What is Behavioral Health Integration?

Illustration: A family tree of related terms used in behavioral health and primary care integration
See glossary for details and additional definitions

Integrated Care
Tightly integrated, on-site teamwork with unified care plan as a standard approach to care for designated populations. Connotes organizational integration involving social & other services. “Altitudes” of integration: 1) Integrated treatments, 2) integrated program structure; 3) integrated system of programs, and 4) integrated payments. (Based on SAMHSA)

Coordinated Care
The organization of patient care activities between two or more participants (including the patient) involved in care, to facilitate appropriate delivery of healthcare services. Organizing care involves the marshalling of personnel and other resources needed to carry out required care activities, and often managed by the exchange of information among participants responsible for different aspects of care” (AHRQ, 2007).

Shared Care
Predominately Canadian usage—PC & MH professionals (typically psychiatrists) working together in shared system and record, maintaining 1 treatment plan addressing all patient health needs. (Kates et al, 1996; Kelly et al, 2011)

Co-located Care
BH and PC providers (i.e. physicians, NP’s) delivering care in same practice. This denotes shared space to one extent or another, not a specific service or kind of collaboration. (adapted from Blount, 2003)

Collaborative Care
A general term for ongoing working relationships between clinicians, rather than a specific product or service (Doherty, McDaniel & Baird, 1996). Providers combine perspectives and skills to understand and identify problems and treatments, continually revising as needed to hit goals, e.g. in collaborative care of depression (Unützer et al, 2002)

Integrated Primary Care or Primary Care Behavioral Health
Combines medical & BH services for problems patients bring to primary care, including stress-linked physical symptoms, health behaviors, MH or SA disorders. For any problem, they have come to the right place—“no wrong door” (Blount). BH professional used as a consultant to PC colleagues (Sabin & Borus, 2009; Haas & deGruy, 2004; Robinson & Reiter, 2007; Hunter et al, 2009).

Patient-Centered Medical Home
An approach to comprehensive primary care for children, youth and adults—a setting that facilitates partnerships between patients and their personal physicians, and when appropriate, the patient’s family. Emphasizes care of populations, team care, whole person care—including behavioral health, care coordination, information tools and business models needed to sustain the work. The goal is health, patient experience, and reduced cost. (Joint Principles of PCMH, 2007)

Behavioral Health Care
An umbrella term for care that addresses any behavioral problems bearing on health, including MH and SA conditions, stress-linked physical symptoms, patient activation and health behaviors. The job of all kinds of care settings, and done by clinicians and health coaches of various disciplines or training.

Mental Health Care
Care to help people with mental illnesses (or at risk)—to suffer less emotional pain and disability—and live healthier, longer, more productive lives. Done by a variety of caregivers in diverse public and private settings such as specialty MH, general medical, human services, and voluntary support networks. (Adapted from SAMHSA)

Primary care is the provision of integrated, accessible health care services by clinicians who are accountable for addressing a large majority of personal health care needs, developing a sustained partnership with patients, and practicing in the context of family and community. (Institute of Medicine, 1994)

Patient-Centered Care
“The experience (to the extent the informed, individual patient desires it) of transparency, individualization, recognition, respect, dignity, and choice in all matters, without exception, related to one’s person, circumstances, and relationships in health care”—or “nothing about me without me” (Berwick, 2011).

Substance Abuse Care
Services, treatments, and supports to help people with addictions and substance abuse problems suffer less emotional pain, family and vocational disturbance, physical risks—and live healthier, longer, more productive lives. Done in specialty SA, general medical, human services, voluntary support networks, e.g. 12-step programs and peer counselors. (Adapted from SAMHSA)

Thanks to Benjamin Miller and Jörgen Unützer for advice on organizing this illustration.
The Primary Care Behavioral Health (PCBH) Model

At the simplest level, integrated behavioral and physical health care occurs when behavioral and primary care providers work together to address the physical and behavioral health needs of their patients.
# A Standard Framework For Describing Integrated Health Services

<table>
<thead>
<tr>
<th>Referral</th>
<th>Co-Located</th>
<th>Integrated</th>
</tr>
</thead>
<tbody>
<tr>
<td><strong>Key Element:</strong> Communication</td>
<td><strong>Key Element:</strong> Physical Proximity</td>
<td><strong>Key Element:</strong> Practice Change</td>
</tr>
<tr>
<td><strong>Level 1</strong> Minimal Collaboration</td>
<td><strong>Level 2</strong> Basic Collaboration at a Distance</td>
<td><strong>Level 3</strong> Basic Collaboration On-Site</td>
</tr>
<tr>
<td><strong>Level 4</strong> Close Collaboration On-Site with Some System Integration</td>
<td><strong>Level 5</strong> Close Collaboration Approaching an Integrated Practice</td>
<td><strong>Level 6</strong> Full Collaboration in a Transformed/Merged Integrated Practice</td>
</tr>
</tbody>
</table>

Behavioral health, primary care and other healthcare providers work:

- In separate facilities
- In separate facilities
- In same facility not necessarily same offices
- In same space within the same facility
- In same space within the same facility (some shared space)
- In same space within the same facility, sharing all practice space
Integrating Behavioral Health and Primary Care: Behavioral Health Consultation

The Nuts and Bolts of Integrating Behavioral Health and Primary Care
PCBH and Role of Primary Care Provider

- Serves as team leader
- Screens for depression, anxiety, and trauma
- Refers a broad range of patients to behavioral health
- Uses behavioral health consistently at certain types of visits (chronic pain, initial dx of diabetes, well child visits, etc.)
- Conducts medication evaluation, prescribing, and monitoring
PCBH and Role of Behavioral Health

- Work alongside primary care providers as Behavioral Health Consultants (BHCs)
- Immediately accessible for both curbside and in-exam room consults, same-day visits (15 – 30 minute consults between 7 – 10/day)
- Shared records: chart in the medical record using a Subjective, Objective, Assessment, and Plan (SOAP) note format
- Reimbursement by encounter – not by time
- No office, No caseload, No “no shows”

Clinical Approach of Behavioral Health Consultant

- Problem-focused and functional-contextual approach to assessment and treatment of behavioral health disorders
- Use evidence-based instruments to develop treatment plans, monitor patient progress, and flexibly provide care to meet patient’s changing needs:
  1. Motivational Interviewing
  2. Behavioral Activation
  3. Acceptance and Commitment Therapy
  4. Screening, Brief Intervention, and Referral to Treatment (SBIRT)

Role of the Behavioral Health Consultant

Address a variety of issues common to primary care:

- Affective concerns: depression; anxiety
- Response to physical illness; pain; substance use and abuse
- Health behavior change: obesity, smoking, sleep, medication adherence, self management of chronic conditions
- Engage in prevention activities

PCBH – Collaborative Approach

- PCPs systematically screen and do “warm hand-offs” according to patient needs
- PCPs and BHCs regularly review each other’s notes in the Electronic Medical Record
- Regularly consult about patient care and change or adjust treatments if patients do not meet treatment targets
- Co-monitor treatment response at each contact with valid outcome measures
- Patients who are not improving are identified and targeted for move to a higher level of care
Case Example

Ms. T is a 73 year old African American woman. She is a retired teacher with chronic back pain, hypertension, and a history of multiple hospitalizations for coronary artery disease. She is depressed, has stopped going to church, misses her PCP appointments, and takes her HBP medications “on her own terms.”
To work in integrated care settings...

- Basic understanding of primary care medical conditions
- Screening, rapid assessment and brief intervention
- Motivational interviewing, behavioral activation, self management
- Systems oriented practice including care planning and care coordination
- Primary care communication skills and interdisciplinary care
- Working knowledge of psychopharmacology
- Substance use/addiction treatment

(Source: Forthcoming/Annapolis Coalition on Behavioral Health Workforce White Paper, “Core Competencies for Integrated Behavioral Health and Primary Care”)
Questions
Resources

- SAMHSA/HRSA Center for Integrated Health Solutions (CIHS)
  *Field-based & Research-based Materials*

- Council on Social Work Education (CSWE)
  *Free Integrated Health Social Work Curriculums*

- Integrated Care Resource Center (ICRC)
  *Medicaid State Level Tech. Asst. for Integrated Health*

- AHRQ Academy for Integrating Behavioral Health & Primary Care
  *Great Research-based Resources*

- Dear State Medicaid Letters/Centers for Medicaid & Medicare Services (CMS)

- Variety of IH Directives including: Health Home Core Quality Measures
Resources

Clinical Social Work & Behavioral Medicine Certificate Program

University of Michigan
Certificate in Integrated Health
http://ssw.umich.edu/offices/continuing-education/certificate-courses/integrated-behavioral-health-and-primary-care

University of Massachusetts
Two Certificate Programs in Integrated Health
http://www.umassmed.edu/cipc/

Fairleigh Dickinson University
Certificate in Integrated Primary Care
http://integratedcare.fdu.edu/

Arizona State University Doctor of Behavioral Health
http://asuonline.asu.edu/dbh