There are two measures that assess medication adherence at different points in treatment:

- **Acute Phase**: Members who remained on their antidepressant for at least 84 days (12 weeks)
- **Continuation Phase**: Members who remained on their antidepressant for at least 180 days (6 months)

**WHY IS THE AMM MEASURE IMPORTANT?**
According to NCQA’s “State of Health Care Quality 2013” report, approximately 50% of psychiatric patient and primary care patients prematurely discontinue antidepressant therapy (when assessed at six months after the initiation of treatment):

- Less than half of those impacted by depression receive treatment even though effective treatments are available
- Appropriate dosing and continuation of medication therapy in both the short term and the long term treatment of depression decrease the recurrence of depressive symptoms
- Increasing client compliance with prescribed medications, monitoring treatment effectiveness, and identifying and managing side effects are all best practices when managing care for clients with depression.

**WHO IS INCLUDED IN THE MEASURE?**
Members diagnosed with major depression in an inpatient, outpatient or partial hospitalization setting

*Applies to members aged 18+: Commercial, Medicare or Medicaid LOB are included.*

*Only encounters from the intake period of May 1 2019 – April 30, 2020 are included in the 2020 measurement year*

**WHEN DOES A MEMBER ‘PASS’ THE MEASURE?**

- **Acute Phase**: When they have remained on their antidepressant medication for at least 84 days (12 weeks)
- **Continuation Phase**: When they have remained on their antidepressant medication for at least 180 days (6 months)

**WHICH MEMBERS ARE EXCLUDED?**
Members on hospice are excluded

**WHAT CAN PROVIDERS DO TO IMPROVE AMM RATES?**

- **Schedule** a follow-up appointment no later than four weeks after starting a new prescription
- **Remind** patients about their appointments
- **Assist** clients in setting up a follow-up appointment with a prescriber when patients are transitioning to another level of care
- **Targeted outreach** for clients at risk of noncompliance via phone calls, medication prompts or case management
- **Educate** staff about the importance of adherence to prescription medications, side effects and benefits of antidepressant medication
- **Involve** the client and family in a collaborative discussion of treatment options and promote client participation in decision-making
- **Connect** the client to health coaching programs, peer support and case management
- **Communicate** with other providers to ensure a whole health approach
What are some Codes that Include Members in this Measure?
The following ICD-10 codes for major depression include members in the denominator (when paired with either an acute or non-acute inpatient stay or an outpatient visit):

- F32.0
- F32.1
- F32.2
- F32.3
- F32.4
- F32.9
- F33.0
- F33.1
- F33.2
- F33.3
- F33.41

ACUTE PHASE

12 Weeks (84 days)  

CONTINUATION PHASE*

6 Months (180 days)

WHAT IS HEDIS®?

HEDIS (Healthcare Effectiveness Data Information Set) is a widely used set of performance measures in the managed care industry, developed and maintained by NCQA. HEDIS measures results and drives improvement efforts surrounding best practices.

HEDIS is a registered trademark of the National Committee for Quality Assurance (NCQA).