



SAMHSA-HRSA Center for Integrated Health Solutions

The webinar will begin shortly.



SAMHSA-HRSA Center for Integrated Health Solutions

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<http://www.integration.samhsa.gov/about-us/webinars>



SAMHSA-HRSA Center for Integrated Health Solutions

Medical Monitoring in the CMHC: The Role of the Psychiatric Medical Team

June 30, 2015

**This webinar is a partnership between
the Center for Integrated Health
Solutions and the American
Psychiatric Association.**

Welcome APA Members!

Before We Begin

- You may submit questions to the speakers at any time during the presentation by typing a question into the “Ask a Question” box in the lower left portion of your player.
- If you need technical assistance, please click on the Question Mark button in the upper right corner of your player to see a list of **Frequently Asked Questions** and contact info for tech support if needed.
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Toll: 402-875-9835



SAMHSA-HRSA
Center for Integrated Health Solutions

NATIONAL COUNCIL
FOR BEHAVIORAL HEALTH
MENTAL HEALTH FIRST AID
Healthy Minds. Strong Communities.

Substance Abuse and Mental Health Services Administration
SAMHSA
www.samhsa.gov 1-877-SAMHSA-7 (1-877-726-4727)

Today's Purpose

- Become aware of the problem of chronic conditions among individuals with mental health and substance use conditions;
- Understand how psychiatric providers monitor medical conditions at the clinical level, including the types of tests clinicians conduct; and
- Identify organizational factors to support medical monitoring by psychiatric providers.

Poll Question: In your CMHC or primary and behavioral health integrated practice, do you have a structure in place to obtain vital signs *BEFORE* a client is seen by the psychiatric provider?

- Yes
- Yes, but it doesn't always happen
- No
- I don't know
- I'm not affiliated with a provider



Today's Speakers

Benjamin G. Druss, MD, MPH

Professor and Rosalynn Carter Chair in Mental Health,
Director, Center for Behavioral Health Policy Studies,
Rollins School of Public Health, Emory University

Lori Raney, MD

Chair, American Psychiatric Association Workgroup on
Integrated Care

Bob Krumwied, MHA

President/CEO, Regional Mental Health Center,
Indiana

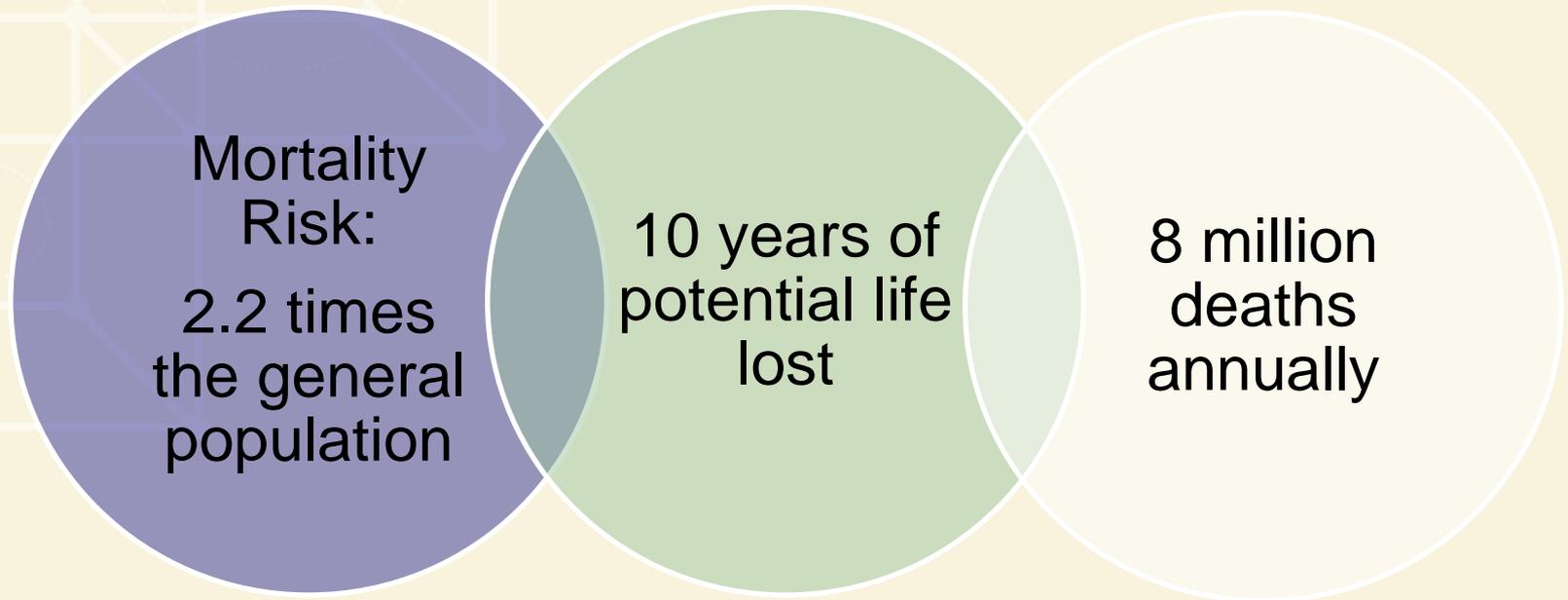


SAMHSA-HRSA Center for Integrated Health Solutions

Improving Health and Healthcare for Patients with SMI: Emerging Roles for Psychiatry

Benjamin G. Druss, MD, MHP
Emory University

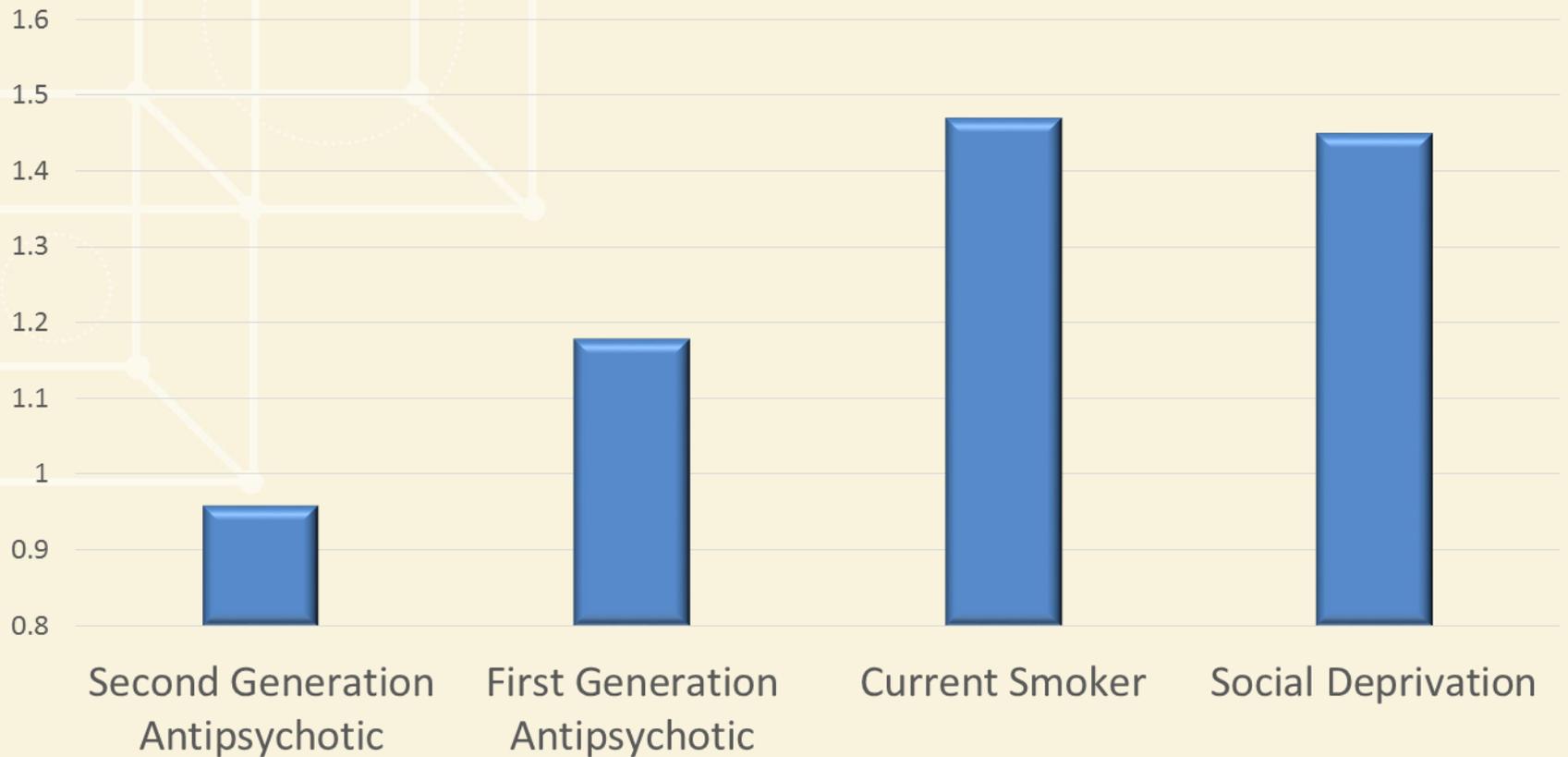
Mental Illness and Mortality



Walker, E.R., McGee, R.E., Druss, B.G. *JAMA Psychiatry*. Epub, doi:10.1001/jamapsychiatry.2014.2502

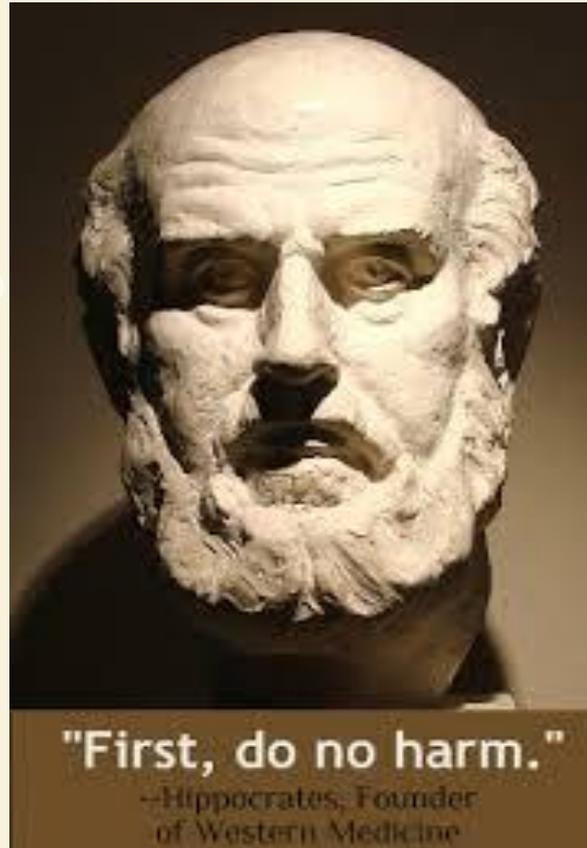
Predicting Cardiovascular Risk in SMI

Risk of CV Event



Osborn et al, JAMA Psych, 2015 72(2): 143-51.

Minimizing Adverse Medication Effects



Journal of Clinical Psychiatry, 2013, 74(11):1108-1120

Screening for Common Problems



New NQF Standards

1927	<p>Cardiovascular Health Screening for People With Schizophrenia or Bipolar Disorder Who Are Prescribed Antipsychotic Medications</p> <ul style="list-style-type: none"> ■ Download Specification (ZIP) 	National Committee for Quality Assurance	Endorsed
1932	<p>Diabetes Screening for People With Schizophrenia or Bipolar Disorder Who Are Using Antipsychotic Medications (SSD)</p> <ul style="list-style-type: none"> ■ Download Specification (ZIP) 	National Committee for Quality Assurance	Endorsed
1933	<p>Cardiovascular Monitoring for People With Cardiovascular Disease and Schizophrenia (SMC)</p> <ul style="list-style-type: none"> ■ Download Specification (ZIP) 	National Committee for Quality Assurance	Endorsed
1934	<p>Diabetes Monitoring for People With Diabetes and Schizophrenia (SMD)</p> <ul style="list-style-type: none"> ■ Download Specification (ZIP) 	National Committee for Quality Assurance	Endorsed

<http://www.qualityforum.org/ProjectMeasures.aspx?projectId=69293>

Counseling for Lifestyle Issues: Action Planning

- Something YOU want to do
- Reasonable
- Behavior-specific
- Answer the questions:
 - What?
 - How much?
 - When?
 - How often?
- Confidence level of 7 or more

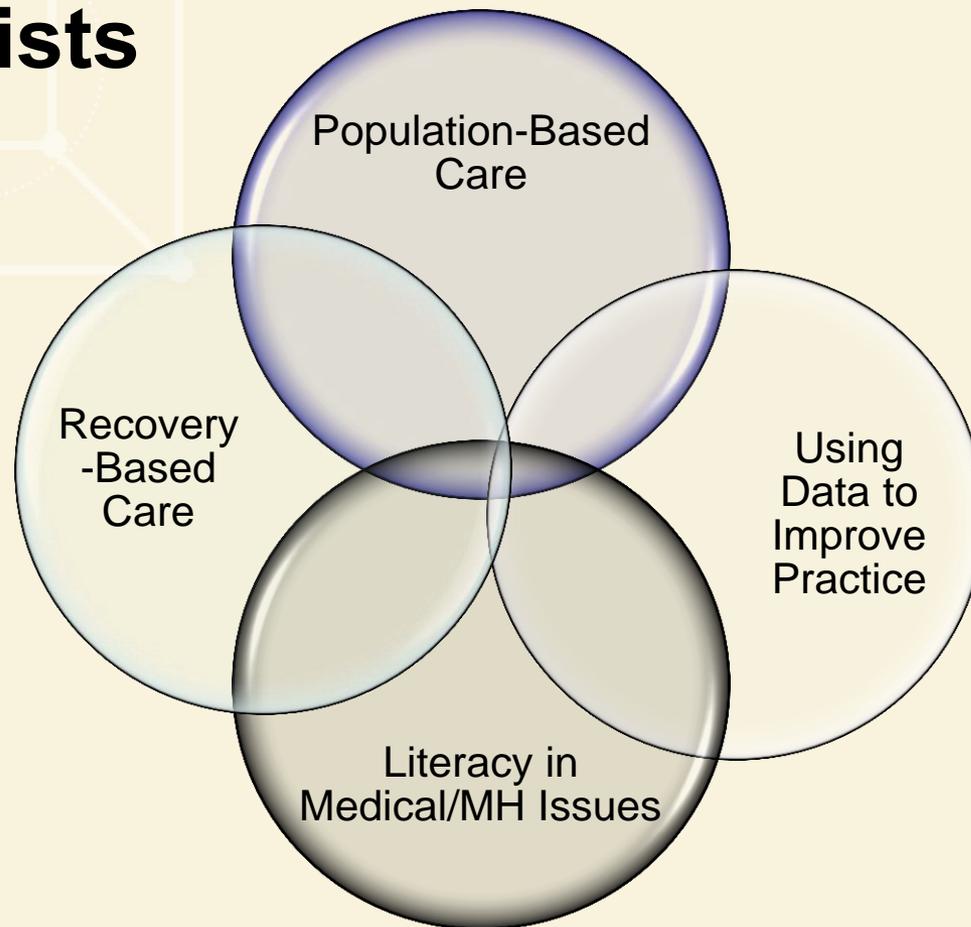
Treating Common Conditions



Leadership



Future Competencies for Public Sector Psychiatrists





SAMHSA-HRSA Center for Integrated Health Solutions

Developing a Metabolic Monitoring Process

Lori Raney, MD

Chair, APA Workgroup on Integrated Care

Collaborative Care Consulting

Medical Staff Standards of Care

1. All patients all visits: BMI, Blood Pressure, ROS – Review of Systems
2. Patients on SGAs - Second Generation Antipsychotics, Lithium, Depakote, Tegretol: Baseline and Annual Labs
3. All patients with SMI: Annual Physical Exam
4. Nicotine Cessation – Nicotine Replacement Therapy available on site

Finding Patients

- Routine screening (Who?, Where? SGAs or all?)
- Self referral
- Psychiatric provider monitoring and referral in community mental health centers

	Baseline	4 wks	8 wks	12 wks	Annually
Review Personal / Family history of illness	X				X
Weight [BMI]	X	X	X	X	X
Waist Circumference	X			X	X
Blood Pressure	X			X	X
Fasting Plasma Glucose	X			X	X
Fasting Lipid Profile	X			X	X

American Association of Clinical Endocrinologists, North American Association for the Study of Obesity: Consensus development conference on antipsychotic drugs and obesity and diabetes. Diabetes Care 2004; 27:596–601

Tracking System: Form Development

Copy of Metabolic Screening [Compatibility Mode] - Microsoft Excel

A22							
fx Tobacco Status							
A	B	C	D	E	F	G	H
9							
10		Baseline					
11	Date	/ /	/ /	/ /	/ /	/ /	/ /
12	Medication						
13	Blood Pressure	/	/	/	/	/	/
14	Vitals Weight or BMI						
15	Height						
16							
17	Labwork Total Cholesterol						
18	LDL						
19	HDL						
20	Triglycerides						
21	Fasting Glucose						
22	Tobacco Status						
23	Consultation with PCP	Y / N	Y / N	Y / N	Y / N	Y / N	Y / N
24							

Tracking - The “Purple Sheet”

Metabolic Screening Sheet NKA

Name: [Redacted]		Seroquel (Quetiapine)		Invega (Paliperidone)	
DOB: [Redacted]		Clozaril (Clozapine)		Abilify (Aripiprazole) ✓	
Provider: Dr. Kanou		Zyprexa (Olanzapine)		Geodon (Ziprasidone)	
Seen at Integrated site: CIHC LPH		Haldol (Haloperidol)		Saphris (Asenapine)	
DIAGNOSIS: Bipolar I D		Haldol Injectable		Risperdal (Risperidone)	
		Invega Sustenna Injectable		Abilify Maintena Injectable ✓	
		Lithium (Lithobid/Eskalith) ✓		Depakote (Valproic Acid)	
		Fanapt (Iloperidone)		Other	

	Baseline	Annual	Annual	Annual	Annual	Annual	Annual
DATE:	1/14/15	/ /	/ /	/ /	/ /	/ /	/ /
Blood Pressure:	111 / 75	/	/	/	/	/	/
Weight / BMI:	192.4	/	/	/	/	/	/
Height:	68"						

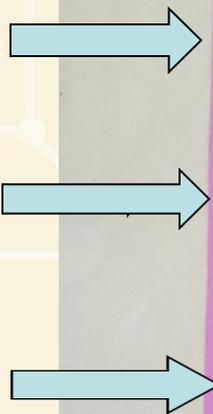
	4/1/14	3/5/15	/ /	/ /	/ /	/ /	/ /
DATE OF LAB:							
A1c/Fasting Glucose	5.4 /	154 (H)					
Total Cholesterol	116	215 (H)					
LDL	25.4	upward to 215 (H)					
HDL	32	24 (L)					
Triglycerides	288 (H)	451 (H)					
WBC	8.7 (9.2-14)						
Lithium Panel	5.90 (4.2-4.4)						
Valproic Acid Panel							
Total Neutrophil #	10.5						

Last PCP Appt: 1/20/15 TSH: 0.11 (L)

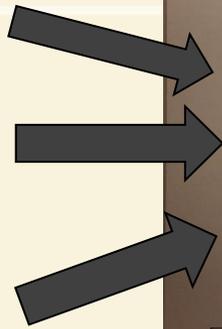
TOBACCO STATUS:

Current Tobacco user	(Y) N	Method to Quit:		NRT Dispensed:	
	PPD				

History	Cardiovascular Disease	Y / N
	Diabetes	Y / N
	Hypercholesterolemia	Y / N
	Metabolic Syndrome (Obesity)	Y / N



**LAB
 PANELS**



AXISHealth System
 Making a meaningful difference

DURANGO
 281 Sawyer Drive / Durango, CO 81303
 970.259-2162

CORTEZ
 691 East Empire / Cortez, CO 81321
 970.565-7946

PAGOSA SPRINGS
 475 Lewis St., Suite #104
 P.O. Box 1347 / Pagosa Springs, CO 81147
 970.264-2104

AXIS HEALTH SYSTEM
Lab Request Form

Date: ____/____/____
 Patient Name: _____
 Diagnosis: v58.69

<input type="checkbox"/> Carbamazepine labs CBC CMP Carbamazepine level 12 hr trough	<input type="checkbox"/> Lithium labs TSH BMP Lithium level 12 hr trough	<input type="checkbox"/> Second Generation Antipsychotic Labs HbA1c Lipid Panel	<input type="checkbox"/> Valproic Acid Labs CBC CMP VPA level 12 hr trough
---	---	---	---

Other _____

<input type="checkbox"/> Direct Access Testing	<input type="checkbox"/> Basic Metabolic Panel
<input type="checkbox"/> Carbamazepine Level 12 hr trough	<input type="checkbox"/> CBC
<input type="checkbox"/> CBC \bar{c} diff weekly	<input type="checkbox"/> CBC \bar{c} diff biweekly
<input type="checkbox"/> Comprehensive Metabolic Panel	<input type="checkbox"/> Fasting Blood Sugar
<input type="checkbox"/> Free T3/T4	<input type="checkbox"/> GGTP
<input type="checkbox"/> HbA1c	<input type="checkbox"/> Hepatic Function Panel
<input type="checkbox"/> Lipid Panel	<input type="checkbox"/> Lipid Panel 12 hr trough
<input type="checkbox"/> Lithium Level 12 hr trough	<input type="checkbox"/> Prolactin
<input type="checkbox"/> TSH	<input type="checkbox"/> Valproic Acid Level 12 hr

Holly Vause NPI1831398403	Susan Grayson NPI1003925934	Patti Snodgrass NPI1033295894	John Schaeffer NPI1497743918	Steve Kitson NPI1255518957	Lori Raney NPI1639114515	Sherry Ketter NPI1477892321
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Please fax results to:

Cortez (970) 565-9005	Durango (970) 247-5255	Pagosa (970) 264-2108
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Just Click Printing • Form 14-1119

ADA/APA Guideline Revised for Non-fasting Labs

Monitoring Protocol For Patients on Atypical Antipsychotics							
Assessment Parameter	Cut-offs	Baseline	4 wks	8 wks	12 wks	Quarterly	Annually
Medical and Family History, Including CVD	n/a	x					
Weight, BMI (kg/m ²)	>7% gain over baseline or >25 kg/m ²	x	x	x	x	x	
Waist Circumference	Men: 40 in., Women: 35 in.	x					x
Hemoglobin A1c	Pre-DM: >5.7%, DM: >6.5%	x			x		x
Random Plasma Glucose	Pre-DM: > 140 mg/dL, DM: > 200 mg/dL	x			x		x
Blood Pressure	>140/90 mmHg	x			x		x
Non-Fasting TC and HDL	Non-HDL: >220mg/dL; or 10-yr risk > 7.5%	x			x		X

Nonfasting Screening for Cardiovascular Risk Among Individuals Taking Second Generation Antipsychotics. Vanderlip et al. Psychiatric Services, Vol. 65 No. 5. 573 - 576

Review of Systems (ROS)

RECEIVED 01/04/2015 14:55 9708827576 Lori Raney, M.D.

Health Review

We ask everyone to fill out this form at each visit. Please do your best to answer all the questions. If you do not understand a question, our staff can explain it. Everything is CONFIDENTIAL and part of your medical record.

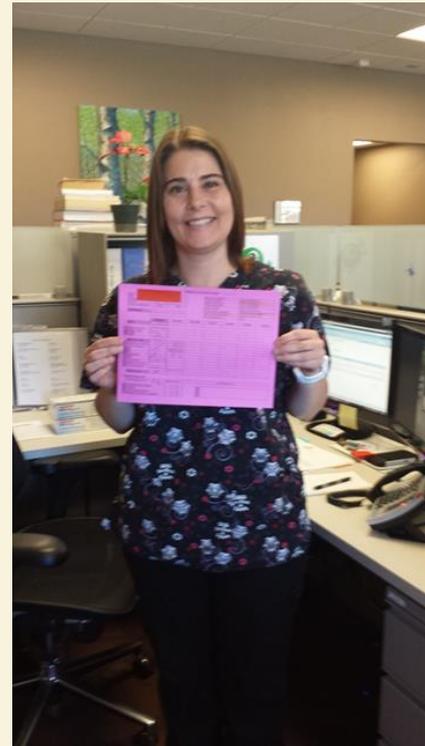
Name: _____ Date of Visit: _____
 Date of Birth: _____

Have you had...		Have you had...			
	YES	NO	YES	YES	NO
CONSTITUTIONAL			EYES		
Any recent weight change	<input type="checkbox"/>	<input type="checkbox"/>	Vision change in past 6 months	<input type="checkbox"/>	<input type="checkbox"/>
Persistent fever	<input type="checkbox"/>	<input type="checkbox"/>	Wear glasses/ contact lenses	<input type="checkbox"/>	<input type="checkbox"/>
Fatigue more than 6 months	<input type="checkbox"/>	<input type="checkbox"/>	EARS/ NOSE/ THROAT		
RESPIRATORY			Change in hearing in 6 months	<input type="checkbox"/>	<input type="checkbox"/>
Chronic/ frequent cough	<input type="checkbox"/>	<input type="checkbox"/>	Nose bleeds	<input type="checkbox"/>	<input type="checkbox"/>
Shortness of breath	<input type="checkbox"/>	<input type="checkbox"/>	Recurrent sore throat	<input type="checkbox"/>	<input type="checkbox"/>
Wheezing	<input type="checkbox"/>	<input type="checkbox"/>	Voice change	<input type="checkbox"/>	<input type="checkbox"/>
Snoring	<input type="checkbox"/>	<input type="checkbox"/>	Dental problems	<input type="checkbox"/>	<input type="checkbox"/>
CARDIOVASCULAR			GASTROINTESTINAL		
Chest pain	<input type="checkbox"/>	<input type="checkbox"/>	Loss of appetite	<input type="checkbox"/>	<input type="checkbox"/>
Palpitations/irregular heart beat	<input type="checkbox"/>	<input type="checkbox"/>	Abdominal pain	<input type="checkbox"/>	<input type="checkbox"/>
Cannot climb 2 flights of stairs	<input type="checkbox"/>	<input type="checkbox"/>	Nausea/vomiting	<input type="checkbox"/>	<input type="checkbox"/>
MUSCULOSKELETAL			Change in bowel habits	<input type="checkbox"/>	<input type="checkbox"/>
Painful/swollen joints	<input type="checkbox"/>	<input type="checkbox"/>	Blood in stool	<input type="checkbox"/>	<input type="checkbox"/>
Back pain	<input type="checkbox"/>	<input type="checkbox"/>	GENITOURINARY		
Difficulty in walking	<input type="checkbox"/>	<input type="checkbox"/>	Burning/pain on urination	<input type="checkbox"/>	<input type="checkbox"/>
HEMATOLOGIC/ LYMPH.			Blood in urine	<input type="checkbox"/>	<input type="checkbox"/>
Easy bleeding/bruising	<input type="checkbox"/>	<input type="checkbox"/>	Difficulty holding urine	<input type="checkbox"/>	<input type="checkbox"/>
Lumps in neck, armpits, groin	<input type="checkbox"/>	<input type="checkbox"/>	Sexual difficulty	<input type="checkbox"/>	<input type="checkbox"/>
NEUROLOGICAL			SKIN		
Chronic/frequent headaches	<input type="checkbox"/>	<input type="checkbox"/>	Hair loss/ excess hair growth	<input type="checkbox"/>	<input type="checkbox"/>
Any fall in past 12 months	<input type="checkbox"/>	<input type="checkbox"/>	Rashes/itching	<input type="checkbox"/>	<input type="checkbox"/>
Convulsions/seizures	<input type="checkbox"/>	<input type="checkbox"/>	Change in skin color	<input type="checkbox"/>	<input type="checkbox"/>
Memory problems	<input type="checkbox"/>	<input type="checkbox"/>	ENDOCRINE		
FOR MEN ONLY			Any loss in height	<input type="checkbox"/>	<input type="checkbox"/>
Discharge from penis	<input type="checkbox"/>	<input type="checkbox"/>	Excessive thirst/urination	<input type="checkbox"/>	<input type="checkbox"/>
Sore/lump on penis	<input type="checkbox"/>	<input type="checkbox"/>	Bothered by hot/cold weather	<input type="checkbox"/>	<input type="checkbox"/>
Lump on testicles	<input type="checkbox"/>	<input type="checkbox"/>	ALLERGIES to food/medicine: <input type="checkbox"/> yes <input type="checkbox"/> no		
FOR WOMEN ONLY			<i>Specify allergy:</i> _____		
Abnormal vaginal bleeding	<input type="checkbox"/>	<input type="checkbox"/>			
Vaginal discharge/lesions	<input type="checkbox"/>	<input type="checkbox"/>			
Discharge/lump in breast	<input type="checkbox"/>	<input type="checkbox"/>			
<i>Date of your last period</i> _____					

Any comments about your physical health: _____

12/2012

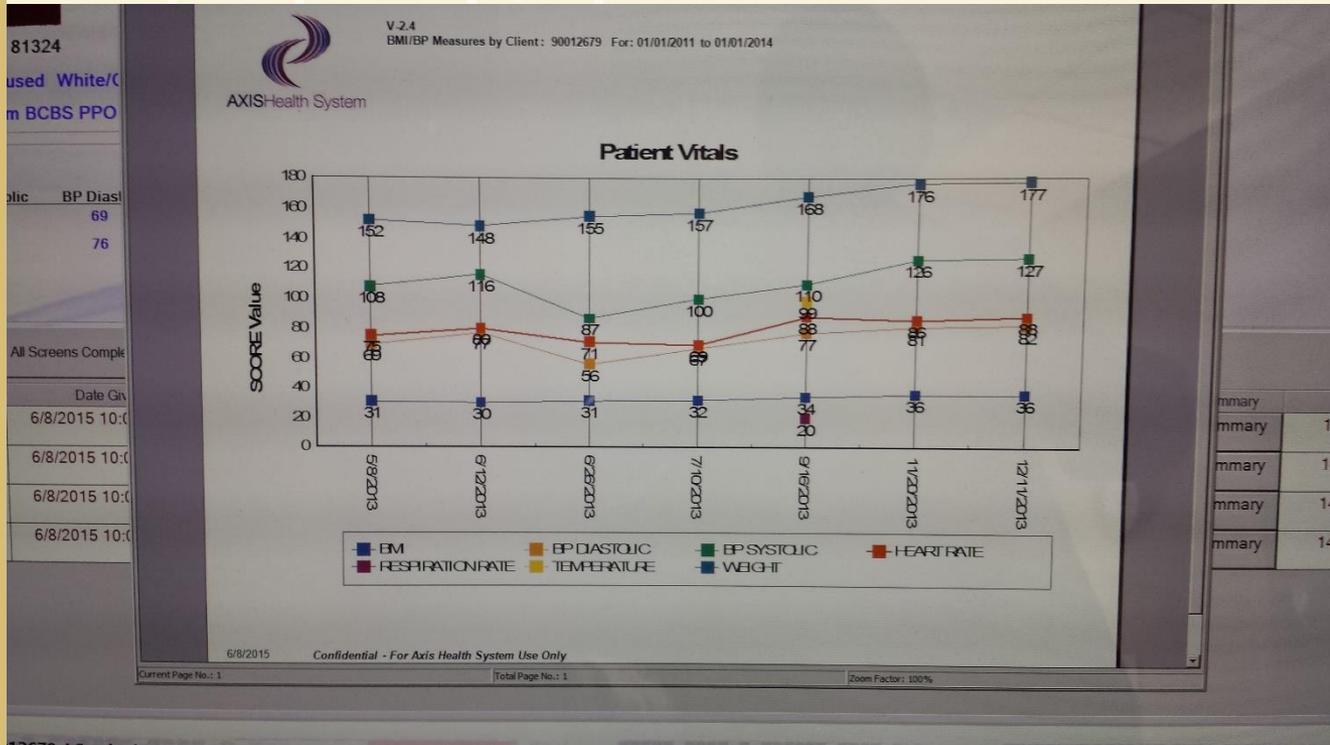
Workflow: Medical Assistants Do Vitals and Prep for Clinic



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Using Dashboards



Formula for Good Health

Place a ✓ for what you already do and an X for what you commit to working on.

<input type="checkbox"/>	0	Cigarettes	
<input type="checkbox"/>	5	Servings of fruits and vegetables per day	
<input type="checkbox"/>	10	Minutes of silence, relaxation, or meditation per day	
<input type="checkbox"/>	30	Body Mass Index < 30 kg/m²	
<input type="checkbox"/>	150	Minutes of exercise per week (e.g., brisk walking or equivalent)	

What Can A Healthy Lifestyle Do For You?

14 recent studies from the medical literature show that just these 5 simple habits can reduce your chance of dying...
 Type 2 Diabetes by 93%
 Hypertension by 78%
 Heart Attacks by 63%
 Strokes by 59%
 Heart Failure by 47%
 All Cancers by 36-64%
 & reduce your overall chance of dying by 40-68%
 This is the #1 way to stay healthy and prevent serious disease!

Kopes-Kerr, *Am Fam Physician*. 2010 Sep 15;82(6):610-614

Colorado Medicaid KPI 2015 (Key Performance Indicator)

Evidence of at least one test of glucose monitoring in all patients on second generation antipsychotics

Withhold funds until prove with claims data reached targets

Integrated Care

Tobacco Use and Mental Illness: A Wake-Up Call for Psychiatrists

Jill M. Williams, M.D.

T. Scott Stroup, M.D., M.P.H.

Mary F. Brunette, M.D.

Lori E. Raney, M.D.



- 50% of deaths in SMI population are due to smoking related cause
- Psychiatrists counsel patients less frequently regarding cessation – <15% vs 90% for PCPs
- Education issue? Reluctance? Belief not interested in quitting?

Williams, et al, Psychiatric Services, October 2014

APA Initiative: PUFFS – Psychiatry Undertaking Freedom From Smoking

- Survey
- Training Needs
 - Online Training Materials
 - In-person Trainings
 - Webinars
- Position Statement on TUD
- Research

E & M Coding

HPI – mixed behavioral health and physical health issues
ex: schizophrenia, smoking, obesity – 3 problems
addressed in the visit

ROS: 2 plus systems

Examination: must have 3 of 7 elements of vital signs

Data: ordering and reviewing labs

Problem points: from HPI – what is stable (1 point), not
improving (2 points), new problem, etc

Questions?

You may submit questions to the speakers at any time during the presentation by typing a question into the “Ask a Question” box in the lower left portion of your player.





SAMHSA-HRSA Center for Integrated Health Solutions

Implementing Medical Monitoring: The CMHC Perspective

Bob Krumwied, MHA

President/CEO, Regional Mental Health
Center, Indiana

Why Do We Do It?

- Bend the Health Cost Curve
 - Health costs up 3.3X as a % of GNP in last 50 Years
 - Now at 17.4%
 - BH appears to be a meaningful tool in bending the curve
 - Ignoring BH issues only drives up overall cost.
 - 4 out the 10 most costly Medicaid conditions include Psychiatry as an issue
 - Overall costs drop with concurrent care
- Board interest
 - Tangible item to deal with and a collective sense of responsibility
 - Relatable, we all have a checkbook and all are growing older
 - Health care cost for a 55 year old are projecting to equal Social security benefits for years beyond 65.

Clients We Serve

- Total Geographic population around 490,000
 - We treat around 11,000/yr.
 - 3,500 with SMI
 - 5,500 are treated by an agency M.D.

Costs

- Total staff are around 390
 - 12 Psychiatrists
 - 9 Adult
 - 2 Child
 - 3 RN
 - 2 Medical Assistants
 - 3 Case Managers

Costs

Total \$3,718,000

Integrated \$612,000

Integration

- Work in progress
 - Shared Data, responsibility
- Case Management > Care Management
- FQHC
- Putting our money where our mouth is
 - Med Assistants in Group Homes
 - Training for Case management
 - Integration of Staff management

Reimbursement

- Opportunities on Horizon
 - Mental Health Medical Homes
 - FQHC
 - Unique Medicaid rate
 - Pressure on MCO's
- Slowly blending roles while we wait
 - Lots of motivation

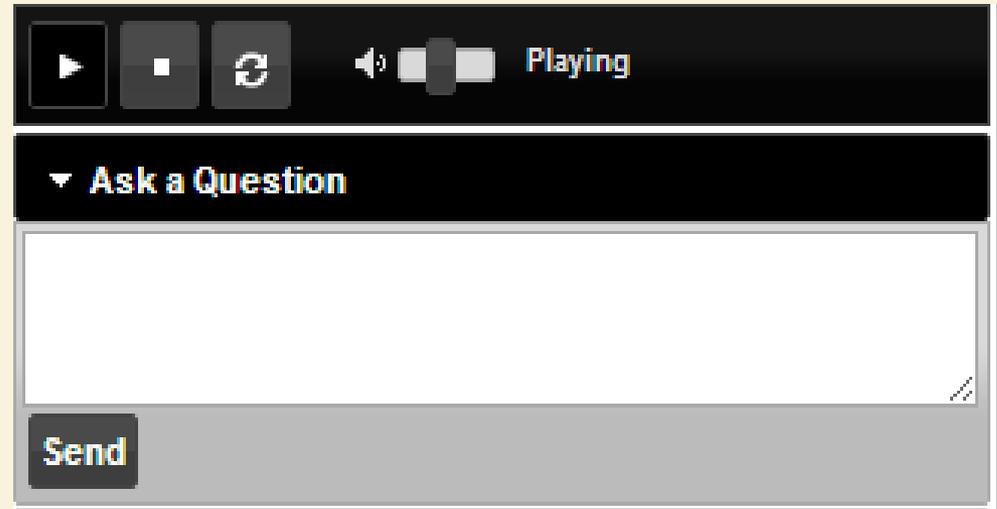
Poll Question: As a result of this webinar, do you have plans to establish medical monitoring procedures at your CMHC or primary and behavioral health integrated practice?

- Yes, we are already planning
- Yes, I will bring this back to the team
- Maybe
- No
- We already have medical monitoring
- I'm not affiliated with a provider



Questions?

You may submit questions to the speakers at any time during the presentation by typing a question into the “Ask a Question” box in the lower left portion of your player.



Resources

- ADA/APA Consensus on Medical Monitoring for Antipsychotic Medications
<http://care.diabetesjournals.org/content/27/2/596.long>
- CIHS Motivational Interviewing Resources
<http://www.integration.samhsa.gov/clinical-practice/motivational-interviewing>
- CIHS Tobacco Cessation Resources
<http://www.integration.samhsa.gov/health-wellness/wellness-strategies/tobacco-cessation-2>
- Zeier, et al. (2013). Recommendations for lab monitoring of atypical antipsychotics. *Current Psychiatry*, 12(9), 51-54.
<http://www.currentpsychiatry.com/the-publication/past-issue-single-view/recommendations-for-lab-monitoring-of-atypical-antipsychotics/541154dc6be51d6d4c0fa9ccf9028c79.html>

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Iraney@pcbhconsulting.net

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bob.krumwied@regionalmentalhealth.org



Additional Questions?
Contact the SAMHSA-HRSA Center for Integrated Health Solutions
integration@thenationalcouncil.org

For More Information & Resources

Visit www.integration.samhsa.gov or
e-mail integration@thenationalcouncil.org





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Please take a moment to provide your feedback by completing the survey at the end of today's webinar.