LEVEL OF CARE GUIDELINES: PEER SERVICES AND SUPPORTS – UNITED HEALTHCARE PLAN OF THE RIVER VALLEY, INC.

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INTRODUCTION

The Level of Care Guidelines is a set of objective and evidence-based behavioral health criteria used to standardize coverage determinations, promote evidence-based practices, and support members’ recovery, resiliency, and wellbeing\(^1\) for behavioral health benefit plans that are managed by UnitedHealthcare Plan of the River Valley.

The Level of Care Guidelines is derived from generally accepted standards of behavioral health practice. These standards include guidelines and consensus statements produced by professional specialty societies, as well as guidance from governmental sources such as CMS’ National Coverage Determinations (NCDs) and Local Coverage Determinations (LCDs). The Level of Care Guidelines is also derived from input provided by clinical personnel, providers, professional specialty societies, consumers, and regulators.

For more information on guiding principles for the Level of Care Guidelines and their development, approval, dissemination, and use, please see the Introduction to the Level of Care Guidelines, available at: www.providerexpress.com > Clinical Resources > Level of Care Guidelines.

Before using this guideline, please check the member’s specific benefit plan requirements and any federal or state mandates, if applicable.

PEER SERVICES AND SUPPORTS

Peer Services and Supports provide members with support, information, and the opportunity to develop skills in support of the member’s recovery. While providing these services, the Peer utilizes his/her training, lived experience and experiential knowledge to reduce the likelihood that the member will become isolated, disempowered, or disengaged. Peer services and Supports is focused on addressing the “why now” factors

\(^1\) The terms “recovery” and resiliency” are used throughout the Psychological and Neuropsychological Testing Guidelines. SAMHSA defines “recovery” as a process of change through which individuals improve their health and wellness, live a self-directed life, and strive to reach their full potential. SAMHSA defines “resilience” as the ability to adapt well over time to life-changing situations and stressful conditions. The American Society of Addiction Medicine defines “recovery” as a process of overcoming both physical and psychological dependence on a psychoactive substance, with a commitment to sobriety, and also refers to the overall goal of helping a patient to achieve overall health and well-being.
that precipitated access to this service (e.g., changes in the member’s signs and symptoms, psychosocial and environmental factors, or level of functioning) to the point that the member’s condition can be safely, efficiently and effectively treated without the support of Peer Services and Supports.

Peer Services and Supports complement the member’s behavioral health treatment, and may be delivered while the member is in treatment or in advance of the start of treatment.

Peer Services and Supports vary in intensity, frequency and duration in accordance with the member’s ability to utilize behavioral health services, manage psychosocial challenges, or otherwise make progress in achieving the member’s recovery goals.

1. Admission Criteria

- see "Common Criteria and Best Practices for All Levels of Care":

  AND

- The member has a Serious Mental Illness (SMI) or a Substance-Related Disorder.

  AND

- The member is not in imminent or current risk of harm to self, others, and/or property.

  AND

- The factors that precipitated access to this service indicate that the member requires assistance with accessing treatment and/or community resources. Examples include:
  - The member requires information about their behavioral health condition, evidence-based treatment, approaches to self-care, or community resources.
  - The member could benefit from learning skills related to problem-solving, communication, managing crises or stress, activating and engaging in self-care, or promoting recovery.
  - The member requires assistance navigating the system of care.

  AND

- The member is receiving behavioral health services, or is likely to engage in treatment with the provision of Peer Services and Supports.

2. Continued Service Criteria

- see "Common Criteria and Best Practices for All Levels of Care":

3. Discharge Criteria

- see "Common Criteria and Best Practices for All Levels of Care":

4. Clinical Best Practices

- see "Common Criteria and Best Practices for All Levels of Care":

REFERENCES*


*Additional reference materials can be found in the reference section(s) of the applicable Level of Care Guidelines and in the related Behavioral Clinical Policy

HISTORY/REVISION INFORMATION

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<th>Date</th>
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<td>• Version 1</td>
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<tr>
<td>March, 2017</td>
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\(^1\) According to Federal Register 58, Number 96, the definition of Serious Mental Illness (SMI) includes persons aged 18 or older who currently or at any time in the past year have had a diagnosable mental, behavioral, or emotional disorder (excluding developmental, dementias, mental disorders due to a medical condition and substance use disorders) of sufficient duration to meet diagnostic criteria specified within the DSM that has resulted in serious functional impairment, which substantially interferes with or limits one or more major life activities.