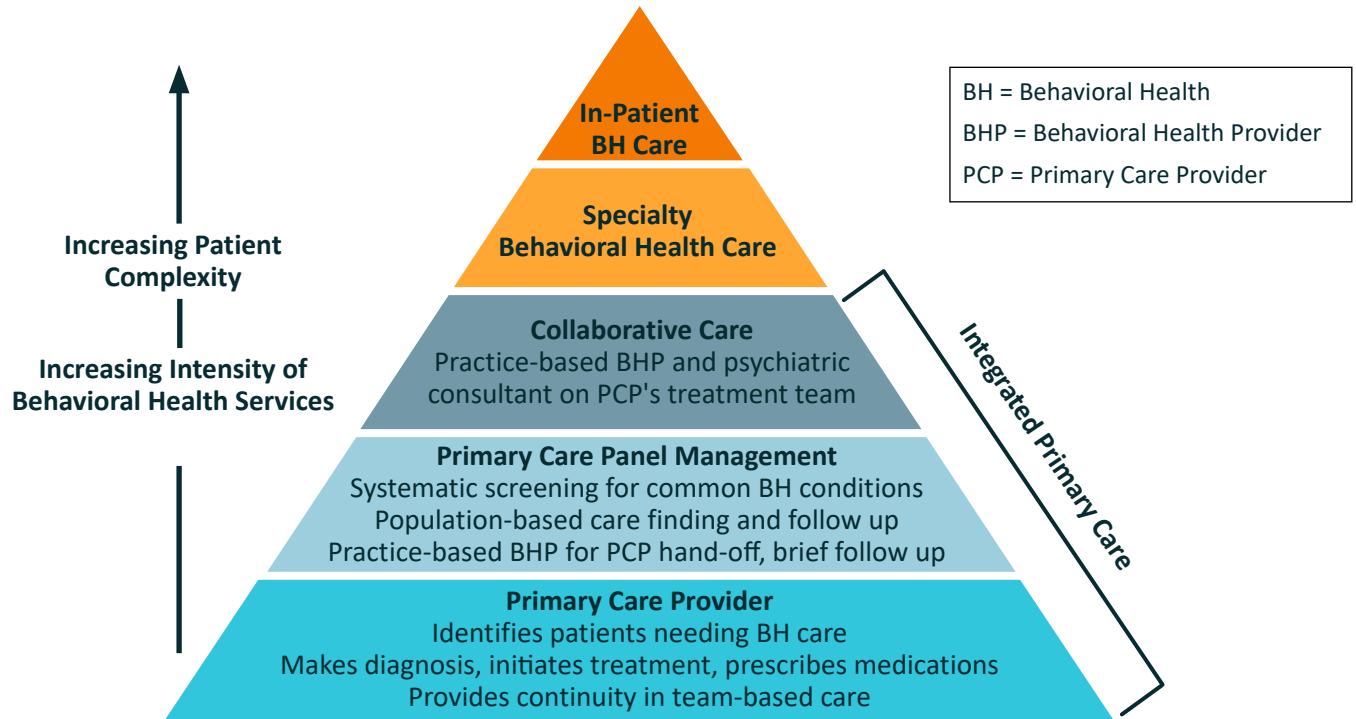


# COLLABORATIVE CARE MANAGEMENT 101

## STEPPED STRATEGIES FOR INTEGRATION <sup>1</sup>



### Principles of Collaborative Care <sup>1</sup>



**Patient-Centered Team.** The patient, primary care, and mental health providers collaborate effectively using shared care plans that incorporate patient goals.



**Population-Based.** A registry is used to facilitate engagement and outcome tracking in a defined group of patients at the caseload and clinic level.



**Measurement-based Treatment to Target.** Progress is measured regularly, and treatments are actively changed until clinical goals are achieved.



**Evidence-Based Treatments.** Providers use treatments that have research evidence for effectiveness.



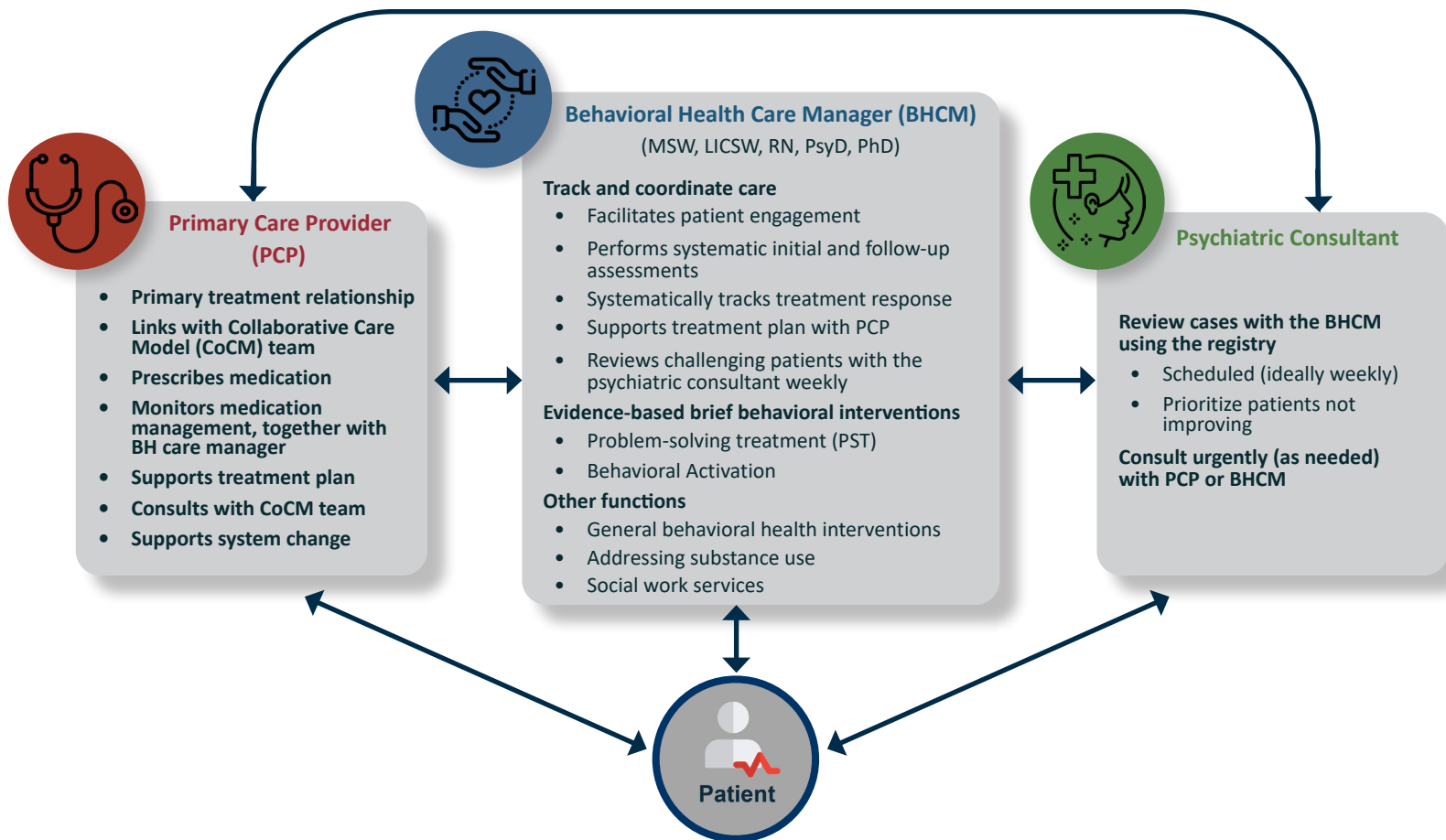
**Accountable.** The care team is accountable to the patient and other care team members for quality of care and clinical outcomes, not just the volume of care provided.

### COLLABORATIVE CARE FOR VARIOUS BEHAVIORAL HEALTH CONDITIONS <sup>1</sup>

#### Established Evidence-Base

- **Depression**
  - Adolescent Depression
  - Depression, Diabetes, and Heart Disease
  - Depression and Cancer
  - Depression in Women's Health Care
- **Anxiety**
- **Post Traumatic Stress Disorder**
- **Chronic Pain**
- **Dementia**
- **Chronic Substance Use Disorder**
- **Bipolar Disorder**

# COLLABORATIVE CARE TEAM STRUCTURE <sup>1</sup>



## IMPLEMENTATION TIPS

- Collaborative Care is a systematic approach to integrated care that is based on the chronic care model and that has the strongest research evidence to date.<sup>1</sup> [IMPACT Trial](#)
- Collaborative care begins with the patient and supporting whole person treatment is critical.<sup>1</sup>
- In this model, patients are cared for by a team, which includes a primary care provider, a care manager located in the primary care setting, and a psychiatric consultant.<sup>1</sup>
- Treatment plans should be individualized for each patient and be based on patient history, patient preference, symptoms at baseline and which treatment modality(ies) are most likely to address these effectively.<sup>1</sup>
- Evidence has shown that collaborative care is effective in a telehealth or virtual manner and there have been promising results as far as improving depression outcomes.<sup>2</sup>
- Billing for CoCM and Behavioral Health Integration is multifaceted and dynamic. It is critical to understand state specific guidelines as well as the broader healthcare landscape in which services are provided.<sup>5</sup>

## REFERENCES AND RESOURCES

1. [Advancing Integrated Mental Health Solutions. \(AIMS\)](#). University of Washington.
2. [Collaborative Care Management Foundations: A 101 primer on the practices and possibilities](#)
3. [Medicare Learning Network Behavioral Health Integration Services](#)  
Insight into CoCM and Behavioral Health Integration billing.
4. [National Council for Mental Wellbeing: Financing the Future of Integrated Care](#)  
Decision Support Tool, Primer, and Billing Module offering guidance on medication for opioid use disorder, screening, care coordination and metabolic monitoring.
5. [National Association of Community Health Centers Payment Reimbursement Tips](#)  
FQHC Requirements for Medicare Behavior Health Integration.

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