

Attachment C - Follow-up interview guide

Purpose of the Follow-up Interview:

The purpose of the in-depth follow-up interview is to find out more about the key issues related to integration and barriers to integration identified during the pilot survey questionnaire. A sample of 30 physicians with a mix of approaches to behavioral health care will be selected based on their responses to questions 16 and 19 of the pilot survey questionnaire. The selection will be based on the following criteria:

1. Physicians who do not screen or assess behavioral health conditions- Select 4 Physicians who meet this criterion;
2. Physicians who treat with only medication- Select 10 physicians who meet this criterion; and
3. Physicians who treat with both medication and some form of counseling - Select 16 physicians who meet this criterion.

What follows is the guide for obtaining the in-depth interview data for each of the three scenarios

Public reporting burden for this collection of information is estimated to average 30 minutes per response, the estimated time required to complete the survey. An agency may not conduct or sponsor, and a person is not required to respond to, a collection of information unless it displays a currently valid OMB control number. Send comments regarding this burden estimate or any other aspect of this collection of information, including suggestions for reducing this burden, to: AHRQ Reports Clearance Officer Attention: PRA, Paperwork Reduction Project (0935-0124) AHRQ, 540 Gaither Road, Room # 5036, Rockville, MD 20850.

Scenario 1: Physicians who do not screen or assess behavioral health conditions

This will include physicians who answered “No” to the pilot survey questionnaire question 16.

Hello. My name is _____, from _____. Thank you for taking the time to speak with us today about the survey of behavioral health care in primary care settings.

First I’d like to confirm that I am talking to **[NAME OF RESPONDENT]**.

YES..... 1 [CONTINUE]
NO..... 2 [STOP]

Thank you for having taken the time to complete our questionnaire and for agreeing to participate in this follow-up interview. I will be asking you for some in-depth information about your responses. Your feedback will be used to help us assess whether the questions are being properly understood so that we can improve the questionnaire.

Your participation in this interview is entirely voluntary. There are no direct benefits to you for participating in this interview; however your feedback will be used to improve the questionnaire that will be collecting data that may be used to advance the healthcare system for providers like yourself. There is no cost to you other than your time and we will be speaking with you for about 30 minutes today. We will be sending you \$75 as a token of our appreciation after we complete this interview.

All the information you provide will be kept confidential and nothing will be reported about you individually. I’d like to record this interview, is that ok with you?

[TURN ON RECORDER]

I am recording this interview with your permission, correct?

YES..... 1 [CONTINUE]
NO..... 2

In this interview, I will ask you to reflect on your experience providing care for patients with behavioral health conditions such as depression, anxiety, or substance abuse.

Q1. When you completed our questionnaire you indicated that you do not have a systematic process to screen and assess your patients for behavioral health conditions such as depression, anxiety, or substance abuse. Please elaborate on the barriers that prevent you from screening patients for behavioral health conditions.

Q2. Please describe what steps you take to screen and assess your patients for any chronic condition?

Q2a. For which conditions do you routinely screen and assess your patients?

Q3. Please describe what steps you take when you suspect or know a patient has a behavioral health condition such as depression, anxiety, or substance abuse.

Q4. Do you have any other input for us about this survey?

[Probe on burden; topics covered, was it comprehensive, should we have talked to someone else in the practice]

Thank you very much for your time.

[STOP RECORDING]

I'd like to now verify your mailing address so we can send the \$75 to the correct address

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Scenario 2: Physicians screen or assess behavioral health conditions and treat with Medication only

This will include physicians who answered “Yes” to the pilot survey questionnaire question 16 and “Yes” to question 19a, but “No” to 19b and to both categories in 19c (referral to a psychiatrist and referral to other behavioral health provider).

Hello. My name is _____, from _____. Thank you for taking the time to speak with us today about the survey of behavioral health care in primary care settings.

First I’d like to confirm that I am talking to **[NAME OF RESPONDENT]**.

- YES..... 1 [CONTINUE]
- NO..... 2 [STOP]

Thank you for having taken the time to complete our questionnaire and for agreeing to participate in this follow-up interview. I will be asking you for some in-depth information about your responses. Your feedback will be used to help us assess whether the questions are being properly understood so that we can improve the questionnaire.

Your participation in this interview is entirely voluntary. There are no direct benefits to you for participating in this interview; however your feedback will be used to improve the questionnaire that will be collecting data that may be used to advance the healthcare system for providers like yourself. There is no cost to you other than your time and we will be speaking with you for about 30 minutes today. We will be sending you \$75 as a token of our appreciation after we complete this interview.

All the information you provide will be kept confidential and nothing will be reported about you individually. I’d like to record this interview, is that ok with you?

[TURN ON RECORDER]

I am recording this interview with your permission, correct?

- YES..... 1 [CONTINUE]
- NO..... 2

In this interview, I will ask you to reflect on your experience providing care for patients with behavioral health conditions such as depression, anxiety, or substance abuse.

Q1. When you completed our questionnaire you indicated that you follow-up on patients diagnosed with behavioral conditions by treating with medication, but without counseling or referral to a psychiatrist or other behavioral health provider. Please elaborate on the barriers to providing counseling by yourself or referring to a psychiatrist or other behavioral health provider.

Q2. For patients with behavioral health conditions please describe a typical visit from start to finish. How do visits for patients with newly diagnosed behavioral health conditions differ from visits with patients with existing behavioral health conditions?

Q3. [Ask if the physician did not cover it when responding to Q2] Please describe what steps you take to evaluate behavioral health as part of routine care assessments.

Q4. [Ask if physician did not cover it when responding to Q2] Do you typically develop a care plan?

[If yes] What process do you follow to develop one [probe on whether they engage the patient and family member, how are they engaged]

Q 5. I want to ask you a few questions on how you are reimbursed for providing behavioral health care services. Please describe the sources of revenue for your practice for providing behavioral health services.

Q 6. How does cost impact the way you treat, counsel, and/or refer patients who require care for behavioral health conditions, such as depression, anxiety, and substance abuse.

Q7 . What reimbursement mechanisms would allow you to improve the quality of the mental health services you provide?

(Probe on Medicaid incentives for integration, monetary incentives linked to improved health, single payer solutions, and/or universal coverage to eliminate cost-shifting related to the uninsured and underinsured.)

Q8. Do you have any other input for us about this survey?

[Probe on burden; topics covered, was it comprehensive, should we have talked to someone else in the practice]

Thank you very much for your time

[STOP RECORDING]

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Scenario 3: Physicians screen or assess behavioral health conditions and treat with both medication and some form of counseling

This will include physicians who answered “Yes” to the pilot survey questionnaire question 16 and “Yes” to question 19a, “Yes” to 19b or “Yes” to either of categories in 19c (referral to a psychiatrist and referral to other behavioral health provider).

Hello. My name is _____, from _____. Thank you for taking the time to speak with us today about the survey of behavioral health care in primary care settings.

First I’d like to confirm that I am talking to **[NAME OF RESPONDENT]**.

YES..... 1 [CONTINUE]
NO..... 2 [STOP]

Thank you for having taken the time to complete our questionnaire and for agreeing to participate in this follow-up interview. I will be asking you for some in-depth information about your responses. Your feedback will be used to help us assess whether the questions are being properly understood so that we can improve the questionnaire.

Your participation in this interview is entirely voluntary. There are no direct benefits to you for participating in this interview; however your feedback will be used to improve the questionnaire that will be collecting data that may be used to advance the healthcare system for providers like yourself. There is no cost to you other than your time and we will be speaking with you for about 30 minutes today. We will be sending you \$75 as a token of our appreciation after we complete this interview.

All the information you provide will be kept confidential and nothing will be reported about you individually. I’d like to record this interview, is that ok with you?

[TURN ON RECORDER]

I am recording this interview with your permission, correct?

YES..... 1 [CONTINUE]
NO..... 2

In this interview, I will ask you to reflect on your experience providing care for patients with behavioral health conditions such as depression, anxiety, or substance abuse.

When you completed our questionnaire you indicated that you follow-up on patients diagnosed with behavioral conditions by treating with medication, and with counseling and /or referral to a psychiatrist or other behavioral health provider.

Q1. For patients with behavioral health conditions please describe a typical visit from start to finish. How do visits for patients with newly diagnosed behavioral health conditions differ from visits with patients with existing behavioral health conditions?

Q2. [Ask if the physician did not cover it when responding to Q1] Please describe what steps you take to evaluate behavioral health as part of routine care assessments.

Q3. [Ask if physician did not cover it when responding to Q1]] Do you typically develop a care plan?

[If yes] What process do you follow to develop one [probe on whether they engage the patient and family member, how are they engaged]

Q4. Please describe the physical location of psychiatrists or behavioral health providers you work with to manage care for individual patients. [Probe on protocol for working with psychiatrist or behavioral health providers to manage care for patients]

Q5. I want to ask you a few questions on how you are reimbursed for providing behavioral health care services. Please describe the sources of revenue for your practice for providing behavioral health services.

Q6. How does cost impact the way you treat, counsel, and/or refer patients who require care for behavioral health conditions, such as depression, anxiety, and substance abuse.

Q7. What reimbursement mechanisms would allow you to improve the quality of the mental health services you provide?

(Probe on Medicaid incentives for integration, monetary incentives linked to improved health, single payer solutions, and/or universal coverage to eliminate cost-shifting related to the uninsured and underinsured.)

Q8. Do you have any other input for us about this survey? [Probe on burden; topics covered, was it comprehensive, should we have talked to someone else in the practice]

Thank you very much for your time

[STOP RECORDING]

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