State Recognition of the CPRP Credential

ARIZONA
AHCCCS (the state Medicaid authority) and the Arizona Department of Health Services officially recognized the CPRP in a letter directed to T/RBHA agencies within the state: "We concur that individuals who are CPRPs can be recognized as Behavioral Health Technicians and could be individually privileged to conduct assessments and/or serve as a clinical liaison..." (Also see A.A.C. R9-20-204. Staff Member and Employee Qualifications and Records, Section F.)

FLORIDA
The USPRA requirements have been determined to be acceptable in meeting certification requirements in Florida. Therefore, individuals delivering psychosocial rehabilitation services to Medicaid recipients may be certified by either the Florida Certification Board as a Behavioral Health Technician or by the United States Psychiatric Rehabilitation Association as a Certified Psychiatric Rehabilitation Practitioner. (Letter, 10/13/2005; from Beth Kidder, Bureau of Medicaid Services; to Bob Sharpe, Florida Council for Community Mental Health)

GEORGIA
Includes the APRP/RPRP/CPRP in the qualifications for staff providing Peer Supports for Adults and Psychosocial Rehabilitation Services. Below are the definitions for the respective services and the description of staff qualifications relating to the IAPSRS registry/credential for each service:

**Peer Supports for Adults Y3022 Peer Supports**
This service provides structured, scheduled activities that promote socialization, recovery, self-advocacy, development of natural supports, and maintenance of community living skills, under the direct supervision of a mental health professional. A Consumer Peer Support Center maintains adequate staff support to enable a safe, structured environment in which consumers can meet and provide mutual support. Services are geared toward consumers with severe and persistent mental illness. These consumers may have concomitant substance abuse disorders or concomitant mental retardation. The purpose of a Peer Supports service is to provide an opportunity for consumers to direct their own recovery and advocacy process and to teach and support each other in the acquisition and exercise of skills needed for management of symptoms and for utilization of natural resources within the community.

**Staffing Requirements**
The program must be under the clinical supervision of a MHP, preferably a consumer who is a Georgia certified Peer Specialist, and preferably who is credentialled by IAPSRS as an Associate Psychosocial Rehabilitation Professional (APRP) or Registered Psychiatric Rehabilitation Professional (RPRP), or who can demonstrate activity toward attainment of certification as a Certified Psychiatric Rehabilitation Professional (CPRP). All staff are encouraged to seek and obtain Georgia certification as a Peer Specialist and IAPSRS APRP, RPRP or CPRP credentials. The individual leading and managing the day-to-day operations of the program must be a Georgia certified Peer Specialist, who is an APRP, RPRP, CPRP or can demonstrate activity toward attainment of APRP, RPRP, or CPRP registration or certification.

**Psychosocial Rehabilitation Y3032**
Psychosocial Rehabilitation is an organized program based on psychosocial rehabilitation philosophy, principles and values to assist persons with long term psychiatric disabilities increase their functioning so that they are successful and satisfied in the environments of their choice with the least amount of ongoing professional intervention. Psychosocial Rehabilitation is a therapeutic, rehabilitative, social skill building service for individuals to increase and maintain competence in normal life activities and gain the skills necessary to allow them to remain in or return to naturally occurring community programs. Services include, but are not limited to: individual or group skill building activities that focus on the development of problem-solving techniques self-medication skills, cognitive and psychosocial functioning, and illness management. Services must be provided in a clinic or other facility based setting.

**Staffing Requirements**
The program must be under the clinical supervision of a MHP who is credentialed as a Registered Psychosocial Rehabilitation Professional (RPRP) or a Certified Psychosocial Rehabilitation Professional (CPRP) or who can demonstrate activity toward attainment of certification. Services must be provided and/or activities led by staff who are: a MHP, a SAM, or a Peer Specialist, CPRP, or Paraprofessional under the supervision of a MHP or SAM.

There must be a MHP present face-to-face at least 50% of all times the service is in operation up to 20 hours per week, regardless of the number of consumers participating. There must be a maximum face-to-face ratio of an average of not more than twelve (12) consumers to one (1) direct service/program staff (including RPRPs and CPRPS), based on average daily attendance of consumers in the program.

At least one CPRP (or person demonstrating activity toward attainment of certification) must be on-site face-to-face at all times (either the supervising MHP or other CPRP staff) while the program is in operation, regardless of the number of consumers participating. All staff are encouraged to seek and obtain IAPSRS RPRP or CPRP credentials. All staff must have an understanding of recovery and psychosocial rehabilitation principles as published by IAPSRS and must possess the skills and ability to assist consumers in their own recovery processes. An MHP or SAM may be shared with other programs so long as these professionals are available as required for supervision and clinical operations and so long as they are not counted in consumer to staff ratios for two different programs operating at the same time.

HAWAII
Requires the CPRP for head of service for psychiatric rehabilitation programs, as follows: Psychosocial Rehabilitation Program – Personnel Requirements

1. The PSR program shall be under the clinical supervision of a Qualified Mental Health Professional (QMHP) who is credentialed as a Registered Psychosocial Rehabilitation Professional (RPRP) or a Certified Psychosocial Rehabilitation Professional (CPRP), or can demonstrate activity toward attainment of certification.

2. Services shall be provided and/or activities led by staff who are QMHP, a Peer Specialists, or others who are under the supervision of a QMHP.

3. One staff shall be CSAC. Staff training, based on evidenced based best practices, shall be provided to direct care staff on screening, early intervention (including stages of readiness) and referral techniques for co-occurring substance disorders.

4. There shall be a QMHP physically present providing direct face-to-face services fifty percent (50%) of all times the service is in operation up to 20 hours per week, regardless of the numbers of consumers participating.

5. There shall be an average face to face ratio not to exceed more than twelve (12) consumers to one (1) direct service/program staff, based on the average daily attendance of consumers in the program.

6. All staff are encouraged to seek and obtain an International Association of Psychosocial Rehabilitation Services (IAPSRS), RPRP, or CPRP credentials. All staff must have an understanding of recovery and psychosocial rehabilitation principles as published by IAPSRS and shall possess the skills and ability to assist consumers in their own recovery process.

7. Staff may be shared with other programs as long as these professionals are available as required for supervision and clinical operations and they are not counted in consumer staff ratios for two different programs operating at the same time. Program shall employ a peer specialist at least on a part-time basis.

8. For those PSR programs that directly provide a fitness restoration program, (rather than arrange for this service), program staff shall be trained in fitness restoration.

ILLINOIS
Recognizes the CPRP credential as the fulfillment of training requirements for psychiatric rehabilitation
practitioners.

IDAHO
131. PSYCHOSOCIAL REHABILITATIVE SERVICES (PSR) - AGENCY STAFF QUALIFICATIONS.

03. Psychosocial Rehabilitation (PSR) Specialist.
   a. As of June 30, 2009, persons who are working as PSR Specialists delivering Medicaid-reimbursable mental health services may continue to do so until January 1, 2012, at which time they must be certified as PSR Specialists in accordance with USPRA requirements.
   b. As of July 1, 2009, applicants to become PSR Specialists delivering Medicaid-reimbursable mental health services must have a bachelor’s degree from a nationally-accredited university in Primary Education, Special Education, Adult Education, Counseling, Human Services, Early Childhood Development, Family Science, Psychology, or Applied Behavioral Analysis. Applicants who have a major in one (1) of these identified subject areas, but have a bachelor’s degree in another field, also meet this requirement.
   c. An applicant who meets the educational requirements under Subsection 131.03.b. of this rule may work as a PSR Specialist for a period not to exceed eighteen (18) months while under the supervision of a staff member with a Master's degree or higher credential or a certified PSR Specialist. In order to continue as a PSR Specialist beyond a total period of eighteen (18) months, the worker must obtain the USPRA certification.
   d. An individual who has been denied licensure or who is qualified to apply for licensure to the Idaho Bureau of Occupational Licenses, in the professions identified under Subsections 131.01 through 131.03 of this rule, is not eligible to provide services under the designation of PSR Specialist with the exception of those individuals who have obtained the USPRA PSR Specialist certification.

IOWA
(Proposed: Chapter 24 New Indicators and Definitions) Intensive Psychiatric Rehabilitation Practitioner means a person who “holds a bachelor’s degree with 30 semester hours or equivalent quarter hours in a human services field (including, but not limited to, psychology, social work, mental health counseling, marriage and family therapy, nursing, education, occupational therapy, and recreational therapy) and at least one year of experience in the delivery of services to the population groups that the person is hired as Psychiatric Rehabilitation Practitioner to serve; and plus at least 60 contact hours of training in intensive psychiatric rehabilitation; or has a CPRP and at least 60 contact hours of training in intensive psychiatric rehabilitation.”

LOUISIANA
1. The program must be under the supervision of an LMHP and who is on site a minimum of 50% of program operating hours. The supervising LMHP shall either be certified by IAPSRS or eligible for certification with a written plan for achieving IAPSRS certification within 12 months of certification.

2. As allowed by the applicable Louisiana Practice Act, the following individuals may provide psychosocial skills building (group):
   a. LMHP; or
   b. MHP under the supervision of a LMHP; or
   c. MHS under the documented supervision of a MHP or LMHP

From “Service Definitions / Staffing Requirements; Psychosocial Rehabilitation Skills (Adults)"

MAINE
Ties the credential to the definition of a Qualified Mental Health Professional: The MHRT/Community certificate (formerly MHRT II/III) applies to MaineCare “other qualified mental health professionals” providing services to adults. This includes providers of support services, assertive community treatment, medication services, and day treatment/rehabilitation services as outlined in Chapter II of the MaineCare Benefits Manual Section 17. – Procedural Guidelines for Mental Health Rehabilitation Technician (MHRT/Community) Certification (August 2002).

The State of Maine has determined that the foundation of the education, experience, and training eligibility requirements for the CPRP is comparable to that of the MHRT/C certification. Therefore,
individuals with the CPRP certification are eligible for full MHRT/C certification. Those individuals wishing MHRT/C certification must submit an application and documentation of the CPRP certification to the Center for Learning in accordance with the August 2002 “Procedural Guidelines for MHRT/Community Certification.” – State of Maine Department of Behavioral and Developmental Services.

MARYLAND
Taken from COMAR 10.21.21.10 - Community Mental Health Programs (Adults)
G. Psychiatric Rehabilitation Staff. The program director shall employ psychiatric rehabilitation staff, including:
(1) At least one rehabilitation specialist who:
   (a) Is either a:
      (i) Licensed mental health professional;
      (ii) Rehabilitation counselor who is currently certified by the Commission on Rehabilitation Counselor Certification; or
      (iii) Bachelor’s prepared Certified Psychiatric Rehabilitation Practitioner currently certified by the U.S. Psychiatric Rehabilitation Association; and
(2) Direct service staff who:
   (a) Have 60 hours of on-the-job direct PRP supervision before providing PRP services without direct supervision;
   (b) At a minimum, have:
      (i) A bachelor’s degree in a health related field;
      (ii) An associate’s degree in a health related field;
      (iii) 30 hours, or its equivalent, of college credit toward a bachelor degree in a health-related field; or
      (iv) A high school diploma or equivalency diploma and one year of experience in a supervised mental health setting.

MINNESOTA
A mental health professional as defined in section 245.462, subdivision 18, clauses (1) to (5). If the recipient has a current diagnostic assessment by section 245.462, subdivision 18, clauses (1) to (5), recommending receipt of adult mental health rehabilitative services, the definition of mental health professional for purposes of this section includes a person who is qualified under section 245.462, subdivision 18, clause (6), and who holds a current and valid national certification as a certified rehabilitation counselor or certified psychosocial rehabilitation practitioner.

NEW JERSEY
From PARTIAL CARE SERVICES STANDARDS
(a) The PA shall be sufficiently staffed with personnel, who are licensed, when required, appropriately credentialed, culturally competent and sufficiently trained to provide PC services as set forth in this chapter. Staff may be engaged on a full time, part time or consulting basis, provided that services are adequate to meet the program needs of participating consumers.

4. The primary case coordinator or counselor shall:
   ii. Possess a bachelor's degree in a human services field, or an associate's degree and two years experience in providing human services, or five years of human service experience, or possess a relevant professional credential, such as Certified Psychiatric Rehabilitation Practitioner, bachelor's degree in social work, certified rehabilitation counselor, certified alcohol and drug counselor, bachelor's degree in rehabilitation, or bachelor of science in nursing.

5. The mental health services worker shall:
   i. Have primary responsibility for the provision and coordination of program services; and
   ii. Possess a bachelor's degree or associate degree in psychosocial rehabilitation or mental health services, or possess related life or work experience, such as assuming leadership roles during participation in mental health services or mental health consumer initiatives, or possess one of the following credentials: Certified Psychiatric Rehabilitation Practitioner or Community Mental Health Associate.
(c) Each PA shall designate staff to take primary responsibility for providing prevocational and integrated treatment for co-occurring mental health and substance abuse disorders services. Such designated staff members shall possess the qualifications for the primary case coordinator or counselor position and shall have training and experience in providing the specialized service.

1. Qualifications for the primary staff providing pre-vocational services must include one year's experience in providing services such as supported employment or job coaching, vocational evaluation, welfare to work, community rehabilitation services, transitional employment, other work experience programs for consumers and recent relevant training or possess one of the following: certified rehabilitation counselor, licensed rehabilitation counselor, master's or bachelor's degree in rehabilitation counseling, Certified Psychiatric Rehabilitation Practitioner, or vocational instructor as defined by the New Jersey State Board of Education.

NEW YORK
New York has implemented a new Medicaid option called Personalized Recovery-oriented Services (PROS). Recognition of the CPRP is related to the definition of professional staff:

“PROS providers must maintain an adequate and appropriate number of professional staff relative to the size of the clinical staff.”

1. A Comprehensive PROS provider will be deemed to have met such standard if at least 40 percent of the total clinical staff full-time equivalents (FTEs) are represented by professional staff.

2. A Limited License PROS program will be deemed to have met such standard if at least 20 percent of the total clinical staff FTEs are represented by professional staff.

3. For the purpose of calculating professional staff ratios, a provider may include staff credentialed by the International Association of Psychosocial Rehabilitation Services (IAPSRS) for up to 20 percent of the professional staffing requirements.”

PENNSYLVANIA
Ties the CPRP to the staff qualifications to be met by a provider in order to be reimbursed for psychosocial services under Medicaid. Psychiatric Rehabilitation Medical Necessity Criteria and Standards [02/01/01]

III. Program Requirements
A. Staff Qualifications
   6. At least 25% of all staff within each psychiatric rehabilitation program must be registered/certified through the International Association of Psychosocial Rehabilitation Services (IAPSRS) as psychiatric rehabilitation practitioners within a two-year timeframe of program start-up.

VIRGINIA
Ties the RPRP and the CPRP to the Qualified Mental Health Professional and the Para-Professional definitions:
"Qualified Mental Health Professional (QMHP)" means a clinician in the health professions who is trained and experienced in providing psychiatric or mental health services to individuals who have a psychiatric diagnosis."

In the commonwealth of Virginia, authorized professionals and minimal qualifications for a QMHP are as follows:

1. Physician: a doctor of medicine or osteopathy, licensed in Virginia; 2. Psychiatrist: a doctor of medicine or osteopathy, specializing in psychiatry and licensed in Virginia;

3. Psychologist: an individual with a master's degree in psychology from an accredited college or university with at least one year of clinical experience;
4. **Social worker**: an individual with a master's or bachelor's degree from a school of social work accredited or approved by the Council on Social Work Education with at least one year of clinical experience;

5. **Registered nurse**: a registered nurse licensed in Virginia with at least one year of clinical experience;

6. **Mental Health Worker**: an individual with at least a bachelor degree in human services or related field, or other degree deemed equivalent to those described, from an accredited college and with at least one year of clinical experience; OR a Registered Psychiatric Rehabilitation Provider (RPRP) registered with the International Association of Psychosocial Rehabilitation Services (IAPSRS) as of January 1, 2001; OR an individual with at least a bachelor's degree, from an accredited college in an unrelated field with an associate's degree in a human services field and who has at least three years clinical experience; OR an individual with at least a bachelor's degree from an accredited college and certification by the International Association of Psychosocial Rehabilitation Services (IAPSRS) as a Certified Psychiatric Rehabilitation Practitioner (CPRP); OR an individual with at least a bachelor's degree from an accredited college in an unrelated field that includes at least 15 semester credits (or equivalent) in a human services field and who has at least three years clinical experience.

**Para-Professionals** in mental health must, at a minimum, meet one of the following criteria: Associate Psychiatric Rehabilitation Provider (APRP), as of January 1, 2001;

2. An Associate's Degree in a related field (social work, psychology, psychiatric rehabilitation, sociology, counseling, vocational rehabilitation, human services Community Mental Health Rehabilitative Services counseling) and at least one year of experience providing direct services to persons with a diagnosis of mental illness or gerontology and special education.

3. A minimum of 90 hours classroom training and 12 weeks of experience under the direct personal supervision of a QMHP providing services to persons with mental illness and at least one year of experience (including the 12 weeks of supervised experience). Direct personal supervision means that the QMHP is on-site at all times and countersigned all documentation. Please refer to the “Exhibits” section for the 90-hour training program for paraprofessionals.

4. College credits (from an accredited college) earned toward a bachelor's degree in a human service or related field (social work, gerontology, psychology, psychiatric rehabilitation, special education, sociology, counseling, vocational rehabilitation, and human services counseling) that are equivalent to an associate's degree will be accepted to meet the educational requirements. One-year's clinical experience is also required. The experience may include supervised internships, practica, and field experience.

5. **Licensed Practical Nurse** – licensed by the Commonwealth and with at least one year of clinical experience. The clinical experience may include supervised internships, practica, and field experience.

6. Certification by the International Association of Psychosocial Rehabilitation Services (IAPSRS) as a Certified Psychiatric Rehabilitation Practitioner (CPRP). [Community Mental Health Rehabilitative Services, Chapter II: Provider Participation Requirements, pp. 5 & 6, 050102]