# Utah Medicaid Provider Manual Mental Health Centers / Prepaid Mental Health Plans Division of Medicaid and Health Financing Updated October 2012

#### Link:

https://medicaid.utah.gov/Documents/manuals/pdfs/Medicaid%20Provider%20Manuals/Mental%20Health%20Centers%20-%20Prepaid%20Mental%20Health%20Plans%20(Archived)/MentalHealth10-12.pdf

#### 2. SCOPE OF SERVICES

Rehabilitative mental health services are covered benefits when they are medically necessary services. Medically necessary services may include psychiatric diagnostic interview examination, mental health assessment by a non-mental health therapist, psychological testing, individual psychotherapy, individual psychotherapy with medical evaluation and management services, family psychotherapy, group psychotherapy, pharmacologic management, therapeutic behavioral services, psychosocial rehabilitative services, and peer support services as described in Chapters 2-2 through 2-10. For PMHPs, rehabilitative mental health services also include 1915(b)(3) services defined in Chapter 3.

## 2 - 11 Peer Support Services (page 35 to 38 of 49)

Peer support services means face-to-face services that are provided for the primary purpose of assisting in the rehabilitation and recovery of adults with serious and persistent mental illness (SPMI) and children with serious emotional disturbances (SED). Individuals may also have co-occurring substance use disorders. SED is the inclusive term for children and adolescents whose emotional and mental disturbance severely limits their development and welfare over a significant period of time and requires a comprehensive coordinated system of care to meet their needs. For children with SED, peer support services may be provided to their parents/legal guardians when the services are directed exclusively toward the treatment of the Medicaid-eligible child.

Peers offer a unique perspective that clients find credible; therefore, peer support specialists are in a position to build alliances, instill hope, and demonstrate that recovery is possible. Peer support services are provided to an individual, a group of individuals or parents/legal guardians. On occasion, it may be impossible to meet with the peer support specialist in which case a telephone contact with the client or parent/legal guardian of a child with SED would be allowed. Through coaching, mentoring, role modeling, and as appropriate, using their own recovery stories as a recovery tool, peer support specialists assist clients with their recovery goals. Peer support specialists assist clients in developing skills in areas including: creation of recovery goals; daily and community living, including, when age appropriate, independently obtaining food, clothing, housing, medical care, employment, etc.; socialization; adaptation and problem-solving; development and maintenance of healthy relationships and communication; combating negative self-talk and facing fears; regulation of emotions, including anger management; pursuing educational goals; securing and maintaining employment and overcoming job-related anxiety. Peer support specialists also provide symptom monitoring and crisis prevention, assist clients with recognition of health issues impacting them and with symptom management.

Peer support services are delivered in accordance with a written treatment/recovery plan. Clients lead and direct in their own recovery by identifying their own preferences and individualized measurable recovery goals.

### Who:

Peer support services are provided by certified support specialists.

To become a certified support specialist, an individual must:

- 1. be at least age 18 and:
  - a self-identified individual who is in recovery from SPMI or SED, and from co-occurring substance use disorders if co-morbidly diagnosed; or
  - b. a parent of a child with SED or an adult who has an on-going and personal relationship with a family member who is a child with SED; and
- 2. successfully complete a peer support specialist training curriculum designed to give peer support specialists the competencies necessary to successfully perform peer support services. Curriculums are developed by the State of Utah, Department of Human Services, Division of Substance Abuse and Mental Health (DSAMH), in consultation with national experts in the field of peer support. Training is provided by DSAMH or a qualified individual or organization under contract with the DSAMH. An individual who successfully completes the certification training will receive a written peer support specialist certification from the DSAMH. Peer support specialists must successfully complete 20 hours of continuing education each year to maintain the DSAMH certification.

Certified peer support specialists are under the supervision of a licensed mental health therapist practicing within the scope of his or her license in accordance with Title 58 of the Utah Code:

- a. licensed physician and surgeon or osteopathic physician engaged in the practice of mental health therapy;
- b. licensed psychologist qualified to engage in the practice of mental health therapy;
- c. licensed clinical social worker;
- d. licensed certified social worker under the supervision of a licensed clinical social worker;
- e. licensed advanced practice registered nurse (APRN), either as a nurse specialist or a nurse practitioner, with psychiatric mental health nursing specialty certification;
- f. licensed marriage and family therapist; or
- g. licensed professional counselor.

Certified peer support specialists must receive weekly individual and/or group supervision by their supervisor.

## Limits:

- 1. Peer Support Services is an approved service effective July 1, 2011. Peer support services provided on or after this date may be billed or reported to Medicaid.
- 2. Peer support groups are limited to a ratio of 1:8.

- 3. Medicaid clients or Medicaid-eligible children's parents/legal guardians may participate in a maximum of four hours of peer support services a day.
- 4. With the exception of older adolescents (adolescents age 16-18) for children with SED, peer support services are provided to their parents/legal guardians and the services are directed exclusively to the treatment of the Medicaid-eligible child (i.e., toward assisting the parents/legal guardians in achieving the rehabilitative treatment goals of their children.
- 5. In accordance with 42 CFR 440.130, and the definition of rehabilitative services, the following do not constitute medical or remedial services and may not be billed or reported to Medicaid:
  - Job training, job coaching, and vocational and educational services. These activities are not
    within the scope of a peer support specialist"s role; however, helping individuals with the
    emotional and social skills necessary to obtain and maintain employment is within the scope of
    peer support services;
  - b. Social and recreational activities (although these activities may be therapeutic for the client, and the peer support specialist may obtain valuable observations for processing later, they do not constitute billable services. However, time spent before and after the activity addressing the clients" skills and behaviors related to the clients rehabilitative goals is allowed); and
  - c. Routine transportation of the client or transportation to a site where a peer support services will be provided.

#### Record:

Documentation must include:

- 1. date and actual time of the service (time may be rounded to the nearest five minute interval);
- 2. duration of the service;
- 3. setting in which the service was rendered;
- 4. specific service rendered;
- treatment goal(s);
- 6. progress toward treatment goal(s) or if there was no reportable progress, documentation of reasons or barriers; and
- 7. signature and licensure or credentials of individual who rendered the service.

If peer support services goals are met as a result of participation in the service, then new individualized goals must be added to the treatment plan.

#### Unit:

H0038 – Individual Peer Support Services - per 15 minutes

H0038 with HQ modifier - Group Peer Support Services - per 15 minutes per Medicaid client

When billing or reporting this procedure code/modifier, follow these rounding rules for converting actual time to the specified number of units:

Less than 8 minutes equals 0 units;

8 minutes through 22 minutes of service equals 1 unit;

23 minutes through 37 minutes of service equals 2 units;

38 minutes through 52 minutes of service equals 3 units;

53 minutes through 67 minutes of service equals 4 units;

68 minutes through 82 minutes of service equals 5 units;

83 minutes through 97 minutes of service equals 6 units;

98 minutes through 112 minutes of service equals 7 units; and

113 minutes through 127 minutes of service equals 8 units, etc.