

Effective Date: January 2009

**Subject: Co-Existing Medical and Behavioral Disorders**

**Overview:** This document describes the mechanisms in place for assessing processes for the screening and management of patients with co-existing medical and behavioral health disorders.

**Policy:**

Members with co-existing medical and behavioral health (BH) conditions are particularly vulnerable to problems resulting from lack of coordination of care between medical and BH practitioners.

- ❖ HPHC encourages and fosters collaboration between treating practitioners to the greatest extent permitted by confidentiality requirements in order to ensure that the needs of this at-risk population are met.
- ❖ HPHC requires that facilities in its care delivery system are staffed and equipped to deal with acute patients affected by co-existing medical and BH disorders.

Recognizing that the exchange of relevant information (within the bounds permitted by confidentiality laws and policies) plays an important role in the management of patients with co-existing medical and BH disorders, HPHC ensures that operational processes are in place to facilitate the appropriate management of members' care.

Existing processes are monitored to ensure they support continuity and coordination of care for members with co-existing medical and BH disorders. Processes that may be monitored include (but are not limited to):

- ❖ Availability of BH consultation for medical or surgical inpatients with a secondary or tertiary mental health or substance abuse diagnosis;
- ❖ Assessment of inpatient concurrent review data re: co-existing medical and behavioral problems;
- ❖ Analysis of pharmaceutical data re: medication interactions to assess coordination of co-existing medical and behavioral problems;
- ❖ Implementation and measurement of mechanisms for depression screening, and/or appropriate referral of chronically ill patients participating in HPHC's Case Management or Disease Management initiatives.

HPHC (through delegation oversight and other monitoring activities) measures practitioners' performance related to appropriate diagnosis, treatment, and referral of BH disorders commonly seen in primary care.

- ❖ At least annually, HPHC selects at least one specific indicator related to these activities for measurement. The indicator(s) selected, performance goal, individuals responsible for measurement, and target date for measurement are documented in the HPHC QI workplan.
- ❖ Results of these measures are analyzed, reviewed by HPHC's Medical Management and Quality Committee (MMQC), and presented to HPHC's Clinical Quality Assurance Committee for review and intervention as appropriate.

**Revisions to date:**

- ❖ **Revised:** 1/03, 12/04, 6/06, 1/09
- ❖ **Initiated:** 5/02