

Peer Support Specialists – Frequently Asked Questions

Updated August 16, 2021

Implementation of SB 803

How do I participate in stakeholder outreach for the implementation of SB 803?

Opportunities for input on implementation efforts are posted on the [DHCS' Peer Support Services website](#). Materials presented during meetings will be posted on our webpage prior to meeting dates. Interested stakeholders may also continue to submit comments to the implementation team via email at Peers@dhcs.ca.gov.

Who is responsible for administering a peer support specialist certification program under SB 803, now Welfare and Institutions Code (W&I) Div 9, Part 3, Chapter 7, Article 1.4 (commencing with Section 14045.10)?

A county, or an agency representing the county, subject to approval by DHCS, is responsible for developing, overseeing, and enforcing a peer support specialist certification program under SB 803. (W&I 14045.14) This means that, while DHCS is responsible for setting the statewide standards for peer support specialist certification programs, each county, or agency representing a county, is responsible for developing a program that is aligned with those standards, and for ensuring it is administered appropriately for Specialty Mental Health Services, Drug Medi-Cal Organized Delivery System, or State Plan Drug Medi-Cal services.

What role does CalMHSA play in the Medi-Cal peer support specialist certification process?

The law specifies that Medi-Cal Peer Support Specialist Certification Programs can be established either by counties, or an agency representing counties. The California Behavioral Health Directors' Association has identified the California Mental Health Services Authority (CalMHSA) as the entity that will represent counties for the implementation of a State-approved Medi-Cal Peer Support Specialist Certification Program, to support consistency statewide.

CalMHSA, on behalf of the counties they represent, and any other counties that seek to implement their own Medi-Cal Peer Support Specialist Certification Program, must adhere to the state standards set forth in [Behavioral Health Information Notice \(BHIN\) 21-041](#).

Who is responsible for developing the curriculum for each area of specialization?

Each state approved Medi-Cal Peer Certification program will submit their curriculum for each area of specialization for DHCS review and approval.

Can the term “Peer Support Specialist” be changed to “Peer Specialists”?

The term "Peer Support Specialist" is directly from statute and cannot be changed by DHCS. Peers certified or funded through a funding source other than Medi-Cal may have more flexibility.

Qualifications

Can youth be Peer Support Specialists?

The law includes several qualification requirements for an applicant to be certified as a Peer Support Specialist in W&I 14045.15. One such requirement is that an applicant must be at least 18 years of age. This does not preclude Peer Support Specialists working with youth or transitional age youth.

If I am currently a peer specialist but do not work with Medi-Cal beneficiaries, do I need to be certified by this program?

No. This certification is only a requirement if peer support services are provided to a Medi-Cal beneficiary and the county submits a claim to be reimbursed by Medi-Cal for the federal share of the cost.

Will there be different certification programs for substance use disorder peers and mental health peers?

No. The law does not make a distinction as separate certifications and states a peer support specialist is an individual “having lived experience with the process of recovery from mental illness, substance use disorder, or both, either as a consumer of these services or as the parent or family member of the consumer.”

Certification Standards

What is the timeframe for the development of Peer Support Specialist Certification Program standards?

DHCS released [BHIN 21-041](#) to County Behavioral Health Agencies and associations with these certification standards on July 22, 2021. For more information and updated timelines, please check the [DHCS Peer Support Services website](#).

Is there a statewide timeframe requirement for a peer support specialist to complete initial certification?

While each approved certification program may include a timeframe requirement, DHCS is not requiring certification programs to have timeframes for initial certification process for individuals.

What do cultural and structural competence mean (as outlined in the core competencies)?

Cultural competency: A set of congruent behaviors, attitudes, and policies that come together in a system or agency or among professionals that enables effective interactions in a cross-cultural framework.¹

A culturally competent peer support specialist can provide high-quality care to diverse individuals, and tailor this care to meet their social, cultural, and linguistic needs.

Structural competency: The trained ability to discern how a host of issues defined clinically as symptoms, attitudes, or diseases (e.g., depression, hypertension, obesity, smoking, medication “non-compliance,” trauma, psychosis) also represent the implications of attitudes that are influenced by social determinants of health.

Can the 20 hours of continuing education required for biennial renewal include any hours of training done for an area of specialization?

Yes. Area of specialization training hours completed by Medi-Cal certified peer support specialists within the two years prior to a biennial certification can count towards the 20 hours of continuing education required to complete a biennial certification.

Are the hours of training in an area of specialization in addition to the 80 hours of training for initial certification?

Yes. The training for areas of specialization are in addition to the 80 hours of training for initial certification.

Are peer support specialists who work in a specialization, such as parent, caregiver, and family peers, required to complete the area of specialization training to provide Medi-Cal peer support services?

No. A county opting into developing a program, either through a designated entity or their own approved program, must make training in the areas of specialization available to certified Medi-Cal Peer Support Specialist within the county, but the state does not require that Peer Support Specialists complete this training before being able to provide Medi-Cal reimbursable services to beneficiaries. Receiving Peer Support Specialist Medi-Cal certification, e.g. taking the eighty-hour training, passing

¹ Cross et al. 1998. Towards a Culturally Competent System of Care: A Monograph on Effective Services for Minority Children Who Are Severely Emotionally Disturbed. Washington DC: CASSP Technical Assistance Center, Georgetown University Child Development Center.

the Medi-Cal Peer Support Specialist Certification Exam, and signing the Code of Ethics, are sufficient to be able to be reimbursed for Medi-Cal services in a county that has opted-in to the benefit. A county may elect to require a specialized training pertinent to their beneficiary population or workforce requirements, and a Peer Support Specialist who has received the training in the area of specialization would be able to demonstrate competency for positions within that specialization statewide.

What kinds of trainings will be considered for peers that are applying for certification through the grandparenting process or out-of-state reciprocity process?

All peer trainings will be considered, however part of the grandparenting process also requires a peer must pass a state-approved exam. Exams must be based off of the core competencies set forth in W&I 14045.13.

For a peer support specialist seeking certification via the out-of-state reciprocity policy, is there any requirement regarding how recent the employment experience needs to be?

No. If the peer support specialist has at least one year of employment and meets all the other requirements and qualifications set forth in [BHIN 21-041](#), they are eligible for certification.

Will DHCS be establishing requirements for a supervisory training curriculum?

DHCS will not be establishing a supervisory training curriculum, however the requirements for peer supervisors are outlined in [BHIN 21-041](#). CalMHSA is developing a supervisory training curriculum that will be available for counties to use to meet this requirement. DHCS encourages counties to support peers as supervisors of their peer workforce but understands that not all counties may have a viable workforce and resources to do so upon implementation of their Medi-Cal peer support services program.

Where should I send recommendations for topics that should be included in the training?

DHCS has forwarded specific recommendations regarding further development of the certification program curriculum to CalMHSA for their use. We encourage feedback to be provided directly to CalMHSA at PeerCertification@calmhsa.org.

Miscellaneous

If a county is wants to opt-in to the peer services benefit, do they have to opt-in for peer services both in Drug Medi-Cal and Specialty Mental Health Services delivery systems?

No, a county can opt-in to one or both delivery systems. For example, a county can begin implementing services in the mental health delivery system, and then opt-in later to provide the benefit in the substance use disorder delivery system.

If a peer support specialist relapses in their recovery, do they have to wait 90 days before providing peer services?

There is no state requirement, in statute, regulation, waiver, or Interagency Agreement, that individuals working as a peer specialist cannot provide services for 90 days after a relapse.

Does an individual need to wait 90 days after finishing treatment services to become a peer support specialist?

There is no state requirement, in statute, regulation, waiver, or Interagency Agreement, that individuals working as a peer specialist must wait any length of time prior to providing peer specialist services.

Will the hourly wage for peer support specialists increase?

DHCS is not authorized under law to set a pay scale for peer support specialists. Counties are responsible for setting rates of pay for county-employed peer support specialists. Some Medi-Cal peer support specialists may be employed by independent organizations or facilities that may or may not be comparable to county pay scales. The rates of pay may vary across different counties and other organizations that employ peer support specialists.

How will DHCS review peer certification programs to identify problematic issues and ensure compliance?

Counties that opt-in to developing a Medi-Cal Peer Support Specialist Certification Program, whether on their own or through a designated entity, are required to develop a corrective action, complaints, and appeals process. Programs will be required to report annually to DHCS and will be subject to a county's Medi-Cal triennial reviews.

Contact Us

Additional questions on the implementation of SB 803 can be sent to the Peers Inbox: peers@dhcs.ca.gov.

Any additional information or questions related to CalMHSA's role in the peer support specialist program to CalMHSA can be sent to CalMHSA's Inbox: PeerCertification@calmhsa.org