

# **Request for Information on Peer Support Services in Louisiana**

## **Louisiana Department of Health**

*Courtney N. Phillips, Ph.D., Secretary*

*Mark Thomas, Deputy Secretary*

*Karen Stubbs, JD, Assistant Secretary, Office of Behavioral Health (OBH)*

**August 30, 2020**



# Louisiana Department of Health

## Request for Information on Peer Support Training and Certification in Louisiana

### Vision

The Office of Behavioral Health (OBH) recognizes the importance of Peer Support Specialists in the engagement and recovery process for behavioral health treatment. The use of trained, certified peers is a critical component to a recovery-oriented system of care and results in improvements in client engagement, treatment outcomes, and recovery. As an enhancement to traditional treatment services, peer support services allow for more effective and targeted interventions, resulting in improved care and an increased capacity of the system to serve a broader array of individuals.

### Background

Peer support services (PSSs) are an evidence-based behavioral health model of care that consist of a qualified peer support provider who assists individuals with their recovery from a mental illness and/or substance use challenges. PSSs reduce the disabling effects of an illness or disability and restore the individual to the best possible functional level in the community. PSSs are person-centered and recovery-focused. The purpose of PSSs is to inspire hope in beneficiaries that recovery from behavioral health conditions is not only possible, but probable.

Peer support services are provided by certified peer support specialists (CPSSs) with lived experience of recovery from a behavioral health challenge, who have been trained and certified by a department-approved organization and trained in the approved curriculum to assist recipients of PSSs in gaining hope and moving forward in their own recovery. PSSs are an important component in the delivery of acceptable and effective treatment and support services, due to the peer support specialist's personal lived experience with behavioral health challenges and, for many, experience with using behavioral health services. In many states, PSSs are included in their Medicaid program as behavioral health rehabilitative services. These services are generally required to be recommended by a physician or other licensed mental health professional (LMHP).

The Louisiana Department of Health (LDH), Office of Behavioral Health (OBH) intends to align the vision, core competencies, and program policies for PSSs with the Substance Abuse and Mental Health Services Administration ([SAMHSA Core Competencies for Peer Workers in Behavioral Health Services](#)) guidance document. Per SAMHSA, peer support is described as "a system of giving and receiving help based on key principles that include shared responsibility and mutual agreement of what is helpful." In efforts to support recipients with behavioral health challenges, Louisiana's PSSs will cover a wide range of activities, including individual advocacy through shared experience, linkage to community resources, assistance in setting goals, mentoring, developing relationships and roles within the community, and assistance in building natural supports. PSSs will comply with the standards set forth by the LDH.

The LDH is seeking information through this Request for Information (RFI) from interested parties related to the training and the certification of peer support specialists to offer peer support services in Louisiana.

## Purpose of the RFI

The LDH is seeking input from a broad range of stakeholders interested in developing and implementing a peer support specialist training program and a peer support specialist certification process that is fully integrated into the Louisiana system of behavioral healthcare and Medicaid delivery system and is consistent with the following values:

- Is guided by the knowledge of/and includes individuals with lived experience in the design of a PSS training program and certification process.
- Assures peer support specialists have the required competency to fulfill the responsibilities of the role.
- Delivers services that are recovery and wellness focused.
- Includes a code of ethics for Certified Peer Support Specialists.
- Establishes eligibility requirements for Certified Peer Support Specialists, such as prerequisite education, training, and experience. This includes training required for the peer support specialist certificate, including the required number of hours, examination process to determine successful completion of training and competency, and content topics for training curriculum design.
- Describes the certification process for Certified Peer Support Specialists.
- Establishes policies and standards for continuing education for certification renewal, including frequency of renewal, number of hours of continuing education required for renewal, and criteria for acceptable continuing education to maintain certification.
- Includes policies and procedures for grandfathering the existing peer workforce to facilitate and expedite their certification, where individuals who were considered to be Peer Support Specialists prior to the implementation of new policies and protocols would be allowed to continue their practice.
- Establishes supervision requirements before and after certification, including any required training for supervisors of Certified Peer Support Specialists.

## Instructions

Any interested parties may respond inclusive of, but not limited to individuals, entities, managed care entities, healthcare systems and providers, advocacy organizations, and/or organizations with Information Technology (IT) expertise. Responses may be accepted from out of state entities.

Respondents are encouraged to provide complete responses to the questions listed below and identify the specific questions responded to in their submission. Please note that a response to every question is not necessary. Additionally, respondents may identify and comment on other issues that they believe are important for the State to consider. LDH asks that you respond to sections in which you hold subject matter expertise, may have future business interest, or can share best practice ideas.

**DATES:** To be assured consideration, comments must be received by 11:59pm CST on Sunday, September 13, 2020. A virtual question and answer session will be available to potential respondents on Tuesday, September 8, 2020 from 2:00p.m. – 4:00p.m. via: <https://ldhobhasstsecofc.zoom.us/j/93847188953?pwd=V0M1dUN1aUI2akt0QjE1VXFpay9LZz09>.

Feedback related to these sessions will be posted to [www.ldh.la.gov/lapeersupport](http://www.ldh.la.gov/lapeersupport).

**RESPONSE SUBMISSION:** Responses, questions, or requests for additional information should be submitted to the Louisiana Department of Health with the following email address: [Ricardo.Williams2@la.gov](mailto:Ricardo.Williams2@la.gov). Please include “Peer Support RFI” in the subject line.

**RESPONDENT CONTACT INFORMATION:** Please provide the name, organization, address, contact number, and email address of the respondent.

## Questions

Please review all of the attached documents listed below in the resources section in an effort to fully answer the questions below.

1. Training for Peer Support Specialists
  - a. What methods should be considered for training CPSSs, e.g. in-person, webinar, other online format, etc. What should be the duration of the training? What qualifications should the individual(s) delivering the trainings have?
  - b. What trainings or curriculums would you offer/suggest to meet the minimum requirements for the training and certification of Peer Support Specialists?
  - c. How often should training be offered?
  - d. What training would you recommend to prepare existing behavioral health facility agency staff to work with Certified Peer Specialists?
  - e. What training would you recommend for supervisors of Peer Support Specialists?
2. Certification of Peer Support Specialists
  - a. What entity would be responsible for the certification process and how would the process be coordinated? How would the certification entity coordinate, communicate, and validate certification with the managed care entities? Should the training entity be separate from the certification and re-certification entity, as recommended by accrediting agencies for certification bodies? If you do not agree they should be separate, please provide your rationale.
  - b. If training and certification entities are the same, what are best practices for establishing and maintaining a firewall between training and certification to avoid conflict of interest?
  - c. Are there unique resources and/or opportunities in Louisiana that should be considered in designing the certification standards for Peer Support Services?
  - d. Should additional considerations be included in the current code of ethics for CPSSs?
  - e. What should be included in policies and standards for continuing education for certification renewal?

- f. How often should certification renewal occur?
  - g. What should be the number of hours of continuing education required for renewal, and criteria for acceptable continuing education to maintain certification?
  - h. What should be included in policies and procedures for grandfathering the existing peer workforce to facilitate and expedite their certification? What specific areas may be subject to grandfathering? If there are specific areas that should not be subject to grandfathering, please provide your rationale.
  - i. What supervision requirements should be considered before and after certification?
  - j. What should be included in required training for supervisors of Certified Peer Support Specialists? In addition to being an LMHP, per guidelines set forth by the Centers for Medicare & Medicaid Services (CMS), what qualifications should a peer supervisor meet in order to supervise peers? What are recommended supervisor to peer ratios? Please include detail associated with recommended number of hours of supervision, group versus individual supervision, expectations for what is covered in supervision, and how it is documented.
3. What are suggestions for funding of training, source of funding, payment of the training and/or certification entity, as well as the initial and renewal of certifications for peers seeking the Certification of Peer Support Specialists? Please cite examples of how other organizations or states have funded the training and certification to ensure costs are not a barrier to obtaining the certification.
- a. Should peers be responsible for payment of their own trainings and certifications
  - b. Should there be an annual fee to recertify and, if so, who would bear this cost?

## Special notes to Respondents

Whenever possible, respondents are asked to draw their responses from objective, empirical, and actionable evidence and to cite this evidence within their responses. References to evidenced-based practices and models used in other states relative to your responses are appreciated. When possible, please reference data and/or lessons learned relevant to the implementation of the proposed practices or models.

**REFERENCE MATERIALS.** The following materials are available to aid in the development of a response to this RFI:

1. OBH's Peer Support Specialist Code of Ethics
2. Peer Support Specialist Eligibility
3. The United States (US) Government Accountability Office (GAO) Report to Congressional Committees: Mental Health Leading Practices for State Programs to Certify Peer Support Specialists
4. CMS Guidance Documents for Peer Support Services
  - a. CMS Medicaid Director Letter dated August 15, 2007
  - b. CMS Clarifying Guidance on Peer Support Services Policy dated May 1, 2013

**THIS IS A REQUEST FOR INFORMATION (RFI) ONLY.** This RFI is issued solely for information and planning purposes; it does not constitute a Request for Proposal, application, or proposal abstract. This RFI does not commit the State to contract for any supplies or services or make a grant award. Further, the State is not seeking proposals through this RFI and will not accept unsolicited proposals. Respondents are advised that the State will not pay for any information or administrative costs incurred in response to this RFI; all costs associated with responding to this RFI will be solely at the interested party's expense.

Information obtained as a result of this RFI may be used by the State for program planning on a non-attribution basis. All submissions become State property and will not be returned. The State may publicly post a summary of the comments received or the actual responses.

### **Confidential Information, Trade Secrets, and Proprietary Information**

All financial, statistical, personal, technical and other data and information relating to the proposer's operation and submitted in response to this RFI shall be not be considered confidential. The State shall not be required to keep confidential any data or information submitted in response to this RFI.

All material will be handled in accordance with the Louisiana Public Records Act, R.S. 44: 1-44 and applicable rules and regulations. Any offer marked as confidential or proprietary may be rejected without further consideration or recourse.

In addition, if the State receives a public records request for information pursuant to the Louisiana Public Records Act, R.S. 44: 1-44 and a proposer wishes to assert that information is confidential, the proposer may seek a protective order from a court of proper jurisdiction preventing the release of such information. In such case, the proposer agrees to hold the State harmless for any and all costs or fees incurred, including attorneys' fees, related to the State's refusal to release documents or other information over which confidentiality has been claimed.