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| **eMeasure Title** | **Anti-depressant Medication Management** | | |
| **eMeasure Identifier (Measure Authoring Tool)** | 128 | **eMeasure Version number** | 5.0.000 |
| **NQF Number** | 0105 | **GUID** | 8924f2b3-ec06-4650-b634-d70a53dee577 |
| **Measurement Period** | January 1, 20XX through December 31, 20XX | | |
| **Measure Steward** | National Committee for Quality Assurance | | |
| **Measure Developer** | National Committee for Quality Assurance | | |
| **Endorsed By** | National Quality Forum | | |
| **Description** | Percentage of patients 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.<br>a. Percentage of patients who remained on an antidepressant medication for at least 84 days (12 weeks).<br>b. Percentage of patients who remained on an antidepressant medication for at least 180 days (6 months). | | |
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| **Measure Scoring** | Proportion |
| **Measure Type** | Process |
| **Stratification** | None |
| **Risk Adjustment** | None |
| **Rate Aggregation** | None |
| **Rationale** | In 2013, over 15 million adults in the United States had at least one major depressive episode in the past 12 months (National Institute of Mental Health 2013), and depression is estimated to affect nearly a quarter of adults in their lifetime (Burcusa and Iacono 2007). Symptoms of depression include appetite and sleep disturbances, anxiety, irritability and decreased concentration (Charbonneau et al. 2005). The American Psychiatric Association recommends use of antidepressant medication and behavioral therapies, such as psychotherapy, to treat depression (American Psychiatric Association 2010).<br><br>For the past 50 years, antidepressant medication has proven to be effective especially for patients with more severe symptoms (Fournier et al. 2010). Among patients who initiate antidepressant treatment, one in three discontinues treatment within one month, before the effect of medication can be assessed, and nearly one in two discontinues treatment within three months (Simon 2002).<br><br>Due to increased risky behaviors for chronic disease (eg, physical inactivity, smoking, excessive drinking and insufficient sleep), evidence has shown that depressive disorders are strongly related to the occurrence of many chronic diseases including diabetes, cancer, cardiovascular disease and asthma (Centers for Disease Control and Prevention 2011).<br><br>Aligning depression quality improvement with methods used in managing other chronic illnesses has been an important step in depression care. Depression management systems have demonstrated improved short- and long-term outcomes of depression severity and persistence, employment retention, functional status and patient satisfaction (Katon et al. 2002; Rost et al. 2001). |
| **Clinical Recommendation Statement** | American Psychiatric Association (APA 2010):<br>Successful treatment of patients with major depressive disorder is promoted by a thorough assessment of the patient and close adherence to treatment plans. Treatment consists of an acute phase, during which remission is |

induced; a continuation phase, during which remission is preserved; and a maintenance phase, during which the susceptible patient is protected against the recurrence of a subsequent major depressive episode.

Acute Phase: An antidepressant medication is recommended as an initial treatment choice for patients with mild to moderate major depressive disorder [I: Recommended with substantial clinical confidence] and definitely should be provided for those with severe major depressive disorder unless electroconvulsive therapy (ECT) is planned [I: Recommended with substantial clinical confidence]. For most patients, a selective serotonin reuptake inhibitor (SSRI), serotonin norepinephrine reuptake inhibitor (SNRI), mirtazapine, or bupropion is optimal [I: Recommended with substantial clinical confidence]. In general, the use of nonselective monoamine oxidase inhibitors (MAOIs) (eg, phenelzine, tranylcypromine, isocarboxazid) should be restricted to patients who do not respond to other treatments [I: Recommended with substantial clinical confidence], given the necessity for dietary restrictions with these medications and the potential for deleterious drug-drug interactions.

During the acute phase of treatment, patients should be carefully and systematically monitored on a regular basis to assess their response to pharmacotherapy, identify the emergence of side effects (eg, gastrointestinal symptoms, sedation, insomnia, activation, changes in weight, and cardiovascular, neurological, anticholinergic, or sexual side effects), and assess patient safety [I: Recommended with substantial clinical confidence]. If antidepressant side effects do occur, an initial strategy is to lower the dose of the antidepressant or to change to an antidepressant that is not associated with that side effect [I: Recommended with substantial clinical confidence].

Continuation Phase: During the continuation phase of treatment, the patient should be carefully monitored for signs of possible relapse [I: Recommended with substantial clinical confidence]. Systematic assessment of symptoms, side effects, adherence, and functional status is essential [I: Recommended with substantial clinical confidence], and may be facilitated through the use of clinician- and/or patient-administered rating scales [II: Recommended with moderate clinical confidence]. To reduce the risk of relapse, patients who have been treated successfully with antidepressant medications in the acute phase should continue treatment with these agents for 4-9 months [I: Recommended with substantial clinical confidence]. In general, the dose used in the acute phase should be used in the continuation phase [II: Recommended with moderate clinical confidence]. To prevent a relapse of depression in the continuation phase, depression-focused psychotherapy is recommended [I: Recommended with substantial clinical confidence], with the best evidence available for cognitive-behavioral therapy.

Maintenance Phase: During the maintenance phase, an antidepressant medication that produced symptom remission during the acute phase and maintained remission during the

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| | continuation phase should be continued at a full therapeutic dose [II: Recommended with moderate clinical confidence]. |
| **Improvement Notation** | Higher score indicates better quality |
| **Reference** | Charbonneau, A., W. Bruning, T. Titus-Howard, E. Ellerbeck, J. Whittle, S. Hall, J. Campbell, S. Crain, S. Munro. 2005. "The community initiative on depression: report from a multiphase work site depression intervention." J Occup Environ Med 47(1):60-7. |
| **Reference** | Fournier, J.C., R.J. DeRubeis, S.D. Hollon, S. Dimidjian, J.D. Amsterdam, R.C. Shelton, J. Fawcett. "Antidepressant drug effects and depression severity: A patient-level meta-analysis." JAMA 303(1): 47-53. |
| **Reference** | Katon, W., J. Russo, M. Von Korff, E. Lin, G. Simon, T. Bush, E. Ludman, E. Walker. 2002. "Long-term effects of a collaborative care intervention in persistently depressed primary care patients." J Gen Intern Med 17(10):741-748. |
| **Reference** | Rost, K., P. Nutting, J. Smith, J. Werner, N. Duan. 2001. "Improving depression outcomes in the community primary care practice: a randomized trial of the QuEST intervention." J Gen Intern Med 16(3):143-149. |
| **Reference** | Simon, G.E. 2002. "Evidence review: efficacy and effectiveness of antidepressant treatment in primary care." Gen Hosp Psychiatry 24(4):213-24. |
| **Reference** | National Institute of Mental Health. 2013. Major Depression Among Adults. http://www.nimh.nih.gov/health/statistics/prevalence/major-depression-among-adults.shtml (December 17, 2015) |
| **Reference** | American Psychiatric Association. 2010. Practice guideline for the treatment of patients with major depressive disorder, third edition. Arlington: American Psychiatric Association. |
| **Reference** | Burcusa, S.L., and W.G. Iacono. 2007. "Risk for recurrence in depression." Clin Psychol Rev 27(8): 959-85. |
| **Reference** | Centers for Disease Control and Prevention (CDC). 2011. "Mental Health: Mental Health Basics." http://www.cdc.gov/mentalhealth/basics.htm (July 27, 2011) |
| **Definition** | Index Prescription Start Date (IPSD): The earliest prescription dispensing event for an antidepressant medication during the period of 270 days prior to the start of the measurement period through 90 days after the start of the measurement period.<br>The "continuous treatment" described in this measure allows for gaps in medication treatment up to a total 30 days during the 114-day period (numerator 1) or 51 days during the 231-day period (numerator 2). Gaps can include either gaps used to change medication, or treatment gaps to refill the same medication. |
| **Guidance** | To identify new treatment episodes for major depression, there must be a 90-day negative medication history (a period during which the patient was not taking antidepressant medication) prior to the first dispensing event |

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| | associated with the Index Episode Start Date (Index Prescription Start Date).<br><br>CUMULATIVE MEDICATION DURATION is an individual's total number of medication days over a specific period; the period counts multiple prescriptions with gaps in between, but does not count the gaps during which a medication was not dispensed.<br><br>To determine the cumulative medication duration, determine first the number of the Medication Days for each prescription in the period: the number of doses divided by the dose frequency per day. Then add the Medication Days for each prescription without counting any days between the prescriptions.<br><br>For example, there is an original prescription for 30 days with 2 refills for thirty days each. After a gap of 3 months, the medication was prescribed again for 60 days with 1 refill for 60 days. The cumulative medication duration is (30 x 3) + (60 x 2) = 210 days over the 10 month period. |
| **Transmission Format** | TBD |
| **Initial Population** | Patients 18 years of age and older with a visit during the measurement period who were dispensed antidepressant medications in the time within 270 days (9 months) prior to the measurement period through the first 90 days (3 months) of the measurement period, and were diagnosed with major depression 60 days prior to, or 60 days after the dispensing event |
| **Denominator** | Equals Initial Population |
| **Denominator Exclusions** | Patients who were actively on an antidepressant medication in the 105 days prior to the Index Prescription Start Date |
| **Numerator** | Numerator 1: Patients who have received antidepressant medication for at least 84 days (12 weeks) of continuous treatment during the 114-day period following the Index Prescription Start Date<br><br>Numerator 2: Patients who have received antidepressant medications for at least 180 days (6 months) of continuous treatment during the 231-day period following the Index Prescription Start Date |
| **Numerator Exclusions** | Not Applicable |
| **Denominator Exceptions** | None |
| **Supplemental Data Elements** | For every patient evaluated by this measure also identify payer, race, ethnicity and sex |

## Table of Contents

- Supplemental Data Elements
- Risk Adjustment Variables

## Population Criteria

- **------ Population Criteria 1 ------**

- **Initial Population =**
  - AND: Age>= 18 year(s) at: "Measurement Period"
  - AND: $InitialMajDepressionDiagnosis
  - AND: $InitialDepMedication
  - AND: Union of:
    - "Encounter, Performed: Office Visit"
    - "Encounter, Performed: Face-to-Face Interaction"
    - "Encounter, Performed: Preventive Care Services - Established Office Visit, 18 and Up"
    - "Encounter, Performed: Preventive Care Services-Initial Office Visit, 18 and Up"
    - "Encounter, Performed: Home Healthcare Services"
    - "Encounter, Performed: Annual Wellness Visit"
    - "Encounter, Performed: Psych Visit - Diagnostic Evaluation"
    - "Encounter, Performed: Psych Visit - Psychotherapy"
    - during "Measurement Period"
- **Denominator =**
  - AND: Initial Population
- **Denominator Exclusions =**
  - OR: "Medication, Active: Antidepressant Medication" <= 105 day(s) starts before start of $InitialDepMedication
- **Numerator =**
  - AND: Sum>= 84 day(s): "Medication, Active: Antidepressant Medication (cumulative medication duration)" <= 114 day(s) ends after start of $InitialDepMedication
- **Numerator Exclusions =**
  - None
- **Denominator Exceptions =**
  - None
- **Stratification =**
  - None

- **------ Population Criteria 2 ------**

- **Initial Population =**
  - AND: Age>= 18 year(s) at: "Measurement Period"
  - AND: $InitialMajDepressionDiagnosis
  - AND: $InitialDepMedication
  - AND: Union of:
    - "Encounter, Performed: Office Visit"
    - "Encounter, Performed: Face-to-Face Interaction"
    - "Encounter, Performed: Preventive Care Services - Established Office Visit, 18 and Up"
    - "Encounter, Performed: Preventive Care Services-Initial Office Visit, 18 and Up"
    - "Encounter, Performed: Home Healthcare Services"
    - "Encounter, Performed: Annual Wellness Visit"
    - "Encounter, Performed: Psych Visit - Diagnostic Evaluation"
    - "Encounter, Performed: Psych Visit - Psychotherapy"
    - during "Measurement Period"
- **Denominator =**

    - AND: Initial Population
- **Denominator Exclusions =**
    - OR: "Medication, Active: Antidepressant Medication" <= 105 day(s) starts before start of $InitialDepMedication
- **Numerator =**
    - AND: Sum>= 180 day(s): "Medication, Active: Antidepressant Medication (cumulative medication duration)" <= 231 day(s) ends after start of $InitialDepMedication
- **Numerator Exclusions =**
    - None
- **Denominator Exceptions =**
    - None
- **Stratification =**
    - None

## Data Criteria (QDM Variables)

- **$InitialDepMedication =**
    - First:
        - "Medication, Dispensed: Antidepressant Medication" satisfies any:
            - <= 270 day(s) starts before or concurrent with start of "Measurement Period"
            - <= 90 day(s) starts after start of "Measurement Period"
- **$InitialMajDepressionDiagnosis =**
    - First:
        - "Diagnosis: Major Depression" satisfies any:
            - <= 60 day(s) starts before start of $InitialDepMedication
            - <= 60 day(s) starts after start of $InitialDepMedication

## Data Criteria (QDM Data Elements)

- "Diagnosis: Major Depression" using "Major Depression Grouping Value Set (2.16.840.1.113883.3.464.1003.105.12.1007)"
- "Encounter, Performed: Annual Wellness Visit" using "Annual Wellness Visit Grouping Value Set (2.16.840.1.113883.3.526.3.1240)"
- "Encounter, Performed: Face-to-Face Interaction" using "Face-to-Face Interaction Grouping Value Set (2.16.840.1.113883.3.464.1003.101.12.1048)"
- "Encounter, Performed: Home Healthcare Services" using "Home Healthcare Services Grouping Value Set (2.16.840.1.113883.3.464.1003.101.12.1016)"
- "Encounter, Performed: Office Visit" using "Office Visit Grouping Value Set (2.16.840.1.113883.3.464.1003.101.12.1001)"
- "Encounter, Performed: Preventive Care Services - Established Office Visit, 18 and Up" using "Preventive Care Services - Established Office Visit, 18 and Up Grouping Value Set (2.16.840.1.113883.3.464.1003.101.12.1025)"
- "Encounter, Performed: Preventive Care Services-Initial Office Visit, 18 and Up" using "Preventive Care Services-Initial Office Visit, 18 and Up Grouping Value Set (2.16.840.1.113883.3.464.1003.101.12.1023)"
- "Encounter, Performed: Psych Visit - Diagnostic Evaluation" using "Psych Visit - Diagnostic Evaluation Grouping Value Set (2.16.840.1.113883.3.526.3.1492)"
- "Encounter, Performed: Psych Visit - Psychotherapy" using "Psych Visit - Psychotherapy Grouping Value Set (2.16.840.1.113883.3.526.3.1496)"
- "Medication, Active: Antidepressant Medication" using "Antidepressant Medication Grouping Value Set (2.16.840.1.113883.3.464.1003.196.12.1213)"
- "Medication, Dispensed: Antidepressant Medication" using "Antidepressant Medication Grouping Value Set (2.16.840.1.113883.3.464.1003.196.12.1213)"

## Supplemental Data Elements

- "Patient Characteristic Ethnicity: Ethnicity" using "Ethnicity CDCREC Value Set (2.16.840.1.114222.4.11.837)"
- "Patient Characteristic Payer: Payer" using "Payer SOP Value Set (2.16.840.1.114222.4.11.3591)"
- "Patient Characteristic Race: Race" using "Race CDCREC Value Set (2.16.840.1.114222.4.11.836)"
- "Patient Characteristic Sex: ONC Administrative Sex" using "ONC Administrative Sex AdministrativeGender Value Set (2.16.840.1.113762.1.4.1)"

## Risk Adjustment Variables

- None

| Measure Set | None |
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