

# Improving Identification of Depression and Alcohol Use Disorder in Primary Care and Care Transitions for Behavioral Health Conditions

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The Centers for Medicare and Medicaid Services (CMS) has identified alcohol use disorders and depression as significant causes of hospital readmissions. Major depressive disorder affects 6% to 9% of those over 55.<sup>1</sup> In the Medicare population, the prevalence of depression has been estimated to be 11%. It has a higher inpatient readmission rate than all other conditions except heart failure.<sup>2</sup>

Furthermore, alcohol use disorder is the most prevalent type of addictive disorder in those age 65 and over, exceeding prescription drug abuse.<sup>3</sup> About 6% percent of the elderly are considered heavy users of alcohol.<sup>4</sup>

To help address these important issues, CMS has awarded the Lake Superior Quality Innovation Network (LSQIN), represented by MetaStar in Wisconsin, a new 4-year project. MetaStar and its counterparts in Minnesota and Michigan will work with primary care providers to increase the identification of Medicare beneficiaries with depression or alcohol use disorder in primary care settings, with a goal of reducing 30-day readmission rates and increasing outpatient follow-up for psychiatric discharges.

It is commonly accepted that screening rates for depression and alcohol use disorders in primary care settings are extremely low due to

apprehension about physicians' ability to effectively to screen for and to initiate treatment for behavioral health conditions because of:

- A lack of familiarity with mental health, substance use disorders (SUD), and alcohol use disorders (AUD).
- A knowledge gap related to evidence-based practices that would allow for office-based treatment of mild-to-moderate behavioral health conditions.
- A lack of understanding of community-based specialty mental health and SUD providers and how to develop relationships with them.

At present, physicians as a whole screen fewer than half of their patients for alcohol use disorders, and existing depression is identified in fewer than half of primary care patients. Approximately two-thirds of those with a behavioral health disorder do not receive behavioral health treatment.

This CMS funding offers LSQIN the opportunity to work with 600 provider practices across the 3-state region (200 practices in each state). In addition, in Wisconsin, a total of 5 inpatient psychiatric facilities (IPFs) (15 total across all 3 states) will have the opportunity to participate and receive support for improving readmission rates for psychiatric discharges. Practice recruitment will end on December 31, 2015.

The intended outcomes for the initiative are as follows:

- Increase the identification of people with depression or alcohol use disorder in primary care settings.
- Reduce 30-day readmission rate and increase outpatient follow-up for psychiatric discharges, along with increasing specialty care follow-up for discharges.
- Improve coordination/transitions of care

among care providers for Medicare beneficiaries with mental health disorders.

- Nationally, for practices recruited into this initiative, by 2019 it is expected that 10,000 primary practices will screen a majority of their Medicare caseload for depression and alcohol abuse with a validated screening instrument, with a total of 1.5 million beneficiaries screened by 2019.
- For inpatient settings recruited into the initiative—compared to baseline—the psychiatric readmission rate will be reduced, and the follow-up rate for behavioral health practitioners following discharge will increase.

LSQIN's behavioral health initiative is intended to support physicians in utilizing evidence-based alcohol and depression screening tools and interventions, initiating pharmacological treatment, and referral to treatment providers in the community.

Participants will develop mutually beneficial partnerships with community behavioral health providers, take advantage of reimbursements, and be prepared for future initiatives by all payers.

If you are interested in exploring participation in this project, please e-mail Chris Becker at [cbecker@metastar.com](mailto:cbecker@metastar.com).

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