The National Committee for Quality Assurance (NCQA) has developed Healthcare Effectiveness Data and Information Set (HEDIS) measures as a tool for performance improvement. We collect HEDIS data from our providers to measure and improve the quality of care our members receive. The NCQA recommends tracking the following HEDIS measures for our members.

**HEDIS Measures:**

**AMM:** Antidepressant Medication Management

**SSD:** Diabetes Screening for People with Schizophrenia, Schizoaffective Disorder or Bipolar Disorder Who Are Using Antipsychotic Medications

**How to improve HEDIS scores**

On the following page are measure definitions, documentation requirements and helpful tips you may choose to follow to improve HEDIS scores. Compliance with HEDIS measures reduces the need for you to send additional medical records later for review and also supports Alliance Provider Care-Based Incentive payment outcomes.
Antidepressant Medication Management (AMM)*

Why is the HEDIS AMM measure important?
Major depression is a serious mental illness with a significant burden of symptoms and the most common psychiatric disorder in individuals who die from suicide. Integrating the right antidepressant medication with appropriate behavioral therapy routinely leads to positive benefits and outcomes for members. Compliance with antidepressant medication is an essential component in treatment guidelines for major depression.

AMM Measure Description:
The AMM measure applies to our members with major depression who are 18 years and older. HEDIS requires an adequate course of newly started medication. Providers should document two phases of medication compliance. The start date for each phase is when the prescription was first filled:

- Effective Acute Treatment Phase: 84 days (12 weeks) minimum with gaps in treatment up to a total of 30 days
- Effective Continuation Treatment Phase: 180 days (6 months) minimum with gaps in treatment up to a total of 51 days during the two phases combined

Medical Record Documentation and Best Practices:
- Include all the following in documentation:
  - Date of service
  - Diagnosis of major depression
  - Clear evidence that an antidepressant medication was prescribed
- Help our members understand that most antidepressants take 4 to 6 weeks to work. The severity of the episode and number of reoccurrences determine duration of treatment.
- Encourage members to continue any prescribed medication, even if they feel better. Inform them of the danger of discontinuing suddenly. If they take the medication for less than six months, they are at a higher risk of recurrence.
- Give members written instructions to reinforce teaching about the proper use of medication and what to do if they experience side effects.
- Discuss other factors that may improve symptoms, such as aerobic exercise and counseling or therapy.
- Assess members within 30 days from when the prescription is first filled for any side effects and their response to treatment.
- Coordinate care between behavioral health and primary care physicians by sharing progress notes and updates.
- Reach out to members who cancel appointments and assist them with rescheduling as soon as possible.

*Coding: This measure is in the CBI 2021 program. Refer to the CBI Technical Specifications for coding information.

2 https://www.ncqa.org/hedis/measures/antidepressant-medication-management/; Accessed 1/21/20
3 NCQA HEDIS 2020 Technical specifications for health plans, volume 2, Washington DC, 2020
4 Defined as no antidepressant medication filled in past 105 days
Diabetes Screening for People with Schizophrenia, Schizoaffective Disorder or Bipolar Disorder Who Are Using Antipsychotic Medications (SSD)

Why is the HEDIS SSD measure important?
Individuals with serious mental illness who use antipsychotics are at increased risk of diabetes. Individuals with serious mental illness who use antipsychotics are at increased risk of diabetes. Diabetes is the seventh leading cause of death in the United States. Diabetes screening for members with schizophrenia, schizoaffective disorder or bipolar disorder who take antipsychotic medications is important for early detection and management.

SSD Measure Description: HEDIS requires annual diabetes screening for members 18 to 64 years old with schizophrenia, schizoaffective disorder or bipolar disorder if they receive an antipsychotic medication at any time during the year. Screen with either a glucose or HgbA1c test and document the result.

Medical Record Documentation and Best Practices:
- Encourage shared decision-making by educating members and caregivers about:
  - Increased risk of diabetes with antipsychotic medications
  - Importance of screening for diabetes
  - Symptoms of new-onset diabetes
- Order a diabetes screening test every year and build care gap “alerts” in your electronic medical record
- Communicate and coordinate care between behavioral health and primary care physicians (PCPs) by requesting test results, communicating test results or scheduling an appointment for testing
- Reach out to members who cancel appointments and assist them with rescheduling as soon as possible
- Behavioral health practitioners:
  - Order diabetic screening tests for members who do not have regular contact with their PCP
  - Coordinate care and communicate test results to the member’s PCP

Coding: Refer to the HEDIS Code Set for coding information.

3 NCQA HEDIS 2020 Technical specifications for health plans, volume 2, Washington DC, 2020