



Behavioral health home models

By Michael Gorfinkle

A recent study of behavioral health home models provides important lessons about how best to design an effective approach for individuals with serious mental illnesses.

In the February 2018 edition of *Health Affairs*, the Community Care Behavioral Health Organization, a UPMC-affiliated nonprofit managed care organization, published the results of a [study](#) of two new and innovative behavioral health home models focused on prevention and holistic (behavioral, social and physical) health. The study authors created two models—one a provider-directed approach, and the other a self-directed approach—with both models focused on creating a culture that promoted a healthy lifestyle, disease prevention and health education and promotion.

The self-directed model, delivered at six community mental health providers, gave patients access to a secure internet portal containing information about their conditions with the aim of inspiring the individuals to take an active role in their own care. Individuals were provided with a detailed history of their use of primary care, specialty visits and medications, as well as self-guided wellness interventions that tracked their progress toward goals in smoking cessation, weight management, improved nutrition and sleep hygiene.

The provider-supported model, delivered at five community mental health providers, brought in a full-time registered nurse as an on-site member of the staff. This nurse consulted with staff on wellness coaching, and assisted in developing wellness plans for individuals. In addition, the nurse worked directly with individuals to coordinate physical medical care and monitor the progress of the individuals.

The results of the study are as follows:

- Both models significantly improved patient activation scores. However, the provider-supported model participants experience a more rapid initial increase that was sustained over time. The authors suggested that the difference was the inclusion of a dedicated full-time wellness nurse in the provider-supported model.
- Both models showed an increased score in perceived mental health over time. However, both models also showed a decreased score in perceived physical health. The study authors suggest

that this decrease was due to increased awareness of the individual's physical health challenges.

- Participants' engagement in primary care increased significantly, but did not differ significantly between the two study groups. The study authors suggest that both models promote an increased attention to preventative care among individuals with behavioral health issues.

Overall, the study authors found that a blend of both self-directed and provider-directed care that is devoted to using both behavioral and physical wellness coaching to promote a culture of wellness focused on holistic care results in better outcomes for individuals with serious mental illness, and that the study can be used to inform efforts at mental health providers nationwide to avoid or reduce early mortality and comorbidity among people with serious mental illness.

For more information on the content of this alert, please contact your Nixon Peabody attorney or:

- Peter Armstrong Egan, 516-832-7633, pegan@nixonpeabody.com
- Michael Gorfinkle, 401-454-1028, mgorfinkle@nixonpeabody.com
- Jena M. Grady, 212-940-3114, jgrady@nixonpeabody.com