

## Regional Advisory Committee Meeting 6/17/13

### Long Island Breakout Questions

1. As we think about making peer services eligible for Medicaid funding, what concerns and suggestions do we need to consider?
  - a. To make sure that Forensic Peer Specialists are also funded by Medicaid so that we can pay for more forensic peer specialists, which are greatly needed.
  - b. Concerns that services will be limited due to low reimbursement rates and capitation by Medicaid.
  - c. To make sure that more services are added to the peer services that already exists and are paid for.
  - d. Concerns that there is not enough time allotted to complete the educational requirements for peer certification.
  - e. To make available on-the-job training, mentoring, and interning for peer specialists.
  - f. There should be family member peer specialists in addition to peer specialists, for both forensic and non-forensic.
  - g. Major concern that peer specialists will lose their integrity and become co-opted into traditional provider roles.
  
2. If peer services are funded by Medicaid, how can we make documentation more peer friendly?
  - a. Create more standardized documentation for peer specialists.
  - b. Include documentation training into the accreditation process.
  - c. Documentation should be recovery focused
  - d. Writing skills and computer skills need to be developed as part of the accreditation process so that people are competent in their skills.
  - e. Note taking should be transparent, with recipient peers involved in the writing process
  - f. Peer Specialists should be given quality tools to do their jobs, with updated and technologically current equipment.
  - g. Access to Common Ground needs to be expanded
  - h. Notes written by Peer Specialists need to actually be read by the treatment team and valued for their input.
  - i. Peer specialists need to be valued for their input and roles.
  
3. How do we insure that peer programs can take advantage of insurance funding like Medicaid?
  - a. The accreditation process and curriculum needs to be clarified and discussed for more inclusive peer input using their expertise and experience.
  - b. There needs to be training on the Medicaid rules and regs.

- c. There needs to be training on writing medically necessary notes.
4. If you had a magic wand and could make Medicaid peer friendly what would you do?
- a. Have a single payer system!!!!
  - b. Hire more peers and give them decent living wages and benefits.
  - c. Train all non-peer staff to work with peers respectfully and effectively and to understand and value peers and peer services.
  - d. Train DSS workers on Medicaid buy in.
  - e. There should be fewer disincentives to apply or reapply for Medicaid.
  - f. Peers should be doing trainings on working with peer services respectfully and effectively, as well as, understanding peers and peer services, directly to Medicaid staff.
  - g. Have strength based perspectives in the services paid for rather than services that are strictly illness focused.
5. Any other issues or concerns?

N/A