The biggest barrier to successful treatment of depression is medication non-adherence. Patients who receive extra support from their provider, such as counseling or written materials, are typically more compliant.

**What is the quality measure?**

Antidepressant Medication Management focuses on patients 18 and older who have been diagnosed with major depression and are starting treatment with antidepressant medications for a minimum of 180 days.

**Diagnosing Major Depressive Disorder**

Major depression is often misdiagnosed and medications overprescribed. The American Psychiatric Association advises that physicians use a diagnosis of major depression only if their patient has experienced at least five of the nine symptoms listed below for two weeks or more, almost every day, or if their symptoms are a change from their prior level of functioning.

- Depressed or irritable mood
- A significantly reduced level of interest or pleasure in most or all activities
- A considerable loss or gain of weight when not dieting or an increase or decrease in appetite
- Difficulty falling or staying asleep or sleeping more than usual
- Agitated or slowed behavior that others can observe
- Fatigue or diminished energy
- Thought of worthlessness or extreme guilt
- Reduced ability to think, concentrate, or make decisions
- Frequent thoughts of death or suicide attempt

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Quality Care Begins with You
Let’s make a difference together.

**SAMPLE DIAGNOSIS:**

Major Depressive Disorder

**AMM STAND-ALONE VISIT:**

90804-90815, 98960-98962, 99078, 99201-99205, 99211-99215, 99217-99220, 99241-9999245, 99341-99345, 99347-99350, 99384-99387, 99394-99397, 99401-99404, 99411-99415, 99510

**AMM VISIT - MUST BE FILED IN CONJUNCTION WITH AMM POS:**

90801-90802, 90816-90819, 90821-90824, 90826-90829, 90832-90834, 9083690840, 90845, 90847, 90849, 90853, 90857, 90862, 90867-90870, 90875-90876, 99221-99223, 99238-99239, 99251-99255

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If your patients are not experiencing at least five of the nine symptoms listed, consider using alternative diagnoses for your patient’s depression such as seasonal affective disorder, bipolar disorder, situational depression, or atypical depression.

**What can you do improve this quality measure?**

1. Use a diagnosis of major depression only if your patient has experienced at least five of the nine symptoms of major depression listed above. Otherwise, consider using alternative diagnoses for your patient’s depression.

2. Talk to your patients about their medications and address common questions, such as
   - “When will it start working?”
   - “What will it feel like?”
   - “How long will I need to be on the medication?”
   - “What are the possible side effects, and what should I do if I experience them?”

3. Discuss the importance of continuing medication even after the patient starts feeling better, and provide close follow-up for the first six months to ensure medication compliance.

4. If you feel your patient would benefit from further consultation with a trained counselor, make a referral so they can get the help they need.