

# Integrating Mental and Physical Care for Whole Person Health

A KHC Community Health Forum

December 5, 2023 | 9:00am-11:00am



Kentuckiana  
Health Collaborative

*Building a Bridge to Better Health, Better Care and Better Value*



# Welcoming Remarks



**Natalie Middaugh, MPH, CHES**  
Director, Programs and Health Strategies  
Kentuckiana Health Collaborative



# Event Sponsor



# Agenda

- ▼ 9:00am – Welcoming Remarks
- ▼ 9:10am – Integrating Mental and Physical Care for Whole Person Health
- ▼ 9:50am – Panel Discussion – Implementation Challenges and Opportunities
- ▼ 10:55am – Closing Remarks



# Objectives

- ▶ Learn the origin and impact of fragmentation of physical and mental care
- ▶ Distinguish components of integrated care and whole person health
- ▶ Understand the benefits of an integrated approach to physical and mental care
- ▶ Identify actionable approaches and outcomes of an integrated care model

# Integrating Mental and Physical Care for Whole Person Health




**Elizabeth W. McKune, Ed.D.**  
Chief Operating Officer  
Seven Counties Services







**Integrating Mental and Physical Care  
for Whole Person Health**  
Elizabeth W. McKune, Ed.D.  
December 5, 2023



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# Evolution of Integrated Care in US

- Origin and Impact of Fragmentation of Physical and Mental Health Care
- Distinguish the Components of Integrated Care and Whole Person Health
- Benefits of an Integrated Approach
- Actionable Approaches and Outcomes on Integrated Care



## Fragmented Care Historic Origins



*“The difficulty is not merely that mind and body are different. It is that they are different in such a way that their interaction is impossible.”*

*Rene Descartes, 1641.*

Thibaut F. The mind-body Cartesian dualism and psychiatry. *Dialogues Clin Neurosci.* 2018 Mar;20(1):3. doi: 10.31887/DCNS.2018.20.1/fthibaut. PMID: 29946205; PMCID: PMC6016047.

## Need for Integration

- Less than half of the 59 million Americans experiencing mental illness in 2020 received any treatment
- People with severe mental illness die on average 25 years sooner
- In 2009, the Foundation for a Healthy Kentucky conducted a health issues poll and found that 7 out of 10 Kentuckians surveyed favored integrating physical and mental health services
- Recent analysis by the U.S. Agency for Healthcare Research and Quality (AHRQ) found a wide variety of methods are being used across the nation—87 different approaches to integrate behavioral health and primary care were evaluated
- The collaborative care model and primary care behavioral health were the most common.

M.Oss (10/19/2023). *Behavioral health integration evolves*. Open Minds Daily Executive Briefing.

NASMHPD. (10/2006). *Morbidity and Mortality in People with Severe Mental Illness*.

Foundation for a Health Kentucky (12/2009). *What Kentuckians think about integrating mental and physical health*.



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# Key Reasons to Integrate Physical and Behavioral Health Services in Medicaid



Medicaid pays for more than a quarter, 26%, of all behavioral health spending nationally



Beneficiaries with behavioral health diagnoses account for almost half, 48%, of total Medicaid expenditures



20% of beneficiaries have a behavioral health — mental health and/or substance use disorder — diagnosis



Spending can increase up to 75% when beneficiaries with a chronic physical condition also have a mental illness

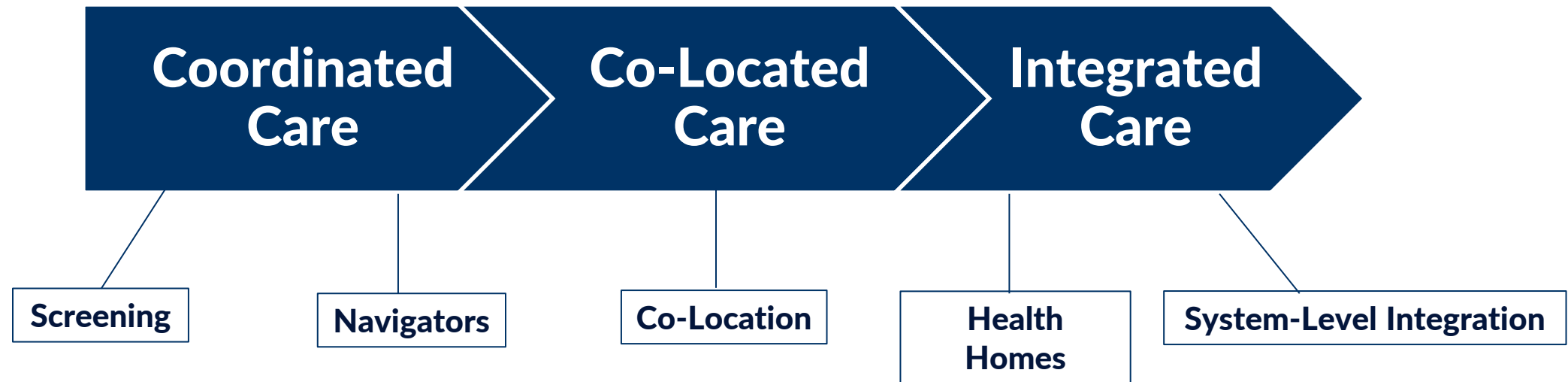
[www.chcs.org](http://www.chcs.org) | @CHCShealth

SOURCES: Report to Congress on Medicaid and CHIP, Medicaid and CHIP Payment and Access Commission, June 2015; Clarifying Multimorbidity Patterns to Improve Targeting and Delivery of Clinical Services for Medicaid Populations, Center for Health Care Strategies, December 2010.



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# Continuum of Approaches to Physical and Behavioral Health Care Integration



Nardone, M., Snyder, S., & J. Paradise (2014). *Integrating physical and behavioral health care: Promising Medicaid models*. Kaiser Family Foundation Issue Brief.



# Recent Data Suggesting Movement toward Integration

- 79% of all antidepressant medications and 45% of all antipsychotic medications are prescribed by a primary care physician
- Medicaid behavioral health benefits are moving away from “carve out” models towards integrated care
- More and more health plans are including behavioral health in their primary care capitation models each year.
- 73% of primary care provider organizations and 51% of specialty provider organizations have adopted a strategy to integrate treatment



M. Oss (11/7/2023). “Whole person care as a “strategy”. Open Minds Daily Executive Briefing.



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## Whole Person Care

- Integrating services
- Improving care coordination
- Embracing a team-based approach
- Engaging with the community



*The ultimate goal is to provide comprehensive, patient-centered care that addresses physical, mental, social, and spiritual well-being.*

M. Oss (11/7/2023). "Whole person care as a "strategy". Open Minds Daily Executive Briefing.



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# Key Decision – What Integrated Care Models To Develop?

## Integrated Care Service Line Options: The *OPEN MINDS* Framework

### Specialty care

- Specialty care – as tech-enabled referral partner
- Specialty care – co-located in primary care setting
- Specialty care – as part of collaborative care model
- Specialty care – as part of a clinically integrated network

### Primary care

- Primary care – as tech-enabled referral partner
- Primary care – co-located in behavioral health setting
- Primary care - as part of collaborative care model

### Care coordination/care management

- Whole person care (WPC) screening services
- Targeted case management services
- Navigator/CHOW (community health outreach worker) services
- Community care team services

### Patient-centered medical home or health home

### Primary care and behavioral health services

- Behavioral health and primary care on-site
- Behavioral health on-site and primary care in-home
- Behavioral health on-site and primary care virtual
- Primary care on-site and behavioral in-home
- Primary care on-site and behavioral virtual
- Certified Community Behavioral Health Clinic (CCBHC)
- Federally Qualified Health Center (FQHC) or FQHC “Lookalike”

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# Building Whole Person Approaches

## Expanded Staffing Models

- There are 86,000 CHWs in the U.S. but that number is expected to increase by 15% by 2029.
- CHW employment is moving away from community-based organizations and into health care organizations.
- Hospitals and health systems have been shown to save as much as \$2.28 for every dollar they spend on a CHW program
- Expanding payment for Non-Traditional Roles

## Alternative Roles

- Consumer assessments and screening
- Care coordination
- Referral tracking
- Health coaching
- Crisis response
- Technology enabled care

## Launching of Value-Based Care Initiatives with Alternative Funding

M.Oss. (9/22/2023). *Rethinking the whole person care team*. Open Minds Daily Executive Briefing.



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# Panel Discussion – Implementation Challenges and Opportunities



**Moderator**  
**Eric Russ, Ph.D.**  
Executive Director  
Kentucky Psychological  
Association



**Russelyn Cruse, BSN, RN,  
CCM**  
Program Manager, Quality  
Assurance  
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**Diane Fahrback**  
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Wellbeing Solutions  
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Blue Shield



**Lori Frazier**  
Senior Buyer, HR  
Services, Health  
Services, and Employee  
Benefits  
GE Appliances, a Haier  
company

# Closing Remarks



**Jenny Goins, SPHR, MA**  
President and CEO  
Kentuckiana Health Collaborative



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*Thank you for attending!  
Slides and an event  
evaluation will be emailed  
to you.*

