

Antidepressant Medication Management (AMM)

New for 2024

- No applicable changes to this measure

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
<ul style="list-style-type: none"> • Commercial • Exchange/Marketplace • Medicaid • Medicare 	<ul style="list-style-type: none"> • CMS Quality Rating System • NCQA Accreditation • NCQA Health Plan Ratings 	Administrative <ul style="list-style-type: none"> • Claim/Encounter Data • Pharmacy Data

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	<ul style="list-style-type: none"> • Bupropion • Vilazodone • Vortioxetine
Monoamine oxidase inhibitors	<ul style="list-style-type: none"> • Isocarboxazid • Phenelzine • Selegiline • Tranylcypromine
Phenylpiperazine antidepressants	<ul style="list-style-type: none"> • Nefazodone • Trazodone
Psychotherapeutic combinations	<ul style="list-style-type: none"> • Amitriptyline-chlordiazepoxide • Amitriptyline-perphenazine • Fluoxetine-olanzapine
SNRI antidepressants	<ul style="list-style-type: none"> • Desvenlafaxine • Duloxetine • Levomilnacipran • Venlafaxine
SSRI antidepressants	<ul style="list-style-type: none"> • Citalopram • Escitalopram • Fluoxetine • Fluvoxamine • Paroxetine • Sertraline

(Medications continued)

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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	<ul style="list-style-type: none"> • Maprotiline • Mirtazapine
Tricyclic antidepressants	<ul style="list-style-type: none"> • Amitriptyline • Imipramine • Amoxapine • Nortriptyline • Clomipramine • Protriptyline • Desipramine • Trimipramine • Doxepin (>6 mg)

Required Exclusion(s)

Exclusion	Timeframe
<ul style="list-style-type: none"> • Members in hospice or using hospice services • Members who died 	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.
- Sharing member demographic data is critical to understanding the cultural, linguistic and social needs of those we serve and decreasing health inequities across the care continuum. This data can include, but is not limited to, race, ethnicity, language, sexual orientation, gender identity, pronouns, sex assigned at birth and disability status.
 - As part of UnitedHealthcare's clinical you to include this demographic data with any structured data file or CCD. Your information is confidential. UnitedHealthcare will keep personally identifiable information confidential and consent.