

Lighting the path: The importance of behavioral health in injury recovery

For a recently injured person, the path to recovery may look long, and sometimes dark. The patient's mental condition can affect their ability to do the things needed for their physical health and recovery — from taking their medications, to eating a balanced diet and getting adequate and restful sleep.

As clinicians with many years of experience supporting injured persons, Tron Emptage, MA, RPh, Chief Clinical Officer, and Robert Hall, MD, Corporate Medical Director, see the powerful relationship between mind, behavior, and physical healing.

May is Mental Health Awareness month. To recognize this important national movement, we sat down with Tron and Robert to learn more about behavioral health, and how Optum works to “light the path” for injured persons by supporting their behavioral health during physical recovery.

You use the term *behavioral health*, rather than *mental health*. Why?

Although mental health and behavioral health are certainly interrelated, in workers' compensation and auto no-fault we're primarily focused on behavioral health, or the overall well-being of the injured person.



*Tron Emptage, MA, RPh
Chief Clinical Officer*



*Robert Hall, MD
Corporate Medical Director*

Our goal is to help injured people return to the healthy behaviors and actions they had before they were injured, or to help them develop new healthy habits. We want them to get back to doing what they used to do — whether that's getting back to work, or simply being more active, functional, and independent.

What would be an example of the way in which behavioral health can influence physical recovery?

Well, let's say a person has a leg fracture — a physical injury. The patient is at home recuperating, but she's not working, not able to help as much with family activities, and experiencing pain. These stressors can serve as catalysts that lead her to worry about her ability to return to work, her ability to take care of her family, and her financial situation. Those worries, coupled with seemingly endless pain, can lead to depression.

As a result of her depression, she spends too much time inactive on the couch, and is reluctant to begin physical therapy. She's thinking, "If I move or exercise, it's going to hurt more."

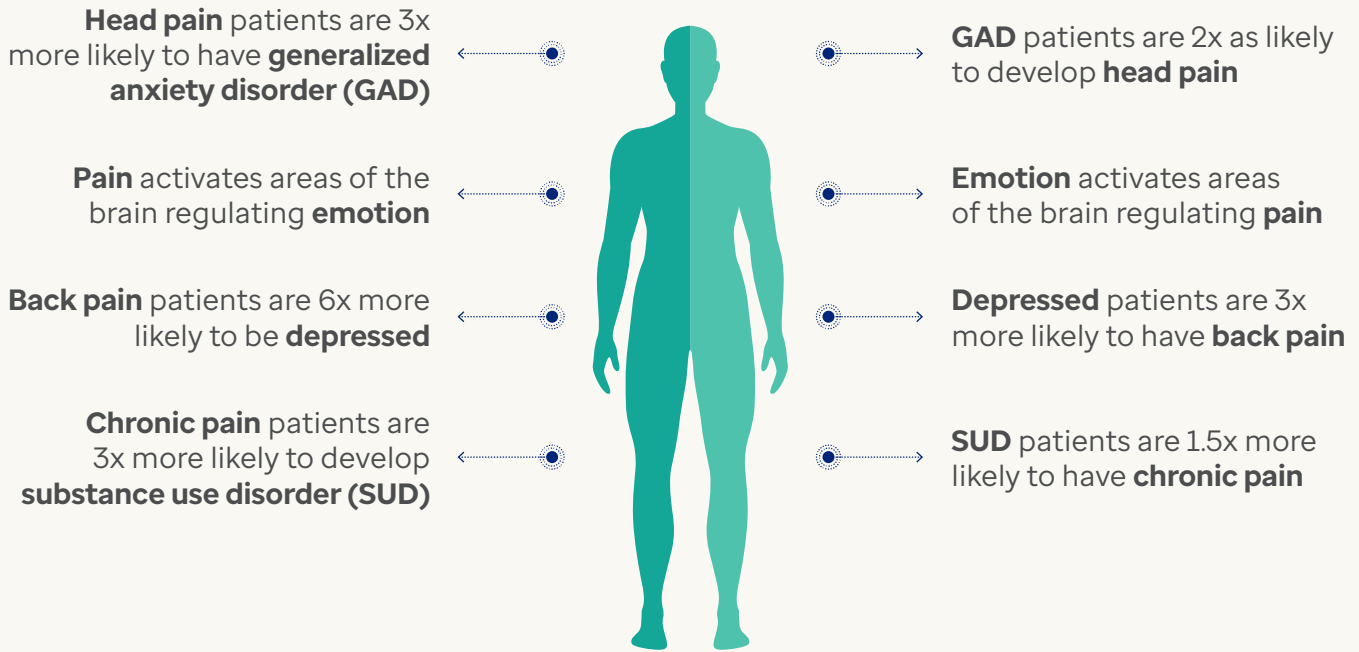
Although her behavioral health issues began after her physical injury and are secondary to it, her mental state and behavior are now affecting her physical health and recovery. In this case, it's important to break the "new norms" of her behavior and help her return to the healthier behavior she had prior to her injury.

What is the "vicious cycle" you focus on breaking?

It's hard to delineate the overlaps between mental and physical health since they're intertwined in human beings. And it's important to recognize their powerful connection. Think of this in terms of the ancient concept of "mind, body, and spirit."

With pain, there's an incredibly strong relationship between the physical attributes and mental state. It's bidirectional, and it's sometimes hard to determine the focal point, especially with chronic pain. For example, is the depression causing pain or is the pain causing depression — or are the components of both at work? To help break the pain cycle, we focus on finding the correct treatment to alleviate pain while considering all other factors that may worsen it.

There is a bidirectional relationship between chronic pain and behavioral health conditions



What are some common disorders you see affecting the behavioral health of injured persons?

There are a number of disorders that can result from a traumatic event or injury and can negatively affect behavior. Post-traumatic stress disorder (PTSD), depression, and anxiety are ones we see often. With PTSD, a person might not be able to go back to work because of fear, nightmares, palpitations, or shortness of breath — all physical symptoms resulting from the event they experienced.

While depression and anxiety may be pre-existing mental health conditions, they may also be the consequences of the injury or event. Pressing concerns like “When will I be able to go back to work? How will I support my family? How will I take care of my children?” can all contribute to both depression and anxiety in some individuals.

Certain medications may also induce depression. Medications that depress the central nervous system may have this effect in some persons — most opioid analgesics fall into this category. If an opioid is prescribed to alleviate pain, but also causes depression, that specific side effect may negatively

influence the recovery of the patient, lengthen the claim duration, and reduce the therapeutic benefits of other treatments.

PTSD, depression, and anxiety contribute to a wide variety of behavioral health issues — from caffeine, alcohol, and medication misuse to overeating and sleep deprivation. It's very important to keep a holistic perspective whenever you're working with injured persons. No injury or illness is identical, and the same can be said about injured persons. Each individual's level of behavioral health and physical health interaction is unique. By addressing the whole person, we can build the whole story that will enable improved care and outcomes.

What are some difficult challenges in supporting an injured person's behavioral health?

Well, first, the country has a shortage of mental health providers, which often leads to long wait times for counseling or other treatments. And for many treatments, finding the right behavioral health provider is important, but can be hard to do — just as it can be hard to find the right physical health provider. In behavioral health, it's important for the patient and provider to connect, and sometimes this just doesn't happen.

We also see medication-related issues; for example, an antidepressant medication may be prescribed at a dose too low to be effective. On the other hand, sometimes the dosage is too high and causes side effects. Drug-drug interactions are also a concern, and with many mental health medications, it can take weeks for an injured person to begin seeing beneficial effects.

Psychological issues are the **#1 barrier** to successful return to function and improved work outcomes



Really, it's an ongoing effort to find the right provider, right medication, right medication dosage, and right duration of care. This can be a challenge for both the injured person and their provider, requiring cooperation and patience.

Are there innovative and newer types of treatments that have met with success?

In addition to treatments that have been around for some time, such as light therapy, medication, massage, and hypnosis, there are new interventions that show promise in the literature. A couple of these mindful and interactive options are biofeedback (for chronic pain) and forest bathing (for anxiety and depression).

Virtual reality therapy (VRT) for use with injured persons in the workers' compensation space has also showed positive results in lessening chronic pain and improving other behavioral health conditions. VRT has been used successfully for several decades in governmental programs with certain populations, such as veterans. And we're now seeing growing evidence that this treatment may be beneficial to recovery for the appropriate injured persons.

How does Optum work with injured persons and their caregivers to support overall behavioral health?

We're here to support our clients as they support their injured persons. Our formularies are tailored for both acute injuries and chronic conditions of affected persons. These formularies help to provide the right medications at the right time. We also use sophisticated predictive data analytics and machine-learning artificial intelligence to evaluate claims and identify injured persons who are at the highest risk of developing long-term, high-cost aging claims. The risk scoring on our portal provides claims professionals with the information and supporting data they need to interact with prescribers and help make the proper medication adjustments to drive better claim outcomes.

Our clinical pharmacist liaisons provide clients with answers and advice on medically and pharmaceutically complex claims. In addition to providing clinical advice on the steps needed to provide better claim outcomes via our clinicians, we provide continuing education through our CEU program, offer

timely podcasts on pertinent industry issues, deliver white papers and articles on relevant topics, and offer client-specific resources in our portals and through our account managers.

As a resource for information, education, and risk identification, we proactively start the discussion and then advise our clients on the proper actions to take.

From a holistic perspective, can you recommend ways to help an injured person improve their behavioral health?

There are many ways to help injured persons improve their behavioral health. You can help them join a community activity, such as a communal garden or sewing group. You can help them find counseling. You can encourage them to look forward to joyful events, such as weddings and other social gatherings, as an incentive for recovery.

At Optum, we take a comprehensive approach. We realize that you can't just treat the broken leg, the PTSD, the pain. Along with that, you must drill down deeper with questions like, "How are you doing? How are you feeling? How are you sleeping? Do you have trouble getting to your medical appointments? Are you having trouble completing your medical or other forms?"

Listen carefully to the answers to the questions. As we continue to recognize the complex and unique issues that injured persons struggle with, we can provide empathetic, creative, and useful approaches to promote their behavioral health, physical function, and overall well-being.



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How are you feeling?

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