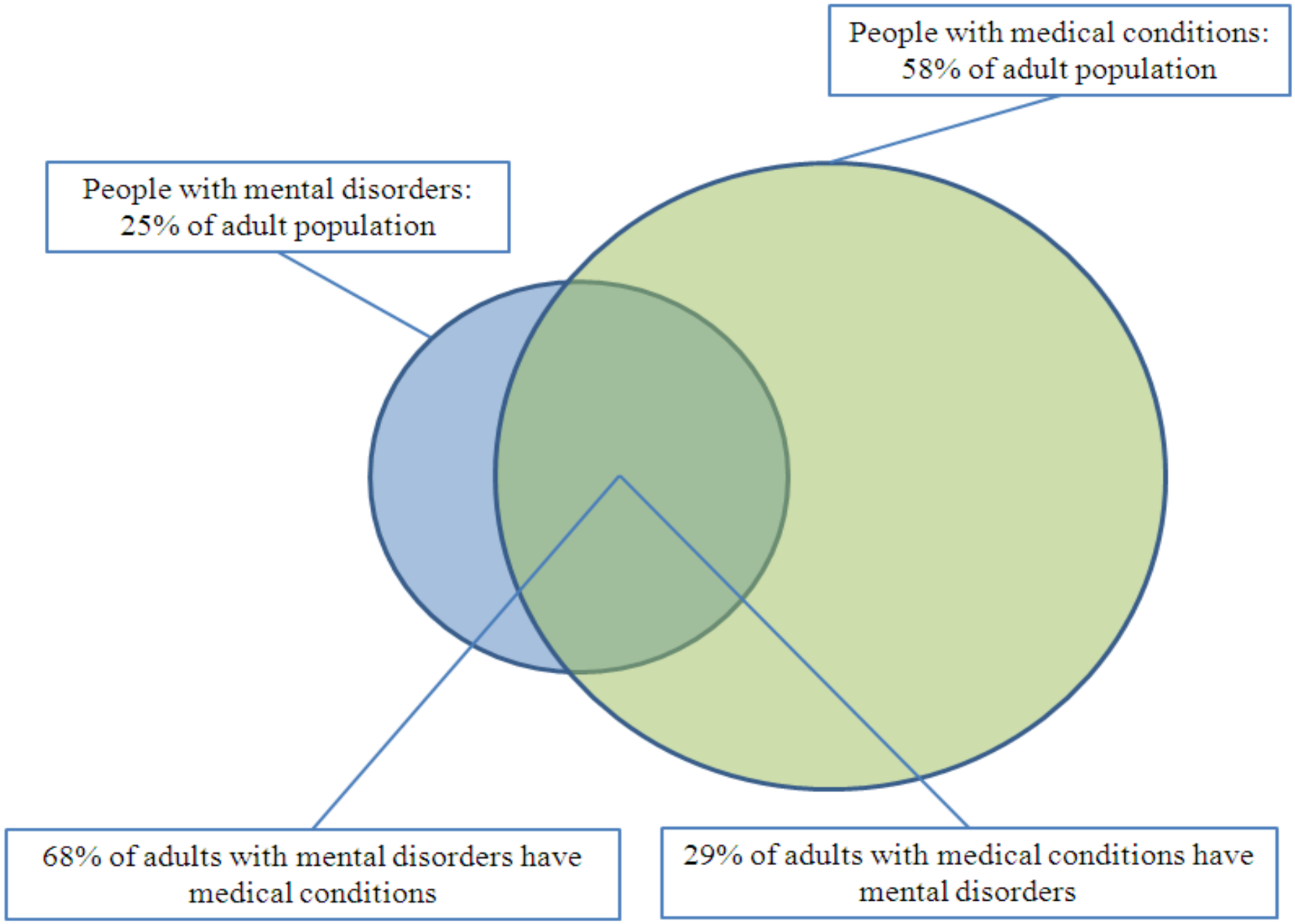
Behavioral Health Within Primary Care: When? How? NOW!

Mike Hogan, Ph.D.

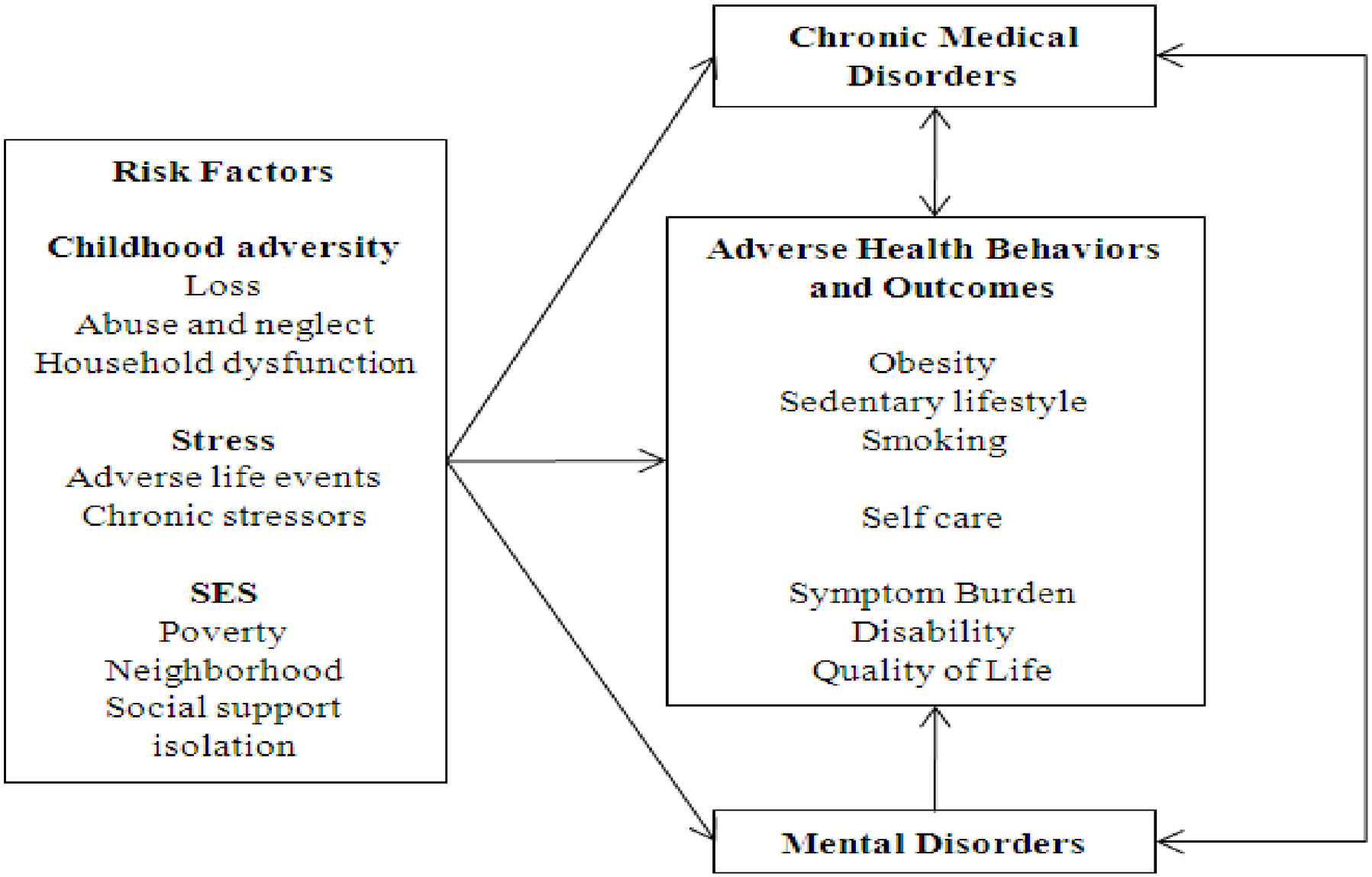
Behavioral Health in Primary Care: WHY?

- Clinical reasons: Primary care is where people with MH/SUD conditions present
- Cost reasons: “Dis-integrated Care” is expensive, ineffective. Behavioral conditions drive costs, integrated care reduces total costs
- Integration is trending: PPACA plus MHEAPA will drive it--and payers love it

Why Integration: Physical and Behavioral Needs Overlap



The Pathways Underlying Comorbidity* Require an Integrated, Proactive Response



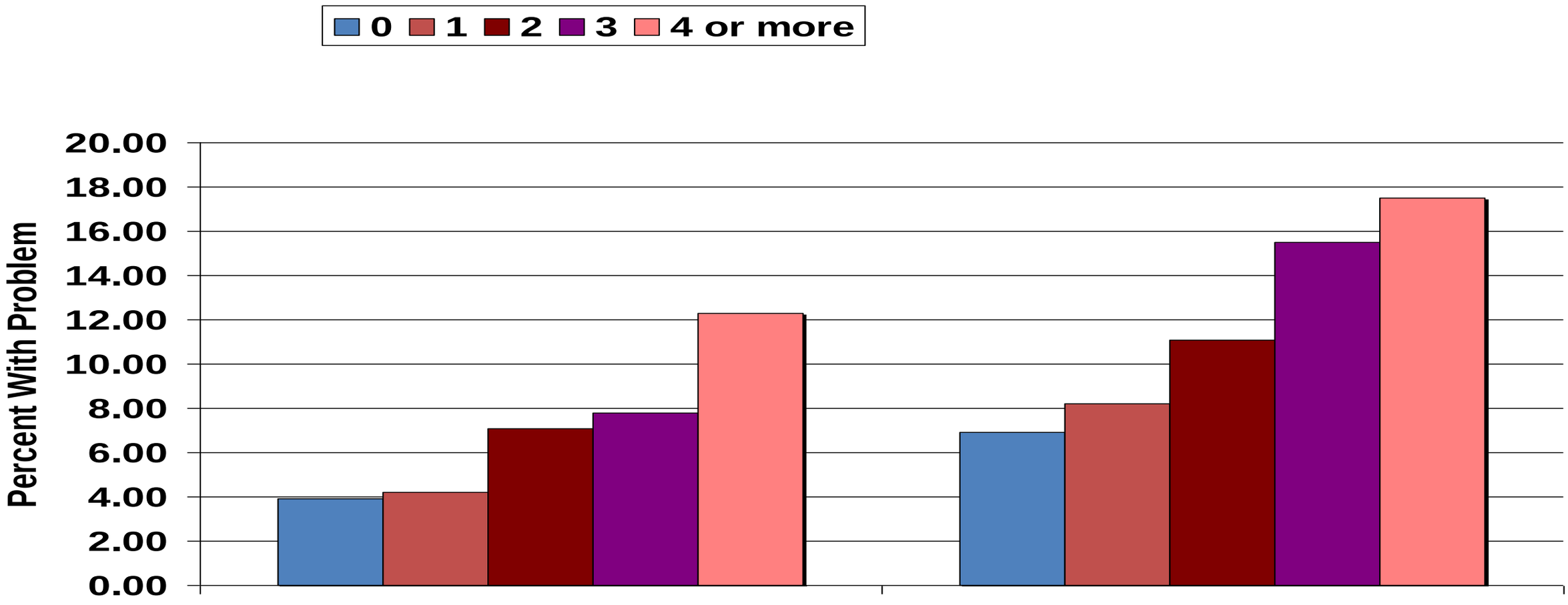
* Adapted from Katon, 2003

The Roots of Most Ill-Health are Behavioral: Lessons From the Adverse Childhood Experiences (ACE) Study*

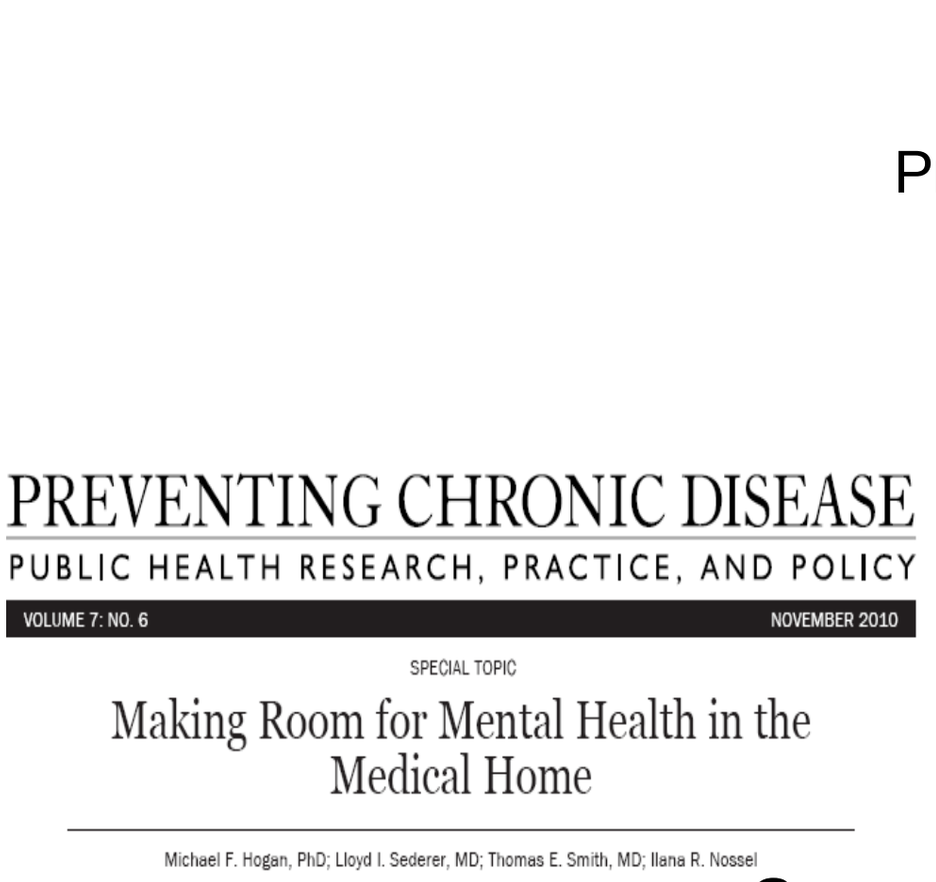
- Adverse Childhood Experiences (ACEs) are very common
- ACEs are strong predictors of later health risks and disease
- This combination makes ACEs *the leading* determinant of the health and social well-being of our nation

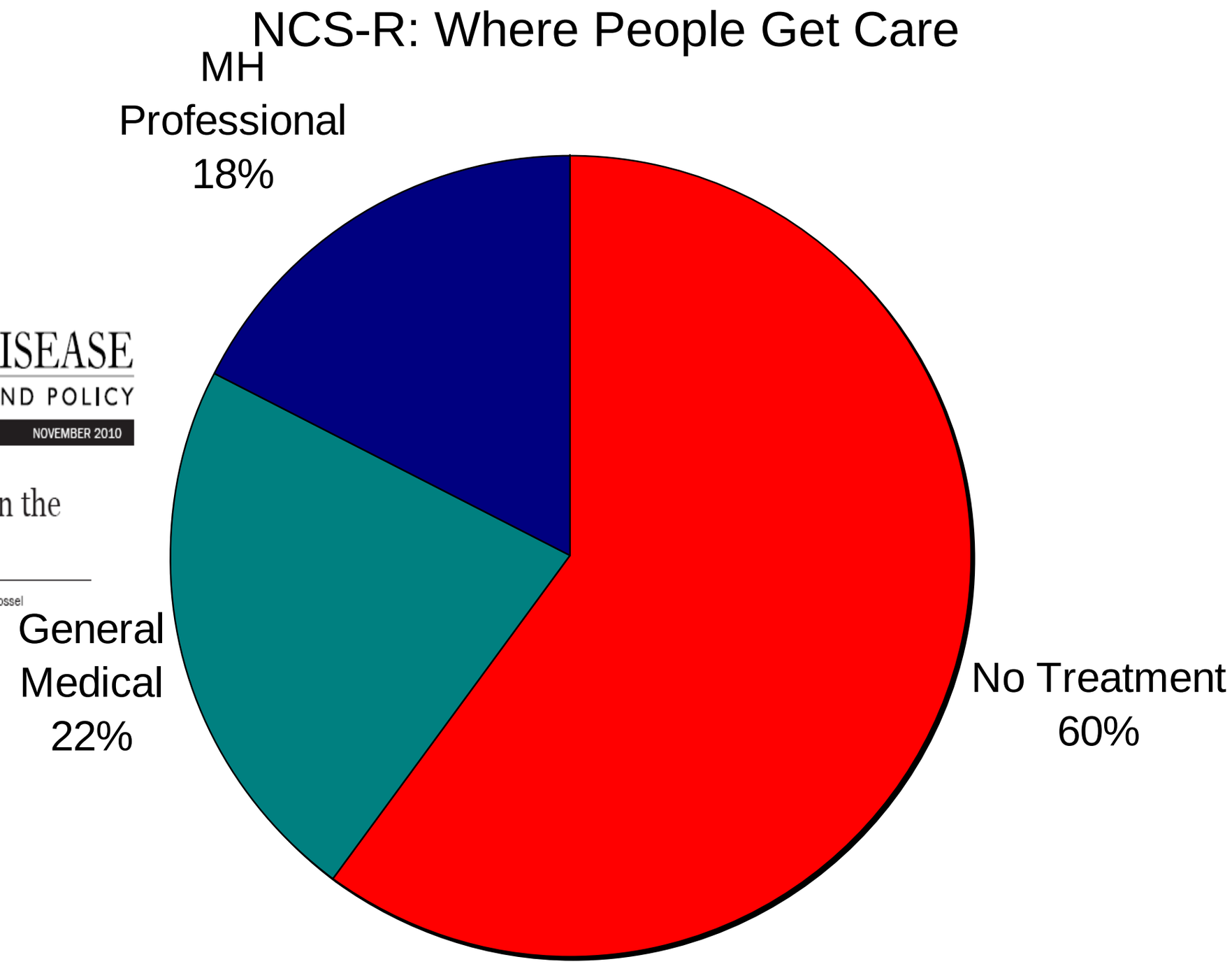
*Information available at www.acestudy.org

ACE Scores, Smoking and COPD



Where Integration is Important
Primary Care, Health Centers and Medical Homes





Wang P, et al., Twelve-Month Use of Mental Health Services in the United States, Arch Gen Psychiatry, 62, June 2005

"We couldn't get a psychiatrist, but perhaps you'd like to talk about your skin. Dr. Perry here is a dermatologist."

66% of PCPs Report Poor Access to Specialty Mental Health Care for Their Patients

Cunningham PJ, *Health Affairs* 2009;28(3)490-501

Integration Requires More than Lip Service: Without Behavioral Support in Primary Care Depression Care* Is Generally Inadequate

- 1/8 of depressed people in primary care receive "minimally adequate care" (Kessler).
  - *–Good treatment is effective: 75–80% of individuals with depression improve with integrated care in clinical trials*
  - *–(In specialty care, about 50% get "adequate" care)*

  - –We have the opportunity to fix MH care in Primary care…can it be done?

* Or Anxiety, ADHD, Problem Drinking Care….

Integration Requires More than Lip Service: "Simple Solutions" Are Not Enough

- Training
- Protocols e.g. Screening
- Available consultation
- Practice re-engineering: workflow, documentation/ records, billing
- *Culture eats strategy for lunch*

Primary BH ("Collaborative") Care: Key Elements

Practice Support

PCP supported by Behavioral Health Care Manager

Integrated Care

Informed, Active Patient

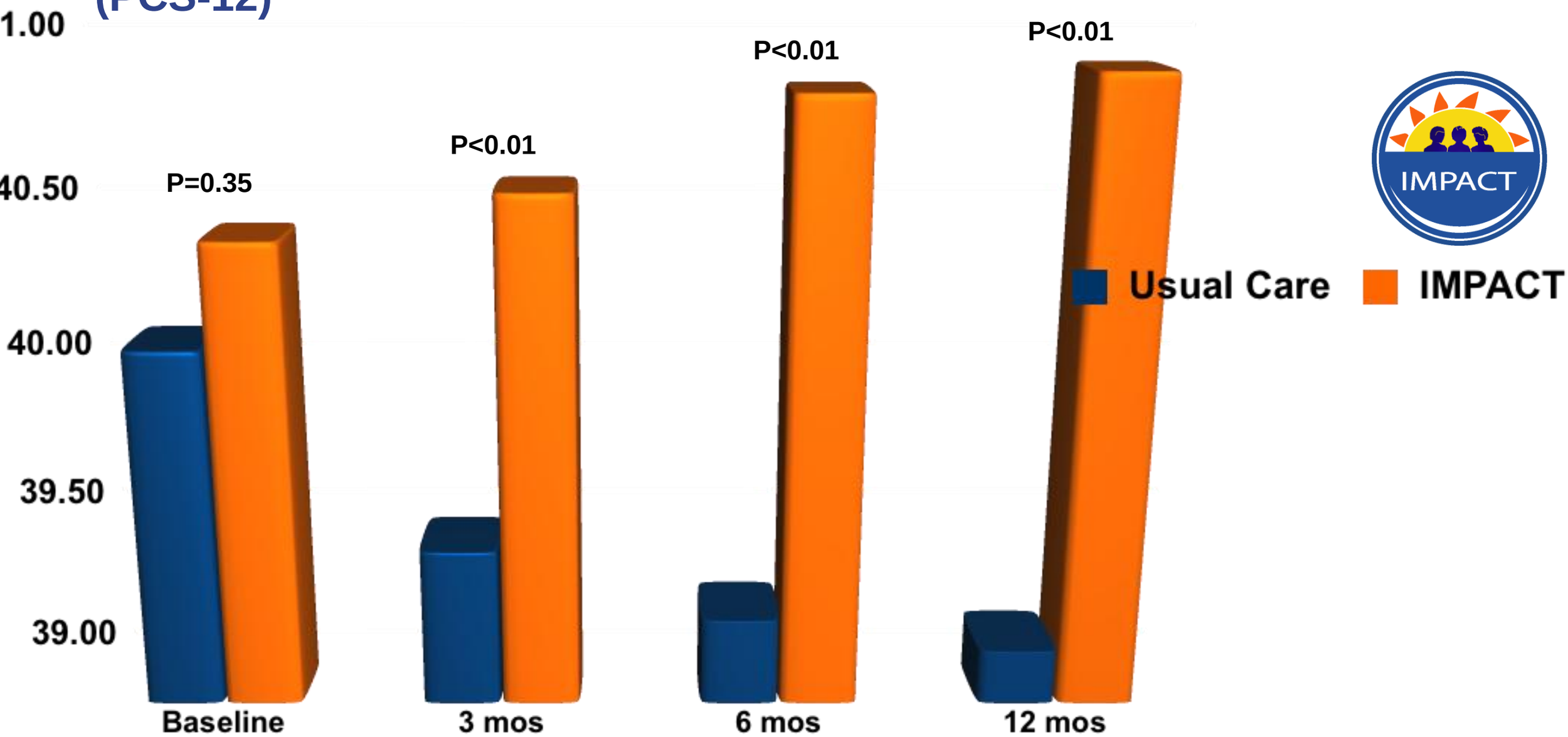
Measurement-based Stepped Care

Caseload-focused Psychiatric Consultation

Training

Better Physical Function

SF-12 Physical Function Component Summary Score (PCS-12)



Callahan et al., *JAGS* 2005; 53:367-373

Implementation of Collaborative Care

- Well-studied: over 40 RCT's
- Most focus on depression, adults. Some evidence with children, other conditions
- Large scale implementation: Kaiser, Group Health, Diamond. Project under way in NYS (collaboration between Health, Mental Health)
- "Collaborative care...provide(s) a significant and substantial increase in clinical response...taking a clinical response rate of 46-48% with usual... treatment and increasing it 92%...this may well represent the Holy Grail of health care delivery..." (Calonge, Am. J. Prev. Med, 2012)

Challenges in Integrating Care

- Getting started
- Integrating different “cultures of care”
  - Pace: The 50 minute hour vs. the 7 minute visit
  - Focus on body vs. brain
  - Perspective from family practice: “Since half of our patients have behavioral concerns and since adaptation to all chronic illness requires behavioral change, we think we have to master this.”
- Regulatory and reimbursement barriers
  - “One visit” billing limits, unavailable billing codes, coverage for "embedded" BH professionals
  - Split benefits
  - Licensure/certification/accreditation limits

Resources For Integrating Care

- SAMHSA-HRSA Center for Integrated Health Solutions
  - –www.integration.samhsa.gov/

- AHRQ's Academy for Integrating Behavioral Health and Primary Care
  - –www.integrationacademy.ahrq.gov/

- Colorado's Advancing Care Together Initiative
  - –www.advancingcaretogether.org

THANK YOU, AND GOOD LUCK INTEGRATING CARE