



Program Provider Agreement

MC3 is funded by a grant (award **20200032-01**) supporting an agreement between the University of Michigan(U-M) and the Michigan Department of Health and Human Services. The intent of the MC3 program is to support primary care providers (PCPs) in Michigan who are managing patients with behavioral health problems so that those patients can continue to be treated within the practice. This patient group includes children, adolescents and young adults through age 26, and women who are contemplating pregnancy, pregnant or postpartum with children up to a year. Support is available to providers through telephone consultations with U-M psychiatrists who can answer questions related to diagnosis, medication management, and psychotherapy recommendations. U-M psychiatrists are available by phone Monday through Friday from 9 am to 5 pm, excluding holidays.

The U-M team works closely with local Community Mental Health (CMH) organizations in each practice's catchment area. A Behavioral Health Consultant (BHC), funded by U-M through the grant award and hired by the CMHs, will assist practices by triaging the referral for consultation, responding to any questions that are within the scope of his/her expertise, and forwarding appropriate cases to the MC3 psychiatrist for same-day phone consultation. In some clinics, the BHC will be embedded on a part-time basis and will provide brief interventions and linkage to community resources for patients and families.

For complex cases where the provider and consulting psychiatrist agree that a more in-depth evaluation is recommended, the BHC may facilitate an in-home tele-psychiatry consultation for the patient/family as long as the insurance is accepted by the Michigan Medicine Department of Psychiatry.

A description of MC3 services, as well as what is included and excluded, is outlined below:

1. MC3 is not an emergency/referral service - emergency consultations over the phone or in person are not provided. If a provider calls about a case requiring an emergency intervention, the BHC will refer the patient to the most appropriate local emergency service.
2. U-M psychiatrists do not provide ongoing treatment or prescribe medication for patients, but rather provide education and guidance to providers concerning medication and treatment options. For those cases beyond the scope of the provider's practice, the BHC will provide recommendations for specialty level resources locally.
3. Timely educational phone consultations by the U-M psychiatrist are offered to the provider for medication and dosing questions, diagnostic dilemmas and general patient management questions. When a provider requests a consult, the BHC will be the initial responder. The BHC will collect basic information and will respond to any questions that are within his/her scope of expertise. If a psychiatrist is the most appropriate person to respond to the consultation request, the call will be referred to the psychiatrist on call who will respond within the same day.
4. These telephone "curbside consultations" do not create a physician-patient relationship between the psychiatrist and the patient. However, it is requested that the provider inform the patient and/or caretaker that he/she will be discussing their situation with a U-M psychiatrist. Trainees should notify their supervisors of enrollment in the MC3 program. Prior to consulting with MC3, trainees should review the case with their attending supervisor and upon completion share the outcome of the consultation with them. Because the consultation is educational in nature, the psychiatrist will not request identifying information about the patient. The psychiatrist will respond



to queries using language such as "in cases like this" or similar general language. No medical record will be maintained by the psychiatrist with regard to these questions or situations. General information about the call (nature of question, patient disposition, etc.) will be maintained by the BHC and psychiatrist for evaluation purposes.

5. Tele-psychiatric consultations may be available to patients from practices of participating providers, as a follow-up to the phone consultation. These video based evaluations are available as a one-time consultation based on insurance. Notes will be documented in the Michigan Medicine medical record system. Upon completion of the evaluation, a written report will be available to the PCP.
6. The MC3 program will maintain a website that offers educational material on treating behavioral health issues. Participating providers will be directed to this website as an additional educational resource.
7. As part of the program, participating providers may be asked to complete surveys to evaluate the program's effectiveness in increasing provider confidence and competence in treating behavioral health issues in their patients.

If a provider fails to comply with the terms of the program, or is practicing according to what are deemed to be unsafe practices or practices contrary to MC3 recommendations or the patient's best interests, that provider will be asked to leave the program.

Provider Name and Degree _____

Resident? (Circle one) Yes / No

If Yes, Attending Supervisor
Name and Email _____

When is your expected graduation date? _____

Practice name _____ Practice county _____

Provider work email _____
(MC3 uses email to send summaries after consultations and info about training opportunities.)

I have read the above and agree to adhere to the procedures described.

Provider signature _____

Please send this completed and signed document to the MC3 Program by fax (734-539-0330) or email (MC3-admin@med.umich.edu). Alternately, you can enroll by visiting our website's provider enrollment page (mc3.depressioncenter.org/pcp/enroll).

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