

August 1, 2022

The Honorable Rachel Levine, M.D.
Assistant Secretary of Health
U.S. Department of Health and Human Services
200 Independence Avenue, SW
Washington, DC 20201

Submitted electronically to: OASHPrimaryHealthCare@hhs.gov

Re: Request for Information (RFI): HHS Initiative To Strengthen Primary Health Care

Dear Dr. Levine:

Founded in 1955, NASW is the largest membership organization of professional social workers in the United States. NASW has 110,000 members and works to enhance the professional growth and development of its members, to create and maintain professional standards, and to advance sound social policies. Social workers are the largest provider of mental, behavioral, and social care services in the nation at 700,000+.

NASW is responding to the information requested regarding:

- Successful models or innovations that help achieve the goal state for primary care
- Barriers to implementing successful models or innovations
- Successful strategies to engage communities
- Proposed HHS actions

1. Successful models or innovations that help achieve the goal state for primary health care

To improve the quality of primary health care in the United States, NASW recommends efforts to support inclusion of social workers and other behavioral health providers in primary care teams. Social workers have expertise in providing psychosocial support to vulnerable populations with chronic mental and physical conditions and individuals with high social needs. Approximately 250,000 social workers in the United States are licensed clinical social workers who have the training and skills to provide mental health and behavioral health services.

The need for mental and behavioral health services has increased throughout the COVID-19 pandemic as individuals, families, and communities have faced unprecedented stressors. Youth, communities of color, essential workers, and adults with income insecurity, have been disproportionately affected by the pandemic, exacerbating health disparities. Primary care providers

¹ Panchal, Nirmita, Kamal, Rabah, Cox, Cynthia, and Garfield, Rachel. "The Implications of COVID-19 for Mental Health and Substance Use." (Feb 10, 2021). Kaiser Family Foundation. Available at https://www.kff.org/coronavirus-covid-19/issue-brief/the-implications-of-covid-19-for-mental-health-and-substance-use/.

are the first line of contact for health services for many individuals. However, primary care clinics may lack staff and resources to address the mental health concerns and health-related social needs of patients. With expertise in engagement, assessment, and addressing social needs, social workers are natural partners to enhance services in primary care settings.²

NASW also advocates for individuals with chronic pain to have access to comprehensive integrative pain management and recognizes integrated care as a model that supports patient-centered services. Clinical social workers have expertise in interventions to help address the needs of patients with chronic pain in their communities.

In a study of randomized controlled trials (RCTs) that included routine vs. integrated primary care with social workers, the primary care teams with social workers improved the behavioral health outcomes and care of patients.³ Social work services in primary care settings can also reduce stigma around chronic pain and treatment of mental health and substance use disorders. Successful models of care that demonstrate the value of having social workers on primary care teams include:

- Ambulatory Integration of Medical and Social (AIMS) at Rush University Medical Center in Chicago http://www.theaimsmodel.org/. The AIMS Model embeds a master's prepared social worker into primary and specialty care teams to assess the needs of complex patients and provide care coordination. Results show that patients served with this model had fewer 30-day hospital admissions, readmissions and emergency room visits as compared to the older adult population in the Chicago area.⁴
- Patient Aligned Care Team (PACT) at Veterans Health Administration
 https://www.patientcare.va.gov/primarycare/PACT.asp. The Social Work PACT Staffing
 Program integrated social work providers in rural primary care clinics in 32 states to assess
 and address psychosocial concerns of veterans. A study of patients served by primary care
 teams with social workers found that there was a decrease in emergency department visits
 and hospitalizations among high-risk patients. Social work inclusion in care teams reduced
 preventable hospital use.
- CMS Comprehensive Care Plus (CPC+) Model https://innovation.cms.gov/innovation-models/comprehensive-primary-care-initiative The Comprehensive Primary Care Plus (CPC+) program, a five-year advanced primary care medical home model, provided an opportunity for practices to integrate care management, mental health and substance use disorder services. Each year of the program, a higher percentage primary care practices integrated behavioral

² National Academies of Sciences, Engineering, and Medicine (NASEM). 2019. *Integrating Social Care into the Delivery of Health Care: Moving Upstream to Improve the Nation's Health*. Washington, DC: The National Academies Press. Available at https://nap.nationalacademies.org/catalog/25467/integrating-social-care-into-the-delivery-of-health-care-moving.

³ Fraser, M. W., Lombardi, B. M., Wu, S., Zerden, L. D. S., Richman, E. L., & Fraher, E. P. (2018). Integrated primary care and social work: A systematic review. *Journal of the Society for Social Work and Research*, *9*(2), 175-215. https://doi.org/10.1086/697567

⁴ Jeannine M. Rowe, Victoria M. Rizzo, Gayle Shier Kricke, Kate Krajci, Grisel Rodriguez-Morales, Michelle Newman & Robyn Golden (2016): The Ambulatory Integration of the Medical and Social (AIMS) model: A retrospective evaluation, Social Work in Health Care, DOI: 10.1080/00981389.2016.1164269.

⁵ Cornell, P. Y., Halladay, C. W., Ader, J., Halaszynski, J., Hogue, M., McClain, C. E., Silva, J. W., Taylor, L. D., & Rudolph, J. L. (2020). Embedding Social Workers In Veterans Health Administration Primary Care Teams Reduces Emergency Department Visits. *Health affairs (Project Hope)*, *39*(4), 603–612. https://doi.org/10.1377/hlthaff.2019.01589

- health services on-site, and an evaluation of the program showed that as a result, long-term opioid use and potential overuse decreased.⁶
- The Massachusetts Child Psychiatry Access Program (MCPAP) https://www.mcpap.com is a system of regional children's behavioral health consultation teams designed to help primary care providers and their practices to promote and manage the behavioral health of their pediatric patients.
- **Brigham and Women's Hospital** https://www.brighamandwomens.org/ utilizes both the Collaborative Care and Integrated Care Management Program models. Both models enable the hospital to provide integrated care in the office and the community. It also provides genders affirming care at their Center for Transgender Health.

2. Barriers to implementing successful models or innovations

A significant barrier to the integration of social workers and behavioral health providers in primary care teams is financial sustainability. Value-based care models have promise in providing patient-centered, high-quality care that supports integration of behavioral health providers.

Research has shown the positive impact of integrated primary care teams that include social workers. However, more research is needed to determine the specific influence of social workers and behavioral health providers within interprofessional teams.

Regarding substance use disorder (SUD) services, in network coverage and availability for substance use treatment are limited. Outpatient primary care providers would benefit from assistance navigating the preauthorization and admissions process that can hinder inpatient SUD treatment for rehab and residential care. Admissions and length of stay procedures and requirements in some parts of the country are contingent upon insurance medical criteria, which at times can result in the denial of admission or care. Additionally, the abstinence versus harm reduction approach can impact continuity of care and care coordination services when attempting to provide referrals and services from primary health care facilities to a higher level of care that may help assist with recovery. Abstinence may be required for 30 days or more prior to be able to receive on going treatment. These barriers and limited knowledge of substance use provider systems may limit the work primary care staff can provide. As a result, social workers are vital members of the primary care interdisciplinary team and help bridge the gaps between primary care and substance use care and recovery.

3. Successful strategies to engage communities

Community-based organizations are an important part of the continuum of care and should be engaged with primary care practices. Initiatives to support bi-directional data sharing help facilitate community referrals and care coordination.^{7,8} Social workers are often a bridge between health care institutions and community services; they have knowledge about local resources and can make appropriate referrals so that individuals connect to ongoing support.⁹ The use of ongoing

⁶ Mathematica Policy Research. Independent Evaluation of Comprehensive Primary Care Plus (CPC+): Second Annual Report. Published May 2022. Available at https://www.mathematica.org/publications/independent-evaluation-of-the-comprehensive-primary-care-plus-cpc-fourth-annual-report.

⁷ NASEM. 2019. Integrating Social Care into the Delivery of Health Care: Moving Upstream to Improve the Nation's Health.

⁸ Mathematica Policy Research. Independent Evaluation of Comprehensive Primary Care Plus (CPC+), May 2022.

⁹ NASEM. 2019. Integrating Social Care into the Delivery of Health Care: Moving Upstream to Improve the Nation's Health.

assessments during each primary care visit can help with engagement in community-based resources. Physicians indicate time constraints as not having the ability to address mental/substance use concerns, and they also identify not knowing where to refer individuals when these issues do come up. Primary care settings would benefit from having social workers onsite to help with referrals, case management services and assessments. As a result, community engagement and needs can be addressed and met within the same setting.

4. Proposed HHS actions

NASW support actions to incentivize to primary care practices to include social workers and other behavioral health providers on interprofessional teams and adoption of value-based payment models that support integrated and whole person care.

NASW recognizes the need for medical records to adequately capture mental and behavioral health outcomes as well as social needs. NASW supports efforts to encourage the collection of health-related social needs and use of Z codes in health care settings to inform care. NASW also requests that HHS establish mechanisms and exercise flexibility in the ability to finance social care through Medicaid, Medicare, and other payers.¹⁰

NASW recommends health IT initiatives to support interoperability between health care providers and community-based service settings.

Student loan repayment opportunities may be able to increase workforce shortages. This opportunity may help to increase social work admissions. This opportunity can provide recent graduates with opportunities to work in underserved/underrepresented areas and have the burdens of their loans decreased and/or eliminated. Additionally, with student loan repayments social workers would also need to see an increase in wages and salaries.

NASW appreciates the opportunity to respond to HHS initiative to strengthen primary health care. If you have any questions, please do not hesitate to contact me at amcclain.nasw@socialworkers.org Sincerely,

Angelo McClain, PhD, LICSW

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Chief Executive Officer

¹⁰ Ewald B, Golden R, Mason DJ. Promoting Health Equity by Paying for Social Care. *JAMA Health Forum*. 2021;2(12):e215023. doi:10.1001/jamahealthforum.2021.5023