



Increasing Shared Decision Making in Behavioral Healthcare

Ann Greiner, President and CEO

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② Mission & Vision

MISSION

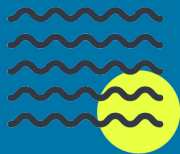
The Primary Care Collaborative advances comprehensive primary care to improve health and health care for patients and their families by convening and uniting stakeholders around research, care delivery and payment models, and policies.

VISION

Shared Principles of Primary Care



Person and
Family-centered



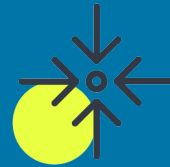
Continuous



Comprehensive
and Equitable



Team-based
and
Collaborative



Coordinated
and
Integrated



Accessible



High-value

👤 BHI: Ongoing Focus of the PCC

- Ongoing BHI Working Group meets bimonthly, with subgroups in between
 - Chairs: Mike Thompson, National Alliance; Dr. Alin Severance, UPMC Health Plan
 - 2022 – First quarter letter to CMS/CMMI with recommendations on BHI and Senate Finance letter/advocacy
- Advanced Primary Care Attributes & the Shared Principles
 - One of seven attributes is BHI
 - Developed by PBGH, National Alliance, AARP, NPWF, IPFCC

[https:// www.pcpcc.org /sites/default/files/ news_files /Attributes%20of%20Advanced %20Primary%20Care.pdf](https://www.pcpcc.org/sites/default/files/news_files/Attributes%20of%20Advanced%20Primary%20Care.pdf)



Where to get the Report



On the PCC website:
www.pccpcc.org/resource/SDMrecs



Link also in chat

SDM Roundtable Members

PLANNING COMMITTEE

- **Ann Greiner** | Primary Care Collaborative
- **Crystal Eubanks** | Purchaser Business Group on Health
- **Julie Bailey-Steen** | Humana
- **Mary Giliberti** | Mental Health America
- **Michelle Dirst** | American Psychiatric Association
- **Rachel Adams** | Takeda

PROJECT LEAD STAFF

Alyssa Neumann | Primary Care Collaborative (formerly)

PARTICIPANTS

- **Margarita Alegria** | Massachusetts General Hospital
- **Allen Doederlein** | Berwyn Township Community Mental Health
- **Anne Gaglioti** | Morehouse National Center for Primary Care
- **Stephen Gillaspay** | American Psychological Association
- **Shawn Griffin** | URAC
- **Jane Kogan** | UPMC Health
- **Jonathan Edwards** | National Association of Peer Supporters
- **Kathryn Cates-Wessel** | American Academy of Addiction Psychiatry
- **Kathy Pham** | American College of Clinical Pharmacy
- **Louise Probst** | St. Louis Area Business Coalition
- **Patty McCarthy** | Faces and Voices of Recovery
- **Renée Markus Hodin** | Community Catalyst
- **Stephen Marder** | UCLA's Psychosis Clinic



Looking at the Evidence

PCC examined evidence falling into seven categories:

- Overview/uncategorized
- Identification of barriers and enablers to implementation
- Reported outcomes
- Clinician perspectives and interprofessional collaboration
- Service user perspectives, experiences, and needs
- Training and education
- Assessment of a decision aid or intervention

Looking at the Evidence, Cont.

Major findings across all categories:

- Training for service users and care team members has been associated with greater shared decision making and greater patient-reported quality of care.
- Service users and clinicians often have differing opinions about the barriers to implementation and challenges with SDM.
- Lack of understanding of cultural differences and issues with stigma can inhibit balanced conversations between service users and the care team.
- There is limited evidence available about the impact of SDM on treatment outcomes.



Shared Decision-Making Recommendations

1. Shift toward a healthcare culture that supports shared decision-making in all aspects of care to increase equity and address stigma among patients and members of the care team.



Shared Decision-Making Recommendations

2. Build on existing innovations and infrastructure to further shared decision-making implementation; broaden training.



Shared Decision-Making Recommendations

3. Advocate for and implement prospective payment models that incentivize the use of shared decision-making, beginning with a shared definition of SDM and related measures.



Shared Decision-Making Recommendations

4. Further develop the evidence base to understand how shared decision-making can improve clinical outcomes, experience of care, and patient and clinician satisfaction.



Q&A