



# Behavioral Health eCare Plan Collaborative Plan (BH eCP)

Behavioral Health clinics need to – and cannot now easily - exchange key information with patients and other care sites to co-create patient-driven, holistic care plans. With LEAP award funding from ASTP/ONC, our team is working to test solutions for data interoperability between two independent behavioral health (BH) clinics and their clients’ medical providers. We are working with BH programs to understand their data needs and workflows, refine a pair of health data integration apps – one clinician-facing (eCP), one patient facing (MyCP), connect the apps, pilot with care team and patient participants, and, finally, evaluate.

## Our Partner Behavioral Health (BH) Sites are Unique

### Site 1

**Description:** Suburban outpatient agency providing counseling to individuals and families across the lifespan (~750 patients)

- Includes Spanish-speaking group

### Interoperability Needs:

- ✓ Client diagnosis and medication history to aid in the treatment of clients and chronic disease management
- ✓ Alerts for clients in crisis (e.g., suicide risk)
- ✓ Primary care contact info for coordination
- ✓ Updates to medication and diagnoses following hospitalization

### Site 2

Urban, residential facility for women receiving treatment for substance use (<30 patients)

- Staff help clients access care, arrange transportation, set up email & health portal

### Interoperability Needs:

- ✓ Client diagnosis and medication history to assess site’s ability to meet needs
- ✓ Robust medication tracking
- ✓ More efficient information exchange (e.g., Continuity of Care Documentation received as cumbersome XML documents)
- ✓ Appointment tracking

## Accomplishments

Our team has identified and documented persistent challenges to interoperability, including:

- ⊕ BH EHR systems offer limited interoperability support and have individual customization needs.
- ⊕ EHR configurations for BH data are not standardized (e.g., using structured data for assessments).
- ⊕ BH sites experience difficulty with (1) Maturity of BH EHRs varies by site and staff bandwidth (2) receiving data from non-traditional care sites (e.g., methadone clinics).

Our team has added the following functionality to the MyCarePlanner and eCarePlanner applications

- ⊕ Structured behavioral health assessments including the PHQ-9 (depression) and GAD-7 (anxiety).
- ⊕ Added history of medical encounters and scheduled procedures
- ⊕ Psychiatric medication flagging to indicate duplicates and suicide risk are near completion.

## Future Directions

- ✓ Use Epic resources for provider/participant sign-in.
- ✓ Develop enhanced MyCP/eCP apps to support sites with low technical maturity.
- ✓ Partner with other teams doing similar/complementary work.

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