

**TRANSMITTAL AND NOTICE OF APPROVAL OF
STATE PLAN MATERIAL
OR: HEALTH CARE FINANCING ADMINISTRATION**

1. TRANSMITTAL NUMBER: 11-001-UT
2. STATE: Utah
3. PROGRAM IDENTIFICATION: TITLE XIX OF THE SOCIAL SECURITY ACT (MEDICAID)
4. PROPOSED EFFECTIVE DATE: July 1, 2011

TO: REGIONAL ADMINISTRATOR
HEALTHCARE FINANCING ADMINISTRATION
DEPARTMENT OF HEALTH AND HUMAN SERVICES

5. TYPE OF PLAN MATERIAL (Check One)
 NEW STATE PLAN AMENDMENT TO BE CONSIDERED AS NEW PLAN AMENDMENT
COMPLETE BLOCKS 6 THRU 10 IF THIS IS AN AMENDMENT (Separate Transmittal for each amendment)

6. FEDERAL STATUTE/REGULATION CITATION:
42 CFR 440.130
7. PAGE NUMBER OF THE PLAN SECTION OR ATTACHMENT:
Pages 8h, 8i and 8j of Attachment #4b of Attachments 3.1-A and 3.1-B
Page 29e of Attachment 4.19-B

7. FEDERAL BUDGET IMPACT:
a. FFY 2011 \$0
b. FFY 2011 \$0
9. PAGE NUMBER OF THE SUPERSEDED PLAN SECTION OR ATTACHMENT (If Applicable)

10. SUBJECT OF AMENDMENT:
Peer Support Services

11. GOVERNOR'S REVIEW (Check One):
 GOVERNOR'S OFFICE REPORTED NO COMMENT OTHER, AS SPECIFIED:
 COMMENTS OF GOVERNOR'S OFFICE ENCLOSED
 NO REPLY RECEIVED WITHIN 45 DAYS OF SUBMITTAL

12. SIGNATURE OF STATE AGENCY OFFICIAL:
13. TYPED NAME: Michael Hales
14. TITLE: Deputy Director, Utah Department of Health
15. DATE SUBMITTED: March 30, 2011

16. RETURN TO:
Craig Devashrayee, Manager
Technical Writing Unit
Utah Department of Health
PO Box 143102
Salt Lake City, UT 84114-3102

17. DATE RECEIVED: 3/31/11

18. DATE APPROVED: 6/6/11

FOR REGIONAL USE ONLY

19. EFFECTIVE DATE OF APPROVED MATERIAL: 7/1/11

20. SIGNATURE OF REGIONAL OFFICIAL:
21. TYPED NAME: Richard C. Allen
22. TITLE: ARA, DMCH

PLAN APPROVED - ONE COPY ATTACHED

23. REMARKS

DIAGNOSTIC, SCREENING, PREVENTIVE, AND REHABILITATIVE SERVICES

Peer Support Services

Peer support services are provided for the primary purpose of assisting in the rehabilitation and recovery of adults and children with severe and persistent mental illness or serious emotional disturbance; individuals may also have co-occurring substance use disorders. Individuals are identified as having serious and persistent mental illness or serious emotional disturbance based on criteria that address functional level and duration of illness.

Peer support services are designed to promote recovery. Peer support specialists lend their unique insight into mental illness and what makes recovery possible. Peer support services are provided to an individual or a group of individuals. On occasion, it may be impossible to meet with the peer specialist; in which case a telephone contact with the client would be allowed. Through coaching, mentoring, role modeling, and as appropriate, using their own recovery stories as a recovery tool, peer support specialists assist clients with their recovery goals. Peer support specialists assist clients in developing skills in areas including: creation of recovery goals; daily and community living, including independently obtaining food, clothing, housing, medical care, employment, etc.; socialization; adaptation and problem-solving; development and maintenance of healthy relationships and communication; combating negative self-talk and facing fears; regulation of emotions, including anger management; and securing and maintaining employment and overcoming job-related anxiety. Peer support specialists also provide symptom monitoring and crisis prevention, assist clients with recognition of health issues impacting them, and with symptom management.

Peer support groups are limited to a ratio of 1:8. Medicaid clients may participate in a maximum of four hours of peer support services a day. Peer support services must be recommended by one of the following licensed practitioners of the healing arts who are authorized under state law to prescribe mental health services:

- (1) a licensed physician and surgeon or osteopathic physician engaged in the practice of mental health therapy;
- (2) a licensed psychologist qualified to engage in the practice of mental health therapy;
- (3) a licensed clinical social worker;
- (4) a licensed advanced practice registered nurse (APRN) with psychiatric mental health nursing specialty certification;
- (5) a licensed marriage and family therapist;
- (6) a licensed professional counselor; or
- (7) a licensed certified social worker under supervision of a licensed clinical social worker.

T.N. # 11-001

Approval Date 6/6/11

Supersedes T.N. # New

Effective Date 7-1-11

DIAGNOSTIC, SCREENING, PREVENTIVE, AND REHABILITATIVE SERVICES

Peer Support Services

Peer support services are provided by self-identified individuals who are a minimum of age 18 and in recovery from severe and persistent mental illness or serious emotional disturbance, and from co-occurring substance use disorders if co-morbidly diagnosed. These individuals have received the proper training to become certified, and are working under the supervision of a licensed mental health therapist specified in 1-7 on page 8. Peers offer a unique perspective that Medicaid clients find credible; therefore, peer providers are in position to build alliances, instill hope and demonstrate that recovery is possible.

Qualified providers are certified peer specialists. Individuals must successfully complete a comprehensive 40 hour peer specialist training curriculum designed to give peer specialists the competencies necessary to successfully perform peer support services.

The training curriculum includes modules on stages of recovery, the role of peer support in the recovery process; using peers' recovery stories as a recovery tool; importance of beliefs that promote recovery; dynamics of change/change process; how to facilitate recovery dialogue; effective active listening and questioning skills; using dissatisfaction as a avenue for change; combating negative self-talk and facing fears; problem-solving with individuals; education on health issues impacting individuals with mental illness; accomplishing recovery goals; peer specialist ethics and professional boundaries, including confidentiality and privacy; standards of peer support services; and documentation of services. Curriculums are developed by the State of Utah, Department of Human Services, Division of Substance Abuse and Mental Health (DSAMH), in consultation with national experts in the field of peer support.

At the end of the training, individuals must pass a written examination at the 70 percent rate. Successful individuals receive a written certification. Certified peer specialists must successfully complete 20 hours of continuing education/training each year in order to maintain certification. Certified peer specialists receive ongoing weekly individual and/or group supervision by a licensed mental health therapist specified on page 8.

Peer support services are delivered in accordance with a written treatment and recovery plan. This plan is a comprehensive, holistic, individualized plan of care developed through a person-centered planning process. Clients lead and direct the design of their plans by identifying their own preferences and individualized measurable recovery goals. Treatment and recovery plans are reviewed by the client and the treatment team and are updated to reflect the client's progress and the client's changing preferences, needs and goals.

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PAYMENT FOR PEER SUPPORT SERVICES

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Peer support services are paid using a uniform fee schedule. The service is defined by a HCPCS code and priced using a fixed fee schedule. Payments are made to peer support providers on a fee-for-service basis for a defined unit of service. The state-developed fee schedule rate is the same for both governmental and private providers.

The agency's fee schedule rates are set as of July 1, 2011, and are effective for peer support services provided on or after July 1, 2011. All rates are published at <http://health.utah.gov/medicaid>.

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