Fluvoxamine	• Paroxetine • Sertraline
Tetracyclic antidepressants	• Maprotiline	• Mirtazapine	
Tricyclic antidepressants	• Amitriptyline • Amoxapine • Clomipramine	• Desipramine • Doxepin (>6 mg) • Imipramine	• Nortriptyline • Protriptyline • Trimipramine

Resources

1. National Institute of Mental Health (NIH). 2023. "Major Depression" nimh.nih.gov/health/statistics/major-depression.shtml
2. Centers for Disease Control and Prevention (CDC). 2023. "Facts About Suicide." cdc.gov/suicide/facts/index.html
3. Substance Abuse and Mental Health Services Administration (SAMHSA). 2023. "988 Suicide & Crisis Lifeline." samhsa.gov/find-help/988

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