## Commonwealth of Massachusetts Peer Support Worker Comparison Chart: Adult Services Department of Public Health Bureau of Substance Addiction Services (DPH/BSAS)\* February 27, 2019



February 27, 2019 Strategies									
Require Lived Experience in Substance Addiction and/or Mental Health Conditions <sup>1</sup>			Do Not Require Lived Experience in Substance Addiction and/or Mental Health Conditions						
Profession	Peer Recovery Coach <sup>2</sup>	Certified (Mental Health) Peer Specialist <sup>3</sup>	Community Health Worker⁴	Recovery Support Navigator⁵	Recovery Specialist <sup>6</sup>				
Shared Values									
Non-Directive & Collaborative - Advocacy of Members' Voice & Choice - Emphasis on Social Determinants of Health - Improve Quality of Care and Reduce High Intensity Services									
Skills, Experience, and Evidence Base									
Focus	Substance addiction	Mental health and trauma	Physical and behavioral health; health education; outreach	Substance addiction and/or mental health conditions	Substance addiction and/or mental health conditions				
Core Lived Experience	Lived experience and in stable recovery from addiction; ability to effect lasting change in oneself and others	Recovery and resilience relating trauma and mental health diagnosis or challenges	Lived experience of culture, language, community; and sometimes shared experience of health condition or immigration	Not applicable	Not applicable				
Education, Training, & Certification	High school diploma or equivalent and Recovery Coach Academy. Certification by MA Board of Substance Abuse Counselor Certification, a private non-governmental agency, is currently voluntary. Some payers require certification, which includes additional coursework and 500 supervised hours.	High school diploma or equivalent and MA Certified Peer Specialist Training. Training is designed for people who have some knowledge and experience with peer support. After completing the 50 hour course, students are eligible to take a written examination for the CPS Certificate. <sup>7</sup>	Certification and training are voluntary. Two certification paths: 1) work experience only, or 2) combined training and work experience. Training programs for certification must cover core competencies (80%) and special health topics (20%); 40% must be taught or co-taught by CHWs, and training must be accessible, inclusive and culturally responsive.	Bachelor-level paraprofessional and at a minimum must have a Bachelor's degree in social work, psychology or related field. Documented, annual training is required.	High school diploma or equivalent and one year working with individuals struggling with mental illness or substance use. LADC II or LADC Assistant or evidence of a waiver through DPH BSAS.				
Foundation of Trust	Disclosure of recovery experiences and empathetic listening	Disclosure of recovery experiences, empathetic listening, ethics and practice supporting voice and choice	Shared cultural, community, and healthcare experiences	Identification of services and resources available in the area they serve	Possess sufficient knowledge and understanding of treatment and recovery from substance use disorders				
Research	Strong empirical support	Strong empirical support	Strong empirical support						
Method and Goals									
Services Delivered	Mutually supportive, non- hierarchical relationship; strength-based approach; shared personal pathway of recovery; community inclusion; accompaniment; non-clinical; integrated with behavioral health; comprehensive wellness plan; may collaborate with addiction professionals	Mutually supportive relationship, strength-based approach, sharing experience and inspiration about recovery, community inclusion, and accompaniment	Outreach, health education, cultural mediation and responsiveness, advocacy, social support, care coordination, advocacy and capacity building, accompaniment, systems navigation, and individual and community assessment	Clarify goals and strategies, education and resources, and access to treatment and recovery supports and clinical services. Participates in care team when appropriate, but not responsible for care plan.	Help individuals and their families cope with mental illness and/or substance use; work as part of a team of medical and mental health professionals providing crisis and long term care; may facilitate groups				

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Duration of Contact	For MassHealth rate, RC must have at least 5 connections over 30 days. Initial requests should be 90 units over 90-day period. <sup>7</sup>	Varied - based on program design	Varies depending on need	MassHealth registration parameters - 180 units over 90 days.	Determined by the service team and family			
Setting	Outpatient, Opioid Urgent Care Centers, EDs, Moms Do Care; close to where people live; connecting people to recovery communities; telephone, e- based, and/or face-to-face.	Multiple settings, most commonly within the traditional mental health system.	Community health centers, outreach in communities, community-based organizations, and other health care settings	Based within a Licensed Behavioral Health Outpatient Clinic or an Opioid Treatment Center, but can be deployed to any setting	Outpatient, inpatient, and residential facilities, including Acute Treatment Services and Clinical Stabilization Services			
Supervision	Supervision by trained RC Supervisor is required by some payers and typically takes place on a weekly or bi-weekly basis	DMH expects Peer Specialists to have opportunities for supervision, training and consultation	Supervised by a CHW Supervisor who is often a social worker, nurse, or former CHW and has received CHW Supervisor training	Supervised by a licensed, master's level clinician	Supervised by licensed professional			
Key Outcomes	Create a non-clinical relationship, remove obstacles to recovery, link recoverees to recovery community, and serve as a personal guide and mentor	Emotional wellness, increased self-direction/self-activation, mental health recovery, community integration, and reduced costs	Increased health care access, improved outcomes, reduced health inequities, and reduced costs	Achievement of self- determined and care plan recovery outcomes and goals	Ensuring safety and structure of program milieu by monitoring client activities, schedule, and assisting with personal needs			
Service Delivery Outcomes	Reduction in high intensity service use (ER and inpatient)	Reduction in high intensity service use (ED, inpatient, community)	Appropriate use of primary health care services and access to needed social services and resources	Increase engagement and fulfillment of recovery goals	Assist in creating stable program setting and structure			
Systems Change	Eliminate addiction stigma from health care and promote recovery	Shift mental health from staff- driven "maintenance and chronic care" to person-driven "recovery support" model	Full access to, retention and follow- through in both clinical services and community resources	Access to, retention and follow-through in both clinical services and community resources				
State Specific Administrative Considerations (MA)								
Current Systems Development and Support	DPH/BSAS	Department of Mental Health	DPH Bureau of Community Health and Prevention (Office of CHWs)	MassHealth	DPH/BSAS			
Funding	DPH/BSAS fee for service unit rate, MassHealth daily case rate, other insurers, grant funded, and private pay	Multiple DMH and MassHealth funded services, MBHP, One Care, ACO/BHCP services, some private insurance	Primarily grant funded, with increasing support through core operating budgets in ACOs and other organizations	15-minute fee for service unit rate through MassHealth	Established billing integrated into staffing			

<sup>\*</sup> Compiled by DMA Health Strategies

<sup>&</sup>lt;sup>1</sup>Peer support workers, typically called Family Partners, exist in the children's behavioral health world. For DMH, Family Partners are required "to have lived experience as a parent/caregiver of a Youth with significant social, emotional, behavioral health, medical or trauma-related needs and who is also experienced in navigating child and family-serving systems (especially the DMH system of care)" (https://bit.ly/2ThebEv). For the Children's Behavioral Health Initiative, Family Partners are required "to have lived experience, having cared for a child with special needs and navigated child-serving systems" (https://bit.ly/2GMJEIS).

<sup>2</sup> MassHealth Recovery Coach Performance Specifications

<sup>3</sup> Transformation Center, Massachusetts Certified Peer Specialist (CPS) Training Program (https://bit.ly/2Ubblhs).

<sup>4</sup> Mass.gov Community Health Worker: Certification in Massachusetts (https://bit.ly/2H4LkwT).

<sup>5</sup> MassHealth Recovery Support Navigator Performance Specifications

<sup>&</sup>lt;sup>6</sup> Performance specifications for Recovery Specialists: Spectrum, Recovery Centers of America, Veterans, Inc., Lahey Heath, Mass partnership - Clinical Stabilization Services

<sup>&</sup>lt;sup>7</sup>Recovery Support Navigator (RSN) and Recovery Coach (RC) Provider Training Registration and Billing for MBHP, June 2018 PowerPoint