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Health and Human
Services

Peer Specialist Services in Medicaid

An Overview

**State Medicaid Managed Care Advisory
Committee Meeting**

May 27, 2021

Peer Specialist Services

Legal Authority

- H.B. 1486, 85th Legislature, Regular Session, 2017 and 2018-19 General Appropriations Act, Senate Bill 1, 85th Legislature, Regular Session, 2017 (Article II, HHSC, Rider 211)
- TAC rules adopted and benefit implemented January 1, 2019 ([1 TAC Chapter 354](#)), Medicaid Health Services, Subchapter N, Peer Specialist Services)



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Peer Specialist Services

- Benefit for persons 21 years of age and older with a mental health or substance use diagnosis
- Must be:
 - Included in the person-centered recovery plan
 - Delivered in person*
 - Delivered individually or in a group (limited to 12 persons) setting

* Public health emergency flexibility for audio/visual or audio only.



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Peer Specialist Services

MCOs are required to consider reimbursement for all Medicaid benefits delivered via telecommunications. MCOs are prohibited from denying reimbursement for an otherwise covered service solely because the service was delivered remotely (Senate Bill 670, 85th Legislature, Regular Session, 2019)



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Peer Specialist Services

- Recovery oriented, trauma-informed, voluntary & person-centered
- Include:
 - Recovery wellness & support services
 - Mentoring
 - Advocacy



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Peer Specialist Services

- Peer specialists use lived experience to support the person in:
 - Achieving goals & objectives of the recovery plan
 - Developing skills
 - Developing problem solving strategies
 - Developing coping mechanisms



Peer Specialists services

Places of Service

- Peer specialist services may be provided in the following settings:
 - Office
 - Home
 - Nursing home (SNF/ICF/ECF)
 - Outpatient hospital
 - Other locations



Peer Specialist Services

Requirements

- Peer specialists must be employed by one of the following Medicaid-enrolled provider types:
 - Licensed Practitioner of the Healing Arts (LPHAs)
 - Local Mental Health/Behavioral Health Authority
 - Chemical Dependency Treatment Facility
 - Opioid Treatment Provider/Program



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Peer Specialist Services

Requirements (cont.)

- Peer specialists must be employed by one of the following Medicaid-enrolled provider types:
 - Federally Qualified Health Clinics
 - Rural Health Clinics
 - Comprehensive provider agencies of MHTCM and MHR services
 - Clinic/group practices that treat behavioral health conditions



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Peer Specialists

Qualifications

- At least 18 years of age
- Lived experience with a mental health and/or substance use condition
- High school diploma or GED
- Willing to appropriately share experiences
- Demonstrate current self-directed recovery
- Pass criminal history & registry checks



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Peer Specialists

Certification

- Must complete all required training & certification prior to service provision
- Training requirements include:
 - Orientation (includes self-assessment)
 - Core training by a certified training entity
 - Supplemental training in:
 - Mental health, or
 - Recovery support



Peer Specialists

Supervision

- Peer specialists must be supervised by a:
- Qualified credentialed counselor (QCC);
- LPHA; or
- Qualified mental health professional (QMHP) or Qualified peer supervisor (QPS) who is supervised by a QCC or LPHA



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Peer Specialists

Supervision (cont.)

- Supervision may be delivered:
 - Face-to-face or via teleconference
 - Individually or in a group setting
 - Via observation of the provision of services



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Peer Specialists

Supervision (cont.)

- Supervision must focus on delivery of services to include:
 - Review of cases & activities
 - Skill building
 - Problem resolution
 - Professional growth



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Peer Specialists

Exclusions

- Peer specialists may not:
 - Practice psychotherapy
 - Make clinical or diagnostic assessments
 - Give expert opinions
 - Engage in a service that requires a license
 - Falsify documentation



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Peer Specialist Services

Billing/Reimbursement

- Procedure Code: 1-H0038
- Three modifiers:
 - HQ – Group delivered services
 - HE – Mental health services
 - HF – Substance use services



Peer Specialist Services

Prior Authorization - FFS

- Required for >104 units (26 hours)/rolling 6 month*
- Requests must be submitted to TMHP
- Use Special Medical Prior Authorization (SMPA) form

* As of May, 27, 2021. Subject to change. See TMPPM for the most up-to-date information



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Peer Specialist Services

Prior Authorization - FFS (cont.)

- Must demonstrate:
 - Person receiving services continues to meet eligibility criteria (to include DSM diagnosis);
 - Current recovery plan goals & objectives;
 - Progress made to goals & objectives; and
 - Need for continued services



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Peer Specialist Services

MCO Authorization

- MCOs must ensure services are furnished in an amount, duration, and scope equal to that furnished in FFS Medicaid, as outlined in the TMPPM
- MCOs may follow the TMPPM or use their own policies for prior authorization
- Authorization procedures may vary between MCOs



Peer Specialist Services

Reference

Texas Medicaid Provider Procedures Manual (TMPPM)

- Information on Peer Specialist Services is in **Chapter 6 of the Behavioral Health and Case Management Services Handbook** in the [Texas Medicaid Provider Procedures Manual](#)
- Updated monthly
 - Do not store on your desktop/laptop



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Thank You!



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