Using the Collaborative Care Model for Populations with Serious Mental Illness

What is the Collaborative Care Model (CoCM)?
CoCM uses a team-based, interdisciplinary approach to deliver evidence-based diagnoses, treatment, and follow up care. This approach is effective for a variety of populations, including people who have serious mental illness (SMI) (e.g., schizophrenia, bipolar disorder and major depression). It is also beneficial in both primary care and specialty mental health settings.

The care manager tracks outcomes through the patient registry and alerts the mental health team when a patient is not at the target goals. The psychiatrist and other members of the multidisciplinary team adjust mental health treatments or communicate with the primary care provider for medical issues. All treatment decisions are made in close collaboration with the patient who is at the center of the model.

Principles of the CoCM Model that Apply to People Who Have SMI
1. Team-based approach – CoCM is a team-based approach that involves the patient, mental health specialists, primary care providers, and a care manager.
2. Measurement-based treatment to target – CoCM uses measurement-based care tools to track patient progress and adjust treatment as needed.
3. Emphasis on coordination of care – CoCM improves coordination of care between different providers and settings.
4. Patient-centered team care – CoCM aims to improve patient outcomes by providing integrated, comprehensive, and patient-centered care.
5. Cultural sensitivity – Providers practice in a way that is tailored to each individual by addressing common barriers and using practical strategies based on a person’s background.
6. Population-based care – Registries track clinical outcomes and progress of individual patients as well as an overall caseload for a target population.
7. Central role of behavioral health care manager (BHCM) in coordinating and engaging patients – BHCMs work with patients to help them overcome barriers to treatment, monitor outcomes, and notify the treatment team when patients are not at their treatment targets.

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Special Considerations When You Use CoCM with People Who Have SMI

1. **Treatment setting** – CoCM is typically delivered in primary care, yet for people who have SMI it is most commonly delivered in public-sector, specialty mental health settings such as community mental health centers.

2. **Measurement-based care** – While most primary care CoCMs focus on treating common mental health conditions such as depression and anxiety, tracking outcomes for SMI involves tracking measures of symptoms such as mania and psychosis. Since it is a high priority for individuals who have SMI to improve function, it is also important to incorporate structured measures of mental health recovery and social outcomes such as employment and housing.

3. **Tracking medical and mental health outcomes** – Unlike individuals who are treated for common mental health conditions in primary care settings, people who are treated in specialty mental health settings may face additional challenges in access to or coordination of medical services. Many also have untreated or poorly treated medical comorbidities. Therefore, any CoCM for SMI must include a focus on tracking medical as well as mental health outcomes.

4. **Funding strategies** – New billing codes for CoCM are primarily used to reimburse primary care providers. Because mental health clinicians typically provide care in public-sector mental health settings, there is a need to develop other strategies for reimbursing these services. This includes optimizing billing for care management activities. It is important to build a business case that is relevant to public-sector settings in order to advocate for and sustain these services.

5. **Staffing** – In primary care settings, most care is provided by physicians and nurses. In specialty mental health settings, the bulk of care is provided by other groups of providers. This includes social workers, counselors, and peer specialists. In order to implement CoCM in these settings, it is important to incorporate the different professions in the mental health workforce into multidisciplinary treatment teams.

Get Trained in The Collaborative Care Model for SMI

SMI Adviser offers training in how to implement CoCM in populations that have SMI. This includes one-hour webinars and 12-week virtual learning collaboratives. These courses offer the chance to master core skills in how to implement CoCM for SMI. Learn how to identify the best measures to track symptomatic and functional improvement; develop and use a registry; manage whole-person care; and finance and sustain these programs for populations that have SMI.

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