

Integrated Care Systems

Psychiatric News features highly informative content on the emerging practice model of integrated care.

Learn about:

- Predominant models of integrated care and the role psychiatrists play
- Working in integrated care settings
- Payment and delivery models
- APA resources on integrated care and delivery systems initiatives

For new psychiatrists entering the field, understanding the key role of systems of care has never been more important. Research published each month in *Psychiatric Services* will help residents play a vital role in the systems of care where they work, which is why the American Psychiatric Association provides psychiatric residents who are APA Members-in-Training full-text online access to *Psychiatric Services* content as a benefit.



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Professional News

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Integrated Care: What Does It Mean for You?

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"Integrated care" is everywhere—in theory, at least, and increasingly in practice. The concept is a feature of the delivery-system improvements in the new health care reform law, and policymakers and many clinicians have converged on the idea that general medical and behavioral health services should be brought together in a patient-centered manner. Today, a small but dedicated and growing cadre of psychiatrists is advancing the cause of integrated care and the participation of psychiatrists in collaborative-care models.

Integrated care "is the right thing to do to improve the care and quality of life for people we take care of."

APA has established a number of initiatives in this area, headed up by the Work Group on Integrated Care of the Council on Healthcare Systems and Financing, chaired by Lori Raney, M.D., medical director of Axis Health System in Durango, Colo., and the Board of Trustees Health Care Reform Strategic Action Work Group, chaired by Howard Goldman, M.D., director of the Network on Mental Health Policy Research (funded by the MacArthur Foundation) and editor of the APA journal *Psychiatric Services*. Work group members include Jürgen Unützer, M.D., who is director of the Center for Advancing Integrated Mental Health Solutions (AIMS) at the University of Washington and one of the pioneers of integration. Along with Wayne Katon, M.D., Unützer began developing models in integrating mental health and primary care and testing them in diverse primary care settings across the country. Previously working on these issues was the APA Board of Directors Task Force on Psychiatry and Healthcare Reform, chaired by Paul Summergrad, M.D., past-president and chair of psychiatry at Tufts University.

Integrated care system is a new opportunity for psychiatrists—another option on which they can use their license to care for people—but it is not a requirement, and it is not a guarantee. Moreover, psychiatrists can work part time in an integrated care system, maintaining whatever kind of traditional inpatient or outpatient practice they wish to (see question 6). There are degrees of integrated care ranging from the original model of general medical and mental health services are offered in the same location; to a model of integrated care—where a psychiatrist working in consultation with other specialists to manage the behavioral health of a defined population of patients is sometimes referred to as "collaborative care," and the two terms—collaborative care—are often used interchangeably. However, for the purposes of this newsletter, the term "integrated care" will be used.



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2016 Isaac Ray Award

The American Psychiatric Association and the American Academy of Psychiatry and the Law invite nominations for the Isaac Ray Award for 2016. This award honors Dr. Isaac Ray, one of the original founders and the fourth President of the American Psychiatric Association, and is presented to a person who has made outstanding contributions to forensic psychiatry or to the psychiatric aspects of jurisprudence. The award, which will be presented at the Convocation of Fellows at the Annual Meeting of the American Psychiatric Association in Atlanta, Georgia, in May 2016, includes an honorarium of \$1,500.

Nominations are requested as follows: (1) a primary nominating letter (sent with the consent of the candidate), which includes a curriculum vitae and specific details regarding the candidate's qualifications for the award, and (2) a supplemental letter from a second nominator in support of the candidate. Additional letters related to any particular candidate will not be accepted or reviewed by the Award Committee. Nominators should not submit letters on behalf of more than one candidate.

The deadline for receipt of nominations is **May 1, 2016**. Nominations will be kept in the pool of applicants for two years.

Nominations, as outlined above, should be submitted to:
Isaac Ray Award Committee
c/o Lori Klinedinst, Staff Liaison
American Psychiatric Association
1000 Wilson Boulevard, Suite 1825
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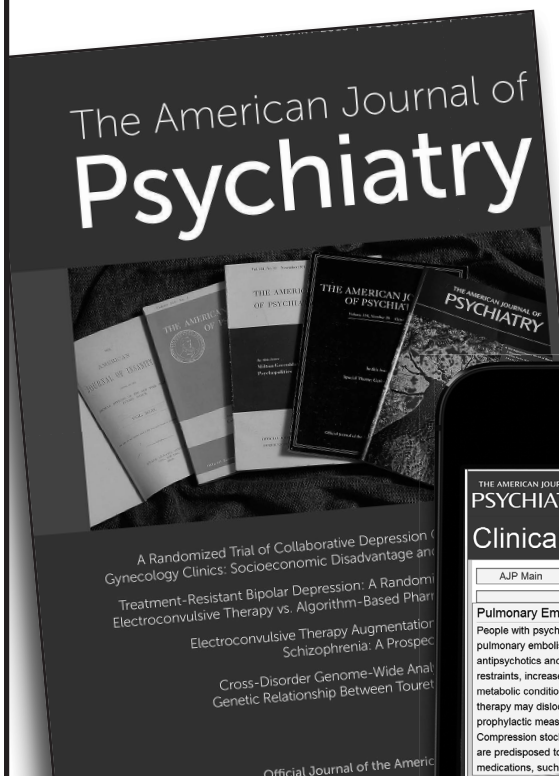
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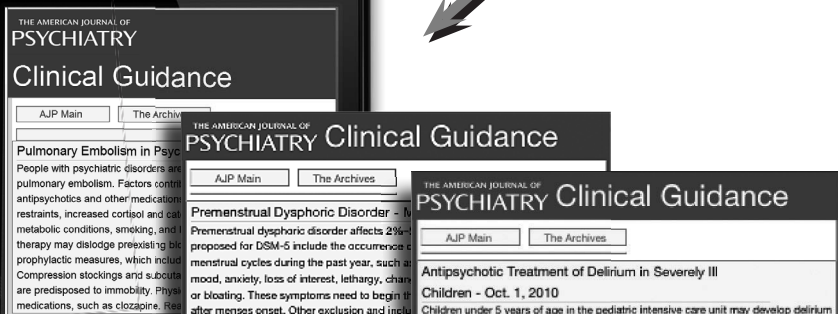
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