Pennyroyal Center
Primary Behavioral Health Care Integration (PBHCI)
Primary Behavioral Health Care Integration Grant

- RFP from SAMHSA after research indicates that SMI individuals die 25 years sooner than age peers.
- One of the original 13 grantees in the nation. Based on need primarily-- SMI adults only.
- Now there are 64 nationwide.
- Most partner with a primary care provider such as a FQHC.
- Obtained our primary Care license in January 2012.
- We have hired our own primary care staff.
Primary Behavioral Health Care Integration Grant

Data provided by a contractual arrangement with the University of Kentucky

Evaluator,

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Total Number of Primary Behavioral Health Care Integration Participants

- **Years 1-3**
  - 526 have enrolled in PBHCI services
    - Of these, 407 agreed to participate in the evaluation
      - 83 refused
      - 36 could not provide informed consent
Participant Baseline Health and Functioning

BMI (of 108 clients with valid data)

- Underweight (BMI under 18.5): 1%
- Healthy weight (BMI between 18.5 - 25): 64%
- Overweight (BMI between 25 - 30): 17%
- Obese (BMI over 30): 18%
Participant Baseline Health and Functioning

Most frequently reported health problems
(Among 398 providing health history)

- 59% headaches
- 57% high blood pressure
- 52% dental problems
- 39% high cholesterol
- 33% asthma
- 31% chronic bronchitis
- 24% diabetes
Participant Baseline Health and Functioning

Most frequently reported substances
(Among 350 providing substance use history)

- 70% cigarettes
- 25% drink alcohol
  - 3% of males meet criteria for binge drinking
  - 2% of females meet criteria for binge drinking
- 10% use cannabis
New Relationships

Because of PBHCl grant-formed a contractual relationship with GOEHI and KHIE to work on adding behavioral health providers to the health exchange.

Additionally began working with KY-REC, to assist us with moving forward with meeting Meaningful Use Criteria.
Electronic Health Record

* Vendor-NetSmart CMHC systems
* On-going process to upgrade—IT Department has created forms for clinical staff within parameters of software.
* e-Prescribing using InfoScriber
* Forms include those for Primary Care
* Obtained an HIT grant from SAMHSA (supplement)
* Obtained 1st year Meaningful Use status in January 2012 with payment for APRNs and psychiatrists
* Have a contractual relationship with GOEHI and KHIE, as well as with KY REC (UK liaison out of Paducah to assist with Meaningful Use implementation)
Electronic Health Record

NEXT STEPS:

Through funds obtained from grants-----

*InfoScriber has been upgraded to OrderConnect-capacity to also order labs electronically

*ConsumerConnect—client portal to look at and obtain health information from the record

*CareConnect---Along with the cooperative efforts of GOEHI/KHIE, will be able to exchange health records.
Clinical Session Manager

<table>
<thead>
<tr>
<th>Demographics</th>
<th>Diagnosis</th>
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<tbody>
<tr>
<td>Client Name:</td>
<td>Diagnosis Date: 08/17/2012</td>
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<tr>
<td>Client ID:</td>
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<tr>
<td>Telephone #:</td>
<td>Axis I - Clinical Disorders - DSM-IV</td>
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<tr>
<td>Gender:</td>
<td>Primary - 296.33 - Major Depressive Disorder Recurrent - Severe without Psychotic</td>
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<tr>
<td>Age:</td>
<td>Tertiary - V62.3 - Academic Problem</td>
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<tr>
<td>Date of Birth:</td>
<td>Axis II - Personality Disorders/Mental Retardation - DSM-IV</td>
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<td>Marital Status:</td>
<td>Primary - 301.50 - Histrionic Personality Disorder</td>
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<td>Physician:</td>
<td>Secondary - 799.9 - Diagnosis Deferred on Axis II</td>
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<tr>
<td>Primary:</td>
<td>Axis III - General Medical Conditions - ICD-9-CM</td>
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<td>Therapist:</td>
<td>Primary - 311 - Depressive Disorder NOS</td>
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<tr>
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<td>Secondary - 789.01 - Abdominal Pain, Right Upper Qua</td>
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<td>Tertiary - 427.0 - Tachycardia, Paroxysmal Suprave</td>
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<td>Axis III - General Medical Conditions - ICD-10-CM</td>
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<tr>
<td></td>
<td>None</td>
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<tr>
<td></td>
<td>Axis IV - Psychosocial and Environmental Problems</td>
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<tr>
<td></td>
<td>Economic problems</td>
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<tr>
<td></td>
<td>Axis V - Global Assessment of Functioning (GAF)</td>
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<td></td>
<td>55 - Moderate symptoms</td>
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</table>
Health and Wellness Evaluation

Date of Evaluation: 08/29/2012

Have you ever been told by a doctor or health professional that you have? (Check all that apply)

- Heart / Myocardial
- High Cholesterol
- High Blood Pressure
- Diabetes
- Cancer
  - Type:
- Stroke
- Lung / Breathing Prob.
- Tobacco Health Issues
- Alcohol/Drug Issues

Does anyone in your family have a history of? (Check all that apply) Specify Relationship

- Chest Pain
- Heart / Myocardial
- High Cholesterol
- High Blood Pressure
### Primary Care Evaluation

**Date**: 08/29/2012  
**Staff**: 9091  
**HEENT**: Normal  
**BP**:  
**ROS**:  
**Temp**:  
**Weight**:  
**Height (In)**:  
**Waist**:  
**HR**:  
**SP02**:  

**CC**

**HPI**

**FHx**

**Allergies**
- PMHx Reviewed  
- FHx Reviewed  
- Meds Reviewed  

**Other Alg**
- Peanuts  
- Penicillin  
- CODINE  

**Reaction**
- Rash  
- Can't breathe  
- Head swells  
- Swollen head  

**Other**
- Death  

**Const**
- Normal  
- Chills  
- Depression  
- Dizziness  
- Fainting  

**Neck**
- Normal  
- Chills  
- Depression  
- Dizziness  
- Fainting  

**Cardio**
- Normal  
- Chest pain  
- High blood pressure  
- Irregular heart beat  
- Low blood pressure
## InfoScriber Medication Log

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<thead>
<tr>
<th>Effective Date</th>
<th>Order Date</th>
<th>Status</th>
<th>Drug Name</th>
<th>Duration</th>
<th>Dosage &amp; Directions</th>
<th>Refills</th>
<th>Original Prescriber</th>
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<tbody>
<tr>
<td>08/25/2012</td>
<td>08/25/2012</td>
<td>Active</td>
<td>SEROquel XR</td>
<td>30</td>
<td>150 mg, ERT, PO (1)ea QHS</td>
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<td>08/25/2012</td>
<td>08/25/2012</td>
<td>Active</td>
<td>Lortab 10/500</td>
<td>30</td>
<td>500 mg-10 mg, TAB, PO (1)ea Q6 hrs</td>
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<td>08/25/2012</td>
<td>08/25/2012</td>
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<td>2 mg, TAB, PO (1)ea QHS</td>
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<td>08/25/2012</td>
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<td>Active</td>
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<td>5 mg, TAB, PO (1)ea PRN-Q6H</td>
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<tr>
<td>06/27/2012</td>
<td>06/27/2012</td>
<td>Reorder</td>
<td>Lortab 10/500</td>
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<td>06/23/2012</td>
<td>06/23/2012</td>
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<td>SEROquel XR</td>
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<td>150 mg, ERT, PO (1)ea QHS</td>
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<td>06/23/2012</td>
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<td>06/23/2012</td>
<td>Reorder</td>
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<td>02/03/2012</td>
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<td>01/12/2012</td>
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<td>Change</td>
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<td>5 mg, TAB, PO (1)ea PRN-Q6H</td>
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<td>01/06/2012</td>
<td>01/06/2011</td>
<td>Discontinue</td>
<td>Cymbalta</td>
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<td>20 mg, DRC, PO (1)ea QID</td>
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<td>01/06/2012</td>
<td>10/07/2011</td>
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<td>Haldol Decanoate</td>
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<td>decanoate 50 mg/mL, SOLN, IM (1)cc As Dir.</td>
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<td>01/06/2012</td>
<td>10/07/2011</td>
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<td>Risperdal Consta</td>
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<td>01/06/2012</td>
<td>10/11/2011</td>
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<td>Wellbutrin XL</td>
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<td>300 mg/24 hours, ERT, PO (1)ea QAM</td>
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</tbody>
</table>
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Integrated Health