

Survey on the Impact of Behavioral Health Integration on MyMichigan Health Primary Care Providers' Confidence in Managing Psychiatric Conditions

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Introduction

- Behavioral health conditions are commonly encountered in primary care, requiring primary care providers (PCPs) to identify, assess, and manage psychiatric concerns.
- Primary care providers report varying levels of confidence in managing different behavioral health conditions and interventions.¹
- Integrated behavioral health (IBH) embeds behavioral health professionals within primary care to support patients and providers and improve access to behavioral health services.²
- IBH has been associated with improved behavioral health outcomes and access to care, but successful implementation depends on effectively meeting the needs of both patients and providers.²
- Evaluating PCP confidence can help determine whether IBH is providing meaningful support and identify opportunities to improve program implementation.²
- This study assessed the relationship between IBH availability and PCP confidence in addressing behavioral health concerns within MyMichigan Health.

Methods

Study design: Voluntary, anonymous, cross-sectional survey conducted using Qualtrics.

Study population: Primary care providers across the MyMichigan Health system, including family medicine, internal medicine, and pediatrics.

Survey content: An 11-question survey assessed provider characteristics, practice-site behavioral health support, and self-reported confidence in managing behavioral health concerns.

Behavioral health integration: Providers reported whether behavioral health support was available at their practice site through **on-site, primarily virtual/telehealth, or no integrated behavioral health support.**

Provider confidence: Likert-scaled questions assessed confidence in identifying patients who may benefit from behavioral health services, connecting patients with support, managing crises and complex psychiatric comorbidities, and providing brief behavioral health interventions.

Data collection: The survey was distributed across the MyMichigan Health system, with responses collected over a **10-week period.**

Statistical analysis: Chi-square tests were used to assess associations between IBH availability, provider clinical role, and self-reported confidence across behavioral health outcomes.

Results

Survey participation: The survey was distributed to **168 primary care providers**, with **27 responses received**, yielding a **16.07% response rate.**

IBH availability: There was a statistically significant relationship between behavioral health integration and provider confidence in **addressing mild or emergent behavioral health concerns before they escalate** ($p = 0.00354$).

Access to care: Behavioral health integration was also significantly associated with provider confidence in **facilitating timely access to behavioral health care** ($p = 0.00381$).

Clinical role: Provider clinical role was significantly associated with confidence in:

- Providing brief behavioral health interventions** ($p = 0.00503$)
- Managing complex psychiatric comorbidities** ($p = 0.00955$)
- Identifying patients who would benefit from additional behavioral health services** ($p = 0.0137$)

Nonsignificant findings: Clinical role was not significantly associated with confidence in **connecting patients with timely behavioral health support** ($p = 0.199$) or **managing behavioral health crises** ($p = 0.263$).

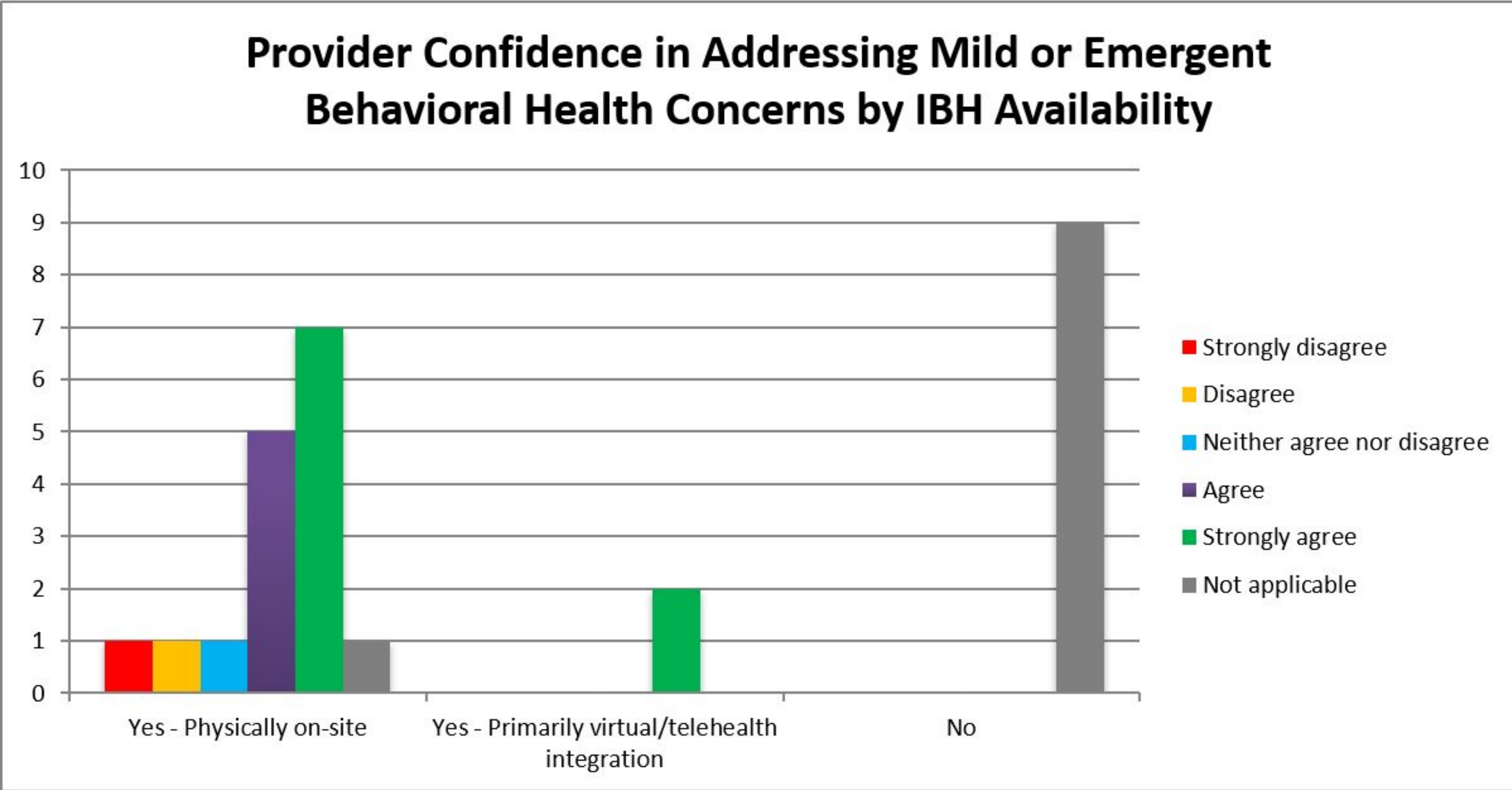


Figure 1. PCP Confidence in Addressing Mild or Emergent Behavioral Health Concerns by IBH Availability.

Distribution of provider confidence ratings across levels of IBH availability. Confidence was assessed using a Likert scale. A significant association was observed between IBH availability and provider confidence in addressing mild or emergent behavioral health concerns before escalation (χ^2 , $p = 0.00354$).

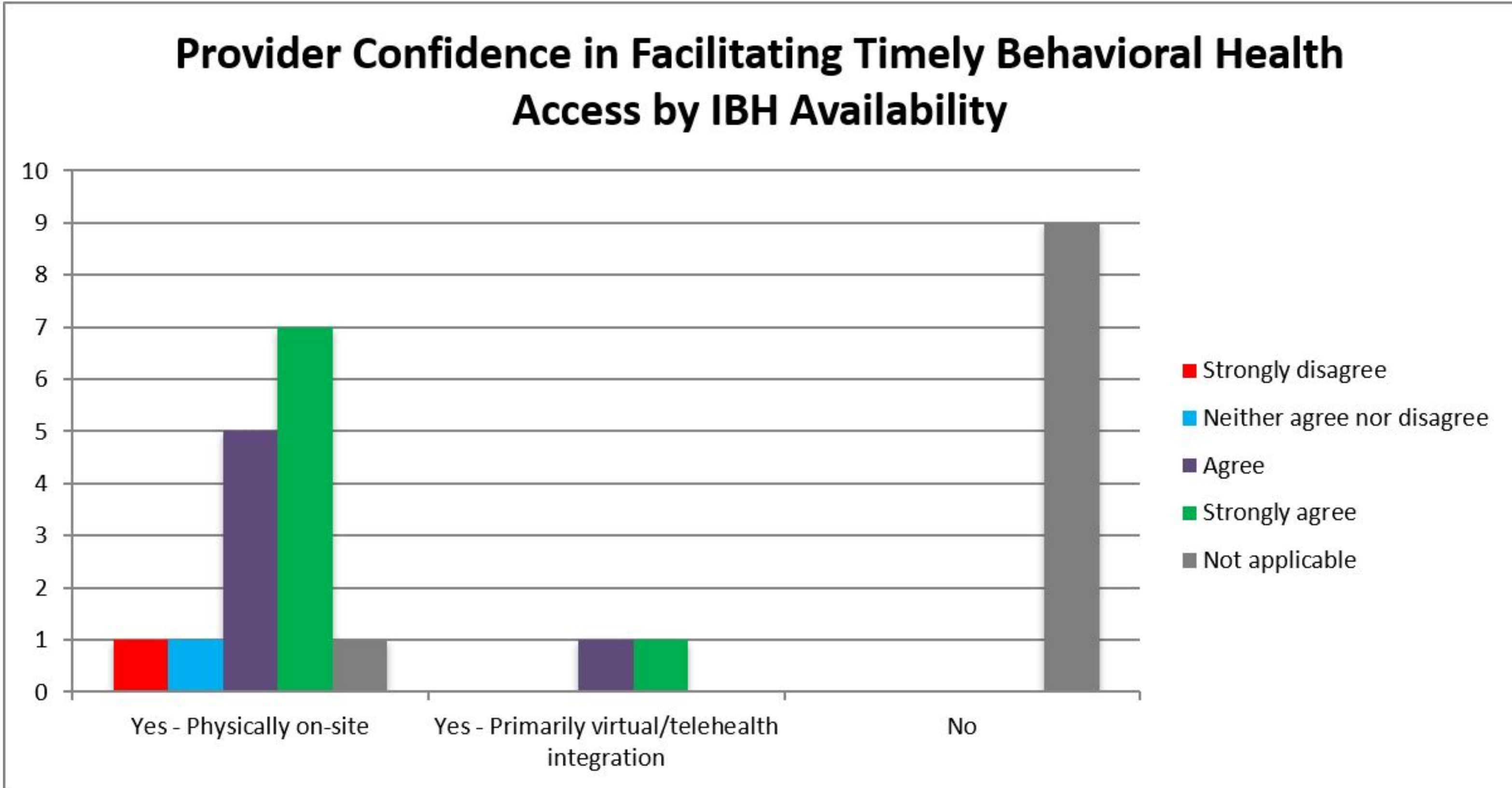


Figure 2. PCP Confidence in Facilitating Timely Behavioral Health Access by IBH Availability.

Distribution of provider confidence ratings across levels of integrated behavioral health (IBH) availability. Confidence was assessed using a Likert scale. A significant association was observed between IBH availability and provider confidence in facilitating timely access to behavioral health care (χ^2 , $p = 0.00381$).

Discussion & Conclusions

- IBH availability was associated with greater PCP confidence in addressing mild or emergent behavioral health concerns and facilitating timely access to behavioral health care, suggesting that IBH may provide meaningful support to PCPs in addressing behavioral health needs within primary care.
- IBH may help address gaps in PCP behavioral health confidence, particularly in areas where confidence differed by clinical role, such as providing brief behavioral interventions, managing complex psychiatric comorbidities, and identifying patients who may benefit from additional behavioral health services.

References

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