Behavioral Health Integration Domains

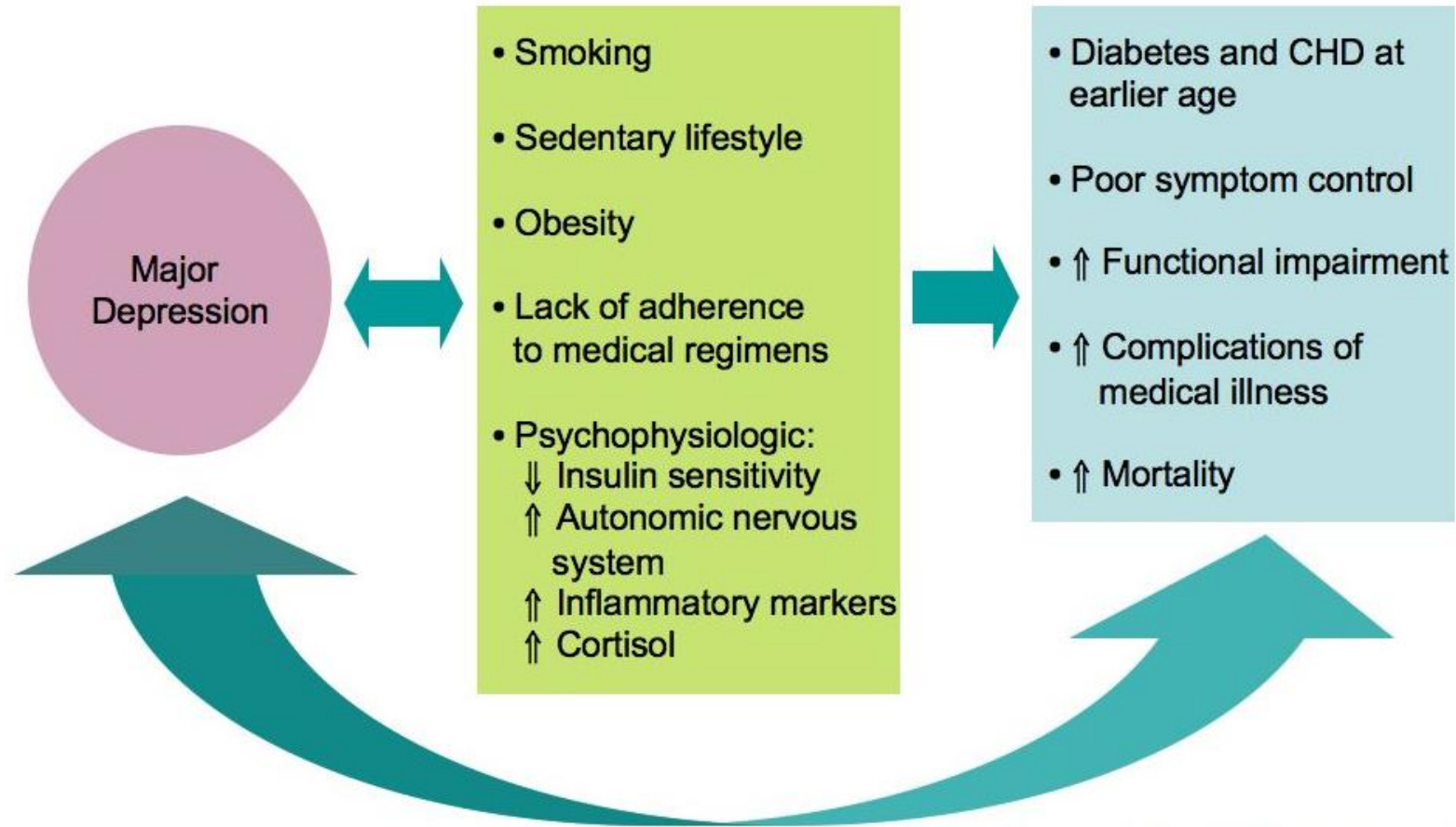|	
1	**Case finding, screening, and referral to care**
2	**Decision support for measurement-based stepped care**
3	**Information exchange among providers**
4	**Ongoing care management**
5	**Self-management support that is culturally adapted**
6	**Multi-disciplinary team (including patients) used to provide care**
7	**Systematic Quality Improvement**
8	**Linkages with community and social services**
9	**Sustainability**

Agenda

BH disorders and Chronic Medical Illness

Review of Screening and Referral Domain Elements
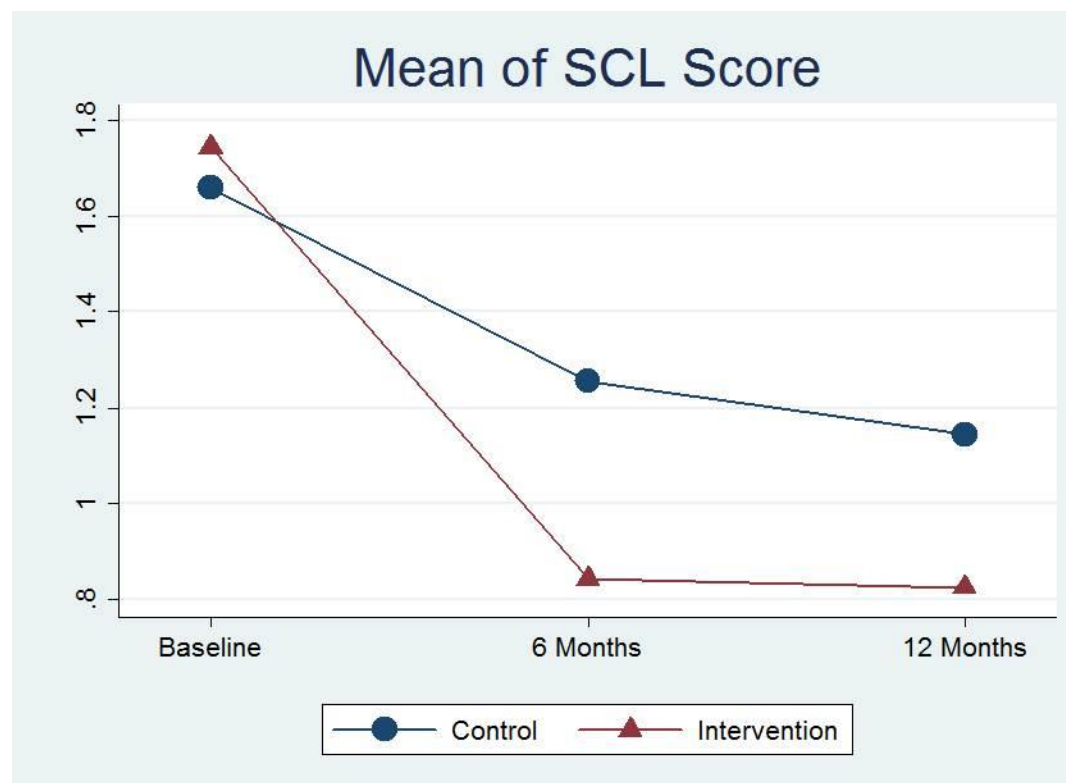
Practical Strategies for Screening and Referral

Discussion

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Adverse Bidirectional Interactions: Depression and Chronic Medical Illness

Major Depression

- Smoking
- Sedentary lifestyle
- Obesity
- Lack of adherence to medical regimens
- Psychophysiologic:
  ⇓ Insulin sensitivity
  ⇑ Autonomic nervous system
  ⇑ Inflammatory markers
  ⇑ Cortisol

- Diabetes and CHD at earlier age
- Poor symptom control
- ⇑ Functional impairment
- ⇑ Complications of medical illness
- ⇑ Mortality

Katon et al. *Biol Psychiatry* 2003

TeamCare Depression Outcomes

Mean of SCL Score

	Baseline	6 months	12 months
Intervention mean (N)	1.7 (105)	0.8 (97)	0.8 (94)
Control mean (N)	1.7 (106)	1.3 (96)	1.1 (92)

TeamCare Outcomes: Diabetes

Mean of HbA1c
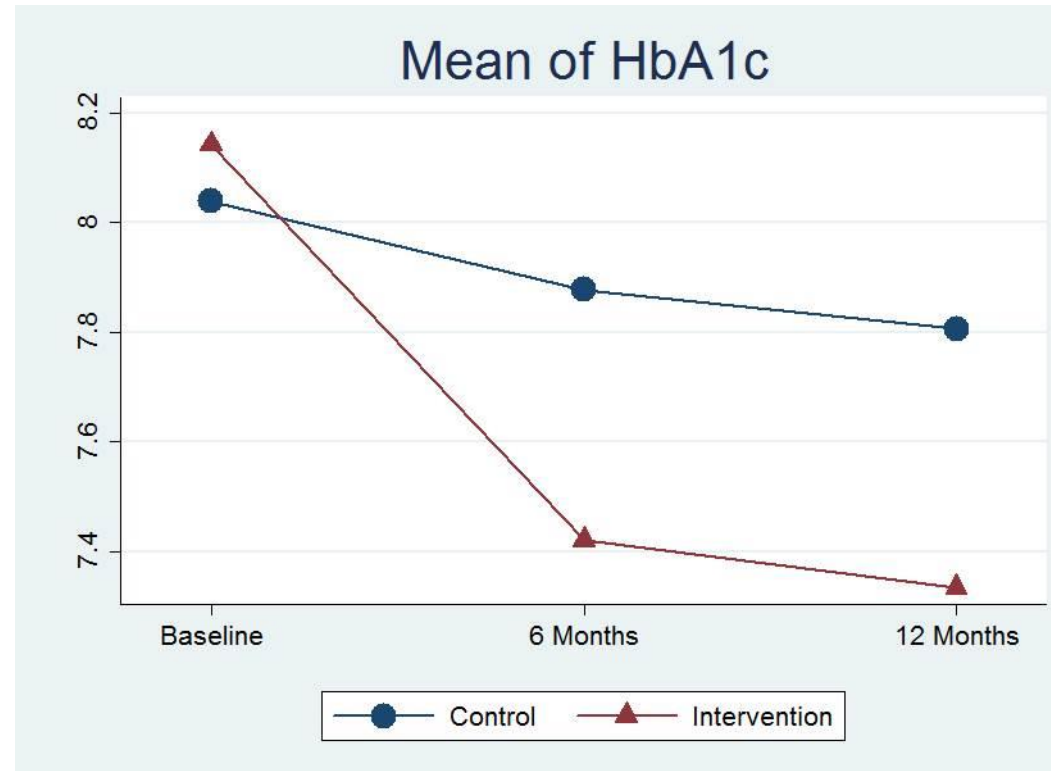
	Baseline	6 months	12 months
Intervention mean (N)	8.1 (105)	7.4 (99)	7.3 (101)
Control mean (N)	8.0 (105)	7.9 (95)	7.8 (97)

Slide courtesy of Wayne Katon, University of Washington, TEAMcare

Teamcare Outcomes: Dyslipidemia
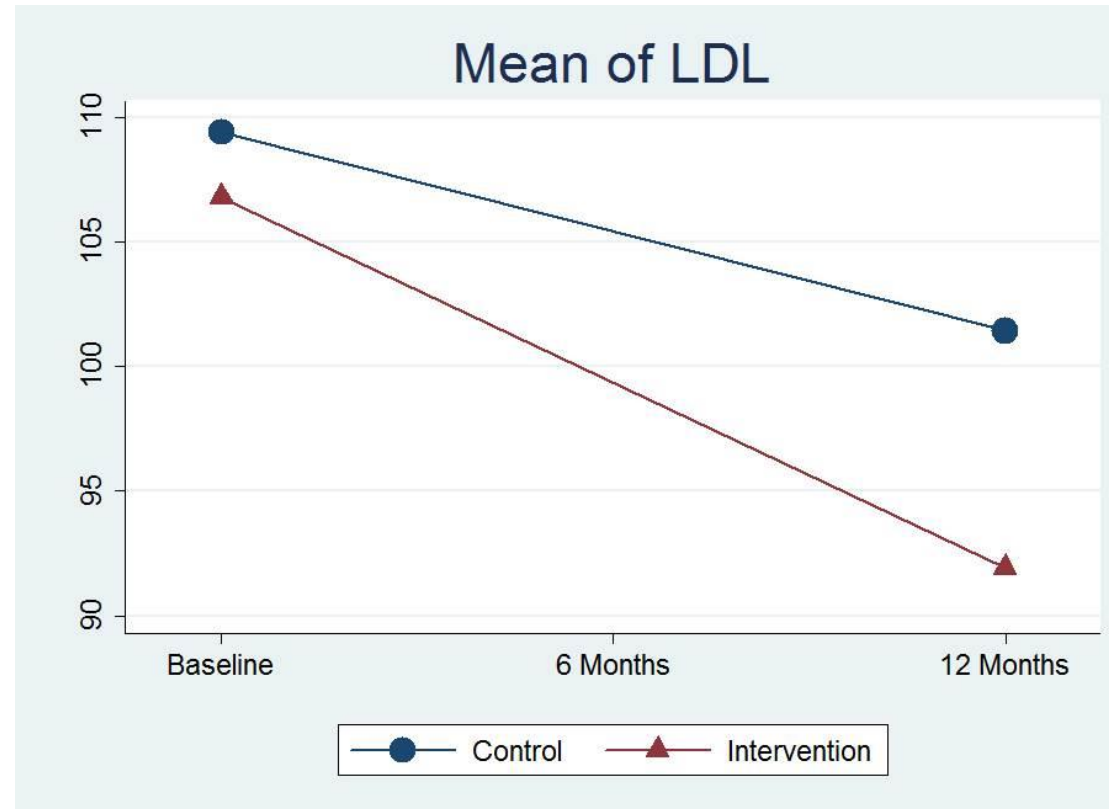
	Baseline	6 months	12 months
Intervention mean (N)	106.8 (105)	N/A	91.9 (98)
Control mean (N)	109.4 (103)	N/A	101.4 (90)

Slide courtesy of Wayne Katon, University of Washington, TEAMcare

Framework Levels of Integration

➢ **Domain 1: case finding, screening, referral to care.**

➢ **Subdomain 1:** *screening, initial assessment, and follow-up.*

Preliminary

- Patient and/or clinician identification of those with symptoms—not systematic

Intermediate

- **Level I:** Systematic screening of target populations (e.g., diabetes, CAD), with follow-up for assessment

- **Level II:** Systematic screening of all patients, with follow-up for assessment and engagement

Advanced

- Analysis of patient population to stratify patients with high-risk BH conditions for proactive assessment and engagement

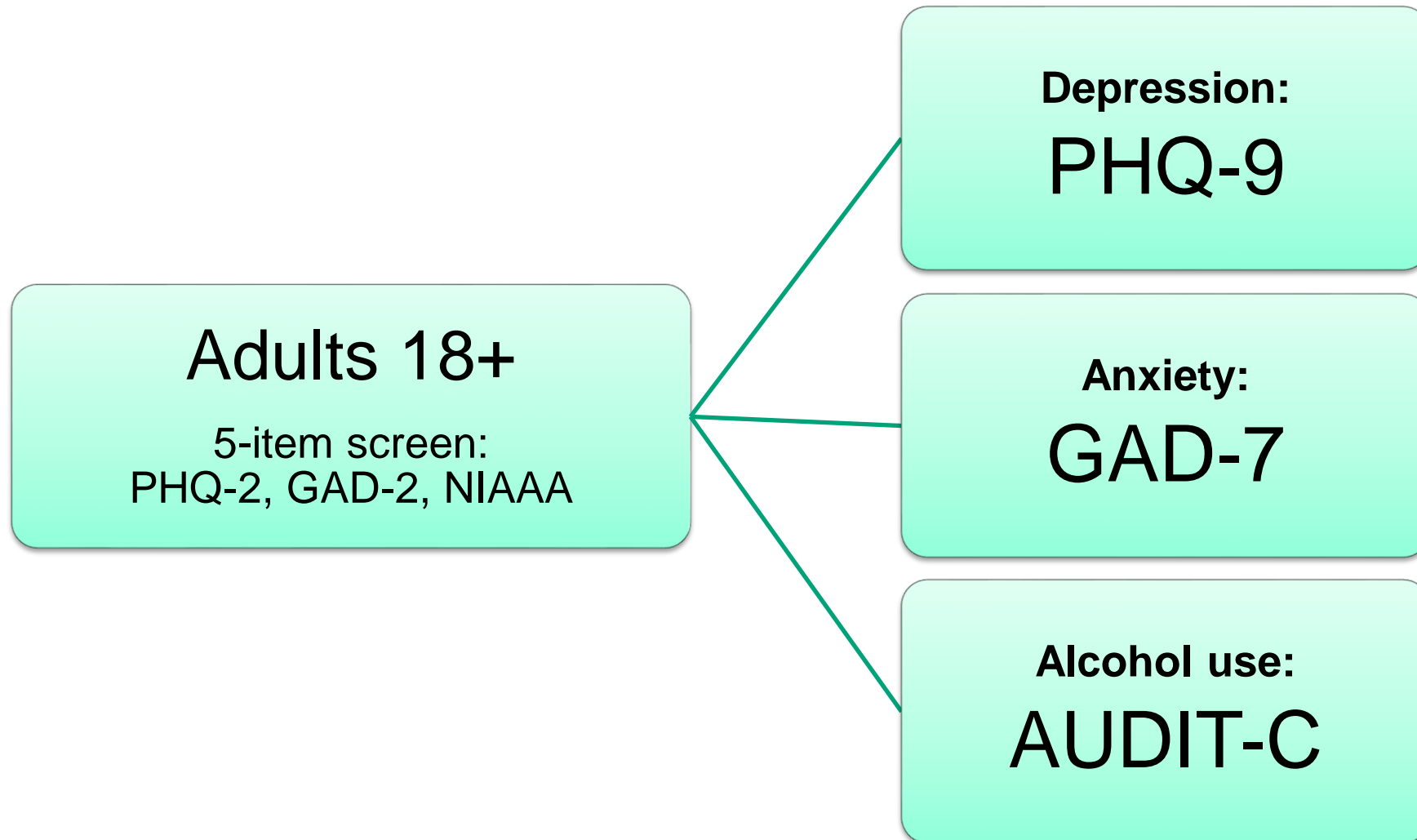**Integration Continuum**

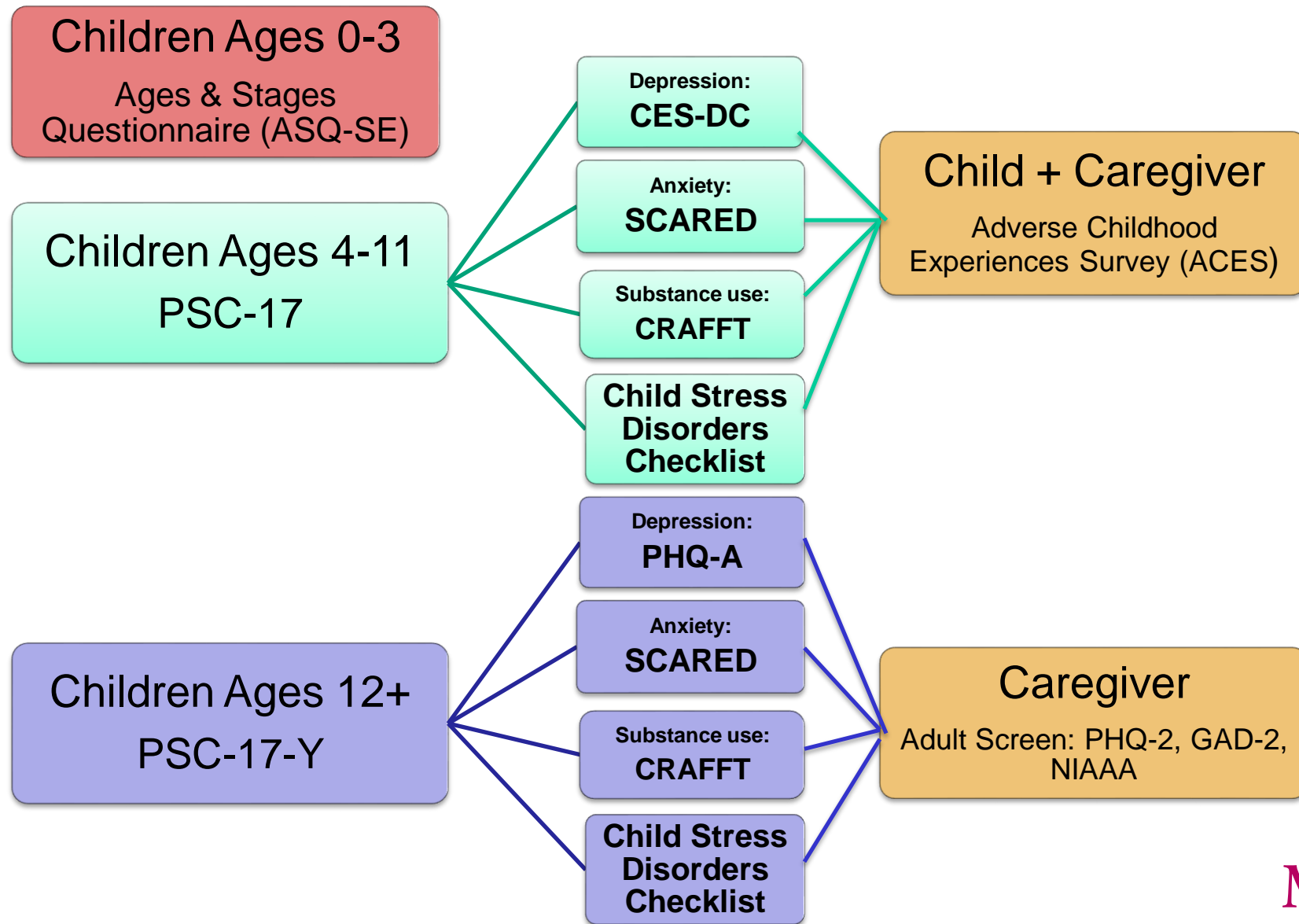Montefiore

Polling Question: Screening

Please select the statement that best describes your site's screening, initial assessment, and BH follow-up workflow as it is performed at least 70% of the time:

A. Patient/Clinician identification of those with BH symptoms- not systematic

B. Systematic BH screening of targeted patient groups (e.g., those with diabetes, CAD) with follow-up for assessment

C. Systematic BH Screening of all patients, with follow-up for assessment and engagement

D. Analysis of patient population to stratify patients with high-risk for BH conditions for proactive assessment and engagement
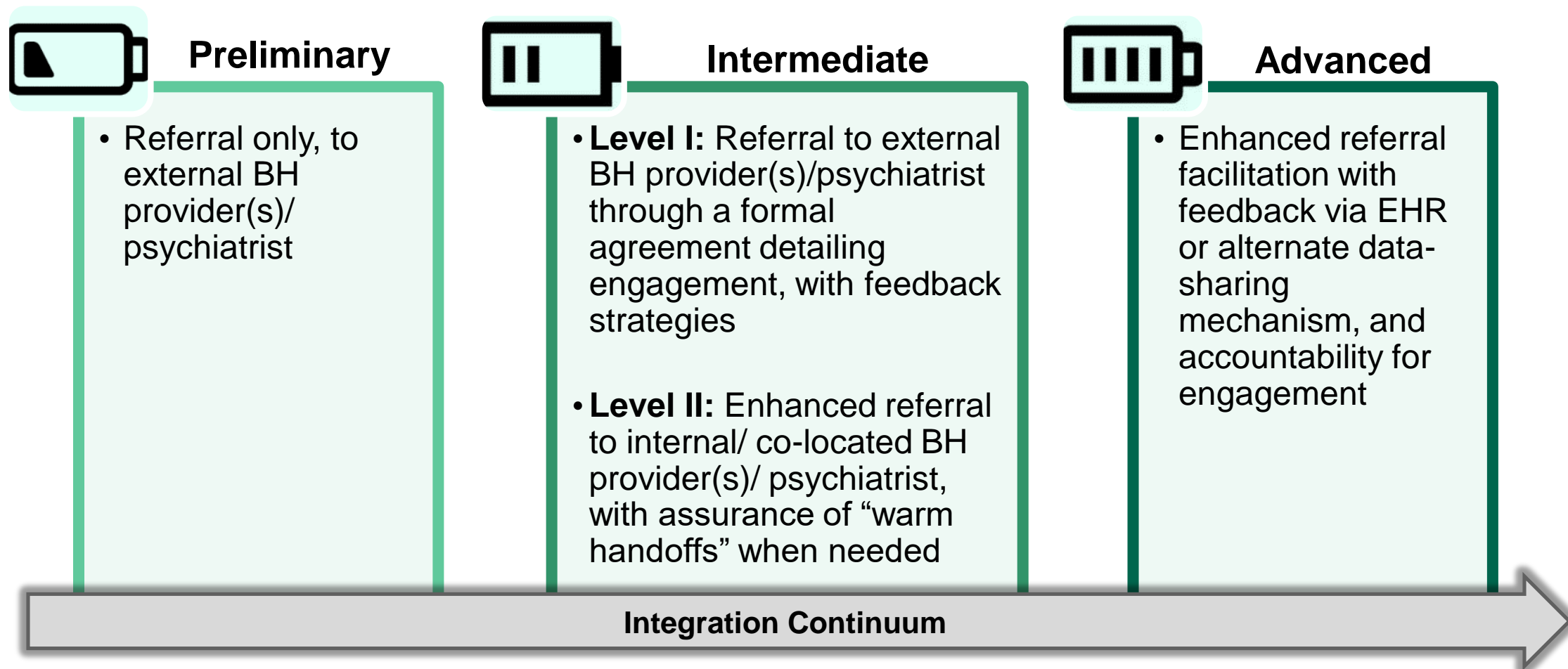
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Universal Screening - Adults

Adults 18+

5-item screen:
PHQ-2, GAD-2, NIAAA

Depression:
PHQ-9

Anxiety:
GAD-7

Alcohol use:
AUDIT-C

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Universal Screening - Children

Children Ages 0-3
Ages & Stages Questionnaire (ASQ-SE)

Children Ages 4-11
PSC-17

Depression:
CES-DC

Anxiety:
SCARED

Substance use:
CRAFFT

Child Stress Disorders Checklist

Child + Caregiver
Adverse Childhood Experiences Survey (ACES)

Children Ages 12+
PSC-17-Y

Depression:
PHQ-A

Anxiety:
SCARED

Substance use:
CRAFFT

Child Stress Disorders Checklist

Caregiver
Adult Screen: PHQ-2, GAD-2, NIAAA

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Framework Levels of Integration

➤ **Domain 1: case finding, initial assessment, and referral to care.**

➤ **Subdomain 2:** *facilitation of referrals, feedback.*

Preliminary

- Referral only, to external BH provider(s)/ psychiatrist

Intermediate

- **Level I:** Referral to external BH provider(s)/psychiatrist through a formal agreement detailing engagement, with feedback strategies

- **Level II:** Enhanced referral to internal/ co-located BH provider(s)/ psychiatrist, with assurance of "warm handoffs" when needed

Advanced

- Enhanced referral facilitation with feedback via EHR or alternate data-sharing mechanism, and accountability for engagement

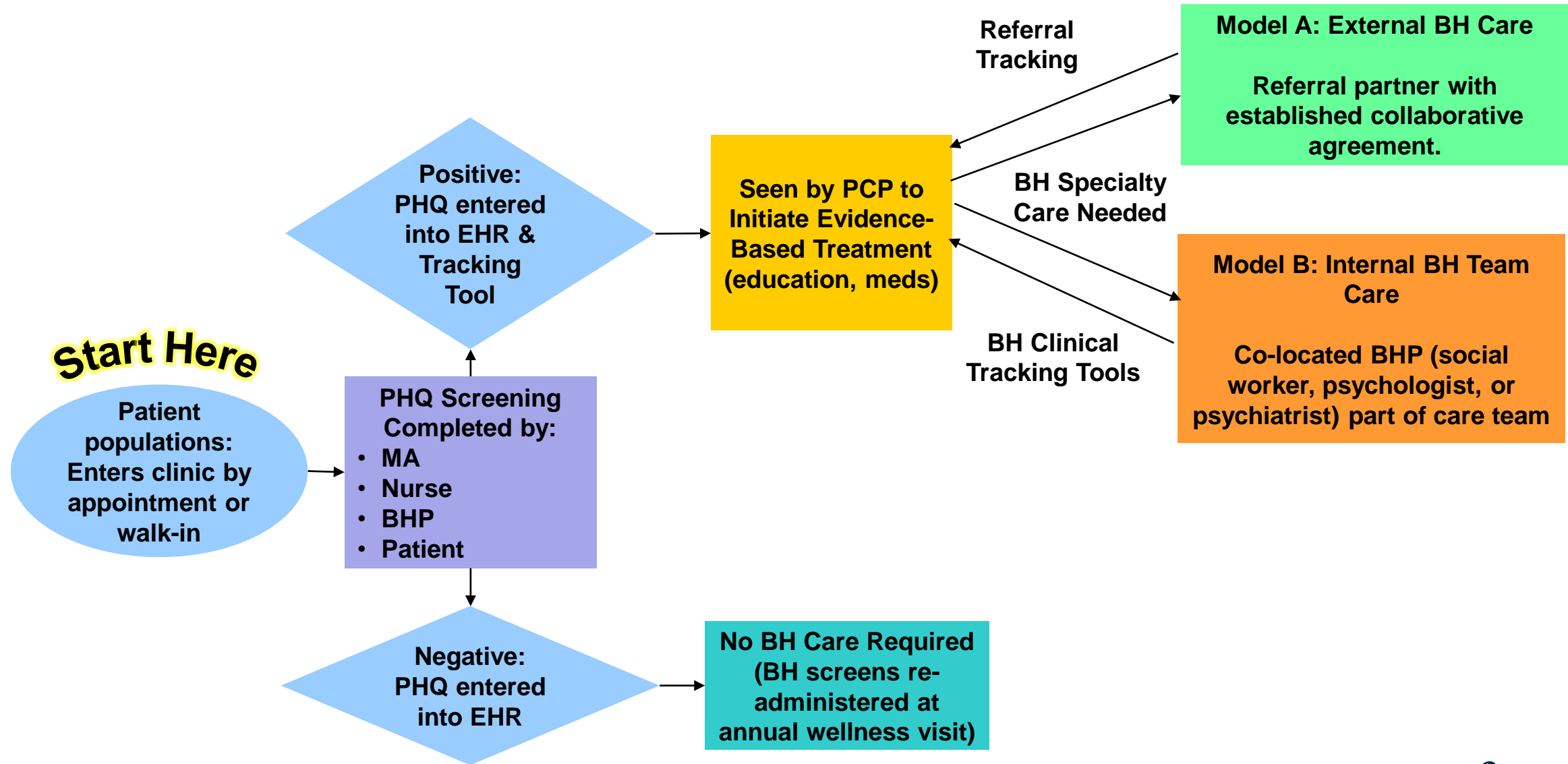**Integration Continuum**

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Polling Question: Referral

Please select the statement that best describes the system your site utilizes for BH referrals and feedback at least 70% of the time:

A. Referral only to external BH provider(s)/psychiatrist

B. Referral to external BH provider(s)/psychiatrist through a formal agreement detailing engagement with feedback strategies

C. Enhanced referral to internal/co-located BH provider(s)/psychiatrist with assurance of "warm handoffs" when needed

D. Enhanced referral facilitation with feedback via EHR or alternative data-sharing mechanism and accountability for engagement

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Screening and Referral Workflow: Internal and External Pathways

Start Here

Patient populations: Enters clinic by appointment or walk-in

PHQ Screening Completed by:
- MA
- Nurse
- BHP
- Patient

Positive: PHQ entered into EHR & Tracking Tool

Negative: PHQ entered into EHR

No BH Care Required (BH screens re-administered at annual wellness visit)

Seen by PCP to Initiate Evidence-Based Treatment (education, meds)

Referral Tracking

BH Specialty Care Needed

BH Clinical Tracking Tools

Model A: External BH Care

Referral partner with established collaborative agreement.

Model B: Internal BH Team Care

Co-located BHP (social worker, psychologist, or psychiatrist) part of care team

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Discussion

We welcome your questions and comments!

Upcoming Sessions

March 3 | **Collaborative Contracting**

Henry Chung, MD
Senior Medical Director, Behavioral Health Integration Strategy, Montefiore Health System
Professor of Psychiatry, Albert Einstein College of Medicine

Marisa Scala-Foley
Director
Aging and Disability Business Institute

March 17 | **Ongoing Care Management Process (Information & Data Sharing)**

March 31 | **Evidence-Based Care & Self-Management**

April 14 | **Community & Social Services Linkages**

April 28 | **Sustainability: Coding for Behavioral Health Services**

May 26 | **Where to Go From Here**

Your SWEEP Team

Have a question? Contact us!

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