The Academy
Integrating Behavioral Health and Primary Care

Atlas for Integrating Behavioral Health and Primary Care
Vasudha Narayanan, Westat
June 30, 2014

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Acknowledgements

- Charlotte Mullican, MPH, AHRQ Project Officer
- Neil Korsen, M.D., M.Sc, Maine Health
- Lauren Mercincavage, MHS, Westat
- Josh Noda, MPP, Westat
- CJ Peek, PhD, University of Minnesota
- Benjamin Miller, PsyD, PI - UC Denver
- Jürgen Unützer, MD, MA, MPH, University of WA
- Garrett E. Moran, PhD, Project Director - Westat
- Kitty Christensen, MPH, University of WA
- NIAC

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AHRQ's Focus on Integrating Behavioral Health and Primary Care (BH/PC)

- AHRQ published a comprehensive review ("Integration of Mental Health/Substance Abuse and Primary Care") of the available evidence on integrated BH/PC in 2008

- AHRQ funded a research agenda conference grant in 2009 which resulted in an early Lexicon draft

- A paper on the Future Research Needs for Integration followed in 2010

- The Academy for Integrating Behavioral Health and Primary Care was initially funded in 2010

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LEXICON http://integrationacademy.ahrq.gov/lexicon

Lexicon for Behavioral Health and Primary Care Integration

Concepts and Definitions Developed by Expert Consensus

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- The Lexicon serves as the foundation for much of the Academy's work
- Goal of the Lexicon was to develop conceptual & definitional clarity
- Focused on what functionalities look like in practice (not just principles and values)

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What is Integrated Behavioral and Primary Care?

The care a patient experiences as a result of a team of primary care and behavioral health clinicians, working together with patients and families, using a systematic and cost-effective approach to provide patient-centered care for a defined population.

This care may address mental health and substance abuse conditions, health behaviors (including their contribution to chronic medical illnesses), life stressors and crises, stress-related physical symptoms, and ineffective patterns of health care utilization.

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Methods

- Framework development

- Literature review and environment scan for measures

- Design and implementation of the Web-based tool

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Elements of Integration Framework

- Two major components: functional domains and measurement constructs

- ***Functional Domains*** divide and organize the Integration Framework into high-level functions or actions.

- ***Measurement Constructs*** describe specific structures, processes, and outcomes observed in integrated behavioral health care.

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Functional Domains

- 11 functional domains organized as follows:

  - Clinical functions necessary for integrated behavioral health care.

  - Enabling functions that support integrated care

  - Potential outcomes of integrated care

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Measurement Constructs

- Specific structures, processes, and outcomes observed during integrated behavioral health care

- Structure and process constructs used to understand if a team is working collaboratively.

- Example: Patient Identification:

  – Structure construct: methods to identify and prioritize individuals for integrated care should be specified in an agreed-upon workflow,

  – Process construct: those agreed-upon methods should be used consistently.

  – Outcomes constructs: the potential results of implementing the structures and processes of integrated behavioral health care.

Integration Framework

- Clinical Functions

  - Care Team Expertise

  - Clinical Workflow

  - Patient Identification

  - Treatment Monitoring

  - Patient and Family Engagement

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Integration Framework (Cont.)

- Enabling Functions

  – Leadership Alignment

  – Operational Reliability

  – Business Model Sustainability

  – Data Collection and Use

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Integration Framework (cont.)

- Potential Outcomes of Integrated Care

    - Patient experience

    - Provider experience

    - System experience

    - Clinical outcomes

    - Financial outcomes

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http://integrationacademy.ahrq.gov/atlas

IBHC Measures Atlas: Search for Measures

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