



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

Antidepressant medication management

This measure examines the percentage of adults age 18 and older who had a diagnosis of major depression and who were treated with antidepressant medication and remained on this treatment. (See list of medications on back.)

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 (6 months)

Exclusion: Members in hospice

Did you know?

- Depression is one of the most common mental disorders in the United States.
- Depression can happen at any age but most often occurs in adulthood.
- Depression often coexists with chronic medical conditions, and depressed patients generally have worse overall health and more severe disabilities than patients with chronic conditions alone.
- Fifty percent of patients on antidepressant therapy discontinue medications prematurely.
- Continued therapy with antidepressants is usually needed for six to 12 months after the resolution of an acute episode to prevent a relapse.

Improving HEDIS scores

- Educate patients on the importance of taking medication daily for optimum 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.
- Discuss potential side effects and inquire specifically about potential side effects at follow-up visits.
- Let patients know when they should call or schedule a follow-up visit and what to do if they have questions or concerns related to their medication or side effects.
- Stress the importance of proper sleep, stress management, social and spiritual support, and diet and exercise to enhance the effectiveness of anti-depressants.
- Provide written instructions to support verbal instructions.

continued

Helpful HEDIS hints

Monitor response to treatment with a standardized tool such as PHQ9.

- Studies show that the most effective treatment, especially in cases of severe depression, is a combination of medication and therapy.
- If there's limited or no response to treatment, consider nonadherence or inadequate dosing as contributing factors.

Tip:

Create a system of follow-up telephone calls to check on patients and remind them of upcoming visits.

Antidepressant medications

Description	Prescriptions	
Miscellaneous antidepressants	<ul style="list-style-type: none">• Bupropion• Vilazodone	<ul style="list-style-type: none">• Vortioxetine
Monoamine oxidase inhibitor	<ul style="list-style-type: none">• Isocarboxazid• Phenelzine	<ul style="list-style-type: none">• Selegiline• Tranylcypromine
Phenylpiperazine antidepressants	<ul style="list-style-type: none">• Nefazodone	<ul style="list-style-type: none">• Trazodone
Psychotherapeutic combinations	<ul style="list-style-type: none">• Amitriptyline - chlordiazepoxide• Amitriptyline - perphenazine	<ul style="list-style-type: none">• Fluoxetine – olanzapine
SNRI antidepressants	<ul style="list-style-type: none">• Desvenlafaxine• Duloxetine	<ul style="list-style-type: none">• Levomilnacipran• Venlafaxine
SSRI antidepressants	<ul style="list-style-type: none">• Citalopram• Escitalopram• Fluoxetine	<ul style="list-style-type: none">• Fluvoxamine• Paroxetine• Sertraline
Tetracyclic antidepressants	<ul style="list-style-type: none">• Maprotiline	<ul style="list-style-type: none">• Mirtazapine
Tricyclic antidepressants	<ul style="list-style-type: none">• Amitriptyline• Amoxapine• Clomipramine• Desipramine• Doxepin (>6 mg)	<ul style="list-style-type: none">• Imipramine• Nortriptyline• Protriptyline• Trimipramine

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