

CCH Peer Support Services (PSS): Frequently Asked Questions



Training date: April 30, 2025, [Slides](#)

Eligibility/Covered Criteria

Q: Can members living in adult group homes receive Peer Support Services?

A: Clinical Coverage Policy 8G outlines the places of service that PSS can be delivered. See Attachment A, section F in the policy.

Q: Can members with an Intellectual/Developmental Disability (IDD) diagnosis receive Peer Support Services?

A: Clinical Coverage Policy 8G outlines eligibility criteria for members with mental health or substance use disorder diagnoses. See section 3.2.1 of the policy.

Q: What documentation is required when a member is starting PSS?

A: See sections 3.2.2 Admission Criteria and 5.4: The following are required prior to providing Peer Support Services: Comprehensive Clinical Assessment, Person-Centered Plan (to include signed service order and crisis plan).

Q: Should anything be signed by a LCAS?

A: Licensed Clinical Addiction Specialists should follow statutory guidelines for their scope of practice.

Billing & Service Codes

Q: Can providers bill for the Comprehensive Clinical Assessments (CCA)?

A: Appropriately licensed individuals can bill for completing a Comprehensive Clinical Assessments. Refer to Clinical Coverage Policy 8C.

Q: How many hours of Peer Support Services can be provided/billed per day?

A: All service delivery should be based on individual member needs.

Q: When billing the H0038 code, is there a limit for units or is this a one-unit billing code?

A: H0038 is billed in 15-minute increments. See Attachment A, section C of Clinical Coverage Policy 8G.

Q: When does the billing period begin?

A: Please refer to Clinical Coverage Policy 8G for specifics around billing Peer Support Services. All admission requirements for the service must be completed prior to billing the service. See sections 3.2.2 and 5.4 in policy 8G for specifics on these requirements.

Q: What system is used for billing?

A: For billing to Carolina Complete Health, please see resources on our [Claims and Billing](#) page.

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Person-Centered Plans & National Standards

Q: Which staff can sign the Person-Centered Plan (PCP)?

A: Please review PCP information [here](#) and review section 5.4 in policy 8G specific to service orders for Peer Support Services.

Q: The Clinical Coverage Policy indicates treatment planning should occur every 90 days but does not mention PCP updates.

A: Per policy 8G, a Person-Centered Plan is required for Peer Support Services. The PCP template can be found [here](#). Additionally, in section 6.2.1 of the policy (see Peer Support Services Program Supervisor), review of the individual's goals of their PCP is noted as a requirement, with progress documented.

Q: Are the National Practice Standards/Guidelines found in Clinical Coverage Policy 8G?

A: National Practice Guidelines for Peer Specialists and Supervisors can be found [here](#). Additionally, information on the NC Certified Peer Support Specialist Program can be found [here](#).

Q: Is a specific Crisis Plan required and when does it need to be submitted?

A: There is a crisis plan template to be used in conjunction with the PCP, as a required component. It can be found [here](#). A crisis plan should be completed with the PCP and anytime updates are needed.

Q: Is there a short form WRAP appropriate to be attached to the crisis plan?

A: There is no standardized Wellness Recovery Action Plan template.

Q: Do all QPs need to take the new PCP format training that is online through the State?

A: Training Requirements can be found in section 6.2.2. Currently, the policy notes that 12 hours of Person-Centered Thinking and 3 hours of PCP Instructional Elements with Comprehensive Prevention and Intervention Crisis Plan Training are required. Information on PCP training can be found [here](#).

Group Services

Q: Is there a penalty for providers not having group services?

A: Per policy, group is not a requirement of service delivery. This should be determined based on members' needs.

Transportation

Q: Can you give transportation clarification and guidelines?

A: See section 5.3.h in Clinical Coverage Policy 8G for additional information related to transportation.

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Supervision and Staffing

Q: Can Clinical Directors supervise Peer Support Specialists?

A: All staffing requirements specific to Peer Support Services can be found in Clinical Coverage Policy, 8G. See sections 6.2.1. Staff Requirements.

Q: Are there special requirements or training for the Program Manager?

A: Staff and Training Requirements can be found in sections 6.2.1 and 6.2.2 of policy 8G.

Resources

1. [Peer Support Services \(PSS\), 8G \(PDF\)](#)
2. [NCDHHS Person Centered Planning](#)
3. [National-Practice-Guidelines-for-Peer-Specialists-and-Supervisors-1.pdf](#)
4. [CCH Claims and Billing](#)

Last Revised: June 18, 2025