# Coordination of Care: Behavioral Health and Primary Care Provider Collaboration

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Introduction

Integrated care is the best practice model that addresses the whole health of an individual. While full integration is not always possible, behavioral health providers (BHPs) have the opportunity to improve coordination of care across disciplines by collaborating with members and increasing outreach to primary care providers (PCPs). Through this collaboration, Magellan BHPs can improve the safety and efficacy of services to support better outcomes for members.
What does coordination of care between Behavioral Health Providers (BHPs) and Primary Care Providers (PCPs) entail?

According to the Institute of Medicine (IOM)\(^1\), care coordination results from successful collaboration between providers.

**Collaboration** depends upon:
- Frequent *communication* of accurate information
- **Consensus** about each provider’s responsibilities and the desired treatment outcomes, and the opportunity for open discussion about treatment options.

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Define

What does coordination of care between Behavioral Health Providers (BHPs) and Primary Care Providers (PCPs) entail?

The Community Mental Health and Rehabilitative Services (CMHRS) Manual, Ch. IV, defines care coordination as:

“collaboration and sharing of information among health care providers, who are involved with an individual's health care, to improve the care”
Why is coordination of care between BHPs and PCPs Important?

Coordinated care can help Magellan members **live longer lives** and get the most out of their care.

**Individuals with Serious Mental Illness (SMI) may die** as much as **25 to 30 years younger** than those without an SMI diagnosis\(^2\)** AND they often die from **avoidable** medical conditions\(^2\).**

**Nationally, Medicaid could save and reinvest an estimated $7.1 to $9.9 billion each year** if Medicaid programs successfully integrated behavioral health and medical care\(^3\).

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Is coordination with the PCP a requirement or simply a best practice for Magellan Network BHPs?

Coordination with the PCP is **BOTH** a **best practice** and a **requirement**.

“The provider shall determine who the primary care provider is and inform him of the individual's receipt of community mental health rehabilitative services. The documentation shall include who was contacted, when the contact occurred, and what information was transmitted.” *(12VAC30-60-143)*

“The service provider must notify or document the attempts to notify the primary care provider or pediatrician of the individual’s receipt of community mental health rehabilitative services including efforts to schedule well visits for kids and as needed physician visits for adults.” *(CMHRS Manual, Ch. IV, p.20)*

“It is our expectation that, with written authorization from the member, you will communicate key clinical information in a timely manner to all other healthcare providers participating in a member’s care, including the member’s primary care physician (PCP), as well as the local CSB, when applicable.” *(Magellan of Virginia Provider Handbook, pp.29-30).*
Problem Solve

How can BHPs partner with members to overcome barriers to care coordination?

- Speak with new members about the advantages of coordination of care between BHPs and PCPs.
- Ask the member to sign an authorization to exchange information with the member’s PCP.
- If the member declines to sign, document this choice and the discussion about coordination of care in the member record. Best practice is to revisit advantages of care coordination with the member.
- Update the authorization document annually or as the member’s needs or preferences change.

- Help the member find a PCP if the member does not identify one.
- Give a copy of a treatment summary the member to share with the PCP or other providers.
- Ask the member to share any Advance Directive or Wellness/Crisis plan information that he or she may have prepared.
Problem Solve

What can BHPs do to develop collaborative relationships with PCPs around care coordination?

• Reach out to the PCP office, briefly explain the advantages of coordinating care, and ask how your offices might exchange information most easily.
• Consider using this [Magellan Provider Communication Form](#) to streamline information exchange.
• Alternatively, identify forms or documents that you already use that you could easily share to keep each other updated on client status.
• For complex cases, consider a personal call to the PCP office to discuss the case. Include consultation regarding any current or historical adverse medication reactions.
• More information about outreach to PCPs can be found here: [Tips for Behavioral Health Providers: Talking to Primary Care Providers](#).
Problem Solve

How can BHPs build or enhance standard care coordination procedures?

• Establish communication with the PCP as a routine part of service provision and documentation. The Magellan of Virginia Provider Handbook specifies that after obtaining a signed AUD, BHPs are expected to communicate in writing to the PCP at the following points in treatment:
  • Initial evaluation
  • Significant changes in diagnosis, treatment plan, or clinical status
  • After medications are initiated, discontinued or significantly altered, and
  • Termination of treatment.
• The Magellan of Virginia Provider Handbook also indicates that when applicable, BHPs should collaborate with medical practitioners to support the appropriate use of psychotropic medications.
• Integrate communication with the PCP into Individual Service Plans.
• Review this checklist for more information about documentation best practices: [Magellan Documentation Standards for Behavioral Health Treatment Records](#).
**Review**

## Tools and Resources

- [Magellan Provider Communication form](#)
- [FAQ: Coordination of Care between Behavioral Health and Primary Care Providers](#)
- [Tips for Behavioral Health Providers: Talking to Primary Care Providers](#)
- [Magellan Documentation Standards for Behavioral Health Treatment Records](#)
- [Magellan Authorization to Use and Disclose (AUD) Information Form](#)
- [Virginia CMHRS Manual, Ch. IV](#)
- [Magellan of Virginia Provider Handbook](#)
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