



Memo in Support of S.8609A/A.10665A

The Coalition for Behavioral Health supports S.8609A(Harckham)/A.10665A(Rosenthal), which would authorize peer recovery advocate telehealth services for reimbursement. Certified peer recovery advocates (CPRA) are a critical part of the behavioral health workforce and should be eligible for telehealth reimbursement just as other behavioral health services are.

The Coalition for Behavioral Health represents over 100 community-based behavioral health organizations, who collectively serve more than 600,000 New Yorkers annually with mental health and substance use issues. We have a telehealth workgroup that convenes regularly to discuss how best to provide telehealth to behavioral health clients. A key priority of our providers, frequently referenced during these meetings, is to allow CPRAs to be eligible for reimbursement for telehealth.

CPRAs provide support services that are a key part of treatment and recovery for substance use disorders. They combine their lived experience with substance use and their professional training to provide non-clinical services. These services are defined in the client's treatment or recovery plan and are integrated into the client's behavioral healthcare. CPRAs help clients to develop life skills for navigating recovery, coping habits, and more. CPRAs provide crisis support and also right with clients as they live in recovery, such as supporting clients through a job interview or apartment search.

Just like other individuals who work in behavioral health, CPRAs have formal training. The Office of Addiction Services and Supports (OASAS) regulates the certification of Peer Recovery Advocates. To become certified, peers must complete 46 hours of training, complete at least 500 hours of related work or volunteer experience, and complete at least 25 hours of supervision. CPRAs are already eligible for Medicaid-reimbursement and should be eligible for telehealth reimbursement, just as other certified and licensed professionals can receive reimbursement for telehealth services.

CPRAs have played a vital role in helping individuals in recovery during COVID-19. The pandemic has presented a substantial challenge for many individuals in substance use treatment or recovery, as their daily routines were altered and many long-standing supports were not available. CPRAs have filled this void, providing crisis services, connecting clients to online supports, and ensuring clients stayed engaged in their treatment plans.

CPRAs are an important part of the behavioral health workforce and should be able to be reimbursed for telehealth services just like other professionals. We urge the Legislature to pass S.8609A/A.10665A.