

**Submission Id:** 5082

**Title**

*Behavioral Health, Psychiatry, and Social Service Referrals from Family Medicine and Internal Medicine*

**Priority 1 (Research Category)**

Behavioral, psychosocial, and mental illness

**Presenters**

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**Abstract**

Context: Behavioral health providers (BHPs) and social services have been utilized by primary care teams to address underlying problems not always accessible to physicians, such as developmental trauma, sudden life stressors, or relational troubles, but it remains unclear how these providers and services are utilized.

Objective: To describe who gets referred to BHPs and to examine differences in patient characteristics (demographics, diagnoses) by type of BHP referral in primary care.

Study Design: Descriptive cross-sectional analysis of patient characteristics at time of BHP referral.

Dataset: De-identified electronic health records of a midwestern healthcare system in 2021.

Population studied: Patients  $\geq 18$  years old with an encounter in family (FM) or general internal medicine (GIM) and a referral to a BHP or social services in 2021.

Intervention/instrument: Patient characteristics (age, gender, race), major diagnostic category from ICD-10-CM (mental health only, mental health + other, no mental health), and mental health diagnostic subcategories (mood disorder, anxiety disorder, mood and anxiety disorder, other mental health).

Outcome measure: Type of BHP referral (social work, psychiatry, behavioral health, counseling, or psychology). Analyses used chi-square tests and one-way ANOVA.

Results: Overall, patients were 43.5( $\pm 18.4$ ) years of age, and majority were female (66.1%), white (80.2%) and referred by FM (75.1%). The most prevalent type of referral was psychiatry (54.1%) followed by behavioral health (25.3%). Almost 90% of patients had a diagnosis of a mental, behavioral, or neurodevelopmental disorder. Social services referrals were most prevalent among 'other type, no mental health' and psychiatry and behavioral health referrals were most prevalent among 'mental health only' and 'mental health + other type'. More social service referrals were made by GIM, and more psychiatry or behavioral health referrals were made by FM.

Conclusions: Most patients referred to psychiatry or behavioral health had a mental, behavioral, or neurodevelopmental diagnosis. Although patients with these diagnoses were more likely to be referred to psychiatry or behavioral health than to social services, it is still unclear whether these referrals were appropriate or cost effective.