

Clinical Guidelines and Related Provider Requirements: Treatment of Adults with Major Depressive Disorder

Community Behavioral Health (CBH) has adopted Clinical Practice Guidelines (CPGs) to outline best practices for the treatment of specific disorders or certain populations. These guidelines will be used by CBH to assess the quality of care provided to CBH members. As such, providers are advised to review and, where appropriate, implement these best practices in their care. CPGs apply to all clinical settings where care is delivered to members. CPGs should be used in conjunction with any LOC-specific performance standards, as well as all other required CBH, state, and federal regulations and standards.

CBH has updated the existing guidelines for the treatment of adults with Major Depressive Disorder. The most recent version of all CPGs can be found on the [CBH Clinical Practice Guidelines webpage](#).

To ensure alignment and best practices, CBH recommends that providers review the CPGs and make any necessary updates or revisions to provider policies and procedures.

Significant changes to the MDD CPG include:

- ➔ Updated references and links throughout
- ➔ Added CBH guidance for Spravato[®] implementation and other considerations for treatment resistant depression (Section 3.8)
- ➔ Expanded language surrounding coordination of care, aftercare, and discharge planning (Section 3.10-3.11)
- ➔ Included additional screening considerations for Suicide Risk Assessments (Section 3.2)
- ➔ Enhanced considerations for Social Determinants of Health (Section 3.5)
 - » Emphasized LGBTQ+ youth risk of depression
 - » Expanded provider roles in assessing and addressing SDOHs, including efforts to reduce barriers to engagement
 - » Included social connectedness as a non-pharmacologic treatment

Adherence to the CPGs will be assessed through CBH monitoring and oversight, including Quality, Clinical, and Compliance Department protocols. To assess quality of care and align with state and

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regulatory requirements, CBH will also be utilizing several specific metrics for the CPG, which are detailed in the table below.

Clinical Guidelines	Quality Metrics
<u>Clinical Practice Guidelines for the Treatment of Adults with Major Depressive Disorder</u>	<ul style="list-style-type: none">➤ HEDIS Antidepressant Medication Management is used to assess the percentage of members 18 years of age and older who were effectively treated with antidepressant medication during the acute and continuation phases.<ul style="list-style-type: none">» Effective acute phase treatment is defined as percentage of members 18 years of age and older who had a diagnosis of MDD and who were treated with and remained on an antidepressant medication for at least 84 days (12 weeks).» Effective continuation phase treatment is defined as percentage of members 18 years of age and older who had a diagnosis of MDD and who were treated with and remained on an antidepressant medication for at least 180 days (6 months).➤ The HEDIS FUH Measure for Follow-up After Hospitalization for Mental Illness has been adapted to capture follow-up after hospitalization due to severe symptoms of MDD including suicidal ideation or attempted suicide. The FUH measure is 2-part and includes:<ul style="list-style-type: none">» 7-day follow-up: An outpatient visit, intensive outpatient visit, or partial hospitalization with a mental health practitioner, within seven days of discharge» 30-day follow-up: An outpatient visit, intensive outpatient visit, or partial hospitalization with a mental health practitioner, within thirty days of discharge

These requirements take effect October 4, 2025. Please direct questions regarding *Clinical Practice Guidelines for the Treatment of Adults with Major Depressive Disorder* to michelle.reece@phila.gov.