

# Peer Support Services for People with Mental Illness and Substance Use Disorder in Medicaid

*February 2018*



**TEXAS**  
Health and Human  
Services

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## 1. Introduction

House Bill (H.B.) 1486, 85th Legislature, Regular Session, 2017, directs the Texas Health and Human Service Commission (HHSC) to create a Medicaid benefit for peer support services. Peer support is an evidence-based practice. Peers use their lived experiences recovering from mental illnesses or substance use disorders and skills learned in formal training to deliver strengths-based, person-centered services. Services promote recovery and resiliency.

Per the bill, HHSC assembled a stakeholder work group to provide input on Medicaid rules defining requirements for training, certification, scope of services, and supervision of Certified Peer Specialists and Recovery Coaches. If rules are not adopted by September 1, 2018, HHSC must submit a written report to explain why. Following rule adoption, HHSC will implement the services in Medicaid.

The 2018-19 General Appropriations Act, Senate Bill 1, 85th Legislature, Regular Session, 2017 (Article II, HHSC, Rider 211), provides \$79,500 each fiscal year to expand peer support capacity through training and technical assistance. Rider 211 also appropriates approximately \$182,871 to provide peer support services in the Medicaid program.

## 2. Background

People accessing behavioral health services sometimes feel they have little hope of getting well and achieving recovery. These individuals often experience stigma, isolation, a lack of social support or positive relationships, and a lack of effective coping and problem solving skills.<sup>1</sup>

Peer supports are provided in combination with other mental health and substance use disorder services. The federal Substance Abuse and Mental Health Services Administration recommends peer supports because they help people engage in the recovery process and reduce the likelihood of relapse. Because peer support services are designed and delivered by people who have been successful in the recovery process, peer support providers can embody a powerful message of hope and share a wealth of experiential knowledge. Peer support services extend the reach of treatment beyond the clinical setting into the everyday lives of those seeking to achieve or sustain recovery.<sup>2</sup>

Peer support services are *non-clinical*, but help support traditional clinical services by promoting:

- hope and the possibility of recovery;
- self-empowerment and increased self-esteem, self-efficacy, and self-management;
- social inclusion, engagement, and increased social networks; and
- effective continuity of care post-hospitalization or other treatment.<sup>3</sup>

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<sup>1</sup> Davidson, L., Chinman, M., Kloos, B., Weingarten, R., Stayner, D., & Tebes, J.K. (1999) Peer Support among individuals with severe mental illness: A review of the evidence. *Clinical Psychology Science and Practice*, 6, 165-187.

<sup>2</sup> *Consumer-Operated Services: How to Use the Evidence-Based Practices KITs*. HHS Pub. No. SMA-11-4633, 2011.

<sup>3</sup> Repper, J., & Carter, T. (2011). A review of the literature on peer support in mental health services. *Journal of Mental Health*, 20(4), 392-411.

Peers serve as role models and help personalize, individualize, and enhance the overall meaning of clinical treatment. Since peers embody recovery, peer support services provide inspiration for service recipients to take action to achieve a successful recovery and improve their quality of life.

## 3. Work Group Overview

### Composition

Per H.B. 1486, the Peer Support Stakeholder Work Group consists of:

- mental health and substance peer specialists from both rural and urban areas
- a person who trains peer specialists
- representatives from organizations who employ mental health and substance use peer specialists
- a representative from each organization that certifies mental health and substance use peer specialists
- representatives of mental health and addiction licensed health care professional groups who supervise mental health and substance use peer specialists
- people with lived experience of recovery from mental illness, substance use conditions, or co-occurring mental illness and substance use conditions

Work group members submitted applications, which HHSC staff reviewed. The HHSC Executive Commissioner appointed all members, including the presiding officer.

### Meetings and Timeline

The work group will meet monthly in Austin until rules are adopted. These meetings are not open to the public. However, work group products will be available online soon, and interested individuals may contact work group members with concerns at [Peer.Support@hhsc.state.tx.us](mailto:Peer.Support@hhsc.state.tx.us).

- January 18, 2018
- February 15, 2018
- March 15, 2018
- April 19, 2018
- May 17, 2018
- June 21, 2018
- July 19, 2018

- August 16, 2018
- September 20, 2018
- October 18, 2018

The Peer Support Work Group is slated to complete its work on the rules in the fourth quarter of fiscal year 2018.

## Membership

Position	Appointee
Organization - Certifies Mental Health Peer Specialists	Dennis Bach
Organization - Certifies SUD Peer Specialists	D. Frank Davis
Organization - Employs Peer Specialists	Wayne Young
Organization - Employs Peer Specialists	Dr. Stanley Williams
Organization - Employs Peer Specialists	Karla Rose
Trainer - MH Peer Specialists	Anna Gray
Trainer - SUD Peer Specialists	Joseph Sanchez
Professional Group who Supervises Peer Specialists	Ellen Goodman
Professional Group who Supervises Peer Specialists	Joe Powell
Professional Group who Supervises Peer Specialists	Amelia Murphy
MH Peer - Urban	Stephanie Jack
MH Peer - Rural	Jason Johnson
SUD Peer - Urban	Patty Doty
SUD Peer - Rural	Meredith Stacy Jones
Lived Experienced	Dr. Sachin Kamble
Lived Experience	Noah Abdenour, Presiding Officer

<b>Position</b>	<b>Appointee</b>
Lived Experience	Jason Howell
Other	Stevie Hansen
Other	Colleen Horton
Other	Shannon Carr, Vice Chair
Other	Gregg Sherrill
Other	Janet Paleo