Report on Peer Support as a Medicaid Benefit

As Required by
Texas Government Code, Section 531.0999(g), as added by House Bill 1486, 85th Legislature, Regular Session, 2017
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Executive Summary

Texas Government Code, Section 531.0999, as added by House Bill (H.B.) 1486, 85th Legislature, Regular Session, 2017, directs the Texas Health and Human Service Commission (HHSC) to adopt rules establishing training requirements for peer specialists to enable the provisions of services to persons with mental illness or persons with substance use conditions, and to create a Medicaid benefit for peer support services. Sec. 531.0999(g) further states, if rules are not adopted by September 1, 2018, HHSC must submit a written report to explain the delay.

Pursuant to the bill, HHSC assembled a stakeholder workgroup to provide input on the development of Medicaid rules to define requirements for training, certification, scope of services, and supervision of certified peer specialists. After initial delay in establishing the stakeholder workgroup due to Hurricane Harvey, the Peer Support Stakeholder Workgroup began meeting at the end of November 2017.

HHSC now anticipates rule adoption to occur by January 1, 2019.
1. Background

Persons with mental health or substance use conditions need support while in recovery. These conditions can impair an individual’s ability to make effective decisions, and receiving support from someone who has walked the road of recovery themselves can be invaluable.

Peer support is an evidence-based practice in which peers use their lived experiences recovering from mental health or substance use conditions, along with skills learned in formal training, to deliver strengths-based, person-centered services. Peer supports are provided in combination with other mental health and substance use services.

The federal Substance Abuse and Mental Health Services Administration recommends peer support services because they help people engage in the recovery process and reduce the likelihood of relapse. Research to date suggests peer support services may result in increased empowerment and hope, increased social functioning, more engagement in treatment, and an increased quality of life and life satisfaction.\(^1\) 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.

\(^1\) Value of Peers, Substance Abuse and Mental Health Services Administration, 2017
H.B. 1486 required HHSC to establish a stakeholder workgroup to provide input for the rules to be adopted. The legislation directed the following stakeholder workgroup composition:

- One representative of each organization that certifies mental health and substance use peer specialists in this state;
- Three representatives of organizations that employ mental health and substance use peer specialists;
- One mental health peer specialist who works in an urban area;
- One mental health peer specialist who works in a rural area;
- One substance use peer specialist who works in an urban area;
- One substance use peer specialist who works in a rural area;
- One person who trains mental health peer specialists;
- One person who trains substance use peer specialists;
- Three representatives of mental health and addiction licensed health care professional groups who supervise mental health and substance use peer specialists;
- To the extent possible, not more than three persons with personal experience recovering from mental illness, substance use conditions, or co-occurring mental illness and substance use conditions; and
- Any other persons considered appropriate by the Executive Commissioner.

The Executive Commissioner appointed five additional members to the workgroup to augment the members required by legislation. The list of workgroup members can be found in Appendix A.

HHSC initially anticipated establishing the workgroup by the end of September 2017 and beginning meetings in October 2017. However, the agency’s Hurricane Harvey disaster response efforts delayed workgroup establishment by two months. Consequently, the first workgroup meeting ultimately took place at the end of November 2017.

Once the workgroup began meeting, rule draft development occurred at a pace to ensure robust input from the variety of stakeholder organizations, providers, and persons with lived experience represented on the workgroup.
By March 2018, agency leadership directed staff to accelerate implementation activities to aim for a rule adoption date of January 1, 2019. The workgroup subsequently completed a draft of the proposed rules at the end of April 2018.

Per H.B. 1486, the workgroup will continue meeting until rules are adopted. As the rules progress through the adoption process, the workgroup will address curricula for training of mental health and substance use peer specialists, along with training curricula for their supervisors.
3. Conclusion

Though the implementation of H.B. 1486 experienced an initial delay due to the Hurricane Harvey response, the internal workgroup and the Peer Support Stakeholder Workgroup were able to work together to create a proposed draft of the Medicaid rules defining requirements for training, certification, scope of services, and supervision of certified peer specialists.

The planned rule adoption date is January 1, 2019.
## List of Acronyms

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<thead>
<tr>
<th>Acronym</th>
<th>Full Name</th>
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<td>H.B.</td>
<td>House Bill</td>
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<td>HHSC</td>
<td>Health and Human Services Commission</td>
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Appendix A. Peer Support Stakeholder Workgroup

Members

The following individuals comprise the Peer Support Stakeholder Workgroup:

- Presiding Officer, Noah Abdenour, lived experience
- Dennis Bach, organization that certifies mental health peer specialists
- D. Frank Davis, organization that certifies substance use peer specialists
- Reginald Smith, organization that employs peer specialists
- Dr. Stanley Williams, organization that employs peer specialists
- Karla Rose, organization that employs peer specialists
- Stephanie Jack, mental health peer specialist who works in an urban area
- Jason Johnson, mental health peer specialist who works in a rural area
- Patty Doty, substance use peer specialist who works in an urban area
- Meredith Stacy Jones, substance use peer specialist who works in a rural area
- Anna Gray, trainer of mental health peer specialists
- Joseph Sanchez, trainer of substance use peer specialists
- Ellen Goodman, professional group who supervises peer specialists
- Joe Powell, professional group who supervises peer specialists
- Amelia Murphy, professional group who supervises peer specialists
- Sachin Kamble, lived experience
- Jason Howell, lived experience
- Shannon Carr, other
- Stevie Hansen, other
- Gregg Sherrill, other
- Janet Paleo, other
- Colleen Horton, other