

Community Center Readiness Guide  
Additional Resource #11  
SAMHSA Grant for Integration

**Substance Abuse and Mental Health Services Administration  
Grants for Primary and Behavioral Health Care Integration (PBHCI)**

In Federal Fiscal Year 2009, SAMHSA accepted applications for its Grants for Primary and Behavioral Health Care Integration (PBHCI). Three sites were awarded in Texas: Austin, Houston and Lubbock. The purpose of the grant program is to improve the physical health status of people with serious mental illness (SMI) by supporting communities to coordinate and integrate primary care services into publicly funded mental health and other community-based behavioral health settings.

SAMHSA expects that people with serious mental illnesses will show improvement in their physical health status through participation in the programs associated with this grant. PBHCI also includes a focus on providing wellness education and support services. This grant program supports SAMHSA's Pledge for Wellness 10 by 10 Campaign to prevent and reduce early mortality among people with mental illness by 10 years over the next 10 years. It is projected that better coordination and integration of primary and behavioral health care should lead to outcomes such as improved access to primary care services; improved prevention, early identification and intervention to avoid serious health issues including chronic diseases; enhanced capacity to holistically serve those with mental and/or substance use disorders; and better overall health status of clients.

Primary and Behavioral Health Integration (PBHCI) grantees are required to use grant funds to provide the services listed below. In addition, funds can be used for necessary infrastructure development to support integration and direct service expansion.

- Facilitate screening and referral for necessary primary care prevention and treatment needs. Provide and/or ensure that provision of direct services (including primary care screening/assessment/treatment and referral for, but not limited to, hypertension, diabetes, obesity, smoking and substance abuse) be provided in a community mental health center and/or other community-based behavioral health agency, as appropriate.
- Development of a registry/tracking system for all primary care needs of, and outcomes for, clients with serious mental illness.
- Care management, individualized person-centered planning and coordination to increase consumer participation and follow up with all primary care screening, assessment and treatment services (including the involvement of consumers and family members in services development and implementation and peer support/management services).
- Prevention and wellness support services (including nutrition consultation, health education and literacy, peer specialists, self-help/management programs).
- Processes for referral and follow-up for needed treatments that are not appropriately provided in a primary care setting.

For the full funding description see [http://www.samhsa.gov/Grants/2009/sm\\_09\\_011.pdf](http://www.samhsa.gov/Grants/2009/sm_09_011.pdf)