BPHC Enrichment Series for Grantees: The Value of Psychologists in Health Centers

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Learning Objectives

• Identify the role of psychologists in health care settings and the significance of integrating primary and behavioral health: What are the values a psychologist adds to health centers?

• Review key statistics on psychologists working in health centers

• Learn about specific services provided by psychologists in integrated community health care centers and how their services benefit health centers both financially and in improving quality of care

• Review methods, resources, and options for health centers in recruiting psychologists (i.e. part-time, consulting, Telehealth)
Agenda in Brief

• Background and Importance of this issue for health centers
• Key statistics and services of psychologists
• One Grantee’s approach: Cherokee Health Systems
• Helpful resources
• Questions
Key Statistics from UDS (2009):

Full-time Psychologists employed by FQHCs: 319
Number of Visits: 348,211

Breakdown of all FQHC Behavioral Health Providers:
Psychiatrists – 348
Psychologists – 319
Clinical Social Workers – 1,070
Other licensed mental health providers- 826
Substance Abuse Providers - 822
Key Statistics from NACHC 2010 Assessment of Behavioral Health Services in Federally Qualified Health Centers

- Close to 1,000 FQHCs surveyed
- Psychologists found in 112 FQHCs and comprise only 8.6 percent of the total specialty behavioral health FTEs reported
- 13.2 percent of the FQHCs in the survey serve as training sites for psychologists
- Survey notes a need for psychologists in health centers that have a high rate of pediatric activity and a higher need for psychological testing for early onset of disorders, i.e. ADHD
- Challenge: The lack of Licensed Psychologists providing services in FQHCs
Value of Psychological Services

• Collaboration between health professionals leads to a more complete understanding of the patient’s needs and preferences with improved health outcomes

• Interdisciplinary and coordinated care enables healthy behaviors and compliance with medication – saves time and money

Psychologists:

• Will help the underserved and advance the integration of behavioral health and primary care

• Can address the special behavioral health needs of the underserved

• Have educational backgrounds with years of clinical training in the field as well as diverse skill sets acquired through years of experience

• Can provide support for patients struggling with chronic illness
Benefit of Psychologists in FQHCs

• Behavioral health factors play a significant role in prevention, diagnosis, treatment in 70% of chronic illnesses
• 70% of primary care visits have a significant psychological component
• Depression is prevalent in over 20% of patients with chronic and or terminal illnesses
• Multiple physical, emotional and interpersonal problems are associated with substance abuse - Screening and intervention in primary care is shown to reduce use
Benefit of Psychologists in FQHCs (cont'd)

• Access – At least 50% better access to Mental Health care if offered in primary care. (Bartels, et al. Am J Psych, 2004)

• Care in medical setting is a better cultural fit for many patients

• Behavioral Health Clinicians free up time for primary care physicians to spend with other patients, while enhancing patient satisfaction

• Care management is more effective when done by professionals with behavioral health skills. (Pincus, Pechura et al. Administration & Policy in Mental Health, 2006)
Services Provided by Psychologists in Community Health Care Settings

• Administration of psychological assessments
• Evaluation and diagnosis
• Counseling/Psycho-Ed
• Behavioral interventions
• Psychotherapy
• Group therapy/family therapy
• Manage depression-chronic illnesses
• Psychopharmacological Rx (some states)
• Consultation to primary and specialty care providers
• Research skills for identifying best practices
Services Provided by Psychologists in Community Health Care Settings: Financial Benefits

Potential financial benefits of psychologists in community health care setting:

- Administration of therapy can be less expensive than with a psychiatrist
- Some states (New Mexico, Louisiana) allow psychologist to prescribe meds, easier access and more cost efficient
- Research oriented-grant writing skills which can financially benefit the health center
Other Potential Roles of Psychologists

Care Management
Brief Therapy
Behavioral Medicine
Relaxation/Biofeedback/Hypnosis
Health Behavior Change
Family Therapy
Substance Abuse Counseling
Child Development
Psychotropic Medication Input
Groups and Patient Education
Community Outreach
Organizational Transformation Agent
Recruitment Incentives and Resources

• APA has approved FQHCs to serve as training sites for psychology students
• CHCs can post vacancies with the American Psychological Association and with their respective state psychological association
• Health center practice requires no start-up cost of the psychologist; they are not responsible for hiring/training or other practice ownership responsibilities
• National Health Service Corps Loan Repayment Program
• Federal Tort Claim Act (FTCA) Medical Malpractice Program
National Health Service Corps (NHCS) Loan Repayment Program

2 years of full-time service for up to $60,000 (minimum 40 hours/week, 45 weeks/year)

For Psychologists: 21 hours/week providing care in an outpatient setting; 19 hours/week providing patient care at an approved site

No more than 8 hours/week can be spent in practice-related duties

Up to 8 hours/week can be spent teaching in a clinical setting

4 years of part-time service for up to $60,000 or optional 2 years part-time service for up to $30,000 (minimum 20 hours/week, 45 weeks/year)

For Psychologists: At least 11 hours per week providing direct patient care at the service site and 9 hours per week providing clinical services, teaching or performing administrative duties

•NHCS Website: [http://nhsc.hrsa.gov/](http://nhsc.hrsa.gov/)
Federal Tort Claim Act (FTCA) Medical Malpractice Program

Benefit for licensed Psychologists:
Supports patient access by offering medical malpractice liability protection to health centers
– Avoids the need to purchase coverage in the commercial marketplace for sites and services within the scope of the grant project
– Eliminates the cost of premiums and allows health centers to redirect the cost to support their programs and patients
– Supports the ability to attract and recruit workforce by offering malpractice coverage thus expanding access for vulnerable populations

• FTCA Website: http://bphc.hrsa.gov/FTCA/
Grantee perspective: Successful integration of psychologists in a community health center

Cherokee Health Systems: The Hybrid Health Center

Dr. Parinda Khatri
Director of Integrated Care
Cherokee Health Systems

• **Our Mission…**
• To improve the quality of life
• for our patients through the integration of
• primary care, behavioral health and substance abuse treatment and prevention programs.
• Together…Enhancing Life
# Cherokee Health Systems
A Federally Qualified Health Center and Community Mental Health Center

## Corporate Profile

**Founded:** 1960

**Services:**
- Primary Care
- Community Mental Health
- Dental
- Corporate Health Strategies

**Locations:**
- 22 clinical locations in 15 Tennessee Counties
- Behavioral health outreach at numerous other sites including primary care clinics, schools and Head Start Centers

**Number of Clients:** 54,009 unduplicated individuals served - 21,326 Medicaid (TennCare)

**New Patients:** 19,210  
**Patient Services:** 419,537

**Number of Employees:** 585

**Provider Staff:**
- Psychologists – 39
- Primary Care Providers – 52
- Master’s level Clinicians – 63
- Psychiatrists – 13
- Case Managers – 38
- Pharmacists – 9
- Dentists – 2
Blending Behavioral Health into Primary Care
Cherokee Health Systems’ Clinical Model

Behaviorist on the Primary Care Team
The Behavioral Health Consultant (BHC) is an embedded, full-time member of the primary care team. The BHC is usually a licensed Health Service Provider in Psychology. A Psychiatrist is available, generally by telephone, for medication consults.

Service Description
The BHC provides brief, targeted, real-time interventions to address the psychosocial aspects of primary care.

Typical Service Scenario
The Primary Care Provider (PCP) determines that psychosocial factors underlie the patient’s presenting complaints or are adversely impacting the response to treatment. During the visit the PCP “hands off” the patient to the BHC for assessment or intervention.
Initiatives in Integrated Care

• Training (e.g. Internship Program)
• Specialty Collaboration (i.e. Sleep Medicine, Nutrition, Occupational and Speech)
• Group Medical Visits (i.e. Kindergarten Readiness, Diabetes)
• Screening (i.e. Alcohol and Drug, Post Partum Depression)
• Telepsychology
Skills for Behavioral Consultants

The ability to understand the biological components of health, illness, and disease and interaction between biology and behavior.

An understanding of how cognition, emotion, motivation can influence health.

An understanding of how social and cultural factors affect health problems, access to health care, and adhering to treatment regimens.

Knowledge of how to assess cognitive, affective, behavior, social, and psychological reactions for all common conditions seen in primary care.

-APA Primary Care Psychology Curriculum Interdivisional Task Force
The Psychologist in Primary Care – Characteristics, Skills and Orientation

- Flexible, Independent & Action Oriented
- Solution Rather than Process Oriented
- Impact Functioning, Not Personality
- Prevention Oriented
- Finely Honed Clinical Assessment Skills
- Cognitive Behavioral Intervention Skills
- Group and Educational Intervention Skills
Cherokee’s Blended Behavioral Health and Primary Care Clinical Model

• Embedded Behavioral Health Consultant on the Primary Care Team
• Real time behavioral and psychiatric consultation available to PCP
• Focused behavioral intervention in primary care
• Behavioral medicine scope of practice
• Encourage patient responsibility for healthful living
• A behaviorally enhanced Healthcare Home
Other Health Centers Implementing Blended Approach

Clinica Family Services in Denver, CO:
Utilizes a team-based model in all services, including integrating behavioral health

“Pod” (care team) at each health center location which includes:

- 3 primary care physicians
- 3 medical assistants
- 1 RN
- 1 behavioral health professional (psychologist, licensed clinical social worker)
Other Health Centers Implementing Blended Approach

- Behavioral health professional available for “warm handoffs” to do 10-15 min. visit in the exam room after the provider visit.

- Can be planned at any point during the day or when provider uncovers a behavioral health problem (depression, anxiety, psychosocial problems) during a visit.

- Behavioral health is an professional integral part of the treatment team.
HRSA Resources for Grantees on Primary and Behavioral Health Integration

Bureau of Primary Health Care

BPHC Grantee Technical Assistance (TA) Resource page for Behavioral Health Integration

This page provides current links to documents and other web resources to assist health centers in the process of integrating primary and behavioral health

http://bphc.hrsa.gov/technicalassistance/taresources/index.html#B
Bureau of Health Professions
Training Grants with Behavioral Health Focus:
Graduate Psychology Education Grant Program

Funds the planning, development, operation and maintenance of accredited graduate programs that foster an integrated approach to health care services by training psychologists to work with underserved populations

http://bhpr.hrsa.gov/grants/psychology/index.html
HHS Resources for Grantees on Primary and Behavioral Health Integration

**SAMHSA**

- Screening Brief Intervention and Referral to Treatment (SBIRT) Grants
  - Integrated approach to the delivery of early intervention and treatment services for those at risk for substance use disorders.


**Center for Integrated Health Solutions**, funded by SAMHSA and HRSA, promotes integrated primary and behavioral health services to address the needs of individuals with mental health and substance use conditions, whether seen in specialty behavioral health or primary care provider settings.

Questions?

Share your success stories by emailing Mark Yanick in OTTAC at myanick@hrsa.gov