



Title:	Referral back to PCP for psychotropic medication management
Subject:	Primary Care Psychiatry
Department:	Behavioral Health
Policy Owner:	Behavioral Health Team
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Approved By:	
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Purpose:

To describe and define the process of referring a patient back to primary care from primary care psychiatry for the purpose of psychotropic medication management.

Policy:

Referral back to PCP for psychotropic medication management

Psychiatry in Primary Care is a limited resource. In order to maintain access and efficiently utilize a Psychiatric Nurse Practitioner and/or Psychiatrist at OLE Health, it is important that there is a focus on utilization review to determine that patients remain in psychiatric care until

- a) They are stable on medication and have a reduction in the symptoms that were present when referred by PCP or
- b) A behavioral health provider determines the patient's diagnoses and symptoms are more appropriately managed in a traditional mental health setting.

Scope:

This policy addresses the rules related to utilization review and referring a patient back to their primary care provider for psychotropic medication management. A separate policy will address utilization review and referrals out to traditional mental health care.



Process

Patient will see the psychiatrist/psych NP until the following occurs:

- 1) Patient is stable on medication regime (No medication changes in at least 2 visits)
- 2) There is a clear reduction in symptoms present when referred.
 And/or
 There is a statistically reliable change in PHQ 9 score: $PHQ-9 \geq 6$
 There is a statistically reliable change in GAD7: $GAD 7 \geq 4$

Baseline PHQ 9 and GAD7 scores are determined at the time of the patient’s first appointment with the psychiatrist/psychiatric nurse practitioner.

Recovery is defined as movement to a score below caseness from a score of caseness or above.

Measure	Disorder	Range	Caseness	Statistically Reliable Change
PHQ-9	Depression	0-27	10	≥ 6
GAD-7	Generalized anxiety disorder (and unspecified anxiety problems)	0-21	8	≥ 4



Utilization Review

- Psychiatrist/Psychiatric Nurse Practitioner will review a patient's chart after 5 visits to assess progress and determine if patient needs to continue with psychiatrist/psychiatric Nurse Practitioner.
- If Psychiatrist/Psychiatric Nurse Practitioner determines the patient is appropriate for referring back to primary care, s/he will send a telephone encounter to patient's primary care provider noting same and will include rationale.
- Psychiatrist/Psychiatric Nurse Practitioner will present patients seen for longer than 8 visits to group supervision to help determine treatment plan.
- If PCP determines the patient has decompensated:
 - PCP will provide rationale for returning to psychiatry via telephone encounter or curbside consultation.
 - Psychiatrist/Psychiatric Nurse Practitioner will re-start treatment or will offer consultation to the PCP.

Definitions:

Psychiatry in primary care: *Services provided by a psychiatrist and psychiatric nurse practitioner in primary care.*

Primary Care Provider: *Medical Doctor, Nurse Practitioner, Physician Assistant*

PHQ9: *Depression screening measure*

Baseline PHQ9: *Score at time of referral to psychiatrist/psychiatric nurse practitioner*

GAD7: *Anxiety screening measure*

Baseline GAD7: *Score at time of referral to psychiatrist/psychiatric nurse practitioner*

Caseness: *The extent to which a patient matches the criteria of a particular condition.*