

UCSF

UC San Francisco Previously Published Works

Title

Student Navigators Help UCSF Primary Care Patients Access Behavioral Health Care in the Context of Insurance and Other Barriers

Permalink

<https://escholarship.org/uc/item/7ct8121j>

Authors

Belkora, Jeff

Duaybis, Daniel

Davila Escorza, Suzette

et al.

Publication Date

2026-10-14

Peer reviewed

Student Navigators Help UCSF Primary Care Patients Access Behavioral Health Care in the Context of Insurance and Other Barriers

Belkora J*, Duaybis D, Davila Escorza S, Phan C, Chun L, Santos V, Zhou Y, Ramos J, Saldana E, LoCicero Z, Perez Maldonado K, Atadaini J, Aguilar Ortiz D, Wang E, Tacla J, Rios-Savanapridi S, Duong T.

UCSF Institute for Health Policy Studies and Integrated Behavioral Health Program. Correspondence: jeff.belkora@ucsf.edu

Background

UCSF Patient Support Corps deploys undergraduate students as interns

- Students learn by helping patients access and navigate care

UCSF has a program for patients needing short-term behavioral health care

- This program is called Integrated Behavioral Health
- UCSF primary care providers refer their patients to this program

Referred patients typically need routine therapy & medication management

- i.e. ADHD evaluations, depression & anxiety care, psychosocial stressors

Program goal: connect all referred patients to appropriate care

This report evaluates the outcomes of these referrals from 8/25 to 5/26

Methods

Patient Support Corps students ran Electronic Health Record (APeX) reports:

- Reviewed Integrated Behavioral Health records between 8/25 and 5/26
- Counted referrals from primary care
- Counted patients queued for scheduling at UCSF
- Identified patients **not** queued for scheduling
- Identified barriers among patients not queued for scheduling
- Counted patients connected with community care (due to scheduling barriers)
- Wrote reflections about lessons learned



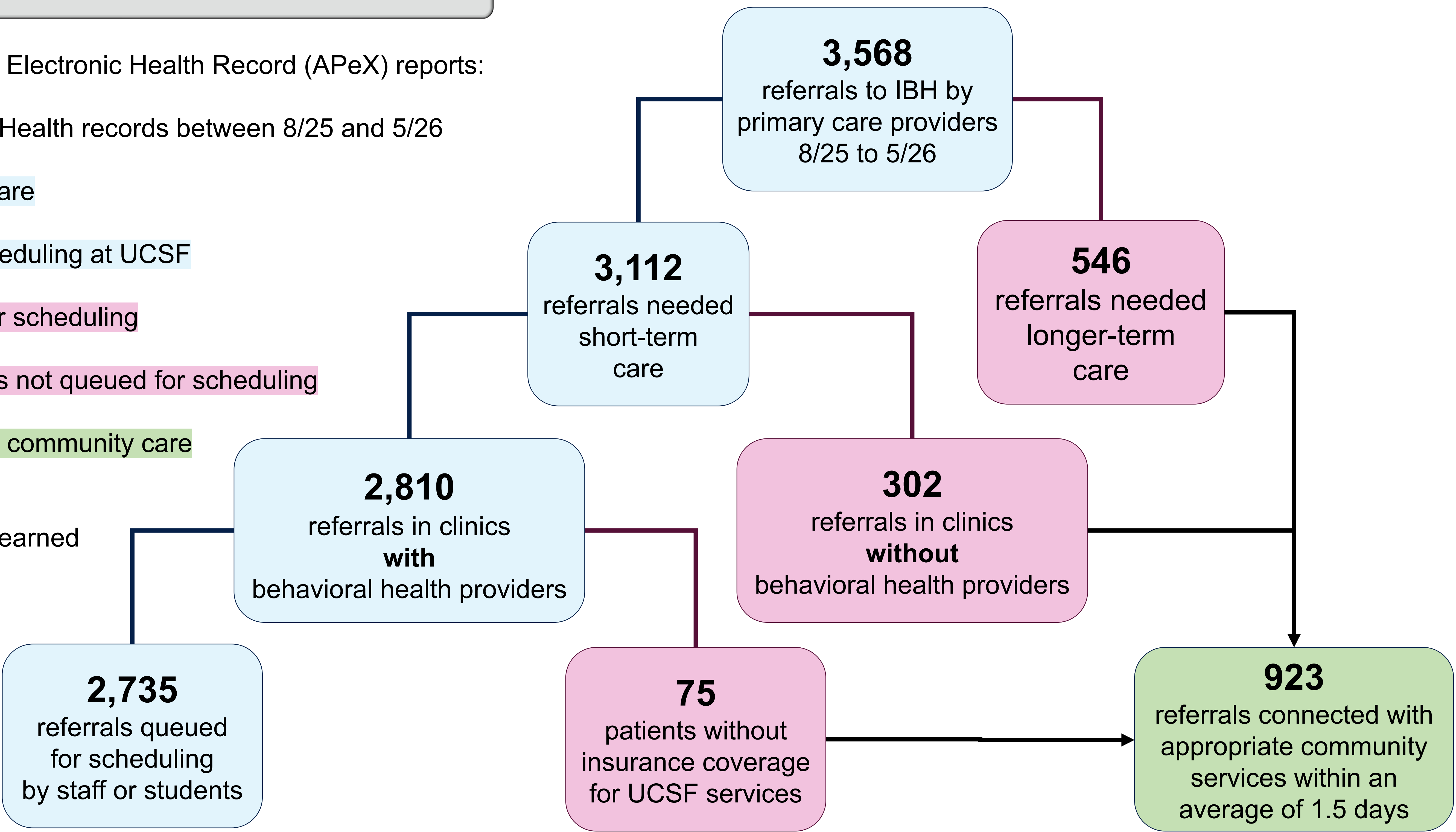
Students assigned to Integrated Behavioral Health



Key – meaning of color codes

- Referrals on track to be queued for scheduling
- Referrals facing barriers – at risk of falling through the cracks
- Students intervene to connect patients with community care

Students saved 923 patients from falling through the cracks in the behavioral health system



Results

Between 8/25 and 5/26, UCSF primary care providers made 3,568 referrals.

Program staff and students queued 2,735 (77%) for scheduling at UCSF.

Of 923 (23%) referrals not queued for scheduling, students determined:

- 546 (59%) needed longer-term care than the 8-13 sessions available
- 302 (33%) referrals needed 8-13 sessions but faced systemic barriers
- 75 (8%) referrals needed 8-13 sessions but faced coverage barriers

Ex: the patient's home clinic had no behavioral health providers

Ex: the program did not accept the patient's insurance.

For the 923 referrals not queued for scheduling, students:

- Contacted patients by telephone or via patient portal (MyChart)
- Identified community-based care covered by each patient's insurance
- Connected the patients with care within an average (mean) of 1.5 days

Examples: local clinics for in-person or tele-health providers for virtual care.

Students reflected on access barriers while helping patients:

- Technology, language, health literacy, illness, disability, provider capacity

Conclusions & Next Steps

1. Students connected patients to community-based care
2. Students gained a firsthand understanding of the patient experience:
 - Interacted with patients via telephone and portal messages
 - Students reported these interactions led to more empathy
3. Student suggest workflow changes to improve patient experience
 - These suggestions are based on frontline interactions with patients
4. Students and staff are implementing these program-wide changes
 - Ex: Patient self-scheduling; referring patients to language care