Successful Treatment of SMI in New Health Care Systems

Integrating Primary Care and Medication Management for Mental Health

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The most important health systems challenge facing mental health care is proper integration of health and behavioral health care.

At stake is a remarkable opportunity to improve medical and social outcomes for those with severe mental illness.
MH was carved out of general health 45 years ago
Response to perceived insufficient allocation of resources for MH treatment
Advocates created a better system, with guaranteed funding, more humane care, patient empowerment, and a much broader range of rehabilitative resources.
Great strides in treatment of mental illness were made, but this carved out system came at terrible cost.
What was Wrong with the Carve-out?

- Psychopharmacologic tx of MI was substandard.
- Integration of psychopharmacologic tx of MH and general medical conditions, which often co-occur, was almost non-existent. (e.g., geriatric medicine).
- Access to addiction medicine tx for co-occurring substance abuse, was very limited.
- Seriously physically ill MH patients were ostracized from primary care.
In service of the triple aim (lower cost, better population health, better experience of care), health services are reorganizing with patient-centered health homes as primary care hubs.

Properly done, this eliminates silos and offers a fresh way to integrate behavioral health.

But there are challenges.
Primary care homes with the capacity to manage reasonably stabilized patients with MH challenges, including MH consultation and management of psychopharmacologic needs.

Behavioral health homes with a broader range of disciplines to permit routine psychopharmacologic management to be delivered in the most cost-effective manner.

Proper range of rehabilitative services in both settings.
An Immediate Psychopharmacology Challenge

- Develop rational, high quality, cost effective psychopharmacologic management that is integrated into overall pharmacologic management of general medical conditions in both primary care settings and in behavioral setting health.
- Clinical pharmacists play a key role.
Objectives

- Discuss strategy to overcome mental health treatment challenges
- Role of clinical pharmacist trained in Mental Health Services and Primary Care
  - Delivery of cost effective treatment/care and management consultation
- Critical pharmacy leadership roles
Medication Therapy in Mental Health: Clinical Pharmacy Services

- Definition of Medication Therapy Management (MTM): Patient specific assessment or intervention
  - Optimize medication therapy and avoid potential drug related complications.
- MTM in Psychiatry/Mental Health Services
  - Conduct MSE, collect client history necessary to design pharmacotherapeutic plan, establish therapeutic goals with treatment team
  - Recommend/initiate/modify pharmacotherapy treatment
  - Develop monitoring plan, assess outcomes, etc.
  - Educate medical and non-medical staff
Clinical pharmacists provide medication management under protocol for primary care patients along with MDs, PAs, and NPs.

- Clinical Pharmacist trained in both primary care and specialized mental health
- May be best equipped to provide psychopharmacologic management in these settings for stabilized mental health patients that currently have limited access to these settings
Clinical Pharmacist: Behavioral Health Homes (BHHs)

- BHHs: Provide necessary range of specialized services to clients with severe mental illness (SMI)
- Resemble current comprehensive mental health programs (DMH outpatient clinic)
- However, BHHs will have capacity to deliver integrated management of primary care services
  - Challenges to developing this primary care capacity, including limited staff and training
Clinical Pharmacist: Behavioral Health Homes (BHHs)

- Clinical pharmacist can provide critical BHH services
- Provide integrative care with primary care providers
- Additionally provide systems leadership in designing BHHs.
  - Ideally suited in delivering complex psychopharmacologic management under protocol in BHHs
    - Psychopharmacologic management involves complex interactions with other prescribed medication and illnesses
Pharmacy Leadership Roles in Integrated Behavioral Health Planning

- Development of pharmacologic treatment protocols and formulary management that span primary care and specialty care
- Substance Abuse Prevention and Control (DPH)
  - Medication assisted treatment (MAT)
  - Coordinate access of Naltrexone
  - Naloxone survival kit in BHHs
Pharmacy Leadership Roles in Integrated Behavioral Health Planning

- State requirement for TAR in minors
- Coordination of access to atypical antipsychotics in
  - Communicate with State TAR department concerns and streamline process of approval
  - Development of TAR information form
  - Instruct providers in DMH Clinics to facilitate medication access for minors
Pharmacy Leadership Roles in Integrated Behavioral Health Planning

- Configuration of behavior health information systems
  - Integration Behavioral Health Information System (IBHIS) and e-Prescribing System
  - Meaningful Use Measures
  - Laboratory Services
  - Pharmacy Benefit Manager
Questions

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