



Implementation of Behavioral Health in Primary Care

“What do I do now ?”

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Disclosures

I HAVE NO RELEVANT FINANCIAL RELATIONSHIP WITH A COMMERCIAL INTEREST TO DISCLOSE.





IMPLEMENTATION

- Meet with your team and discuss plans for integration of a Behavioral Health Care in your office.
- Team should include administration, front desk, schedulers, nursing staff and all providers.
- Create a positive culture around caring for BH patients.
- Schedule a meeting with your coders and billing company.
- Engage your provider representatives from your local payers.

You need to lay the groundwork for practice transformation your TEACH training affords you.





Implementation

- Utilize your EMR .
- Develop templates for BH visits; include time stamp and goals of therapy.
- Use your EMR to track your visits; will help with care coordination , pre-planning and advocacy.





Implementation

The screenshot displays a medical chart interface for a patient named "Test Test" (DOB: 08/03/1974, 46 yrs, Acct# 26793). The chart is titled "Anxietyprimarycare - 10/15/20 - OPEN" and is managed by "MATTIMORE, COLLEEN, M.D.". The interface includes a top navigation bar with options like "Route", "Send", "Import", "Open/Exit", "Approve/Exit", and "Close/Exit". Below the navigation bar, there are tabs for "Dx Selection", "CPT Selection", and "+ PT Teaching". The main content area shows an "Assessment #1" with a diagnosis of "Hx F43.22 Adjustment disorder with anxiety". The "Comments" section includes "Acute. Moderate". The "Care Plan" section lists various options like "+ Med", "+ Lab", "+ Xray", "+ Order", "+ Edu", "Misc", "+ Ref", "F/U", and "+ Imm/Inj". The "Recommendation" section includes "Goals" and "+ Vaccine Refusal". The "Comments" section contains detailed notes: "Barriers to obtaining goals: no", "Prognosis: Fair", "Co-managing Mental Health Provider: Local Therapist", "Education: Extensive education regarding need for counseling, exercise, healthy diet, sleep, and medication.", "Time spent counseling: 16-37 minutes", "Follow Up: Followup: 2 weeks.", and "Goals: Intervention Plan". The "Goals" section includes: "* Goal(Short/Long Term): Treatment goals met, patient was instructed to maintain current self-management plan.", "* Therapeutic Intervention: Discussion with patient and family about: All questions are answered.", "* Medications:", and "* Plan: Patient will work on therapeutic interventions and goals discussed above until next follow up visit. Patient (and support persons - when appropriate) were advised to call crisis". The interface also features a right-hand sidebar with navigation options like "Top", "CC", "HPI", "PMH", "FH", "SH", "ROS", "Vitals", "Exam", "CP", "Bottom", and ">>". The bottom status bar shows "INSERT MODE", "Shorthand is OFF", "Row 16 Col 84", "Pg 2 Ln 3.56" Pos 6.53".





Implementation

- Schedule- allow adequate time for BH visits.
- Bring patients and families back for follow up; manage your schedule . Don't try and do everything in one visit
- Utilize telemedicine , video visits (Doxy.me)





Implementation

- Use the screening tools ! Have all screening tools ready in folders. Include their use in the am huddle.
- Keep Project Teach resources handy; remember warm lines for questioning.
- Don't forget releases, use a specific release for mental health.
- Consider contracts (ADHD; medication management)
- Document CAP-PC consults (we use phone triage)





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Cut Copy Paste Format Painter Clipboard

Font Paragraph Styles Editing

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Find Replace Select

Navigation

Search Document

This document does not contain headings.

To create navigation tabs, create headings in your document by applying Heading Styles.

Document Recovery

Word has recovered the following files. Save the ones you wish to keep.

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- Document1 [Aut... Version created ... 4:47 PM Tuesda...
- Letter to HN re B... Version created l... 8:06 PM Wednes...
- BH incentive lett... Version created l... 8:13 PM Wednes...

Which file do I want to save?

Close

Western New York Pediatric Associates LLC
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Orchard Park, NY 14127
Phone: 662-7337 Fax: 662-0641

PATIENT NAME: _____ DOB: _____

**CONSENT FOR MEDICATION
SSRIs AND OTHER ANTIDEPRESSANT MEDICINES**

I, _____, the parent/legal guardian of _____, agree to the use of the following medication for my child. I have been told the desired effects which may include:

1. Better mood, happier, less crying
2. Less argumentative, cranky, or irritable
3. Less negative thinking
4. Less anxiety or nervousness, panic attacks
5. Less obsessive compulsive symptoms
6. Better, sounder sleep
7. Better concentration and motivation
8. Less suicidal thinking or behaviors

These medications often take a number of weeks (even 1-2 months) to reach their full effect. Be patient!

Common side effects and risks have also been discussed and may include:
(Call your doctor if these do not go away within 2 weeks)





Implementation

- Practice Models- Embedded Mental Health Providers.
- WNY Pediatrics- employs a LMHC on staff, FT
- Team based approach that has proven to be invaluable. A positive impact on cost of care and less stress on providers.
- Embraced by our patients and families
- See patients at POS ; “quick touches”, her own schedule for counseling and follow up and assists in linking families with counselors and therapists.
- We also have a therapy dog





Implementation

- Advocacy- get involved !!
- American Academy of Pediatrics-Private Payer Advocacy.
- Pediatric Counsels – success in WNY with a Incentive Program around BH with BCBS
- VBP models/ Capitation in WNY





Thank you !



