

Primary Care Task Force: Workforce Workgroup

February 11, 2026



MASSACHUSETTS
HEALTH POLICY COMMISSION



EOHHS

Agenda



Call to Order



UP NEXT: Approval of Minutes: November 18, 2025 (VOTE)

Discussion: Supporting Team-Based Care Models and Behavioral Health Integration in Primary Care

Upcoming PCTF Meetings

Adjourn

VOTE

Approval of Minutes from the November 18, 2025 Primary Care Access, Delivery, and Payment Task Force Workforce Workgroup Meeting

MOTION

That the Primary Care Access, Delivery, and Payment Task Force Workforce Workgroup hereby approves the minutes of the meeting held on November 18, 2025, as presented.

Primary Care Task Force: Workforce Workgroup Members



Workgroup Chair Ryan Schwarz, MD, MBA, Chief, Office of Accountable Care and Behavioral Health, MassHealth

Workgroup Co-Chair David Seltz, Executive Director, Massachusetts Health Policy Commission

- **Wayne Altman, MD, FAAFP**, Founder, MAPCAP (MA Primary Care Alliance for Patients); Professor and Chair of Family Medicine, Tufts University School of Medicine; Vice President, Massachusetts Academy of Family Physicians; President, Family Practice Group (The Sagov Center for Family Medicine)
- **Brenda Anders Pring, MD, FAAP**, President, Massachusetts Chapter of the American Academy of Pediatrics; Pediatrician, Beth Israel Deaconess Medical Center; Chief Medical Officer, Essential Pediatrics; Instructor Harvard Medical School
- **Laura Black, DNP, FNP-C**, President, Massachusetts Coalition of Nurse Practitioners; Nurse Practitioner, BrightStar Health and Wellness; Owner, Integrated Health Partners

- **Jennifer Blewett, DSW, LICSW, DCSW, CGP**, Clinician and Assistant Director for Community Outreach and Engagement, West End Clinic, Department of Psychiatry, Massachusetts General Hospital; Member, Massachusetts State Board, National Association of Social Workers
- **Alyson Bracken, PA-C, MPH**, Senior Manager, Primary Care Center of Excellence, Brigham and Women's Hospital
- **Renee Crichlow, MD, FAAFP**, Chief Medical Officer, Codman Square Health Center; Vice-chair of Health Equity, Department of Family Medicine, Boston University
- **David Gilchrist, MD, MBA, FAAFP**, Past President, Massachusetts Academy of Family Physicians
- **Stephen Martin, MD, EdM, FAAFP, FASAM**, Professor, Department of Family Medicine and Community Health, UMass Chan Medical School; Staff Physician, Barre Family Health Center
- **Christina Severin**, President and CEO, Community Care Cooperative
- **Barbara Spivak, MD**, Past President, Massachusetts Medical Society; Internist, Watertown

Agenda



Call to Order

Approval of Minutes: November 18, 2025 (VOTE)



UP NEXT: Discussion: Supporting Team-Based Care Models Behavioral Health Integration in Primary Care

Upcoming PCTF Meetings

Adjourn

Three bills that have been proposed in the state legislature regarding primary care all support team-based care and behavioral health integration.



194th General Court Primary Care Bills (S.867, H.1370, and H.2537)

- Adds a member from the MA chapter of the National Association of Social Workers, Inc with expertise in behavioral health care in a primary care setting to the proposed permanent primary care advisory body within the HPC.
- Two qualifying investments in primary care ("transformers") that would make providers eligible for enhanced payments under the capitation payment model would be:
 - "Integrating behavioral health with primary care" and
 - "Employing community health workers or health coaches as part of the primary care team."

S.867 and H.2537 both also add a goal for the new advisory body to **"strengthen the integration of primary care and behavioral health and increase investment in behavioral health."**

Dr. Steve Martin, PCTF Member: Why are primary care teams necessary?

- **Reduce patient suffering**
- Support Starfield's Principles of first **contact care, continuity, coordination, and comprehensiveness**
- Encourage primary care clinicians **to enter and remain in the workforce**
- **Reduce overall health care costs**
 - Evidence supports **general primary care teams reduce costs** in at least two cases:
 1. Addressing Ambulatory Care Sensitive Conditions¹
 2. Supporting Clinician Continuity of Care^{2,3}

1 Meyers DJ, Chien AT, Nguyen KH, Li Z, Singer SJ, Rosenthal MB. Association of team-based primary care with health care utilization and costs among chronically ill patients. *JAMA Intern Med.* 2019;179(1):54-61.

2 Chung Y, Petterson S, Dai M, Phillips RL Jr, Bazemore A. Primary care physician continuity is a consistent measure associated with lower costs and hospitalizations. *J Am Board Fam Med.* 2026;38(5):812-833.

3 Yang Z, Ganguli I, Davis C, et al. Physician- versus practice-level primary care continuity and association with outcomes in Medicare beneficiaries. *Health Serv Res.* 2022;57(4):914-929.

Discussion: Supporting Team- Based Care Models and Behavioral Health Integration

- What does your **ideal integrated primary care team** look like? Which roles are included in a team-based environment, and which are the most critical?
- For practices pursuing behavioral health integration as a part of their team-based care model, **which roles are most valuable to implement fully integrated behavioral health (BH)** in primary care (as opposed to co-located BH or psych consults)?
- What are **the barriers and opportunities for implementing integrated teams**, especially related to payment models?
 - Has your practice participated in models that have helped facilitate better integrated care?
 - Is there a way to shift more BH care into alternative payment models/PMPMs while ensuring sufficient reimbursement to maintain staff capacity?

Discussion: Supporting Team- Based Care Models and Behavioral Health Integration

- How can we **best prepare/train students** for roles on integrated care teams?
 - Is the clinical workforce already entering the field with knowledge of/training for working in integrated teams, and/or with BH integration?
 - What preparation or training is needed and when?

- Aside from payment reform, **what supports do practices need to pursue team-based models, and BH integration?**
 - Technical assistance/training around billing?
 - Work-flows, warm hand-offs, schedule capacity?
 - Sample team models with clearly defined roles/scope of practice for each team member?

Agenda



Call to Order

Approval of Minutes: November 18, 2025 (VOTE)

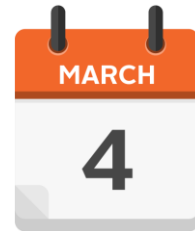
Discussion: Supporting Team-Based Care Models and Behavioral Health Integration in Primary Care



UP NEXT: Upcoming PCTF Meetings

Adjourn

Upcoming Meetings



Primary Care Task Force Meeting

Wednesday, March 4, 2025

10:00 AM – 12:00 PM (Location TBA)



We will reach out to schedule future Workforce Workgroup meetings to continue our discussions informing **statutory deliverable #7**