



PCMH PRIME CERTIFICATION: INTEGRATING BEHAVIORAL HEALTH FOR HIGH-VALUE CARE

Information for Payers

The under-diagnosis of behavioral health conditions (mental illness and substance use disorders) is a serious and costly public health problem.

Under-diagnosis and under-treatment of behavioral health conditions is common. Among Massachusetts residents reporting a mental illness or substance use disorder, 51% and 86%, respectively, did not receive treatment or counseling.¹ This number is likely to be an underestimate; behavioral health conditions are often undiagnosed in the primary care setting.²

The presence of a behavioral health condition can exacerbate a chronic medical condition, increase total health care costs, and complicate disease management.³ For example, Medicaid patients diagnosed with major depression and diabetes have more than twice the overall health care costs as those without depression.⁴ Because it is poorly managed, mental illness ranked as one of the top five most costly conditions in 2006.⁵

Integration of behavioral health into primary care helps address the treatment gap for individuals with behavioral health conditions by facilitating high-quality, cost-effective care.

Because primary care providers often serve as patients' first access point to health care, the integration of behavioral health into the primary care setting is critical. Integrating appropriate screenings, treatment, and care coordination for behavioral health conditions into primary care visits may help reduce the need for higher-cost behavioral health care and additional medical care, and lead to better health outcomes.

The PCMH PRIME Certification program identifies primary care practices that offer integrated behavioral health.

To promote behavioral health integration, the Massachusetts Health Policy Commission (HPC), in collaboration with the National Committee for Quality Assurance (NCQA), has created a new certification program to recognize primary care practices that build and demonstrate key behavioral health integration capabilities. To achieve certification, practices must meet 7 of 13 behavioral health integration criteria and achieve NCQA PCMH Recognition.

The PCMH PRIME program aims to support the development of behavioral health capabilities and highlight the achievements of primary care practices that make significant advances towards behavioral health integration. PCMH PRIME Certification may help purchasers and payers identify high quality providers, improve population health, and control health costs. Specifically, purchasers and payers could use the PCMH PRIME program in the design of products such as tiered networks, value-based contracting, and quality transparency tools for consumers.

Behavioral health integration requires a coordinated effort between providers and payers: the HPC encourages payers to support practices in achieving PCMH PRIME Certification. For additional information on PCMH PRIME Certification please visit the HPC website (<http://bit.ly/PCMHPRIME-Home>) or contact the HPC at HPC-Certification@state.ma.us.

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- 2 Druss, Benjamin and Walker, Elizabeth. "Mental disorders and medical comorbidity". Robert Wood Johnson Foundation. February 2011. http://www.integration.samhsa.gov/workforce/mental_disorders_and_medical_comorbidity.pdf
- 3 Mental Health Financing in the United States, A Primer, April 2011. The Kaiser Commission on Medicaid and the Uninsured. Data based on SAMHSA Spending Estimates Project, 2010. <https://kaiserfamilyfoundation.files.wordpress.com/2013/01/8182.pdf>
- 4 Unutzer, Jurgen et al. The Collaborative Care Model: An Approach for Integrating Physical and Mental Health Care in Medicaid Health Homes. Health Home: Information Resource Center. Brief May 2013. <http://www.medicaid.gov/State-Resource-Center/Medicaid-State-Technical-Assistance/Health-Homes-Technical-Assistance/Downloads/HH-IRC-Collaborative-5-13.pdf>
- 5 Soni, Anita. The Five Most Costly Conditions, 1996 and 2006: Estimates for the U.S. Civilian Noninstitutionalized Population. Statistical Brief #248. July 2009. Agency for Healthcare Research and Quality, Rockville, MD. http://www.meps.ahrq.gov/mepsweb/data_files/publications/st248/stat248.pdf