

INTEGRATING PHYSICAL AND BEHAVIORAL HEALTH

CASE STUDY

Hackensack Meridian Health | Hackensack, NJ

The AHA aims to help hospitals and health systems increase the integration of physical and behavioral health services in acute inpatient, emergency department and primary care. This resource offers an example of how hospitals and health systems can successfully integrate behavioral health into their existing care.

Overview

New Jersey-based Hackensack Meridian Health (HMH) integrates robust behavioral health services into various physical health care service lines to improve quality of care while maximizing financial stability.

HMH integrates physical and behavioral health in each of its 17 emergency departments (EDs), its over 500 pediatric and adult primary care providers, and its medical urgent care centers. Behavioral health units are embedded in EDs to improve access, improve quality of care, reduce stress on physicians and improve patient flow.

HMH secured more than \$5 million a year in federal and state primary care funding to develop specialized programs with integrated behavioral health services for both adult and pediatric populations. Medical urgent care centers were integrated with behavioral health services to improve access with a goal of reducing unnecessary ED visits by 40-50%. Additionally, HMH integrated behavioral health in its care pathways and utilized data to develop value-based care models.

HMH's integration work includes:

- Developing a behavioral health service line on the same level as other service lines to create a clinically integrated network of 3,500 physicians and psychiatrists.
- **Investing in telehealth,** which has increased the number of patients treated, decreased



appointment cancellations and reduced stigma by enhancing privacy.

- Integrating primary care with specialized programs:
 - Comprehensive Primary Care Plus program: Secured enhanced Centers for Medicare & Medicaid Services funding to provide integrated services for adult patients.
 - Pediatric Psychiatry Continuum program: Secured \$5 million a year in state funding and partnered with competitors such as RWJBarnabas Health to integrate behavioral health and pediatric care across the state.
 - Adult Primary Care Integration program:
 Partnered with a health data/care navigation company and a large payer to identify and treat high-cost patients with significant comorbidities in behavioral and physical health, which generated positive ROI for payers.
 - Behavioral Health Partial Hospital and Intensive Outpatient programs:
 Partnered with primary care physicians to reduce A1C, smoking and obesity.
- Integrating the ED with psychiatric emergency services/crisis units, dedicating behavioral health units with licensed behavioral health staff, and/or embedding behavioral health professionals on ED teams, which allows ED doctors to focus on medically



- clearing patients while behavioral health staff screen for behavioral health needs.
- Developing a behavioral health home model to serve patients with chronic mental illnesses and co-morbid physical illness.
- Integrating behavioral health with medical urgent care to provide on-demand treatment for physical and behavioral health needs and reduce unnecessary use of the ED.
- Transforming care bundles into integrated care pathways to include behavioral health services in all major service lines, collect patient quality data and develop risk models.

Impact

HMH's physical and behavioral health integration resulted in positive outcomes for patients, hospitals and pavers.

- Patients reported satisfaction with increased access, improved quality of visits and less stigma.
- Primary care integration demonstrated the dollar value of behavioral health due to enhanced funding, specialized programs and data collection used to identify and treat highcost patients with comorbidities in physical and behavioral health.
- Integrated care pathways resulted in positive value-based care models, which gained support and interest from payers.
- ED integration resulted in more patients being treated and improved health outcomes.
- Integrating behavioral health into medical urgent care was well received by payers because it allowed patients to get same-day service. Additionally, payers were pleased with the reduction of costs associated with unnecessary ED visits.

Barriers

HMH was able to identify existing barriers and create strategies to resolve them, including:

• No centralized access: Prioritize telebehavioral

- health to develop a comprehensive access platform for patients and physicians to get needed, and correct, services.
- Parity and reimbursement: Develop models that monetize and demonstrate the direct and indirect value of integrating behavioral health into various services (i.e., showing the value of enhanced patient flow).
- Supporting the behavioral health system in **New Jersey:** Established Pediatric Psychiatry Continuum program which received a positive response from elected officials at both the state and national levels.

"Our goal is to provide quality, effective, and financially responsible care," said Joseph Miller, vice president for HMH's behavioral health care transformation services.

Future Goals

HMH plans to utilize its investment in telehealth to develop a separate telebehavioral health division tied to a comprehensive access center, similar to an air traffic control center, to provide centralized access for all behavioral health requests and support continued integration with primary care and specialty medical providers.

"This will drive the growth and future of physical and behavioral health integration," Miller said.

Special thanks and in memoriam: Dr. Miller died unexpectedly in September, before we released this case study. He dedicated his life to serving those with mental illness, and his passion to improving access to high quality behavioral health services was endless. He will be truly missed.

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