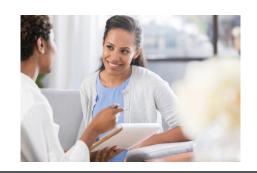


Antidepressant Medication Screening & Management

We appreciate you taking an active role in screening your patients for depression



The American Psychiatric Association recommends patients complete the Patient Health Questionnaire (PHQ-9) screening tool

Use a screening tool

- The PHQ-9 can aid in identifying the severity of depressive symptoms, especially before prescribing medication
- The PHQ-9 instruction manual recommends consideration of medication only for those patients who score in the moderate to severe range (scores above 15)

See page 2 for a PHQ-9 scoring guide

Resources

- More tools and information about behavioral health issues are available on providerexpress.com > Clinical Resources > Behavioral Health Toolkit for Medical **Providers**
- Patient education information is available on liveandworkwell.com > use access code "clinician"

Refer to a Mental Health Professional

You can request coordination of care and referrals for patients by calling the number on the back of the patient's health plan ID card or searching liveandworkwell.com > use access code "clinician"

Prior to prescribing an antidepressant for patients assessed to have Mild to **Moderate Depression:**

- Refer to supportive counseling as first treatment recommendation
- Encourage the use of self-help apps for depression. Apps are useful for symptom tracking, sleep and meditation, self-guided therapy, or other supports.

For patients assessed to have **Moderate to Severe Depression:**

- Consider prescribing an antidepressant
- Encourage follow-up visits to discuss medication side effects, response to treatment, and adherence. Consider telephonic check in with patients between in person visits.
- Review tips to increase medication adherence with patients. Help patients move past stigma and see treatment for mental health and physical health equally.
- · Discuss barriers and identify solutions at the time of the prescription
- · Encourage use of mail-order prescription fill. Remind your patients to sign up for refill reminders through their pharmacy, or utilize self-help apps for pill and refill reminders

Sources: Kroenke, K., Spitzer, R.L., & Williams, J.B. (2001). The PHQ-9: validity of a brief depression severity measure. Journal of General Internal Medicine. 16(9):606-13. doi: 10.1046/j.1525-1497.2001.016009606.x.

American Psychiatric Association (2022). https://www.psychiatry.org/psychiatrists/practice/dsm/educational-resources/assessment-

measures

High-Level Stratification and Interventions for Depression

PHQ-9 Score: 5-9 Mild PHQ-9 Score: 10-14 Moderate PHQ-9 Score: 15-19 Moderately Severe PHQ-9 Score: 20-27 Severe

WATCHFUL WAITING

MONITOR

ACTIVE TREATMENT

IMMEDIATE TREATMENT

Repeat PHQ-9 Assessment at follow-up visit

Encourage use of self-help apps for depression

Assess for differential diagnosis

Click here to access the member website to search for behavioral health providers (Use access code "Clinician")

Repeat PHQ-9 Assessment at follow-up visit

Refer to behavioral health therapy and Optum Case Management for additional support

Provide educational information around depression

Provide community resource referrals as needed

Repeat PHQ-9 Assessment at least monthly

Assess for pharmacotherapy

Refer to behavioral health therapy and Optum Case Management for additional support

Coordinate with behavioral health treatment provider

Work with patient on using self-management tools

Provide community resource referrals as needed

Repeat PHQ-9 Assessment at least monthly

Initiate pharmacotherapy

Expedite a referral to behavioral health for individual, family or group therapy

Coordinate with behavioral health treatment provider

Monitor for medication adherence*

Provide community resource referrals as needed

Effectively coordinating care between treatment professionals can lead to improved health outcomes. Please be sure to have the member sign a release of information form.

You may use your own form or <u>click here</u> to access the Optum Confidential Exchange of Information form.

It is recommended that patients remain on antidepressant medication for at least 180 days (6 months) National Committee for Quality Assurance 2023 HEDIS Specifications see NQF-Endorsed Measures at www.ncga.org