International Journal of Research and Development in Pharmacy & Life Sciences

Virtual Behavioural Health Integration into Primary Care - A Clinical Trial

Dr. Manuel A Castro

Medical Director, Atrium Health Behavioral Health Charlotte, a facility of Carolinas Medical

Abstract:

Affective disorders like depression and anxiety generate significant healthcare costs and result in social and vocational disability. Almost half of patients who are treated for major and minor depression are seen exclusively in primary care. Mental health treatment among primary care practices is typically delivered through short episodes of care. Primary care providers tend to offer less intensive mental health treatment than that provided by psychiatrists. The level of involvement of primary care providers to deliver outpatient mental health care often depends on: (1) lack of mental health providers in the region; (2) willingness to prescribe psychotropic medications; and (3) knowledge of mental health disorders. To enhance the care of patients seen in the primary care setting, Atrium Health has designed a virtual behavioral health integration (VBHI) program. All patients complete a PHQ-9 upon an office visit and those who have an elevated score or report suicidal/homicidal ideation are eligible for the program. A behavioral health care team comprised of licensed clinicians (Behavioral Health Professionals), health coaches, a consulting psychiatric pharmacist and psychiatric providers follow patients for up to 3 months or more depending on patient need after their primary care office visit. This program is being assessed through a randomized clinical trial where 22 clinics with comparable patient populations were selected. The VBHI program is offered at half the clinics.

Patients meeting eligibility criteria accrue in both arms of the study. The study aims to evaluate whether the VBHI program reduces the total cost of care within 90 days of the primary care office visit. Secondary outcomes include 90-day acute care and primary care utilization. Additionally, symptom improvement and health outcomes will be assessed.

Conclusion:
Biosimilars Summit & Clinical Trials 2020; September 18-19, 2020

Available evidence suggests that adoption and utilization of virtual care in tandem with wrap-around services may reduce utilization and improve health outcomes. Here we will present the details of the VBHI program (program design, patient recruiting) and share experiences from prior behavioral health virtual programs.

Keywords: Behavioral health, virtual, primary care



Biography:

Dr. Manuel Castro has been with Carolinas Healthcare System for 9 years and serves as the Vice-Chief Department of Psychiatry and Medical Director of Behavioral Health Integration. Responsible for leading the creation and design of an innovative, sustainable and clinically efficacious virtual behavioral health model with Carolinas HealthCare System. In 2016 Dr. Castro was honored to become a Fellow for the American Psychiatric Association. He leads the Behavioral Health Integration team in servicing ambulatory care practices across the healthcare system through a virtual platform. Board certified in adult psychiatry. He is the recipient of the Brian R Nagy MD teaching award at CMC-Randolph and is an adjunct associate professor of psychiatry with UNC-Chapel Hill.

Citation: Manuel A Castro; Virtual Behavioural Health Integration into Primary Care – A Clinical Trial; Biosimilars Summit & Clinical Trials 2020; September 18-19, 2020

Inter. J. Research. Development. Pharmacy & Life Sciences 2020