

963 – PEER AND RECOVERY SUPPORT SERVICE PROVISION REQUIREMENTS

EFFECTIVE DATES: 07/01/16, 10/01/18, 10/01/19, 10/01/20, 10/01/21, 10/01/22

APPROVAL DATES: 06/13/18, 09/05/19, 06/23/20, 05/11/21, 05/24/22

I. PURPOSE

This Policy applies to ACC, ACC-RBHA, ALTCS E/PD, DCS/CHP (CHP), and DES/DDD (DDD) Contractors; Fee-For-Service (FFS) Providers serving: the American Indian Health Program (AIHP), Tribal ALTCS, TRBHA, and all FFS populations, excluding Federal Emergency Services (FES). (For FES, refer to AMPM Chapter 1100). This Policy establishes Medicaid reimbursement requirements for peer support services delivered within the AHCCCS programs. These requirements include the qualifications, supervision, continuing education, and training/credentialing processes of Peer and Recovery Support Specialists (PRSS).

II. DEFINITIONS

For purposes of this Policy:

PEER-AND-RECOVERY SUPPORT SPECIALIST (PRSS) - CONTINUING EDUCATION AND ONGOING LEARNING Activities of professional development intended to enhance relevant knowledge and build skills within a given practice. These activities may involve, but are not limited to, acquiring traditional Continuing Education Units (CEUs).

PEER-AND-RECOVERY SUPPORT SPECIALIST (PRSS) - CREDENTIAL A written document issued to a qualified individual by operators of an AHCCCS-recognized PRSS credentialing program. A PRSS credential is necessary for provision of Medicaid-reimbursed peer support services delivered by the holder of the credential under supervision by a Behavioral Health Technician or Behavioral Health Professional.

Additional Definitions are located on the AHCCCS website at: [AHCCCS Contract and Policy Dictionary](#).

III. POLICY

A. OVERVIEW

Individuals with lived experiences of recovery are an integral part of the behavioral health workforce. To comply with Centers for Medicare and Medicaid Services (CMS) requirements for provision of peer support services as specified in the State Medicaid Director Letter, (SMDL) #07-011, the AHCCCS Division of Community Advocacy and Intergovernmental Relations (DCAIR), Office of Individual and Family Affairs (OIFA) has established training requirements, supervision and credentialing standards for Peer-and-Recovery Support Specialist (PRSS) providing peer support services within the AHCCCS programs. CMS grants State Medicaid programs the authority to define the scope of peer support services, and to determine the oversight and qualification requirements for individuals providing peer support services. A PRSS

credential, as defined in this Policy, is required for reimbursement of all peer support services within the AHCCCS programs.

Peer support services include the provision of assistance to more effectively utilize the service delivery system (e.g., assistance in developing plans of care, identifying needs, accessing supports, partnering with other practitioners, overcoming service barriers); or understanding and coping with the stressors of the individual's disability (e.g., support groups, coaching, role modeling, and mentoring). These services shall only be provided by a PRSS and are aimed at assisting in the creation of skills to promote sustainable recovery. The Contractor and FFS provider shall ensure the provision of quality peer support services.

B. PEER AND RECOVERY SUPPORT SPECIALIST AND TRAINER QUALIFICATIONS

1. Individuals training PRSS, or individuals seeking credentialing and employment as a PRSS, shall:
 - a. Qualify as a Behavioral Health Paraprofessional (BHPP), Behavioral Health Technician (BHT), or Behavioral Health Professional (BHP), and
 - b. Self-identify as an individual who:
 - i. Has lived experience of mental health conditions, and/or substance use, for which they have sought support, and
 - ii. Has an experience of sustained recovery to share.
2. The Contractor shall ensure PRSS credentialing program operators:
 - a. Utilize Attachment B to determine if applicants are qualified for admission,
 - b. Admit only individuals completing and fulfilling all requirements of Attachment B, and
 - c. Maintain a record of issued credentials.
3. Final determination for admission rests with the credentialing program operator.
4. AHCCCS recognizes PRSS credentials issued by credentialing programs in compliance with this Policy. The Contractor and providers shall recognize credentialing from any PRSS credentialing program in compliance with this Policy. If there are regional, agency or culturally specific training requirements exclusive to the Contractor, service provider or tribal community, the additional requirements shall not prevent recognition of a PRSS credential issued in compliance with this Policy.
5. The PRSS credentialing process is not a service.

C. COMPETENCY EXAM

Upon completion of required training, individuals seeking credentialing and employment as a PRSS shall demonstrate their ability to support the recovery of others by passing a competency exam with a minimum score of 80 percent. Each PRSS credentialing program operator has the authority to develop a unique competency exam. All exams shall include at least one question related to each of the curriculum core elements as specified in this Policy. If an individual does not pass the competency exam, the provider of the exam may allow the individual to retake the exam or complete additional training prior to taking the competency exam again.

The Contractor shall ensure all AHCCCS registered providers operating a PRSS credentialing program submits, upon completion of each class, Attachment C to AHCCCS/DCAIR OIFA, via email at oifa@azahcccs.gov. These reports shall contain no other identifying information apart from what is required.

The Contractor shall ensure PRSS credentialing program operators retain copies of, Attachment C and make copies available upon request.

D. PROCESS FOR SUBMITTING EVIDENCE OF CREDENTIALING

1. The Contractor shall:
 - a. Ensure provider agencies contracted to deliver peer support services utilize Attachment A to maintain current and ongoing documentation providing all individuals delivering Medicaid-reimbursed peer support services are in compliance with this Policy,
 - b. Develop and make available to providers policies and procedures describing how the Contractor is monitoring and auditing/oversight activities where records specific to supervision, training, continuing education, and/or ongoing learning of PRSS are reviewed and maintained, and
 - c. Submit Attachment A documenting all actively employed PRSS meet the required qualifications and credentialing for the delivery of peer support services s specified in Contract.
2. FFS Providers shall maintain Attachment A documenting all actively employed PRSS meet the required qualifications and credentialing for the delivery of peer support services. Attachment A shall be made available to AHCCCS DFSM upon request.

E. INTER-STATE RECIPROCITY

AHCCCS/DCAIR, OIFA, recognizes credentials issued by states and/or training programs in compliance with CMS’s requirements, as specified in SMDL #07-011. Individuals credentialed in another state shall submit their credential to AHCCCS/DCAIR, OIFA, via email at oifa@azahcccs.gov.

F. CONTINUING EDUCATION AND ONGOING LEARNING REQUIREMENTS

Similar to other practitioners, requirements shall be established for individuals employed as PRSS to obtain continuing education and ongoing learning relevant to peer support, including physical health and wellness.

1. The Contractor shall develop and make available to providers’ policies and procedures describing requirements for individuals employed as PRSS to obtain a minimum of four hours of continuing education and ongoing learning relevant to peer support, per year. At least one hour shall cover ethics and boundaries related to the practice of peer support.
2. The Contractor shall ensure providers and individuals employed as a PRSS have access to and obtain a minimum of four hours of continuing education and ongoing learning, relevant to peer support, per year.

G. SUPERVISION OF PEER/RECOVERY SUPPORT SPECIALISTS

Supervision shall be provided by a BHT or BHP.

1. The Contractor shall:
 - a. Establish amount and duration of supervision for PRSS, and
 - b. Ensure supervision is documented and inclusive of both clinical and administrative supervision, and
 - c. Ensure supervisors of PRSS have access to training and ongoing learning relevant to the supervision of PRSSs.

H. PEER SUPPORT EMPLOYMENT TRAINING CURRICULUM STANDARDS

1. A PRSS credentialing program curriculum shall include the following core elements:
 - a. Concepts of hope and recovery:
 - i. Instilling the belief that recovery is real and possible,
 - ii. The history of social empowerment movements, and their connection to peer and recovery support, including but not limited to the following movements:
 - 1) Self-help,
 - 2) Consumer/survivor/ex-patient,
 - 3) Neurodiversity,
 - 4) Disability Rights, and
 - 5) Civil Rights.
 - iii. Varied ways that behavioral health has been viewed and treated over time and in the present,
 - iv. Appreciating diverse paradigms and perspectives of recovery and other ways of thinking about behavioral health (e.g., harm reduction, 12-Step recovery, neurodiversity),
 - v. Knowing and sharing one's story of a recovery journey and how one's story can assist others in many ways,
 - vi. Holistic approach to recovery addressing behavioral, emotional, and physical health, and
 - vii. Member-driven/person-centered service planning.
 - b. Advocacy and systems perspective:
 - i. State and national health systems' infrastructure – the history of Arizona's health systems,
 - ii. Confronting and countering discrimination, prejudice, bias, negative stereotypes and other social injustices against those with behavioral health and substance use disorders – combating internalized stigma and oppression,
 - iii. Organizational change – how to utilize person-first and identity-first language to educate provider staff on recovery principles and the role and value of peer support,
 - iv. Creating a sense of community in a safe and supportive environment,
 - v. Forms of advocacy and effective strategies – consumer rights and navigating health systems,
 - vi. The Americans with Disabilities Act, (ADA), and
 - vii. Social Determinants of Health (SDOH).
 - c. Psychiatric rehabilitation skills and service delivery:

- i. Strengths based approach, identifying one’s own strengths and helping others identify theirs, building resilience,
 - ii. Trauma-informed care,
 - iii. Distinguishing between sympathy and empathy emotional intelligence,
 - iv. Understanding learned helplessness, how it is taught and how to assist others in overcoming its effects,
 - v. Motivational interviewing, communication skills and active listening,
 - vi. Healing relationships – building trust and creating mutual responsibility,
 - vii. Combating negative self-talk – noticing patterns and replacing negative statements about oneself, using mindfulness to gain self-confidence and relieve stress,
 - viii. Group facilitation skills,
 - ix. Culturally & Linguistically Appropriate Services (CLAS) standards, and the role of culture in recovery, and
 - x. Understanding and supporting individuals with Intellectual and Developmental Disabilities (I/DD).
 - d. Professional Responsibilities of the PRSS and self-care in the workplace:
 - i. Professional boundaries and codes of ethics unique to the role of a PRSS,
 - ii. Confidentiality laws and information sharing – understanding the Health Insurance Portability and Accountability Act (HIPAA),
 - iii. Responsibilities of a mandatory reporter, what to report and when,
 - iv. Understanding common signs and experiences of:
 - 1) Mental health disorders,
 - 2) Substance Use Disorders (SUD),
 - 3) Opioid Use Disorder (OUD),
 - 4) Addiction,
 - 5) Dissociation,
 - 6) Trauma,
 - 7) I/DD, and
 - 8) Abuse/exploitation and neglect.
 - v. Familiarity with commonly used medications and potential side effects, informed consent as specified in to AMPM Policy 320-Q,
 - vi. Guidance on proper service documentation, billing and using recovery language throughout documentation,
 - vii. Self-care skills:
 - 1) Coping practices for helping professionals,
 - 2) The importance of ongoing supports for overcoming stress in the workplace,
 - 3) Using boundaries to promote personal and professional resilience, and
 - 4) Using self-awareness to prevent compassion fatigue, secondary traumatic stress, and burnout.
2. PSETPs shall not duplicate training required of individuals employed by a licensed agency or Community Service Agencies (CSA). PRSS employed in CSA shall complete additional trainings as specified in AMPM Policy 965.
3. The Contractor shall develop and make available policies and procedures as well as additional resources for development of curriculum, including Contractor staff contacts for questions or assistance.

I. PEER SUPPORT EMPLOYMENT TRAINING PROGRAM APPROVAL PROCESS

AHCCCS/DCAIR, OIFA, oversees the approval of all credentialing materials including curriculum and testing tools. AHCCCS/DCAIR, OIFA, bases approval solely on a program’s compliance with all requirements as specified in this Policy. Peer support employment training is not a billable service for costs associated with training an agency’s own employees.

1. To be considered for review, AHCCCS registered providers intending to operate a PRSS credentialing program shall submit its program curriculum to AHCCCS/DCAIR, OIFA. Program curriculum materials shall include but are not limited to:
 - a. Student and trainer manuals,
 - b. Handouts,
 - c. Homework,
 - d. Final exam,
 - e. Any other classroom materials, or
 - f. Descriptions of reasonable accommodations and alternative formats for the accessibility of program materials by all audiences.
2. If a program makes substantial changes (e.g., change to content,) to its curriculum or if there is an addition to required elements the program shall submit the updated content to AHCCCS/DCAIR, OIFA, for review and approval.
3. If there are regional or culturally specific training requirements exclusive to the Contractor, or tribal community, the additional training requirements shall not prevent employment or transfer of a PRSS credential based on the additional elements or standards.