MENTAL HEALTH CARE MUST: Be a part of primary care

Mental health conditions often go undetected for too long, which leads to worsening of symptoms and unnecessary suffering. Depression and suicide represent an illustrative example.

Yet...

- Less than half (47%) of primary care patients with major depressive disorder are diagnosed in primary care
- Only 9% receive adequate treatment

So it’s not surprising that...

- 8 years is the median amount of time between onset of depression symptoms and the start of treatment
- 45% of people who died by suicide had contact with primary care in the last month of their lives

THERE IS AN OPPORTUNITY

Because people with mental health and substance use conditions often do not seek out specialty behavioral health care on their own — but are likely to visit primary care in a given year — there is a huge opportunity to address unmet behavioral health needs in primary care.

THE SOLUTION:

Mental health screening and behavioral health care can be provided in primary care settings to better reach people where they already are. Earlier detection of mental illness and connection to treatment improves long-term outcomes and quality of life for patients and reduces the cost of care for co-occurring physical health conditions.
INTEGRATED CARE PROVIDES A COHESIVE, PATIENT-CENTERED SOLUTION

Untreated mental illness or substance use disorder can also adversely affect other, co-occurring conditions. For example:

- Those with coronary heart disease often also have a mental illness which, when left untreated, puts them at higher risk for cardiovascular death. Additionally, costs for treating medical conditions like coronary heart disease are two to three times higher for those with co-occurring mental illness than those without.
- Long-term use of methamphetamine can cause liver, kidney and lung damage.

Integrated care means providing universal screening for behavioral health conditions during primary care visits, and treatment for those who need it. This can not only improve mental health outcomes, but also improve overall health by:

- Increasing the reach of mental health and physical health resources to more patients who are receiving care in a variety of health care settings, and
- Improving coordination between primary care providers and behavioral health care specialists, which allows for better follow-up care.

OKLAHOMA IS WELL-SUITED FOR INTEGRATED CARE

Oklahoma has a limited supply of psychiatrists, but a higher than average number of primary care providers. This makes integrated care an ideal option for improving access to behavioral health care in the state.

INTEGRATED CARE IS A COST-EFFECTIVE WAY TO IMPROVE PATIENT OUTCOMES.

Studies have shown that integrated care leads to better mental health and physical health outcomes for patients:

- Patients with depression and diabetes, coronary heart disease, or both saw positive improvement in their HbA1c levels, cholesterol levels, blood pressure, and depression scores while receiving care under the collaborative care model of integrated care over the course of a year.
- Patients receiving integrated care report a better quality of life and greater satisfaction with their care for all of their conditions.

Ensuring that patients receive treatment for both physical and mental health conditions in primary care prevents these conditions from worsening and often means they need less costly treatment in the future.

For a list of sources and additional resources visit healthyminds.org/integratedcare

HEALTHY MINDS POLICY INITIATIVE

Building community capacity in Tulsa to address treatable mental illness through local systems change and statewide policy work. LEARN MORE: HEALTHYMINDSPOLICY.ORG.