Integration of Behavioral Health into Adult Primary Care

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BACKGROUND

The current United States healthcare system is fragmented, limiting access to mental health services and neglecting to address comorbid diagnoses that may be present and deteriorating to many individuals. Screening for mental health and wellness is just as significant to preventative treatment as screening for common physical health problems, as both can be equally detrimental. Integrated behavioral health care is a model of patient care that is person-centered and focuses on providing mental health services in the primary care setting. This model has the potential to improve outcomes for millions of Americans that suffer from these comorbid physical and mental health problems (Grazier, Smiley, & Bondalapati, 2016). While there are barriers to implementing care, there are benefits that can far outweigh the challenges faced by providers.

BARRIERS AND CHALLENGES

- Overall resistance to change
- Current healthcare fragmentation
- Poor or lack of provider communication
- Role identification when collaborating
- Electronic medical record design fragmentation
- Organizational and political issues
- Shortage of psychiatric providers and large volume of referrals
- Financial and insurance reimbursement issues (Kroenke & Unutzer, 2017)

PURPOSE

The purpose is to demonstrate the benefits of integrating behavioral health into adult primary care and investigate the challenges and barriers of implementation.

STATISTICS

- More than 50% of individuals meet the criteria for two or more psychiatric illnesses (Soltis-Jarrett, et al., 2017).
- Individuals with severe and persistent psychiatric illness are shown to die 25 years earlier than the general population (Soltis-Jarrett, et al., 2017).
- In 2017, less than half (46.2%) of adults with a mental illness received mental health services (National Institute of Mental Health, 2019).
- In 2017, adults aged 18-25 years with a mental illness were less likely to receive mental health treatment than adults aged 26 and older (NIMH, 2019).

METHODS

A literature review of 45 articles was conducted to investigate the challenges, barriers, facilitators, and benefits of an integrated behavioral health care model. Three databases (PubMed, CINHAL, and MEDLINE: full text) were searched with the keywords: Primary care, behavioral health, integrated care, integrative health, mental health, intervention, psychiatry, patient satisfaction. Relevant articles were published between 2004 and 2019. The focus of the review is on the adult population including those from low socioeconomic areas with underlying depression, anxiety, trauma, and substance use disorders.

BENEFITS & FACILITATORS

- A decrease in stigmatism for those seeking treatment (Miller-Matero et al., 2018).
- Early identification and screening with referral to treatment (Kroenke & Unutzer, 2017).
- Familiarity and easier access of care (Christian, Krall, Hulkuover, & Stigleman, 2018).
- Typically very low “no show” rates with behavioral health appointments (Lauzer, Marenakos, Gaffney, Ketron, & Huncik, 2018).
- High levels of satisfaction among patients and staff (Ede, et al., 2015).
- Co-location of providers promotes communication and allows for expedited treatment plans (Ling, Bereton, Conklin, Newbould, & Roland, 2012).
- A strong understanding of roles and responsibility among staff (Bussetu, Luijkj, Calciolari, Ortiz & Vrijhoef, 2018).
- Adequate training of staff on mental health symptoms (Walada et al., 2018).
- Strong support from the community (Barracough, Longman, & Barclay, 2016).
- A strong IT infrastructure including accessible patient electronic health records and proper billing codes (Ling, et al., 2012; SAMHSA, 2014).
- Warm handoffs (Buche et al., 2017).

CONCLUSION

The integration of mental health services into adult primary care has been shown to be beneficial for the patient, family, and providers. This collaborative, holistic approach allows for patient triage, intervention, and education. The use of screening tools for depression, anxiety, and substance use concerns identify those in need of intervention. Although there are challenges involved with implementation, the overall patient outcome has demonstrated many benefits that are extremely favorable to the patient’s overall wellness. There is a vital need for more research related to sustainability and level of services needed to accommodate community needs. (Christian, Krall, Hulkuover & Stigleman, 2018).