

**Office of Mental Health and Addiction Services**  
**Promoting Medicaid Funded Peer Delivered Services**  
**September, 2006**

**Introduction** The Addictions and Mental Health Services Division (AMH) recognizes the indisputable value of peer delivered services in transforming a mental health service delivery system that is based on the recovery model. AMH will work with consumers/survivors and stakeholders to develop strategies to increase the use and availability of peer delivered services. The largest funding source for community-based mental health services in Oregon is Medicaid. This document summarizes current Medicaid funding mechanisms for peer delivered services.

**Current Options** to provide Medicaid funding for peer delivered services in Oregon include:

- 20 Hour Personal Care Services - An individual who is eligible for Medicaid and needs assistance with an activity of daily living (e.g., medication management, nutrition, basic personal hygiene) may select and employ a personal care assistant of their choosing, including a peer. The eligible individual must be living independently (e.g., not in foster care or a residential treatment home or facility).
- Mental Health Organizations (MHOs) provide Prevention, Education and Outreach. MHOs can support peer services through PE&O activities, which include services such as parent/family education, life skills development, prevention support activities and services integration. Prevention, Education and Outreach (PE&O) activities are provided on an individual or broad basis. These services do not result in encounterable clinical services covered by the Oregon Health Plan's mental health benefit package. The PE&O activities are reported in lump sum by the MHOs.
- MHOs may provide reimbursement for clinical interventions or services by peers who are employed by an agency certified by AMH. These peer delivered services must be part of a treatment plan, which meets the Oregon Administrative Rules for Adult Outpatient services. These services are reported with encounter codes to document the services provided by the MHO.
- Peer run organizations may apply for AMH certification and Medicaid credentialing requirements and, with approval of the Community Mental Health Program, provide the full range of Adult Outpatient services. The full range of adult outpatient services includes training requirements, clinical services, clinical supervision, etc. These services are reported with encounter codes to document the services provided by the MHO.

## **Related Information**

- The Oregon Health Plan and participating MHOs are funded primarily by federally matched Medicaid funds governed by the Centers for Medicare and Medicaid Services, and locally administered by Oregon's Department of Human Services. Medicaid was established to provide access to medical services and its rules include credentialing requirements to ensure services are provided by licensed or certified clinicians/providers.
- The Addictions and Mental Health Division, in collaboration with Community Mental Health Programs, certifies mental health agencies providing outpatient child and adult services using criteria established in Oregon Administrative Rules.
- MHOs may authorize payments to non-certified providers when a sufficient level of experience, training and supervision has been demonstrated.
- The procedure code for "Self-help/Peer Services" (H0038) is an "encounter" code used by Mental Health Organizations to document and report to DHS the provision of services. There is no state specified payment amount assigned to H0038 but some MHOs provide payment for this service.
- MHOs negotiate payment rates for the services provided. This is particularly true for encounter only codes such as H0038 that are not included in the fee-for-service payment system and are used to provide data to establish future rates.