



SENATOR JIM BEALL

SB 803 Peer Support Specialist Certification Act of 2020

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BACKGROUND

A peer is a person who draws on lived experience with mental illness and/or substance use disorder and recovery, bolstered by specialized training, to deliver valuable support services in a mental health and/or substance use setting.

The COVID-19 pandemic and economic downturn pose a serious threat to the mental health of Californians. Calls to suicide prevention lines from California were up 40 percent in March. Calls to the Substance Abuse and Mental Health Services Administration's disaster distress hotline increased 891 percent from March 2019 to March 2020. 891 percent. The need for mental health response will continue to grow even as the state of emergency subsides. The sharp rise in mental health disorders triggered by COVID-19 is likely to linger long after the end of the pandemic itself. For some people, it will create enduring mental health issues.

THE ROLE OF PEER SUPPORT

Studies demonstrate that use of peer support specialists in a comprehensive mental health or substance disorder treatment program helps reduce client hospitalizations, improve client functioning, increase client satisfaction, alleviate depression and other symptoms, and diversify the mental health workforce. That's why 48 other states have adopted peer certification programs. They have established clear, basic standards for peer training and they get a federal match for the services. California is behind and needs to catch up.

The pandemic is revealing racial and economic disparities that have long existed. The peer workforce tends to be more diverse than the existing behavioral health workforce. Peers play a unique role that no other provider type can. They are trusted community members who have been through crisis and can guide others. They can serve the most pressing needs, such as supporting individuals who are homeless or struggling with navigating care systems, because they have been there.

Peer support can divert people from emergency services and ensure patients receive a continuum of care, saving

substantial costs of treatment and improving health outcomes. Research shows that peers contribute to the ability of people with mental illness and substance abuse to obtain education and employment, contributing to the California economy rather than depending on social safety nets alone.

Federal agencies such as CMS and SAMSHA, and prestigious organizations like the Institute of Medicine have identified services offered through a certified peer specialists as being valuable and effective. While increasing consumer wellness, the use of peer specialists decreases costs. Data shows a clear return on investment when peers are part of the mental health system.

STATEWIDE CERTIFICATION

Statewide certification would ensure quality, standardization, and effectiveness of peer support services and allow federal dollars to be drawn down for any California county that chooses to opt-in to the program.

In 2007, the federal Centers for Medicare and Medicaid issued guidance for the reimbursement of peer services. Under the guidance, peer services are eligible for federal reimbursement upon the adoption of statewide training and certification standards.

Currently California has no uniform education and training standard for behavioral health peer support services and no peer services-specific Medi-Cal billing codes.

THIS BILL

SB 803 establishes statewide training standards for peer support specialists and requires the DHCS to activate a billing code for peer services in Medi-Cal, enabling participating counties to receive matching federal funds. Counties can opt-in to the program to provide certified peer support specialist services in their county. Under the bill, a participating county is responsible for training and certifying a peer, and providing program oversight.

The peers program defines the range of responsibilities and practice guidelines for peer support specialists, specifies required training and continuing education requirements, determines clinical supervision requirements, and establishes a code of ethics and processes for revocation of certification.

The bill would permit peers certified in one county to practice in counties that opt-in to the program. Finally, the bill only comes into effect if the Department of Health Care Services gains federal approval.

FOR MORE INFORMATION

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SPONSORS

California Association of Mental Health Peer Run Organizations (CAMHPRO)
County Behavioral Health Directors Association of California (CBHDA)
County of Los Angeles Board of Supervisors
Steinberg Institute

SUPPORT

2020 Mom
Alameda County District Attorney
Alum Rock Counseling Center
American Foundation for Suicide Prevention (AFSP)
Arc and United Cerebral Palsy California Collaboration
Association of California Healthcare Districts
Association of Community Human Service Agencies (UNREG).
Bay Area Community Services
BestNow, Alameda County Network of Mental Health Clients
Board of Behavioral Sciences
Cal Voices
California Academy of Child and Adolescent Psychiatry
California Access Coalition
California Alliance of Child and Family Services
California Association of Healthcare Districts
California Association of Alcohol and Drug Program Executives, Inc. (CAADPE)
California Association of Local Behavioral Health Boards & Commissions (CALBHB/C)
California Association of Public Hospitals & Health Systems
California Association of Social Rehabilitation Agencies
California Association of Veteran Service Agencies
California Behavioral Health Planning Council
California Chapter of the American College of Emergency Physicians (California ACEP)
California Commission on Aging

California Consortium of Addiction Programs and Professionals
California Council of Community Behavioral Health Agencies (CBHA)
CaliforniaHealth+ Advocates
California Institute for Behavioral Health Solutions
California Judges Association
California Mental Health Advocates for Children and Youth
California Mental Health Services Oversight and Accountability Commission (MHSOAC)
California Pan-Ethnic Health Network
California Psychiatric Association
California Psychological Association
California School Nurses Association
California State Association of Counties
California Youth Empowerment Network
Children Now
Children's Defense Fund-California
Community Research Foundation
County Behavioral Health Directors Association
County of Santa Clara
County of Ventura
Crestwood Behavioral Health
Depression and Bipolar Support Alliance
Disability Community Resource Center (DCRC)
Disability Rights California
First 5 Alameda County
Gateways CONREP
Hope Cooperative
Housing for All Alliance
Juvenile Court Judges of California (JCJC)
Law Foundation of Silicon Valley
Los Angeles County Chief Executive Office
Local Health Plans of California
National Association of Social Workers, California Chapter (NASW-CA)
Mentor and Peer Support (MAPS)
Mental Health America of California
Mental Health America of Los Angeles
Mental Health Association of San Francisco
Mental Health Services Oversight and Accountability Commission
Napa MomSquad
National Alliance on Mental Illness (NAMI) California
National Alliance on Mental Illness (NAMI) Fresno
National Alliance on Mental Illness (NAMI) Santa Clara County
National Alliance on Mental Health (NAMI) Solano County
National Alliance on Mental Illness (NAMI) Yolo County
National Association of Social Workers, California
Occupational Therapy Association of California (OTAC)
Orange County Board of Supervisors
Peers Envisioning and Engaging in Recovery Services (PEERS)
Project Return Peer Support Network

Psychiatric Occupational Therapy Action Coalition
(POTAC)
Santa Clara Family Health Plan
Santa Clara County Board of Supervisors
California State Council of the Service Employees
International Union (SEIU California)
Self Help and Recovery Exchange
Seneca Family of Agencies
Solano County Mental Health Advisory Board
The Children's Partnership
Transitions-Mental Health Association
United Parents
Ventura County Board of Supervisors
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Western Center on Law & Poverty, Inc.
Winter Faith Collaborative
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