



# Defragmenting health: Integrating care through payment, policy, and provision

Benjamin F. Miller, PsyD (@miller7)

Farley Health Policy Center

University of Colorado School of Medicine

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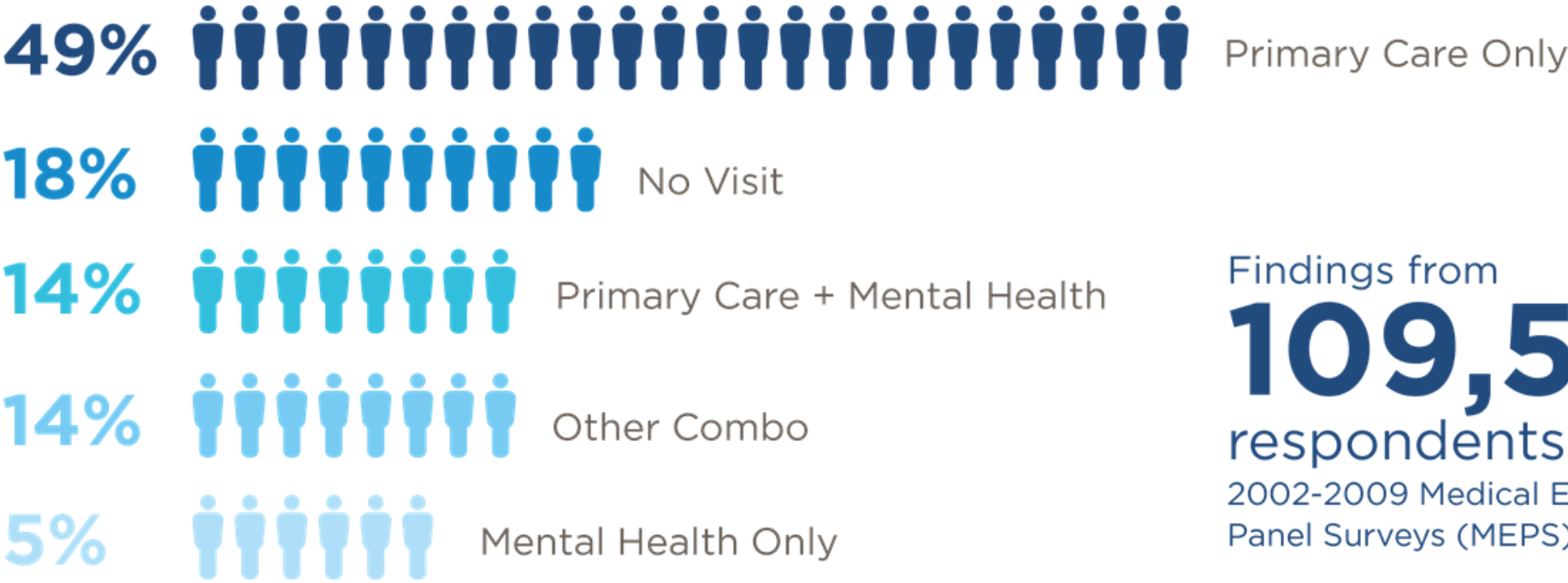




# MENTAL HEALTH TREATMENT PATHWAYS



## Visits for Individuals with Poor Mental Health

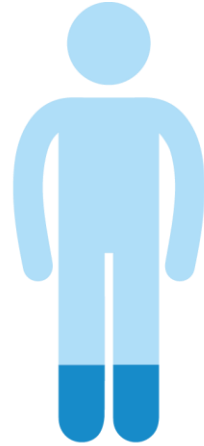


Findings from  
**109,593**  
respondents to the  
2002-2009 Medical Expenditure  
Panel Surveys (MEPS)

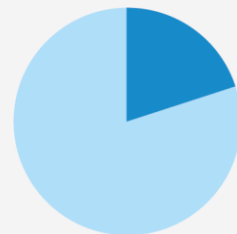




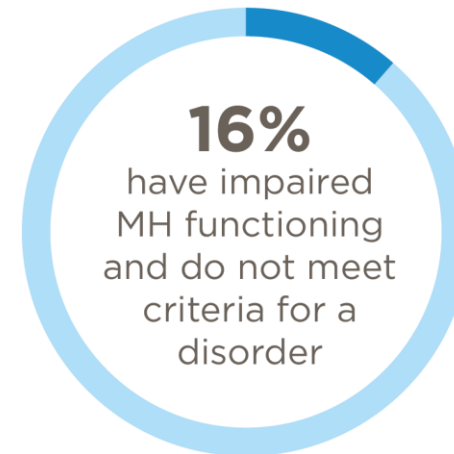
# Child & Adolescent BH



**Approximately 21%**  
of US children and adolescents  
meet diagnostic criteria for a  
**mental health or substance abuse disorder**  
with impaired functioning



**Only 20%**  
of these receive  
needed services



Shaffer D, Fisher P, Dulcan MK, et al. The NIMH Diagnostic Interview Schedule for Children Version 2.3 (DISC-2.3): description, acceptability, prevalence rates, and performance in MECA study. Methods for the Epidemiology of Child and Adolescent Mental Disorders Study. J Am Academy Child Adolescent Psychiatry. 1996;35(7):865-877



## Child & Adolescent BH

Adolescents with mental health disorders are most likely to receive mental health services



\*Except for youth of color (welfare or juvenile justice where MH care received)



# CREATING A CULTURE OF WHOLE HEALTH

Recommendations for Integrating Behavioral Health and Primary Care



## Multi-Method Findings Aligning the Literature, Interviews, Focus Groups, and a National Leader Summit

Benjamin F. Miller, PsyD  
Emma C. Gilchrist, MPH  
Kaile M. Ross, MA  
Shale L. Wong, MD, MSPH  
Larry A. Green, MD

Eugene S. Farley, Jr. Health Policy Center  
University of Colorado School of Medicine

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Integration and payment

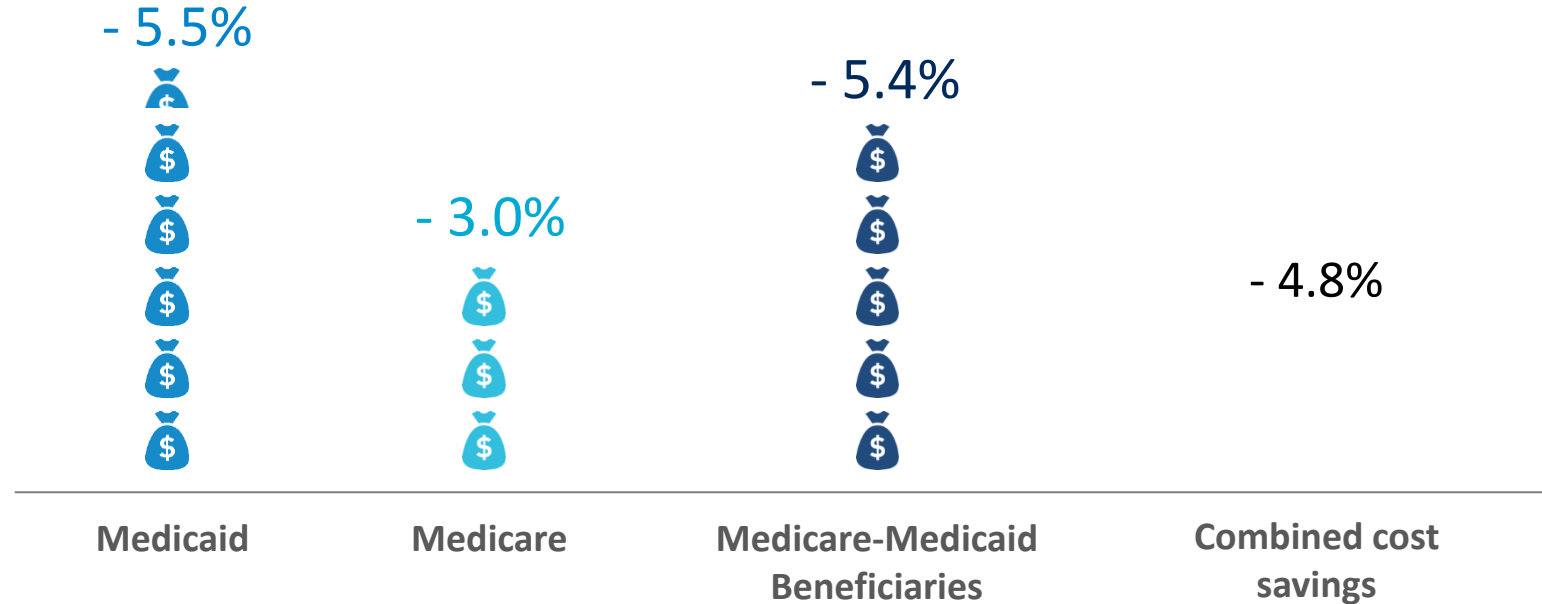
**CHANGE THE PAYMENT, CHANGE THE CARE**





# Comprehensive Care = Cost Savings

- Substantial, independently evaluated total cost of care differentials
- Normalized for differences in population, demographics, risk and price





# Payment recommendations

- This is not about changing the way we pay for behavioral health this is about changing the way pay for health
- Behavioral health should be seen as a critical facet of comprehensive primary care and no different than other investments in high quality comprehensive primary care, such as practice-based care management, measurement and other data use competencies, technology, and practice transformation support
- Global payments for behavioral health services should support team-based care and provide compensations for personnel, interventions, and related infrastructure specific to individual practices (Volume-based reimbursement models may limit the role of the behavioral health provider to patient services and other team-based activities that can be coded for payment)

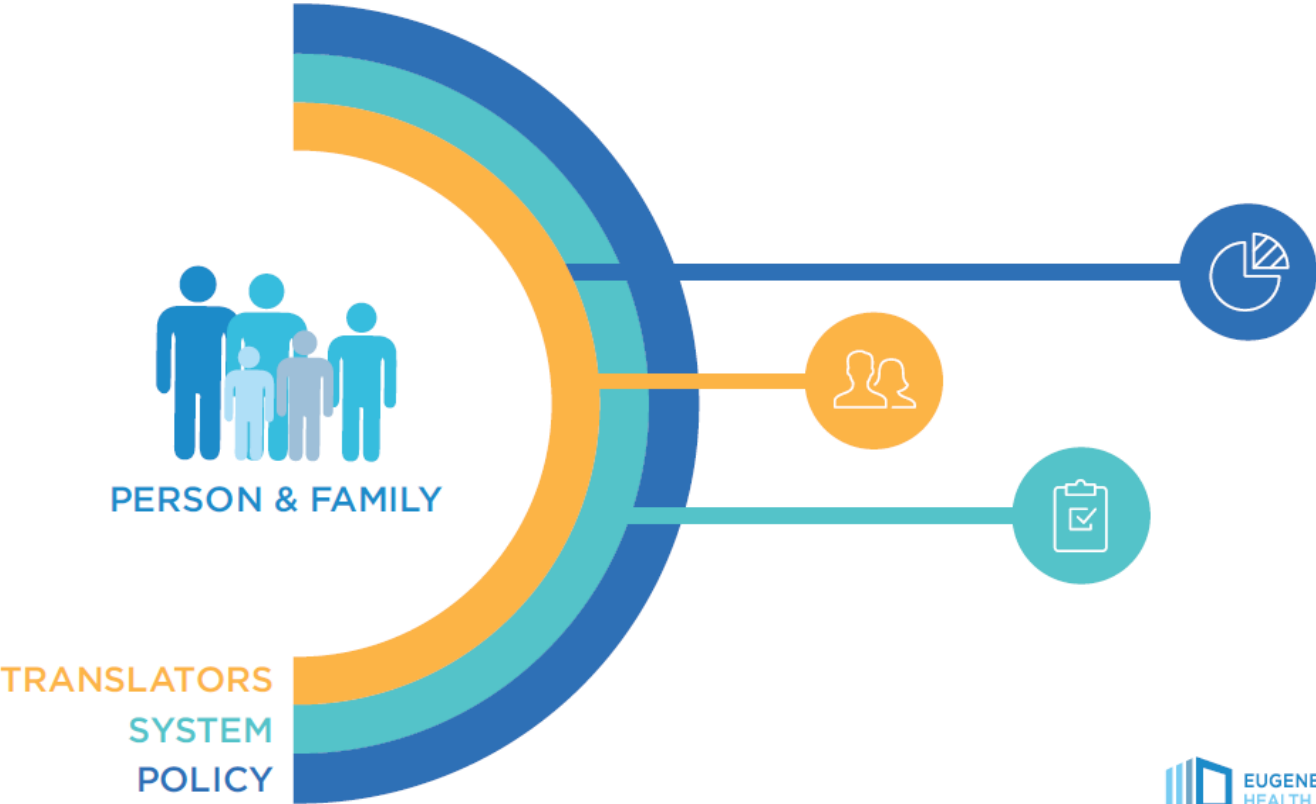


Integration and policy

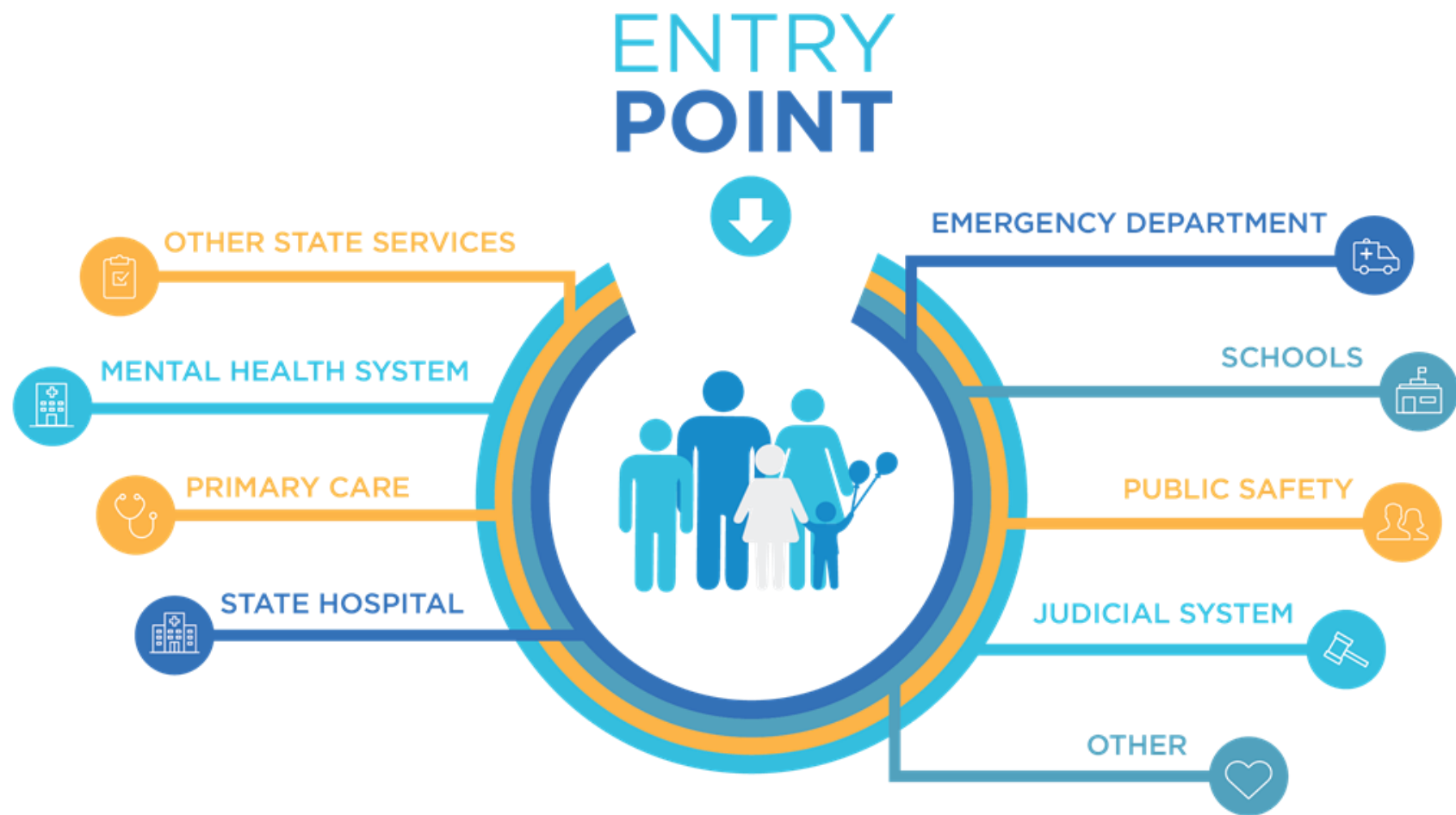
# **DIVISIONS DIVIDE**



CONCEPTUAL FRAMEWORK



# Is no wrong door a possibility?







## Policy recommendations

- Assess how policies limit what treatment options are offered to patients? Do the policies limit where the treatment is offered?
- Make sure there are incentives in place to encourage primary care clinicians to work with behavioral health (e.g. hold them accountable for certain behavioral health conditions)
- Carving out the behavioral health benefit may have unintended consequences on increasing access and allowing for better integrated care
- Fragmentation at the administrative level may limit integration at the delivery level



Integration and provision

# **CREATING THE WORKFORCE FOR THE SYSTEM YOU WANT, NOT THE ONE YOU HAVE**



## A Colorado Consensus Conference:

Establishing Core Competencies for Behavioral  
Health Providers Working in Primary Care





## The big 8

1. Identify and assess behavioral health needs in primary care settings
  2. Engage patients in participating in integrated care in the primary care setting
  3. Treat behavioral health problems and factors as part of primary care plans and teams
  4. Participate in team-based care and collaboration
  5. Communicate frequently with other clinicians and patients
  6. Manage your provider time in the primary care culture
  7. Provide whole-person care with cultural competence
  8. Apply professional values and attitudes in daily work
-



## Clarifying the goal

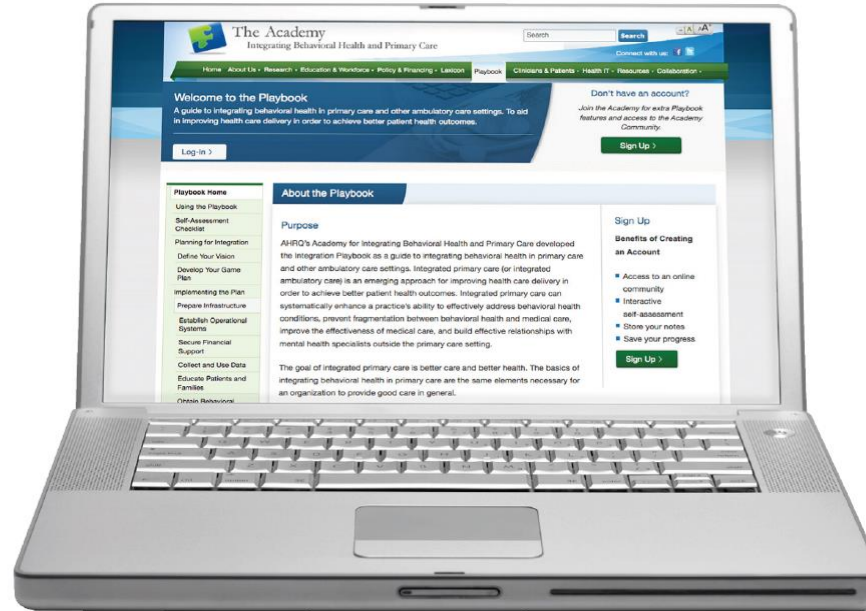
- What is and what is not integration? (see AHRQ Lexicon)
  - Clarifying specialty behavioral health from integrated behavioral health (differentiating populations and needs)
  - Specifying at what level the measures are for (e.g. clinical, process)
  - Structure of data
  - Data quality
-



## A free, Web-based guide to integrating behavioral health in primary care and other ambulatory care settings.

### What topics are covered?

- Planning for integration
- Preparing the infrastructure
- Establishing protocols and clinical workflows
- Developing processes for tracking patients, monitoring outcomes, and maintaining engagement



Available at

[integrationacademy.ahrq.gov/playbook](http://integrationacademy.ahrq.gov/playbook)



**The Academy**  
Integrating Behavioral Health  
and Primary Care



**AHRQ**  
Agency for Healthcare  
Research and Quality

### What's inside?



Tips, resources, and real-world examples of how others are doing it



“North Star” goals toward an ideal integrated behavioral health and ambulatory care setting



What not to do, or the pitfalls to avoid when integrating behavioral health



An interactive integration self-assessment checklist with immediate feedback linked to guidance



Access to the Academy Community, an online forum for peer-to-peer networking and sharing



## Welcome to the Academy

The AHRQ Academy web portal offers you **resources** to **behavioral health and primary care**, and fosters a **collaborative** dialogue and discussion among relevant thought leaders.

**New Atlas of Integrated Behavioral Health Care Quality Measures**

A new Atlas of Integrated Behavioral Health Care Quality Measures (IBHC Measures Atlas) can help primary care organizations measure whether they are providing high quality integrated behavioral health care.

More...

**New & Notable**

- Fri, 02/28/14 Rural Women Miss Out on Mental Health Care
- Fri, 02/28/14 Global Focus on Comorbidity of Depression and Chronic Medical Illness
- Fri, 02/28/14 Get Your Latest News Via the Academy
- Wed, 02/19/14 Pediatric PCPs Hesitate to Prescribe Antidepressants
- Wed, 02/19/14 Coming Soon to the Academy Portal: New Interactive Features

New & Notable items include highlights of current activities of The Academy for Integrating Behavioral Health and Primary Care, as well as new research findings, Federal initiatives and other

**Featured Products**

[Atlas of Integrated Behavioral Health Care Quality Measures](#)

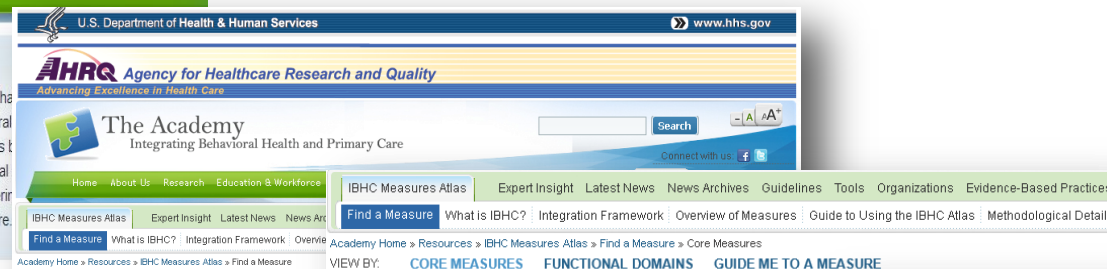
[Lexicon for Behavioral Health](#)

[Academy Webinars](#): National Integration Academy Council members

[NIAC Videos](#): Featuring National Integration Academy Council members

**Neil Korsen, MD, MSc**

The Academy for Integrating Behavioral Health in Primary Care sponsored by the Agency for Healthcare Research and Quality (AHRQ) is an important online tool for those interested in changing health care. View video description



### Find a Measure

There are three ways to find core measures in the IBHC Measures Atlas.

- (1) **By measure**: If you already know the measure you are looking for, go to the [Find a Measure](#) page.
- (2) **By functional domain**: If you know the domain of interest, go to the [Find a Measure](#) page.
- (3) **Guide me to a measure**: If you would like a recommendation, go to the [Guide Me to a Measure](#) page.

For additional measures that apply to a specific instrument, go to [Overview of Measures](#) - Additional Measures

### Core Measures

- [C1. Assessment of Chronic Illness Care](#)
- [C2. Behavioral Health Integration Checklist\\*](#)
- [C3. Competency Assessment Instrument Measures](#)
- [C4. Consumer Assessment of Healthcare Providers and Systems](#)
- [C5. Consumer Assessment of Healthcare Providers and Systems](#)
- [C6. Level of Integration Measure\\*](#)
- [C7. Mental Health Integration Programs\\*](#)
- [C8. Site Self assessment Evaluation Tool\\*](#)
- [C9. Young Adult Health Care Survey Measures](#)

### Additional Measures

#### C2. Behavioral Health Integration Checklist\*

View the measure

**Purpose:**  
To help organizations planning an integrated care implementation to identify the key components of a successful program and to determine which of these they have and which need to be (further) developed. To help assess the level of implementation of integrated care for a given population.

**Developer:**  
Advancing Integrated Mental Health Solutions (AIMS) Center, University of Washington

**Date:**  
2011

**Relevant submeasures:**  
Not applicable

**Format/data source:**  
Organizational checklist

**Development and testing:**  
Developed by the AIMS Center in collaboration with a national group of experts.

**Past or validated applications:**

- Setting:** Primary care and behavioral health
- Population:** Organizations looking to integrate
- Level of evaluation:** Individual or groups of health care professionals

**Sources:**  
AIMS Center, University of Washington

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**Relevant Functional Domains from the Integration Framework:**

- [Business Model Sustainability](#)
- [Care Team Expertise](#)
- [Clinical Workflow](#)
- [Data Collection and Use](#)
- [Desired Outcomes](#)
- [Leadership Alignment](#)
- [Operational Reliability](#)
- [Patient and Family Engagement](#)
- [Patient Identification](#)
- [Treatment Monitoring](#)

#### Patient-Centered Integrated Behavioral Health Care Principles & Tasks

**AIMS CENTER**  
Advancing Integrated Mental Health Solutions

**About This Tool**  
This checklist was developed in consultation with a group of national experts ([http://bit.ly/IMHC\\_experts](http://bit.ly/IMHC_experts)) in integrated behavioral health care with support from The John A. Hartford Foundation, The Robert Wood Johnson Foundation, Agency for Healthcare Research and Quality, and California Healthcare Foundation. For more information, visit: [http://bit.ly/IMHC\\_principles](http://bit.ly/IMHC_principles)

**The core principles of effective integrated behavioral health care include a patient-centered care team providing evidence-based treatments for a defined population of patients using a measurement-based treatment approach.**

**Principles of Care**

	How	When	How often
<b>1. Patient-Centered Care</b> Primary care and behavioral health providers collaborate effectively using shared care plans.	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
<b>2. Population-Based Care</b> Care team shares a defined group of patients tracked in a registry. Practices track and reach out to patients who are not improving and mental health specialists provide case-level focused consultation, not just ad-hoc advice.	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
<b>3. Measurement-Based Treatment to Target</b> Each patient's treatment plan clearly articulates personal goals and clinical outcomes that are routinely measured. Treatments are adjusted if patients are not improving as expected.	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
<b>4. Evidence-Based Care</b> Patients are offered treatments for which there is credible research evidence to support their efficacy in treating the target condition.	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
<b>5. Accountable Care</b> Providers are accountable and reimbursed for quality care and outcomes.	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>

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## The take away

- Define or be defined
  - How can you measure what's not been defined?
- Begin to consider parsimonious measures and **measure alignment** (and consider the multitude of federal, state, and local programs)
- Consider how payment and measurement are uniquely connected and often perpetuate fragmentation
- Leverage alternative payment models in support of the team



# UPSTREAM

A scenic landscape featuring a deep blue fjord or river winding through rugged, rocky mountains. The sky is filled with large, white, fluffy clouds. The word "UPSTREAM" is overlaid in large, white, sans-serif capital letters across the center of the image.

# RESOURCES

## One stop

[integrationacademy.ahrq.gov](https://integrationacademy.ahrq.gov)

## Policy

[farleyhealthpolicycenter.org](https://farleyhealthpolicycenter.org)

## Case study

[advancingcaretogether.org](https://advancingcaretogether.org)

## State example

[coloradosim.org](https://coloradosim.org)

## National organization

[cfha.net](https://cfha.net)

## Email

[Benjamin.miller@ucdenver.edu](mailto:Benjamin.miller@ucdenver.edu)