

## Swearingen, Moshe@MHSOAC

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**From:** Min Suh <supermin99@gmail.com>  
**Sent:** Wednesday, February 24, 2016 12:26 PM  
**To:** MHSOAC  
**Subject:** Senate Bill SB 614

To the MHSOAC Commissioners and Toby Ewing, Executive Director;

I am writing this letter, joining the strong tide of California organizations, counties and people advocating for growth in high quality peer/family support services and peer specialist career development in supporting SB 614, to bring peer certification to California. The impact of implementing SB 614 on the General Fund would be minimal, while it would bring in a 50% Medi-CAL match for services that already exist currently without federal government participation.

Peer Certification makes good fiscal sense, and California is one of four states in the nation without it.

In 2007, the U.S. Centers for Medicare and Medicaid Services (CMS) sent a guidance letter to all State Medicaid Directors emphasizing, “peer support services are an evidence-based mental health model of care which consists of a qualified peer support provider who assists individuals with their recovery from mental illness and substance use disorders.” CMS encouraged states to establish a state certification process for training, credentialing, supervision and care coordination. (CMS, SMDL #07-011) This enables the use of federal Medicaid (Medi-Cal in California) financial participation with a 50% match.

Currently forty-two (42) states plus the District of Columbia and the U.S. Department of Veteran’s Affairs have implemented protocols to certify peer specialists, and four additional states are in the process of creating certification programs, enabling the majority of states to leverage Medicaid funds. However, California has not acted and is therefore among a mere four US states that are at the tail end of progress. California deserves better!

Under existing Medi-CAL codes, a handful of California counties do allow peer specialists to bill, but due to the nature of peer specialist services, at least 25% of peer services cannot be billed under the old codes. We need unique peer support service and provider codes to capture the unique services that are provided and will generate more revenue from the federal match. Also free-standing peer run organizations cannot currently bill at all.

Initially funded by Department of Mental Health and then OSHPD, California began an in depth and focused look at peer certification in 2011. Substantial work has been done toward peer certification in the past years and substantial funds have already been invested into developing peer certification in California. SB 614 allows for the use of Mental Health Services Act (MHSA) funds and Workforce Education and Training (WET) Program resources to develop and administer the peer and family support specialist certification program.

Programmatically peer certification also makes sense.

Numerous research studies support the efficacy and cost effectiveness of peer specialist services. Peer services over traditional services alone lead to less inpatient services, decreased symptoms, increased coping skills and life satisfaction, reduced overall ongoing need for mental health services, and decreased substance use.

Peer Support is a unique service, a relationship of mutual learning founded on the key principles of hope, equality, respect, personal responsibility and self-determination. Services provided are non-hierarchical therapeutic interactions between people who have a shared lived experience of a behavioral health challenge. This non-pathologizing connection or affiliation is a deep, holistic understanding based on mutual experience where people are able to “be”

with each other without the constraints of the traditional power differential of expert/patient or expert/family member relationships.

Peer Support is provided to individuals or groups in a variety of settings, including but not limited to: peer operated centers and programs, community based organizations, County clinics, natural community settings, as well as personal residences, community service agencies, schools, courts, primary care, and in-patient settings.

Across California, peer services are already utilized in many of the above settings. However, as SB 614 states, there is no statewide scope of practice, standardized curriculum, training standards, supervision standards, or certification protocol. Very few of the Counties that do utilize peer support services even require training prior to hire. The benefits of Peer Certification for peer support are obvious. Peer certification:

- Defines the service of peer support.
- Standardizes the quality of services provided by Peer Support Specialists.
- Assures that practitioners receive standardized training and demonstrate competency.
- Provides a scope of practice that employers and service recipients can benefit from.
- Can be utilized as a basis for the ability to bill Medi-Cal for services provided.
- Allows for portability of Certification to other counties in the State.

SB 614 makes sense from both a policy and fiscal perspective and can serve to provide more comprehensive assistance to people in need.

Please do your part to bring California up to speed with the rest of the nation in recovery and resiliency services through a State protocol for Medi-CAL billing and Certification of peer and family support specialists.

Do not hesitate to contact me for any reason by emailing [supermin99@gmail.com](mailto:supermin99@gmail.com)

Sincerely,

Min Suh