



**Testimony:
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Before the

Maryland Senate: Finance Committee

on

**SB 765: Maryland Medical Assistance Program – Clinical Services Provided by
Certified Peer Recovery Specialists**

March 7, 2018
3 East Miller Senate Building
Annapolis, Maryland

Thank you, Chair and members of the committee. My name is Nate Thomas. I am here to support SB 765, and Medicaid coverage for services delivered by peer recovery specialists in Maryland.

I am the Lead Peer Recovery Specialist for the Supportive Housing team at Health Care for the Homeless. I'm also a licensed Certified Peer Recovery Specialist, and a Registered Peer Supervisor. I've been committed to Peer work for more than 10 years now, and during this time I have come to know that Peers are an essential ingredient in the physical and mental health, prosperity and stability for our most vulnerable citizens. In some cases, there is a connection between a Peer and a client that is literally unattainable by licensed professionals, and in most cases we, as Peers, are the pathway to life-saving services. There's an old saying (that I just made up over the weekend): "You can lead a horse to water but sometimes it takes a Peer to let them know it's safe to drink."

Peer support has existed in behavioral health for decades. Its rapid growth in recent years is for good reason. Research and experience show that peer support providers have a transformative effect on both individuals and systems. Peer support has been shown to:

- Improve quality of life
- Improve engagement and satisfaction with services and supports
- Improve whole health, including chronic conditions like diabetes
- Decrease hospitalizations and inpatient days
- Reduce the overall cost of services

While we all know that doctors, psychiatrists and therapists play a huge role in the quality of life for those with behavioral and physical illness, we must ask ourselves, *What good is a primary care physician to a patient who won't see him or her? What good is a therapist to a client so overcome by depression that he or she can't leave his or her home?* I'm here to tell you there have been countless clients of mine who have suffered severely, simply because they didn't feel comfortable or worthy enough to get the treatment they needed so badly. There were also numerous clients who just did not have the memory it takes to attend scheduled appointments, and even more who felt alone, rejected and abandoned by their family members and society as whole. It is with these very clients that Peer work has proven so effective—and the difference between a client embracing the fullness of life and just being alive.

I recall a client of ours who had experienced homelessness and become housed—and who, as soon as the ink dried from his signature on the lease, used his home as a hiding space. He literally cut himself off from the world and ate himself into a state of unhealthiness. The only time he opened his front door was to pay for food he had ordered, which over time caused him to gain an unimaginable amount of weight, which then lead to diabetes. There were times this client didn't feel worthy of being alive. It took not only the skill set of a therapist, but the unwavering support, advocacy and dedication of a Peer to pull this client out from his own demise. It was the Peer-to-client trust-filled relationship that allowed the client to trust the process. While appointments were scheduled, it was "Peer Power" that reminded the client, escorted and supported him. It was the mix of "Peer Power" and therapy that allowed this client to feel safe enough to once again go out and purchase groceries and break free from his "lock-down" mindset. He is now receiving proper behavioral health and medical care. He is building, nurturing and enjoying new relationships, and as he puts it, he is "Getting fly for the ladies." His growth was in full display at the annual holiday dinner we do for our clients each December: his brand, new haircut and groomed appearance were only superseded by his illuminating confidence and self-worth.

It is a fact that Maryland is behind the curb with having Peer work become reimbursable, as **41 states** already have this practice in place! That's right: Maryland is one of only 9 states that haven't made this change. Let's get on board and get this train chugging forward, for the sake of our beloved citizens. If not now, then when? If not us, then who?

Thank you for supporting SB 765 and Medicaid coverage for our Peer Recovery Specialists in Maryland!