Family Physicians Are Essential for Mental Health Care Delivery

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As the largest and most widely distributed of primary care physicians, family physicians have an important role in providing mental health care, especially in rural and underserved areas. However, the proportion of family physicians who report providing mental health care is low. Policy barriers such as payment for mental health services should be explored to ensure access to mental health care for patients across the urban to rural continuum. (J Am Board Fam Med 2013;26:114–115.)

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Access to mental health care is critical for the U.S. population. In 2004, an estimated 25% of adults in the United States reported having a mental illness in the previous year.[1] A recent study reported that about two thirds of primary care physicians could not get outpatient mental health services for their patients.[2] Primary care physicians report that they are the primary manager of psychiatric disorders in one third of their patient panel.[3] Two thirds or more of patients with depression receive treatment for their depression in the general medical setting.[4] Because family medicine often is regarded as the unification of the behavioral and physical models of illness,[5] family physicians (FPs) have an important role in the provision of mental health care for their patients, particularly in rural and underserved areas.

We used demographic data of American Board of Family Medicine diplomates from 2007 to 2009 (n = 9507, 9692, and 9558, respectively) to explore recent trends in the provision of mental health care by FPs across the rural-urban continuum. We calculated the proportion of FPs self-reporting delivery of mental health care services across the study years. Using the American Medical Association Physician Masterfile, we also calculated availability of psychiatrists in the nation by rurality. The percentage of FPs providing mental health care was higher in more rural areas, and psychiatrists per capita drops considerably as rurality increases (Table 1). FPs providing mental health services are more available than psychiatrists in rural areas, indicating the importance of FPs to the delivery of mental health care services.

Two features of these two specialties—a geographic maldistribution and general shortage of psychiatrists and the broad distribution and biopsychosocial training of family physicians—help explain why FPs are essential for providing mental health care, particularly in rural settings. Mental health insurance carve outs, poor reimbursement, and time restraints discourage FPs from providing needed comprehensive mental health services. The patient-centered medical home model and advent of accountable care organizations also will demand the integration of primary and mental health care. Improving mental health access requires enhancing

Table 1. Family Physicians (FPs) Providing Mental Health Care (MHC) by Rurality

Rural-Urban Continuum Code	Psychiatrists Per 10,000 Population	FPs Per 10,000 Population	FPs Providing MHC (%)	FPs Providing MHC Per 10,000 Population*
1 (Most urban)	1.29	2.21	40	0.89
2	1.07	2.98	43	1.28
3	0.92	3.17	44	1.40
4	0.51	2.70	48	1.30
5	0.74	3.52	48	1.69
6	0.32	2.94	49	1.44
7	0.36	3.58	53	1.90
8	0.10	2.29	51	1.17
9 (Most rural)	0.11	2.85	52	1.48
National	1.07	2.60	43	1.12

*Adjusted.

Data Sources: 2010 US Census; 2012 American Medical Association Physician Masterfile; American Board of Family Medicine Examination Application Demographic Data (2007–2009).

the ability of FPs to deliver mental health care and paying appropriately for these services.[5]

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