

# **NASMHPD: Peer Support Services Survey**

Pillars of Peer Support Services Summit II  
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# **NASMHPD: Peer Support Services Survey**

## **Massachusetts Perspective**



- As an outgrowth of a state agency and consumer partnership, a work group was established to create a roadmap for Medicaid reimbursement for peers as a distinct service

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## Current Mechanisms for Medicaid Financial Support in Massachusetts



- Reimbursed within the rate for the rehab option in the state plan
- Reimbursed within the rate for services authorized through our 1115 waiver and paid by managed care entities
  - Emergency Services Program
  - Assertive Community Treatment (ACT)
  - Some Day Programs

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## **Other State-Funded Programs with Peer Presence**



- Patient advocates in state-run hospitals
- Recovery Learning Communities
- Clubhouses
- Individual supports in a variety of living arrangements
- Department of Mental Health is creating a peer series for our employees in a range of settings

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## Work Group Process



- Relied heavily on the CMS State Medicaid Directors guidance from August 2007
- Researched what is done in other states
  - Drew upon the survey conducted for the 2009 Pillars Summit
- Decided to create a survey for our own use which led to the NASMHPD survey results
- Looking for guidance on appropriate Medicaid authority

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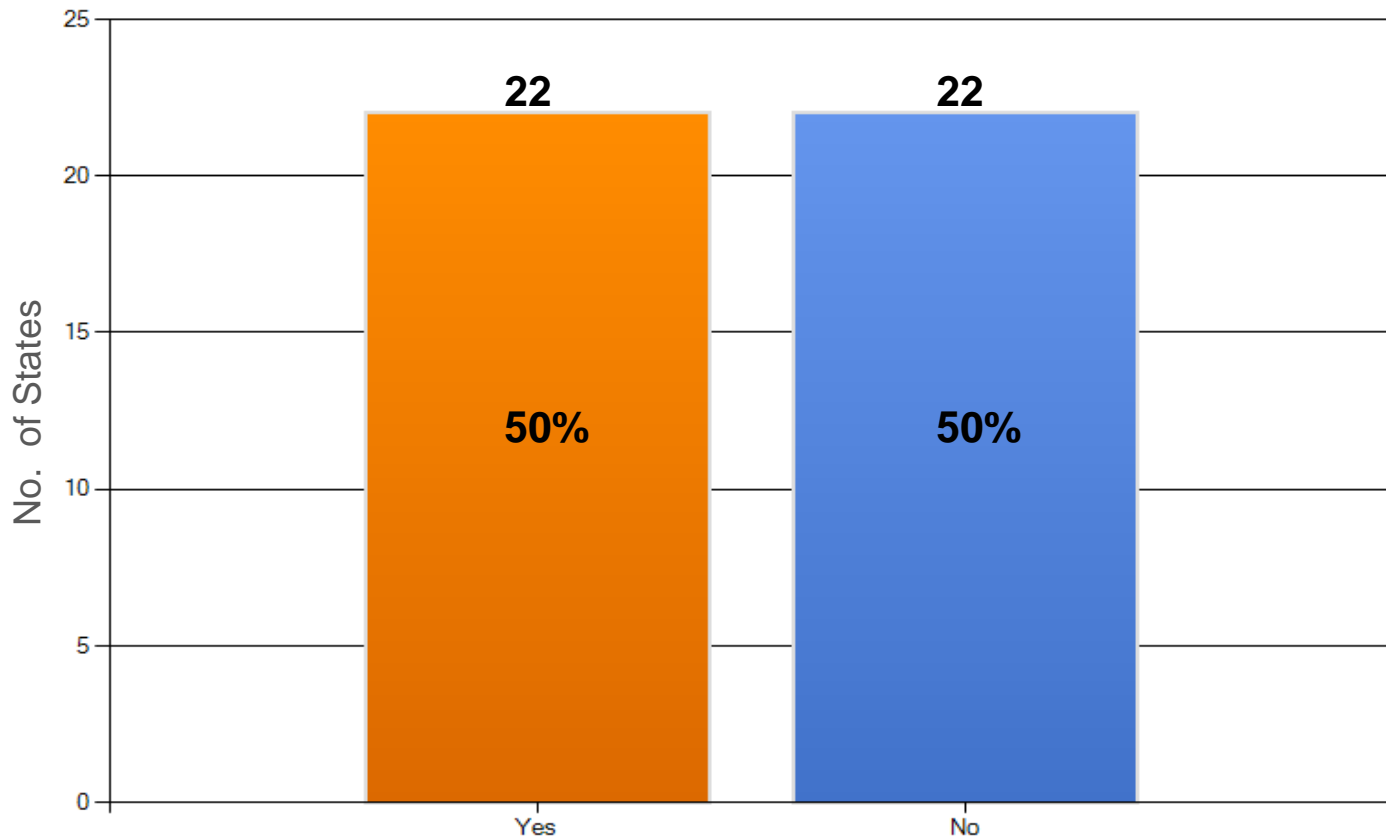


- Survey conducted in partnership with NASMHPD's Financing and Medicaid Division
- Survey in field October 1-14, 2010\*
- Results from 43 States and the District of Columbia\*

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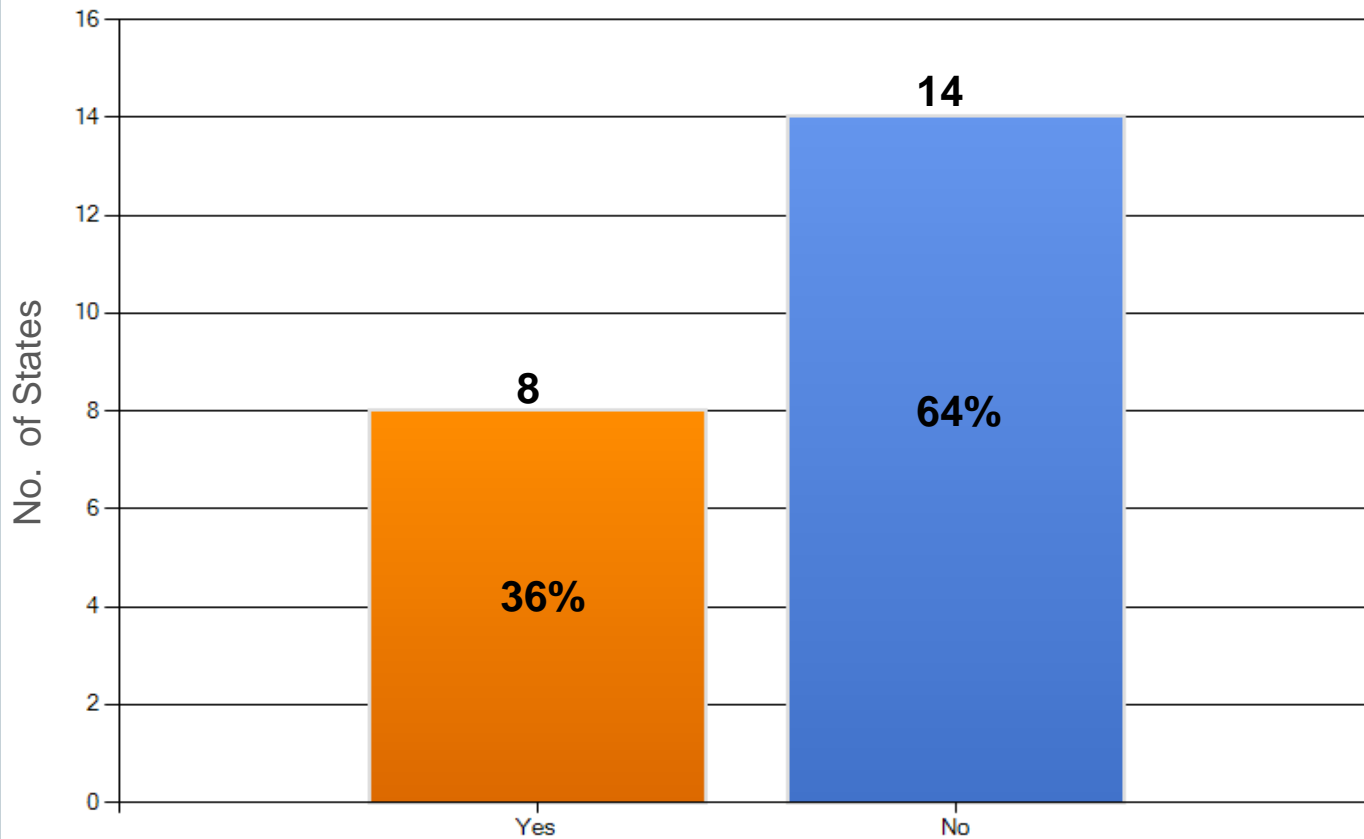
Does the Medicaid program in your state reimburse for mental health services provided by peer support specialists?



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Is the Medicaid office planning to seek reimbursement for peer support services within the next year?

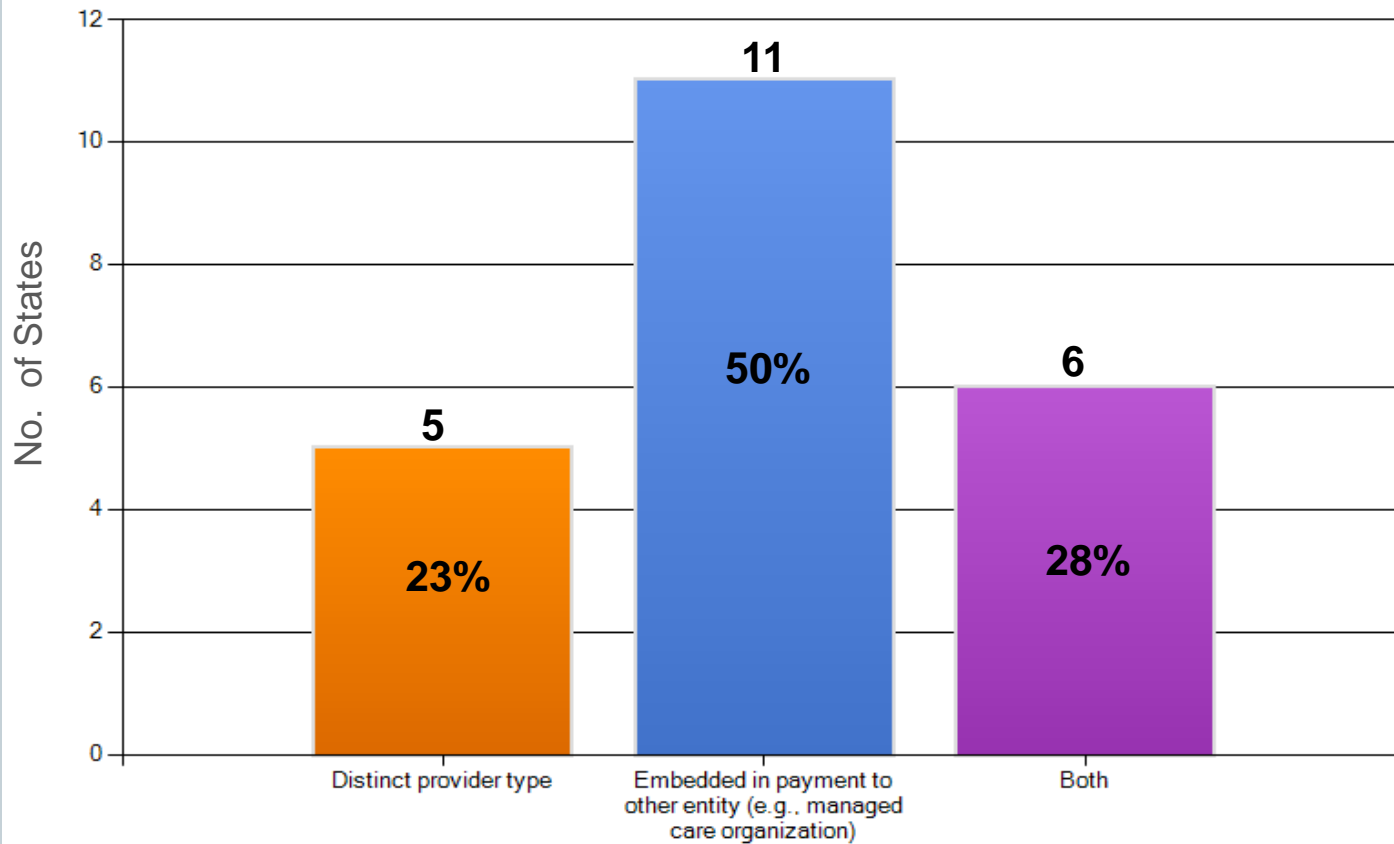




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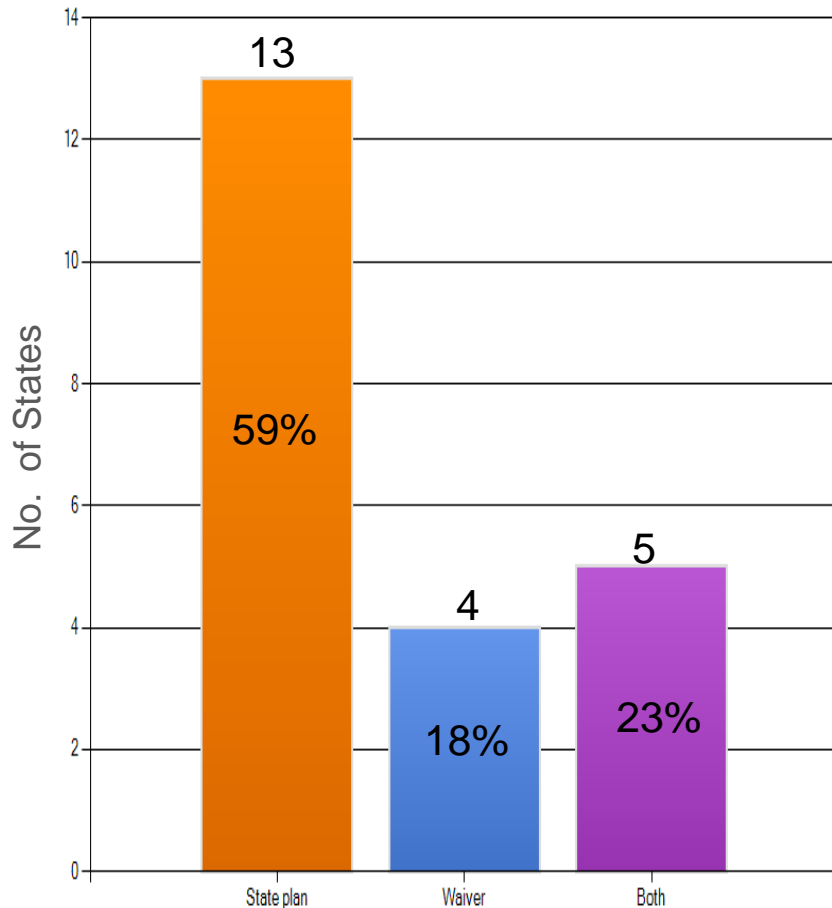


Are peer support services paid for as a distinct provider type or embedded in the payment provided to a behavioral health carve out vendor or other managed care organization?



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Under what Medicaid authority are services covered?



## • State Plan

- 1905(a)(13): 12 states (92%)
- 1915(i): 1 state (8%)

## • Waiver

- 1915(b): 2 states (50%)
- 1115: 1 state (25%)
- Other: 1 state (25%)

## • Both\*

- 1905(a)(13): 5 states (100%)
- 1915(b): 4 states (80%)
- 1915(c): 1 state (20%)
- 1115: 1 state (20%)

\* States could select multiple responses

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## Key Findings on Reimbursement

- Reimbursement through:
  - Managed care organizations: 6 out of 12 states (50%)
  - Behavioral health carve out vendor(s): 2 out of 12 states (17%)
  - Both: 4 out of 12 states (33%)
- Cost included in capitation rate:
  - Yes: 7 out of 12 states (58%)
  - No: 1 out of 12 states (8%)
  - Don't know: 2 out of 12 states (17%)
  - Other: 2 out of 12 states (17%)

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## **Roles and Functions**

- **Individual peer counseling: 11 out of 12 states (92%)**
- **Fill out required forms: 9 out of 12 states (75%)**
- **Crisis support: 9 out of 12 states (75%)**
- **Group peer counseling: 8 out of 12 states (67%)**
- **Write progress reports: 8 out of 12 states (67%)**
- **Person-centered planning: 7 out of 12 states (58%)**
- **Individual service planning: 7 out of 12 states (58%)**
- **Outreach: 7 out of 12 states (58%)**
- **Consumer advocacy: 6 out of 12 states (50%)**
- **Wellness planning: 6 out of 12 states (50%)**
- **Social networking/ socializing: 6 out of 12 states (50%)**
- **Family support: 3 out of 12 states (27%)**
- **Other: 2 out of 12 states (17%)**
- **Supervising other peers: 1 out of 12 state (8%)**

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## **Rates and Fringe Benefits**

- **Of the 12 states reporting, 9 use rates based on 15-minute increments**
- **There was a wide range of rates reported:**
  - **\$3.30/15 minutes for peer specialists without a Bachelor's degree for group-setting delivery model to \$31.52/15 minutes for skills training in the rehab option**
  - **Rates varied widely on the basis of provider's level of education, the types of services provided (e.g., skills training, rehab services), populations served and whether services are provided by managed care organizations**
- **8 of 12 states didn't know if fringe benefits are included in the rate; 1 state indicated that some providers include fringe benefits; 3 states stated that all do**

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## Settings

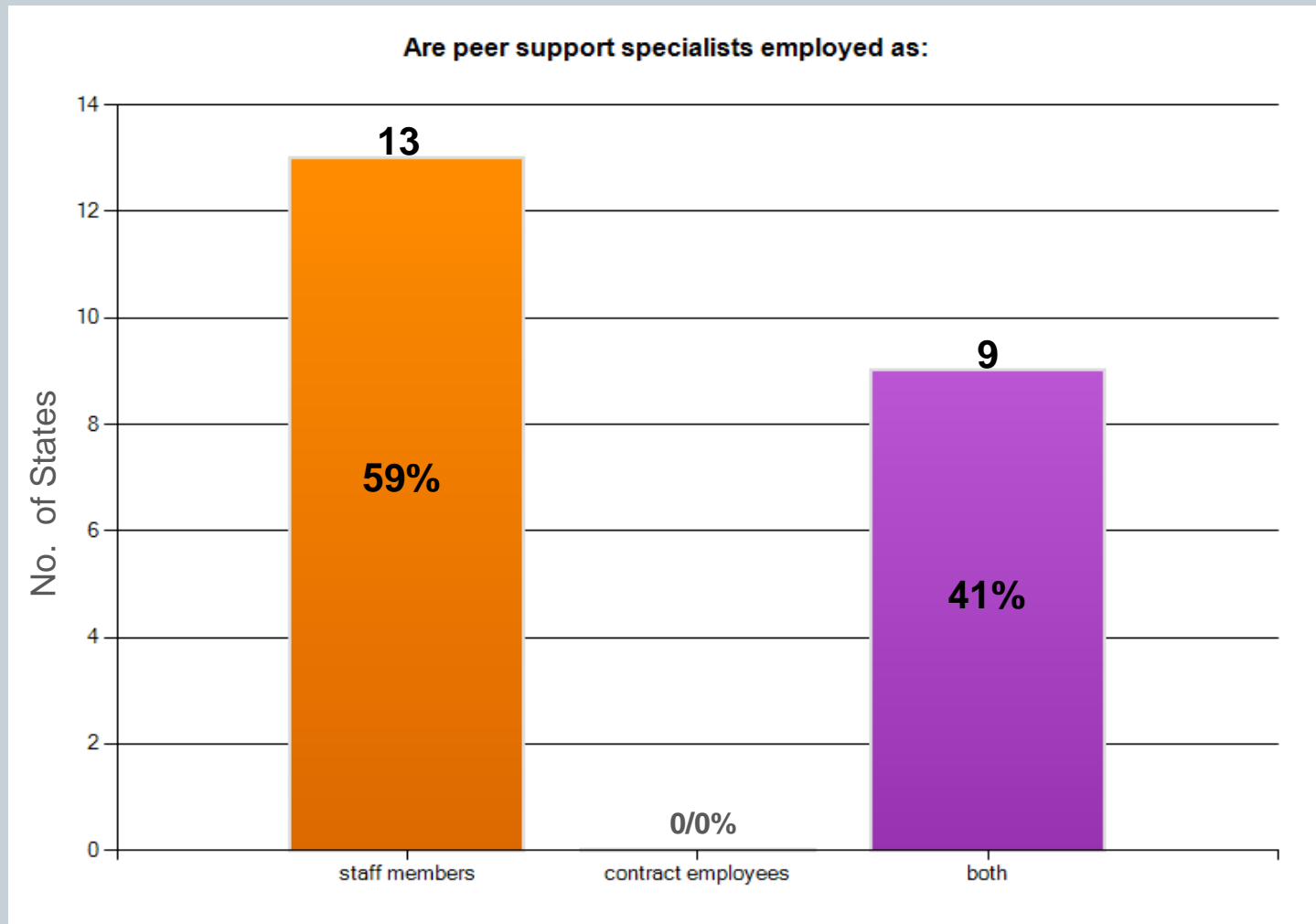
- **Outpatient clinics: 17 out of 22 states (77%)**
- **Consumer-operated peer centers: 14 out of 22 states (64%)**
- **Psychosocial rehabilitation centers: 14 out of 22 states (64%)**
- **Residential: 12 out of 22 states (55%)**
- **Day treatment: 11 out of 22 states (50%)**
- **Clubhouses: 11 out of 22 states (50%)**
- **Other: 10 out of 22 states (46%)**
- **Inpatient: 6 out of 22 states (27%)**

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## Services

- Assertive Community Treatment (ACT): 15 out of 22 states (68%)
- Outpatient clinic: 13 out of 22 states (59%)
- Community support programs: 13 out of 22 states (59%)
- Day treatment: 8 out of 22 states (36%)
- Other: 8 out of 22 states (36%)
- Jail diversion: 8 out of 22 states (36%)
- Supportive employment services: 6 out of 22 states (27%)
- Supportive housing services (outreach, search, etc.): 6 out of 22 states (27%)
- Respite: 3 out of 22 states (13%)

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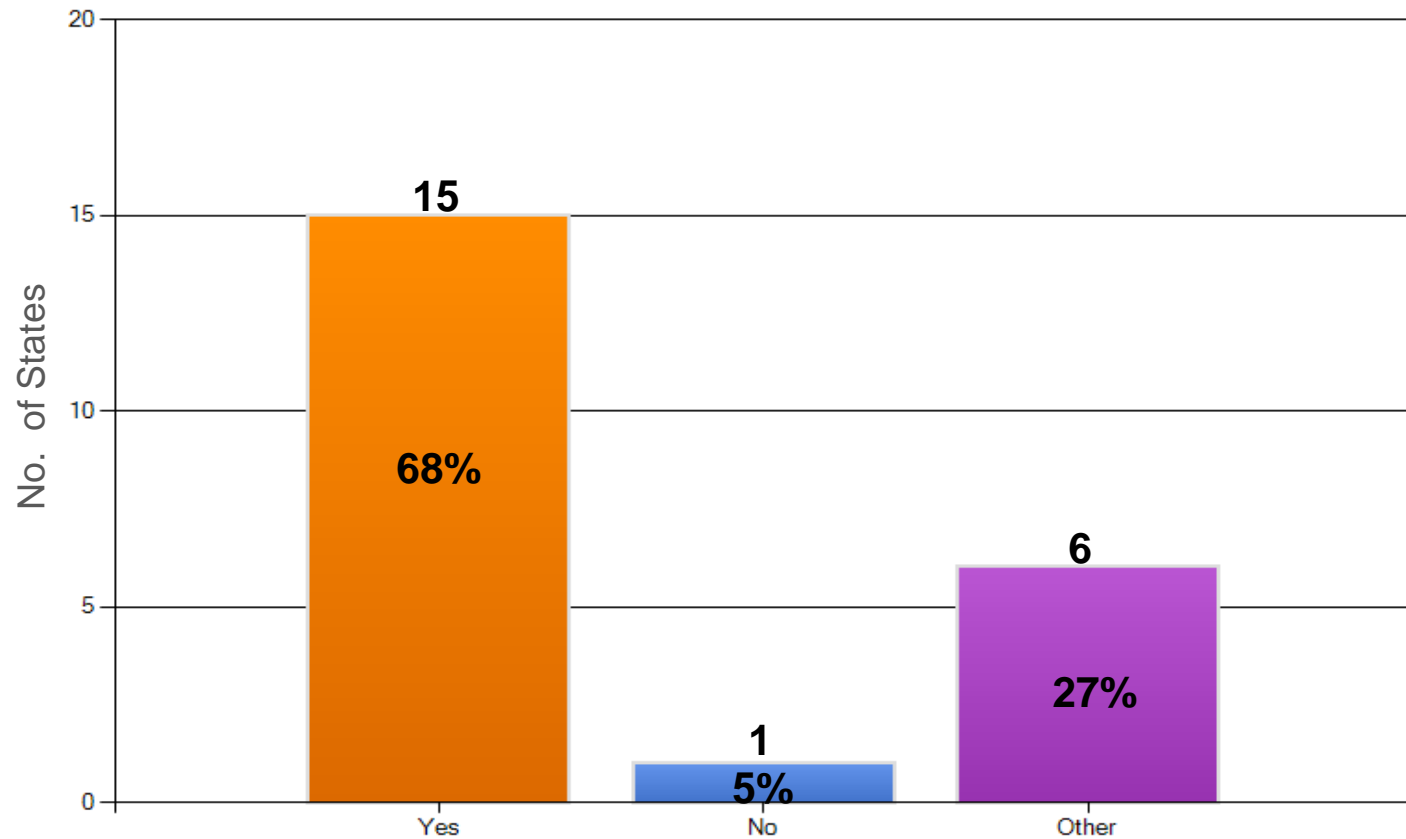
## Qualifications

- **State certification/licensing:**
  - 7 states (CT, OH, OK, IN, WI, TN, GA) indicated a state certification/licensing requirement; 1 respondent noted state involvement as opposed to just taking classes
- **Exam:**
  - 9 states (CT, IL, OK, MO, IN, NV, WI, IA, MI) required passing an exam or other certification (frequently not defined)
- **Training curriculum:**
  - 11 States (NC, WY, MN, MO, OK, IN, KS, WI, OR, MI, PA) required some form of a training curriculum
- **Educational requirement:**
  - 10 states (CT, WY, MN, MO, OK, IN, TX, MI, PA, GA) required at least a high school diploma or GED
- **Mental Health Consumer:**
  - 7 States (NC, WY, OK, KS, TX, NJ, MI) noted the need to be a MH consumer

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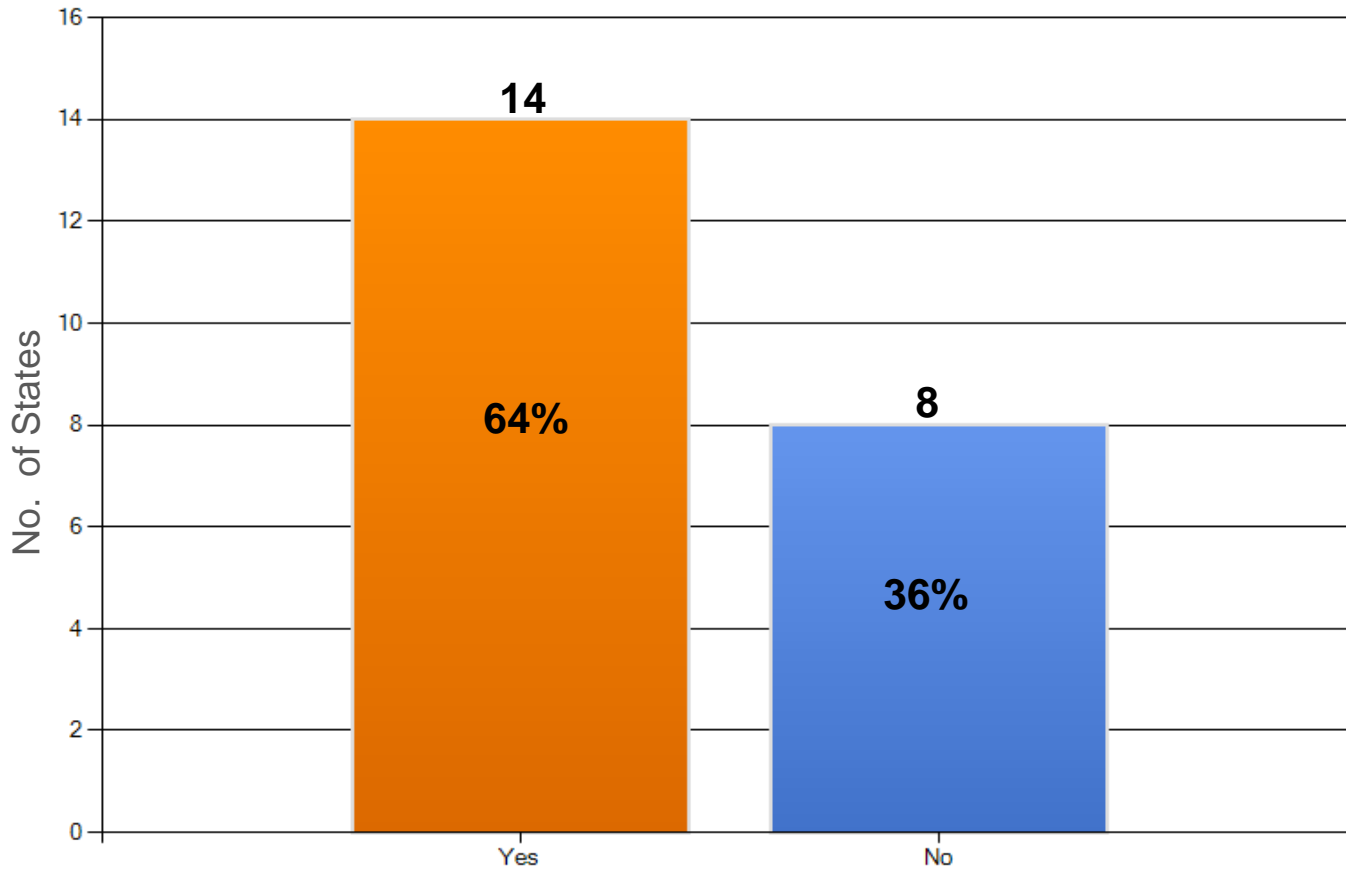
Are peer support specialists required to be supervised by mental health professionals  
(as defined by your state)?



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Are peer support specialists required to meet continuing education requirements?



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## **Respondents' Comments**

- **3 states (ND, WV, NY) pay for peer support services out of state budget dollars; two additional states (MT, VT) “use” peer services, but did not indicate how they are paid for (if at all)**
- **4 states (VA, OH, AK, IL) have peers provide Medicaid reimbursable services but not as a stand-alone service**
- **2 states (FL, VA) are reimbursed through Medicaid for certain limited/specified peer services**
- **Nevada may be eliminating this service**
- **3 states (NH, DE, AR) are looking into adding peer support services but not within the year**

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- Thank you!
- For more information, contact  
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\* Data has been updated since the 2010 Pillars Summit presentation to reflect additional information received from several states