

# **Antidepressant Medication Management (AMM)**

### New for 2023

#### **Updated**

- Members who died during the measurement year is now a required exclusion
- Members must meet the lower age limit for the measure, 18, as of the Index Prescription Start Date (IPSD)

### **Definition**

Percentage of members ages 18 and older who were treated with antidepressant medication, had a diagnosis of major depression and remained on an antidepressant medication treatment.

Two rates are reported:

- 1. **Effective Acute Phase Treatment –** Percentage of members who remained on an antidepressant medication for at least 84 days (12 weeks)
- 2. **Effective Continuation Phase Treatment –** Percentage of members who remained on an antidepressant medication for at least 180 days (6 months)

Plan(s) Affected	Quality Program(s) Affected	Collection and Reporting Method
Commercial	CMS Quality Rating System	Administrative
<ul> <li>Exchange/Marketplace</li> </ul>	NCQA Accreditation	Claim/Encounter Data
Medicaid	NCQA Health Plan Ratings	Pharmacy Data
Medicare		

#### **Medications**

To comply with this measure, a member must remain on any of the following medications for the required duration of time:

Drug Category	Medications	
Miscellaneous antidepressants	Bupropion     Vilazodone	Vortioxetine
Monoamine oxidase inhibitors	Isocarboxazid     Phenelzine	<ul><li>Selegiline</li><li>Tranylcypromine</li></ul>
Phenylpiperazine antidepressants	Nefazodone     Trazodone	
Psychotherapeutic combinations	Amitriptyline-chlordiazepoxide     Amitriptyline-perphenazine	Fluoxetine-olanzapine
SNRI antidepressants	Desvenlafaxine     Duloxetine	<ul><li>Levomilnacipran</li><li>Venlafaxine</li></ul>
SSRI antidepressants	<ul><li> Citalopram</li><li> Escitalopram</li><li> Fluoxetine</li></ul>	<ul><li>Fluvoxamine</li><li>Paroxetine</li><li>Sertraline</li></ul>

(Medications continued)



# **Antidepressant Medication Management (AMM)**

## **Medications (continued)**

To comply with this measure, a member must remain on one of the following medications for the required duration of time:

Drug Category	Medications		
Tetracyclic antidepressants	Maprotiline	Mirtazapine	
Tricyclic antidepressants	<ul> <li>Amitriptyline</li> <li>Amoxapine</li> <li>Clomipramine</li> <li>Desipramine</li> <li>Doxepin (&gt;6 mg)</li> </ul>	<ul><li>Imipramine</li><li>Nortriptyline</li><li>Protriptyline</li><li>Trimipramine</li></ul>	

## Required Exclusion(s)

Exclusion		Timeframe
Members in hospice of	r using hospice services	- Any time during the measurement year

## **Tips and Best Practices to Help Close This Care Opportunity**

This measure focuses on medication compliance.

- Screening tools (e.g., PHQ-9) may provide objective assessment and better identify who would or would not benefit from medication. Screening tools available at providerexpress.com > Clinical Resources > Behavioral Health Toolkit for Medical Providers. Tools help to identify mild, moderate or severe depression. Use "unspecified" diagnoses sparingly.
- Many patients with mild depression who are prescribed antidepressants do not stay on medication. Consider referral or a consult for talk therapy as an alternative to medication.
- When prescribing antidepressants, ensure patients understand it may take up to 12 weeks for full effectiveness of medication and discuss side effects and the importance of medication adherence.

- Encourage the use of telehealth appointments to discuss side effects and answer questions about the medication.
- Encourage patients to accept a referral for psychotherapy and help them understand mental health diagnoses are medical illnesses, not character flaws or weaknesses.
- If you need to refer your patient to a behavioral health specialist or need to request coordination of care, please call the number on the back of the patient's health plan ID card or search liveandworkwell.com.
- Encourage use of Employer Assistance Program (EAP) if covered under benefit plan at no cost to member.