

# HEDIS® News You Can Use

Aetna Better Health® of West Virginia



Let's Improve Medication Management Together!

## Follow-up Care for Children Prescribed ADHD Medication (ADD)

### **i** Measure Requirements:

Members 6-12 years of age in the measurement period, newly prescribed ADHD medication and had at least three follow-up care visits within a 10-month period, one of which was within 30 days of when the first ADHD medication was dispensed.

The measurement period for this measure is March 1 of the year prior to measurement year through the last calendar day of February of the measurement year.

### **Two rates are reported:**

- **Initiation Phase** - The percentage of members 6-12 years of age with an ambulatory prescription dispensed for ADHD medication, who had one follow-up visit with a practitioner **with prescribing authority** during the 30-day Initiation Phase
- **Continuation and Maintenance Phase** - The percentage of members 6-12 years of age with an ambulatory prescription dispensed for ADHD medication, who remained on the medication for at least 210 days and who, in addition to the visit in the Initiation Phase, had at least two follow-up visits with a practitioner within 270 days (9 months) after the Initiation Phase ended

## Antidepressant Medication Management (AMM)

### **i** Measure Requirements:

Members 18 years of age and older with a diagnosis of major depression and were treated with antidepressant medication, and that remained on an antidepressant medication treatment. This measure runs between May 1 of the year prior to the measurement year and ends on April 30 of the measurement year.

Antidepressants can be prescribed by a PCP or mental health practitioner.

### **Two rates are reported:**

- **Effective Acute Phase Treatment:** Members who remained on an antidepressant medication for at least 84 days (12 weeks).
- **Effective Continuation Phase Treatment:** Members who remained on an antidepressant medication for at least 180 days (6 months).





## Medication Criteria:

### Antidepressant Medication Management (AMM)

**Miscellaneous antidepressants:** Bupropion, Vilazodone, Vortioxetine

Monoamine oxidase inhibitors: Isocarboxazid, Phenelzine, Selegiline, Tranylcypromine

**Phenylpiperazine antidepressants:** Nefazodone, Trazadone

Psychotherapeutic combinations: Amitriptyline-chlordiazepoxide, Amitriptyline-perphenazine, Fluoxetine-olanzapine

**SNRI antidepressants:** Desvenlafaxine, Duloxetine, Levomilnacipran, Venlafaxine

**SSRI antidepressants:** Citalopram, Escitalopram, Fluoxetine, Fluvoxamine, Paroxetine, Sertraline

**Tetracyclic antidepressants:** Maprotiline, Mirtazapine

**Tricyclic antidepressants:** Amitriptyline, Amoxapine, Clomipramine, Desipramine, Doxepine (>6 mg), Imipramine, Nortriptyline, Protriptyline, Trimipramine



## Coding Information:

Refer to the Provider Toolkit for coding information.

<https://www.aetnabetterhealth.com/westvirginia/providers/hedis/hedis-toolkit>



## Common Gaps in Care:

- Parents/Guardians not allowing enough time to adjust to side effects which leads to members stopping medications
- No show for follow-up appointments
- Medications are not taken as directed
- Initial diagnoses changed from depression to anxiety which still leaves the member in the measure
- Members not understanding diagnosis
- Abuse of prescription



## Great Resources:

<https://www.cdc.gov/ncbddd/adhd/research.html>

<https://www.cdc.gov/ncbddd/adhd/treatment.html>



## Patients trust you:

Patients consider you their most trusted source of information when it comes to their health. When talking to patients, encourage and allow time for questions.



## Here for you!

**Thank you for the care you provide to our members!**

For questions or for more information, please contact

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## Best Practices

- No refills until the initial follow-up visit is complete.
- Conduct initial follow-up visit 2-3 weeks after member starts medication therapy.
- Member needs 2 additional visits within 9 months of starting medication, schedule these appointments at initial visit.
- If member cancels, reschedule appointment right away.
- Educate members/parents regarding time it takes to reach therapeutic levels.
- Educate members regarding side effects, expected time for side effects to resolve and importance of staying on medication.
- Be aware that outpatient visits/ encounters, inpatient stays/ encounters, observation/ED visits, intensive outpatient encounters, partial hospitalizations, community mental health center visits, telehealth visits, e-visits and virtual check-ins where the Major Depression diagnosis occurred do apply to the eligible population for this measure.