

POLICY AND PROCEDURE

DEPARTMENT: Medical Management	DOCUMENT NAME: Peer Support Services
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APPROVED DATE: 01/21	RETIRED:
EFFECTIVE DATE: 01/21	REVIEWED/REVISED: 01/2021
PRODUCT TYPE: Medicaid	REFERENCE NUMBER: LA.CP.MP.505

SCOPE: Louisiana Healthcare Connections (Plan) Behavioral Health Outpatient Utilization Management Department

PURPOSE: To establish the process and mechanism for determining authorization requests for Peer support services (PSS) for Louisiana Healthcare Connections members.

POLICY: Louisiana Healthcare Connections will determine if services are medically necessary based upon the preliminary assessment of risk, mental status and medical stability and the need for further evaluation or other mental health services as well as supplemental information provided by the treating practitioner.

Peer support services are an evidence-based health service that consists of a qualified peer support provider, who assists members with their recovery from mental illness and/or substance use. PSS are behavioral health rehabilitative services to reduce the disabling effects of an illness or disability and restore the member to the best possible functional level in the community. PSS are person-centered and recovery focused. PSS are face-to-face interventions with the member present. Most contacts occur in community locations where the member lives, works, attends school and/or socializes. Members cannot receive services from a peer support specialist in lieu of services to be provided by a clinician (i.e. seeing walk-in when a licensed clinician is not available) or services provided by a personal care attendant.

Certified Peer Support Specialists (CPSS) must receive regularly scheduled clinical supervision from a Licensed Mental Health Professional (LMHP). LMHP supervisors must have the practice-specific education, experience, training, credentials, and licensure to coordinate an array of behavioral health services. Supervision refers to clinical support, guidance and consultation afforded to unlicensed staff rendering rehabilitation services, and should not be confused with clinical supervision of bachelor's or master's level individuals pursuing licensure. Discussions during treatment planning and treatment team meetings between the LMHP supervisor and PSS do not count as supervision.

PSS must be provided under the administrative oversight of licensed and accredited local governing entities (LGEs). LGEs must meet state and federal requirements for providing PSS.

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PSS include a range of tasks to assist the member during the recovery process. Recovery planning assists members to set and accomplish goals related to home, work, community and health. PSS may include, but are not limited to:

- Utilizing ‘lived experience’ to translate and explain the recovery process step by step and expectations of services;
 - Assisting in the clinical process through:
 - Providing feedback to the treatment team regarding identified needs of the member and the level of engagement of the member;
 - Development of goals;
 - Acting as an advocate, with the permission of the member, in the therapeutic alliance between the provider and the member;
 - Encouraging a member with a low level of engagement to become actively involved in treatment; and
 - Ensuring that the member is receiving the appropriate services of their choice and in a manner consistent with confidentiality regulations and professional standards of care;
- Rebuilding, practicing, and reinforcing skills necessary to assist in the restoration of the member’s health and functioning throughout the treatment process;
- Providing support to the member to assist them with participation and engagement in meetings and appointments
- Assist members in effectively contributing to planning and accessing services to aid in the member’s recovery process
- Aiding the member in identifying and overcoming barriers to treatment and support member in communicating these barriers to treatment and service providers;
- Assisting the member with supporting strategies for symptom/behavior management;
- Supporting the member to better understand their diagnoses and related symptoms;
- Assisting the member with finding and using effective psychoeducational materials;
- Assisting the member to identify and practice self-care behaviors, including but not limited to developing a wellness recovery plan and relapse prevention planning;
- Explaining service and treatment options;
- Assisting the member to develop support systems with family and community members;

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- Serving as an advocate, mentor, or facilitator for resolution of personal issues and reinforcement of skills necessary to enhance and improve the member's health;
- Fostering the member in setting goals, promoting effective skills building for overall health, safety and wellbeing that support whole health improvements and achievements of identified goals and healthy choices;
- Functioning as part of the member's clinical team to support the principles of self-direction to:
 - Assist and support the member to set goals and plan for the future;
 - Propose strategies to help the member accomplish tasks or goals; and
 - Support the member to use decision-making strategies when choosing services and supports; and
- Providing support necessary to ensure the member's engagement and active participation in the treatment planning process.
- Support the member to arrange services that will assist them to meet their treatment plan goals, inclusive of identifying providers such as:
 - Primary care services;
 - Behavioral health management and treatment services;
 - Local housing support programs;
 - Supportive employment;
 - Education, other supportive services;
 - Referral to other benefit programs; and
 - Arranging non-emergency medical transportation.
- Provides support with transitioning members from a nursing facility and adjustment to community living.

PROCEDURE:

Medical Necessity Criteria

I. Admission Criteria

Criteria **A**, **B**, **C**, **D**, and **E** must be met to satisfy admission criteria

A. Member must be 21 years of age or older

B. Must have a mental illness and/or substance use disorder diagnosis

C. Member must be actively receiving a behavioral health treatment service and in the pre-contemplative or contemplative stage of change

D. Member must be willing to participate in services

E. Must provide documentation showing one or more tasks to assist the member during the recovery process

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II. Allowed Modes of Delivery

- A. Individual
- B. On-site; and
- C. Off-site

III. Service Delivery

- A. Member shall be involved throughout the planning and delivery of services
- B. Services shall be:
 - i. Delivered in a culturally and linguistically competent manner
 - ii. Respectful of the member receiving services
 - iii. Appropriate to members of diverse racial, ethnic, religious, sexual and gender identities and other cultural and linguistic groups
 - iv. Appropriate for age, development and education

IV. Continued Stay Criteria

Criteria **A** and **B** must be met to satisfy continued stay criteria

- A. Member continues to meet admission criteria
- B. Progress notes document progress relative to goals identified in the Individual Care Plan, but treatment/recovery goals have yet been achieved

V. Discharge Criteria

Criteria **A** and either **B**, **C** or **D** must be met to satisfy discharge criteria

- A. An adequate continuing care plan has been established
- B. Goals to the Individual Care Plan have been substantially met
- C. Member/family requests discharge
- D. Transfer to another service/level is more clinically appropriate

VI. Limitations/Exclusion

- A. Services that are purely recreational, social or leisure in nature or have no therapeutic or programmatic content;
- B. Peer support services that are provided to members as an integral part of another covered service;
- C. Transportation;
- D. General office/clerical tasks; and
- E. Attendance in meetings or sessions without a documented purpose/benefit from the peer's presence in that meeting or session

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REFERENCES

Louisiana Department of Health Behavioral Health Services Provider Manual

ATTACHMENTS:

DEFINITIONS:

REVISION LOG

REVISION	DATE
<ul style="list-style-type: none">• Policy created	1/2021

POLICY AND PROCEDURE APPROVAL

The electronic approval retained in RSA Archer, Centene's P&P management software, is considered equivalent to a physical signature.

Sr. VP, Population Health: Electronic Signature on File
Chief Medical Officer:-Electronic Signature on File