(Julie Jacobson): Peer recovery support. Substance Use Disorder, SUD, reformed. Substance use disorder reform was passed during the 2017 legislative session. Substance Use Disorder, SUD reform, seeks to transform the service continuum from an acute episodic model to a chronic and longitudinal model.

The person centered changes will seek to provide the right level of service at the right time and treat addictions like other chronic health condition.

New services and a direct access process are part of the reform, however, prior to implementing the service and direct process, the state must seek approval from the Centers for Medicare and Medicaid, which is the federal agency that must approve the addition of new services to the State’s benefit step.

The SUD reform legislation includes a legislative directive to the (DHF) to seek the federal approval as the state is not able to do this without legislative authority. The timelines for implementation of the new services can be found at the SUD reform implementation timeline link available on the website.

SUD reform adds pure recovery support to the Medicaid benefit set. Peer support services can be provided before, during and after SUD treatment to help individuals connect with resources that support recovery.

Peers are individuals who are willing to share to personal recovery experience and often engage quickly with individuals to offer reassurance, reduce fears, answer questions, support motivation and convey hope.
At 254B.05, subdivision five, paragraph B, clause four. The reform legislation adds pure recovery support services to the Medicaid benefit set on July 1st 2018 or upon federal approval whichever is later and direct the department to seek disapproval.

The peers themselves would not be eligible for direct reimbursement. For the service to be reimbursable, the peer providing the peer support service must be employed and supervised by an eligible vendor of the service.

Peer Recovery Support and Recovery Community Organization definition. Peer support services are defined at 245G.07, subdivision one, paragraph A, clause five and include education, advocacy, mentoring through self disclosure of personal recovery experiences.

Attending recovery and other support groups with the client. Accompanying the client to appointments set support recovery.

Assistance accessing resources to obtain housing employment, educational and advocacy and non clinical recovery support to assist the transition from treatment into the recovery community.

In addition, Recovery community organization is the defined at 254B.01, subdivision 8. Recovery community organization means that an independent organization led and governed by representatives of local communities of recovery.

A recovery community organization, mobilizes resources within and outside of the recovery community to increase the prevalence and quality of long term recovery from alcohol and other drug addiction.

Recovery community organizations provide pure based (to) recovery support activities such as training of recovery peers. Recovery community organizations provide mentorship and ongoing support to individuals dealing with a Substance Use Disorder and connect them with the resources that can support each person’s recovery.
A recovery community organization also promotes a recovery focused orientation and community education and outreach programming and organize recovery focused policy advocacy activities to foster healthy communities and reduce the stigma of Substance Use Disorder.

Recovery peer qualifications. Individuals providing peer support must complete training, certification and continuing education requirements identified by the commissioner. And the training must address ethics and boundaries, mentoring, advocacy, culturally based approaches and community resources.

An individual providing peer support must have a minimum of 1 year of recovery from Substance Use Disorder. An individual providing peer support must be supervised by a qualified SUD professional who understand the responsibilities and scope of work of a recovery peer.

Recovery peer qualifications are defined at 245G.11, subdivision 8. One, have a high school diploma or its equivalent. Two, have a minimum of 1 year in recovery from Substance Use Disorder.

Three, hold the credential from the certification body approved by the commissioner that demonstrates skills and training in the domains of ethics and boundaries, advocacy, mentoring and education and recovery and wellness support.

And four, receive ongoing supervision in areas specific to the domains of the recovery peers role by an alcohol and drug (inaudible) or an individual with the certification approved by the commissioner.

Eligible vendor. The reform legislation identifies SUD programs, (withdrawal) management programs and recovery community organizations as eligible vendors of peer support services.

A recovery community organization must have a certification approved by the commissioner to be an eligible vendor. 254b.05, subdivision 1, paragraph A, identifies SUD programs and withdrawal management programs as eligible vendors.
In addition, 254B.05, subdivision 1, paragraph D, identifies a recovery community organization that meets certification requirements identified by the commissioner as an eligible vendor of peer support services.

Timeline. The reform legislation adds peer support services to the Medicaid benefit set on July 1st 2018 or upon federal approval whichever is later and directs the department to seek approval.

Staying informed. The alcohol and drug abuse division will be providing implementation, technical assistance and resources for the new services in the 2017 SUD reform legislation, through its website, frequently asked questions, fact sheets, WebEx’s et cetera, and by presenting that various conferences and other events and associations.

Jacob Owens: Thank you (Julie).

(Julie): Thanks Jacob.

Jacob Owens: Have a wonderful day.


Jacob Owens: Bye.

END