



Evidence-Based Prescribing Practices for Behavioral Health and Diabetes

Patty Gibson, MD
Psychiatrist

Chief Medical Officer, Allevant Health Centers

Today's Moderator



Andrew Philip, PhD
Senior Director of Clinical & Population Health
Primary Care Development Corporation
New York, NY



About PCDC

Primary Care Development Corporation (PCDC) is a national nonprofit organization and a community development financial institution catalyzing excellence in primary care through strategic community investment, capacity building, and policy initiatives to achieve health equity.

Disclaimer

The views, opinions, and content expressed in this presentation do not necessarily reflect the views, opinions, or policies of the Center for Mental Health Services (CMHS), the Substance Abuse and Mental Health Services Administration (SAMHSA), or the U.S. Department of Health and Human Services (HHS).



www.samhsa.gov

Moving Beyond 101: An Advanced Application of Integrated Care



Integrated Care Listening Session

- Share about pressing issues you are facing
- Be heard by stakeholders and your peers
- https://pcdc.zoom.us/webinar/register/8515849768135/WN_wuPNNkpTTGSaaq6eBVFk4A



Poll

What's life like where you are viewing?

1. I'm in a clinic setting
2. I'm in a nonclinical office setting
3. I'm at home and otherwise normal
4. I'm at home, and helping care for children and others
5. Other

An Integrative Approach to Addressing Diabetes

- Improve screening and management and partner with patients to better address diabetes
 - Maximize the value of interprofessional teams
 - Enhance what you have (even if it's just you!)
 - Build efficient processes and procedures



(Image courtesy C. Aguilar)

An Integrative Approach to Addressing Diabetes

1. Behavioral Treatment
2. Evidence-based Prescribing Practices
3. Nutrition, Food Insecurity and Health Promotion
4. Integrating Clinical Pharmacy
5. Expanding Quality Improvement
6. Operational and Clinical Pathways
7. Persons with Lived Experience

Why Address Diabetes in Integrated Behavioral Health?

- Patients with behavioral health conditions are disproportionately likely to struggle with diabetes and associated metabolic conditions
- Behavioral health providers are uniquely positioned to impact diabetes
- Integrated care will increasingly involve integrating metrics

Today's Key Messages

- Understanding the role of psychiatric prescribers including psychiatrists within the care team
- Special considerations for providers in addressing psychiatric medications in the presence of diabetes or risk of diabetes
- In the absence of a prescribing provider, other members of the team help support patient needs around medication and diabetes

Today's Presenter



Patty Gibson, MD

Psychiatrist

Chief Medical Officer, Alleviant Health Centers

Patty Gibson, MD is a physician, board certified in Psychiatry, Addiction Medicine and Anesthesiology. She is the Chief Medical Officer for Alleviant Health Centers from Little Rock, Arkansas. She has been actively involved in Behavioral Health Integration and Value-Based Population Health for more than ten years, including being the Medical Director for the BHI team in the Arkansas Baptist Hospital System from 2017-2019 and leader of the Primary Care Mental Health Integration program at the Central AR Veterans Healthcare System in Little Rock from 2009-2016.

She is also the President and co-founder of the newly formed non-profit organization called ABHIN (AR Behavioral Health Integration Network) whose purpose is to create professional collaboration and network opportunities for training and support for implementation of Behavioral Health Integration in Arkansas. She is also actively involved in forming the CFHA Psychiatry SIG and has developed many collaborative relationships around the country through participation in various learning opportunities through American Psychiatric Association, Collaborative Family Healthcare Association and IIBHN (Idaho Integrated Behavioral Health Network).

Poll

Do you have a psychiatrist (or other psychiatric prescriber) on your team?

- Yes
- No


Role of Psychiatrist as Part of Primary Care Team

- Why
- What
- How
- Who



De-Mystifying Psychiatry

Psychiatrist



What my mother thinks I do



What patients think I do



What my friends think I do



What society thinks I do



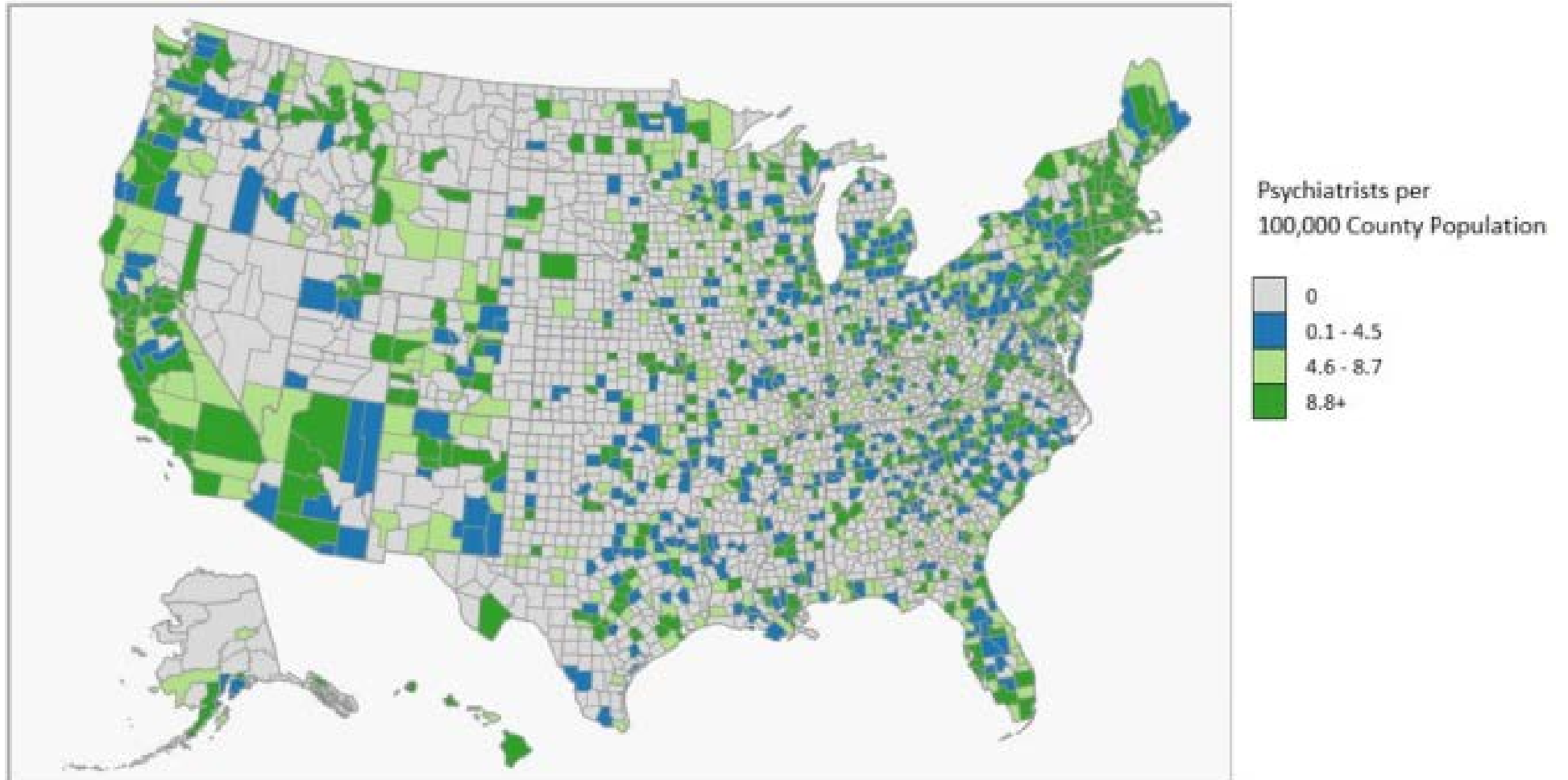
What I think I do



What I really do

powered by uthinkido.com

Psychiatrists per 100,000 Population by U.S. County



University of Michigan Behavioral Health Workforce Research Center. Estimating the Distribution of the U.S. Psychiatric Subspecialist Workforce. Ann Arbor, MI: UMSPH; 2018.

Numbers

- **2nd** most requested specialty needed in 2017 (13th in 2001, 9th in 2007)
- **30,451** psychiatrists active in U.S
- **9.35** psychiatrists/100,000 people nationwide
- **4,535** in CA (14.9% of psychiatrists for 12.1% of US pop)
- **41%** of all psychiatrists in top 5 states
- **59%** of psychiatrists > **55yo**

SHORTAGE



Access Remains a Problem

New models needed to redefine access to psychiatrists

- Not just face-to-face visits
- Primary Care staff need support and training to assist with diagnosis and treatment
- Need new ways to pay for psychiatric care other than fee-for-service

Force Multiplication and Raising Capacity

From impacting one patient to many

- Teaching primary care providers
 - Shared decision tool for choice of antidepressants
 - Curbside consults – ‘doc of the day’
 - E-Consults
 - Psychiatric Access Lines
 - CME Conferences - “Reach Institute”
- Care Coordination
 - Collaborative Care Management
 - Telepsychiatric options and case-based learning
 - Complex Case Reviews
- ECHO project (University of New Mexico)
 - Case-based teaching



Case 1

- Co-located BHC (LPC) – employed by psychiatrist
- 27yo male – IDDM – Addiction to synthetic THC
- Recent inpatient hospitalization with coma related to IDDM
- Multiple visits with BHC for SBIRT / MI

- Questions:
 - need for substance abuse treatment
 - detox – or other medication

- Meds:
 - supportive – sleep/anxiety/depression
 - Mirtazapine, SSRIs, SNRIs, Bupropion
 - Benzodiazepines

Case 2

- Co-located BHC (LMSW) – employed by PC clinic
- 38yo female, hx of Bipolar d/o, currently manic
- PCP requesting medication recs until outpatient visit next week

- Meds:
 - Mood stabilizers
 - Depakote
 - Atypical Antipsychotics (Seroquel, Zyprexa, Abilify)
 - Lithium
 - Lamictal
 - Benzodiazepines
 - Sleep meds
 - Antidepressants

Psychiatric Medication Management

- Psychiatric disorder / symptoms
- Physical health problems
- Other medications
- Substance abuse / current or past
- Sleep (***)sleep apnea)
- Social situation (employed, relationship, living situation, financial means)
- **SIDE EFFECTS**

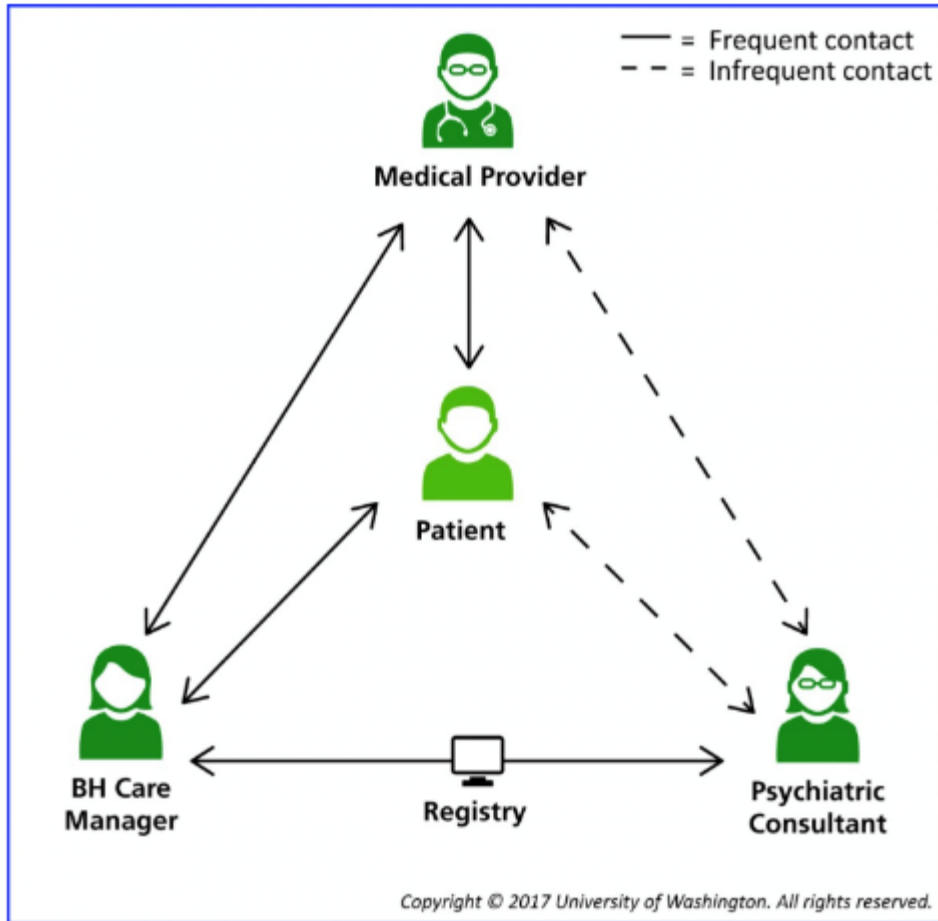


Case 3

- Integrated Primary Care Team (RN, SW, Pharmacist, Psychiatrist, PCP)
- 51yo male
- DM – not taking insulin

TEAMS

Collaborative Care Management



Education

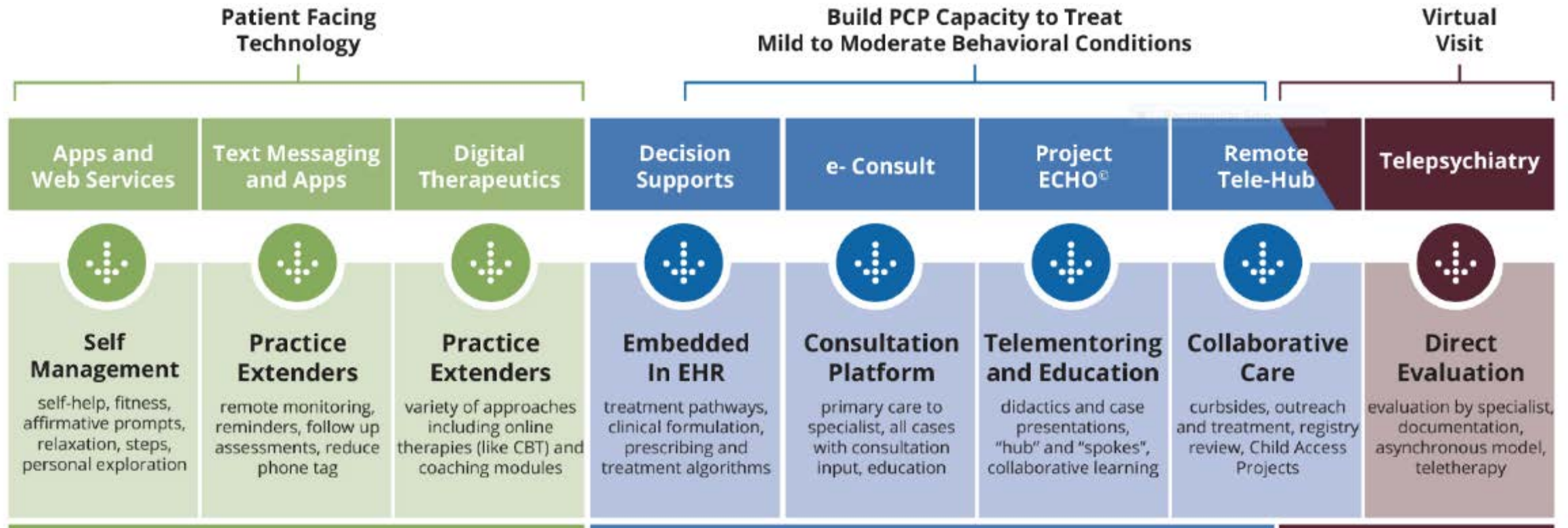
- Case-Based – prn/scheduled, 1:1/groups
- Webinars/Lunch & Learns
- ECHO “Behavioral Health” (<https://echo.unm.edu/teeecho-programs/bha>)
- UAMS (<https://psychiatry.uams.edu/clinical-care/cast-2/matriarc/>)
- REACH Institute (<https://www.thereachinstitute.org/>)



State/National Child Psychiatry Access Programs

- Mass Child Psychiatry Access Program (MCPAP)
 - <https://www.mcpap.com/>
 - Tools - <https://www.mcpap.com/pdf/MCPAPGuidelines-Pearls-Book.pdf>
- National Network of Child Psychiatry Access Programs
 - <https://nncpap.org/>

TECHNOLOGY ENABLED BEHAVIORAL HEALTH IN PRIMARY CARE



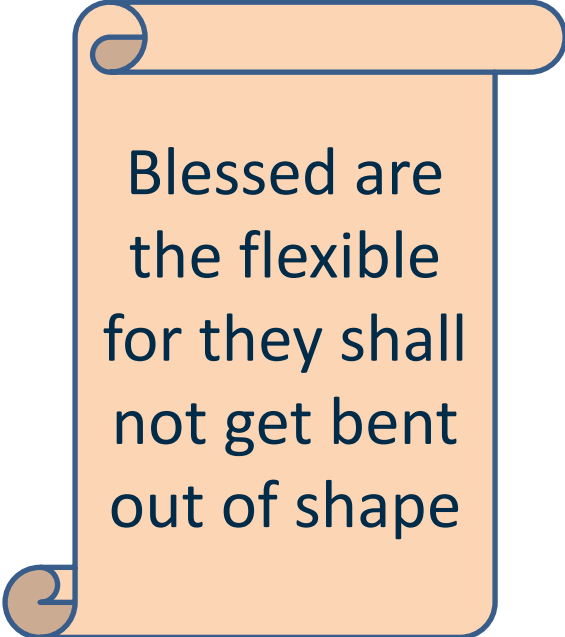
© Lori Raney, MD

Raney L, et al: Current Psychiatry, October 2017

Psychiatric Provider Best Suited for this Work

- Flexible – expect the unexpected
- Adaptable - child and other populations
- Willing to tolerate interruptions
- Able to manage liability concerns and do curbsides
- Like teaching
- Enjoy being part of a team
- Willing to lead

****Training resources are available**



Blessed are
the flexible
for they shall
not get bent
out of shape



Q&A

Center of Excellence for Integrated Health Solutions

Relias Online Trainings – Learn more on our website here:
<https://www.thenationalcouncil.org/integrated-health-coe/training-events/>

Learning Communities and ECHOs – Learn more on our website here:
<https://www.thenationalcouncil.org/integrated-health-coe/learning-collaboratives/>

Request Technical Assistance - <https://www.thenationalcouncil.org/integrated-health-coe/request-assistance/>

Contact Us



Patty Gibson, MD
Alleviant Health Centers
pldgibson@gmail.com



Andrew Philip, PhD
Primary Care Development Corporation
aphilip@pcdc.org

Resources

- Brief Medication Prescribing Directions (AIMS Center)

https://aims.uw.edu/sites/default/files/Psychotropics%20Medications_2018.pdf

- Detailed Medication Guide (AIMS Center)

https://aims.uw.edu/sites/default/files/Brief%20Medication%20Prescribing%20Directions_2018.pdf

- Psychiatric Consultant Role (Training Module & Job Description)

<http://aims.uw.edu/collaborative-care/team-structure/psychiatric-consultant>

References

- Wayne Katon, MD Discusses How Collaborative Care Drives Quality - https://www.youtube.com/watch?v=XUAgxB1s4_c
- SAMHSA-HRSA CIHS – “Psychiatrists” - <https://www.integration.samhsa.gov/workforce/team-members/psychiatrists>
- Lori Raney – Discussing Training of Psychiatrists working in Integrated Care - <https://www.youtube.com/watch?v=ZtQXppVHSY0>
- Lori Raney, MD, “Integrated Care: Working at the Interface of PC and BH,” 2015
- American Psychiatric Association – Integrated Care (include training for Psychiatrists, PCPs, and Care Managers) - <https://www.psychiatry.org/psychiatrists/practice/professional-interests/integrated-care>