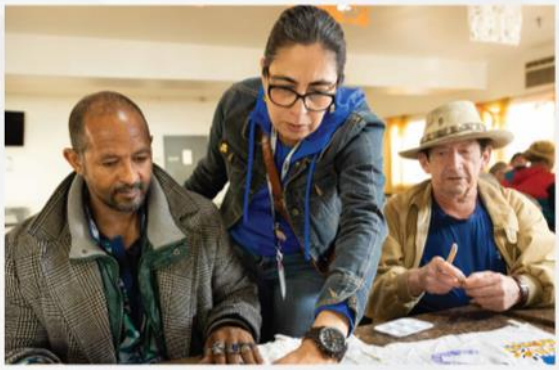
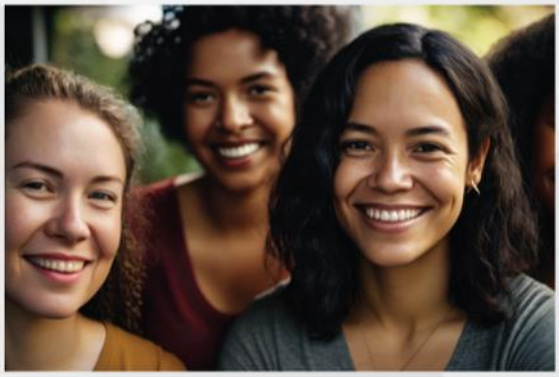




Medi-Cal Peer Support Specialist Training Provider Guide

JULY 2026

CalMHSA

California Mental Health Services Authority

Table of Contents

WELCOME

The California Mental Health Services Authority (CalMHSA) serves as the certifying body for Medi-Cal Peer Support Specialist certification in California. Our responsibilities encompass certification, examination, and enforcement of professional standards. Additionally, we oversee the California Certification Registry for certified professionals, handle consumer complaints, and administer disciplinary actions for violations of the Code of Ethics. As the certifying entity, we approve training providers to ensure compliance with quality standards in peer support education.

CalMHSA collaborates with its Stakeholder Advisory Council and County Behavioral Health Plans to ensure that the voices of peers are duly represented in our certification program. Our certification process adheres to state standards outlined in Chapter 7, Part 3, Article 1.4, Division 9 of the Welfare and Institutions Code.

We are thrilled by your interest in becoming an approved training provider for the CalMHSA Medi-Cal Peer Support Specialists Certification Program. This guide furnishes crucial details for achieving approval as a training provider, facilitating professional development and progress in peer support. By reviewing this application, you embark on the initial phase of joining esteemed CalMHSA-training providers dedicated to delivering top-tier training and bolstering the behavioral health workforce within Medi-Cal programs.

The Training Provider Application Guide furnishes prospective training providers with comprehensive information on the process of becoming a CalMHSA-approved provider. For additional information, please visit the certification website www.capeercertification.org

CalMHSA
California Mental Health Services Authority

General Information

APPLICATION CYCLES

Training applications are accepted during the designated annual cycles (subject to change):

- January 1 – 31: Continuing Education (CE) Training (hours *vary*)
- April 1 – 30: Specialized Training (40 hours) (40 hours)
- July 1 – 31: Medi-Cal Peer Support Specialist Training (80 hours)

Note: Application timelines and eligibility may vary. Please visit the certification program website for the latest updates, including language-specific offerings.

How to Apply

- Applications must be submitted electronically through the certification program website.
- A separate application and fee is required for each training type and language. Example: If a training provider is applying to offer Continuing Education (CE) in both English and Spanish, they must submit two separate applications and pay the corresponding fees for each.
- For step-by-step instructions, see Directions for Submitting an Application below.

TRAININGS IN SPANISH LANGUAGE

Applications for Spanish language trainings are accepted **during the open annual cycles**. All participant material must be written in Spanish (i.e., policies, evaluations, certificates, etc.).

TRAINING PROVIDER APPROVAL PERIOD

Application Review:

- CalMHSA will review the application and make an approval decision within 90 days of receiving a completed application.
- CalMHSA uses a standardized review process to evaluate all training provider applications. Applications are reviewed against the landscape analysis and curriculum

competencies outlined in the Document Requirement Guidelines, using consistent internal review tools and criteria. As part of this process, please note that applications found not to meet the required standards may be denied without the opportunity to revise or resubmit, at CalMHSA's discretion.

- Applicants who disagree with a denial decision may pursue the formal appeal process outlined in their notification letter.

Approval and Contract Execution:

- If the application is approved, training providers have up to 12 months from the approval date to execute a contract with CalMHSA.
- The contract must be signed within this 12-month period.

Recognition Period:

- Upon executing the agreement, training providers will be recognized as a CalMHSA-approved training provider for up to 2 years.
- This recognition period starts from the end of the initial 90-day review period.

PRE-APPLICATION CONSIDERATIONS

- Prospective training providers are highly encouraged to read the application in its entirety before applying to become training providers. Prospective providers are expected to submit all required information to avoid processing delays.
- Only electronic applications will be accepted through the CalMHSA certification website. A completed application includes: 1) online application, 2) associated fees, and 3) training materials within the approved timeframe.
- Applications that do not meet the required timeframes will be denied. Please make note of application processing times prior to applying to avoid any processing delays.

CONTRACT AGREEMENT

CalMHSA requires a fully executed contract between the training provider and CalMHSA before the commencement of training is permitted. Prospective training providers ***may not*** begin training or advertisement for training courses until written approval is received from CalMHSA.

COPYRIGHT MATERIAL

CalMHSA cannot accept any training material or supplemental training material that is subject to copyright. If your agency wishes to use training material developed by a different organization, written proof of copyright permission must accompany the training application.

RESPONSIBLE USE OF ARTIFICIAL INTELLIGENCE (AI)

Training providers who utilize AI tools must do so in a manner consistent with responsible AI practices, exercising sound judgment and accountability. When AI is employed to assist with content development, communication, design, or other training-related functions, providers are responsible for validating the accuracy, appropriateness, and compliance of outputs with established training objectives and regulatory requirements.

REQUIRED NAMING FOR COURSES

To ensure clarity and consistency across all training programs, it is imperative that the titles and language used strictly adhere to the appropriate naming conventions for the approved course(s). This uniformity must be maintained in course material, including but not limited to, course titles, training materials, marketing materials, and certificate of completion. Non-compliant training materials will not be acceptable.

The following naming conventions must be followed:

- Medi-Cal Peer Support Specialist Training
- Parent, Caregiver, and Family Member Peer
- Peer Services in Crisis Care
- Peer Services for Unhoused
- Peer Services for Justice Involved

Application Information

APPLICATIONS

Applications are submitted on the CalMHSA certification website application portal. An application must be completed for each training type for which you wish to apply.

FEES

A non-refundable training provider application fee must accompany this application. **Fee must be paid at the time of application submission or no later than 72 hours from the submission of the application.** An application must be completed, and a fee is required for each training type for which you wish to apply. *The non-refundable application fee is considered an administrative fee.*

PROCESSING AND REVIEW TIME

CalMHSA will process complete applications within 90 days of receipt. It is the training provider's responsibility to make necessary revisions in a timely manner to avoid processing delays. Applications exceeding the 90-day review are subject to denial.

Incomplete applications will be held for three business days from the date submitted. Applications that remain incomplete will be voided; fees will be forfeited and will require a new application. The training provider bears responsibility to provide a complete application.

QUALITY ASSURANCE

Site Visit. A CalMHSA representative may conduct periodic visits to an approved training provider site. CalMHSA will provide reasonable notice to the training provider in advance of the visit.

Quality Assurance Review. CalMHSA may review the training provider's training records, including training content, participant records, marketing material, and other related materials to monitor compliance with the guidelines and contractual agreements.

Data Collection. Training providers are required to collect and maintain the following data for training participants, including, but not limited to:

1. Contact information including: legal name, telephone number, and email address.
2. Dates of training registration/enrollment.

3. Language(s) in which the training was delivered.
4. Format or modality of training (in-person, asynchronous, online, and/or hybrid).
5. Course completion statistics, including non-completions.
6. All reasonable accommodation(s) requested and/or provided, if applicable.

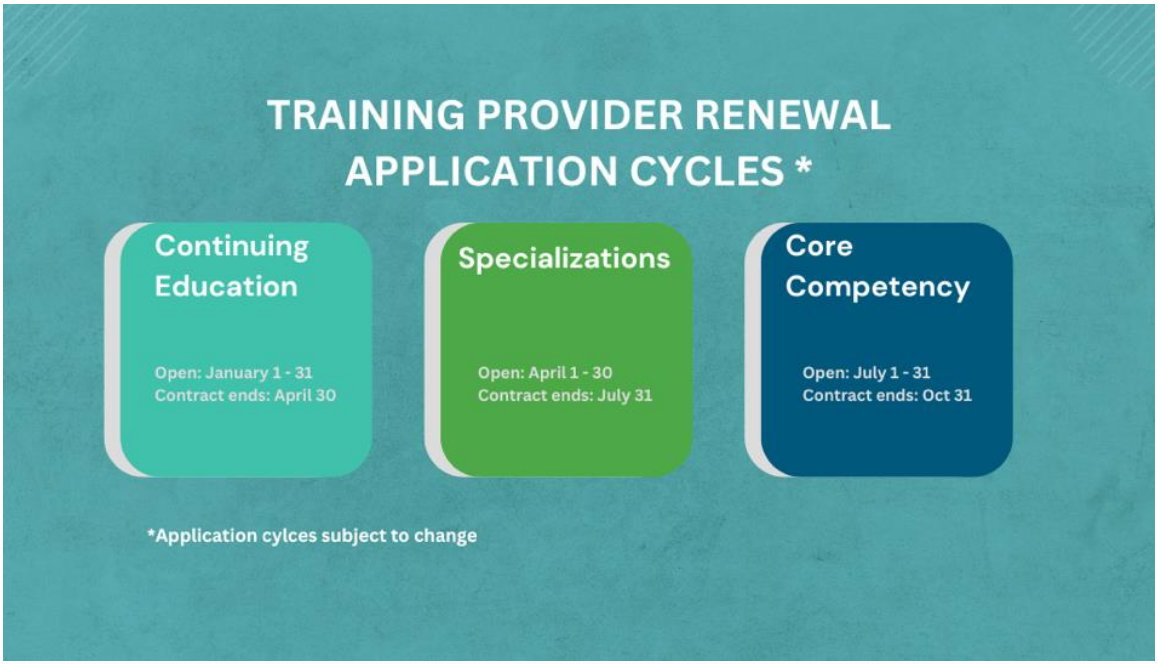
Please note: Data collection is subject to change based on updated guidelines by the Department of Health Care Services.

RENEWAL OF CALMHSA TRAINING PROVIDER RECOGNITION

Only currently approved providers may apply for renewal to maintain their CalMHSA-approved status. Renewals are offered on a two-year cycle and must be submitted online during the designated application cycle, including all required fees, **before the provider's contract with CalMHSA expires**.

The **Training Provider Renewal Application** is intended for programs with **minor to no revisions** to the approved curriculum. Providers with significant changes must also submit a **Modification Request Form** with the renewal application.

Renewals apply only to currently approved courses and languages (e.g., an 80-hour English Medi-Cal Peer Support Specialist course must be renewed as-is). This process is also an opportunity to review and update training materials in alignment with current CalMHSA standards.



TRAINING CURRICULUM MODIFICATION REQUEST

CalMHSA maintains high-quality standards, therefore, any substantive changes to approved training curricula require approval prior to using the updated material. Substantive modifications include major changes to content, structure, or learning objectives. Updated curricula must meet CalMHSA's quality standards, as outlined in this guide. Curriculum modification requests are subject to fees. Submit modification requests at least 90 calendar days before the planned implementation date, including all required fees.

Detailed submission instructions and additional requirements are available here.

Directions for Submitting an Application

Complete applications must be submitted electronically. Hard copy or handwritten submissions will not be accepted. Only complete applications will be reviewed. Electronic applications must be submitted through the CalMHSA certification website application portal. Training providers must complete one application per interested training. For example, if a training provider is interested in applying for two specialized training areas, then they must submit two separate applications and payment of fees for each application.

To apply, please use the register/login button located on the top right of the website to register and create an account. Only complete applications will be reviewed.

OVERVIEW OF PROCESS

1. Training provider submits a complete application and payment. (CalMHSA will send an email confirmation of application).
2. Training provider must upload a single combined pdf document of their training material with their application.
3. CalMHSA will begin the application review once application Is submitted and associated fees Is paid ("90-day processing period").
4. CalMHSA will notify training providers via email of the status of their application.
5. Contracting phase begins for approved training providers.

STEP-BY-STEP PROCESS

Step 1 – Submission of Applications

Training providers are required to provide the following information at the time of submission. Please review the appendix for specific requirements for each file.

1. Submit a complete Training Provider Application and payment. Applications must include the following application information:

   - CA Business License Number/non-profit number/exception ID
   - Name and contact information of the dedicated training coordinator
   - Language in which the training will be delivered
   - Training modality: In-person, hybrid, asynchronous (self-paced) and/or online

- Total training hours of the course (minimum hour requirement must be met)

2. General Agency Files:

- A completed Provider Application Checklist
- A completed Training Provider Agency form of your agency to be added to the CalMHSA certification website, upon approval
- A file with your agency's logo: transparent .jpg or .png format
- Instructor(s) information/qualifications (include CV, resume, biography, etc.)
- Proposed training fee/cost for course
- Proposed yearly training schedule with published dates and times
- Sample training marketing material.

  Note: marketing of training prior to receiving CalMHSA approval and agreement is not permitted.

3. Policies and Procedures (see appendix for requirements on each document):

- A documented enrollment/registration process and procedures
- Documented course completion information, including make-up of assignments and quizzes, etc.
- A documented process for issuance of certificate of attendance or completion
- A digital sample of certificate of attendance or completion (must meet requirements set below)
- A documented course refund/cancellation process. The policy must have a mechanism for refunds.
- A documented leave of absence request process
- A documented reasonable accommodation (ADA) policy
- A documented anti-discrimination and anti-harassment policy
- A documented complaints process to address complaints against the program, trainer, and/or institution and resolution procedures including process timelines.
- A documented record retention policy. (Training providers are required to maintain participant records for a minimum of 3 years unless a longer period of records retention is stipulated under Agreement with CalMHSA.)
- A documented process for evaluation of training course and trainer(s)
- A digital sample of the evaluation form (must meet requirements set below)

Step 2 - Submission of Training Content – New Providers Only

Submitting Training Content (review appendix for specific requirements):

1. Training providers seeking initial approval must submit a complete, single combined PDF file, of the training course to their application on the portal within from the time of the request.
2. Training providers seeking renewal for their approved training are not required to upload their curriculum and will be subject to a full review during provider audits.
3. All training content submitted must be accompanied by the appropriate CalMHSA crosswalk for specific training materials required, depending on each application submission. This crosswalk is used by program staff to navigate the training material submitted; therefore, no exceptions will be granted for this requirement.

Step 3 – Review of Complete Application

CalMHSA will begin the application review process. Please note, this will start the 90-day processing period. During the 90-day application processing period, minor revisions may be requested via email. If revisions are requested by CalMHSA, it is the training provider's responsibility to provide timely revisions, as applicable.

Step 4 – Application Status

Upon successful completion of the policy and curriculum review, training providers will receive an email notification from CalMHSA confirming approval and outlining the steps required to complete the contracting phase. The following section details each required step.

Please note: Training providers have **12 months** from the date of the approval notice to fully execute a contract with CalMHSA. Training may not begin until a contract is fully executed.

Action 1 – Confirm Your Interest

Training providers must respond to the CalMHSA approval email within **10 days** of receipt to confirm intent to proceed with the contracting phase. Failure to respond within this timeframe may affect the provider's approval status.

Action 2 – Introductory Meeting with CalMHSA

New Training Providers An introductory meeting with the CalMHSA Peer Certification Team is required for all new training providers. Upon confirmation of interest, CalMHSA will provide available dates and times to schedule this meeting.

Existing Approved Training Providers Applying for an Additional Provider Type

An optional 30-minute orientation meeting is available for existing approved providers applying for an additional provider type (80-Hour, Specialization, or Continuing Education). The meeting provides an overview of the new provider type requirements and an opportunity to address any questions. This meeting is not required. If you do not wish to schedule a meeting, proceed to Action 3.

Action 3 – Submit Required Documentation

The following must be submitted to CalMHSA before the contract can be finalized:

- **Contract contact information:** The full name and email address of the individual responsible for contractual obligations on behalf of the organization.
- **Revised Certificate of Completion** *(CE Providers Only):* Resubmit a digital sample of your Certificate of Completion with your assigned CalMHSA CE Provider identification number included. Your CE Provider number will be provided in your approval email.

Action 4 – Submit Contracting Documents

The contract will not be finalized until all required documents listed below have been submitted and approved by CalMHSA:

- **W-9 Form:** A completed W-9 for your organization.
- **Financial Documents:** A copy of audited financial statements (e.g., Profit & Loss statement or comparable financial documentation).

- **Workers' Compensation:** Proof of workers' compensation coverage, if your organization has employees.
- **Certificate of Insurance (COI):** General liability coverage listing CalMHSA as an additional certificate holder. Use the following certificate holder information:

  California Mental Health Services Authority (CalMHSA)
  1610 Arden Way, Suite 175
  Sacramento, CA 95815

Step 5 – Contract Agreement

Once CalMHSA has received all required documentation and, if applicable, conducted the introductory meeting, the contract agreement will be sent to the contract contact for review.

- If revisions are needed, return the edited document using Microsoft Word's Track Changes feature.
- If no revisions are needed, notify CalMHSA and the agreement will be routed for signatures.

Training providers are required to have a fully executed contract with CalMHSA in place prior to beginning any training.

Please note: Training providers may not begin training or advertisement of training courses until the contract is fully executed and written approval has been received from CalMHSA.

Appendix

DOCUMENT REQUIREMENT GUIDELINES

The following section provides detailed information on requirements for documents being requested for submission with the application. Each document has its own requirements that must be present at the time of submitting the application. To avoid delays in processing, please refer to the following information to ensure all documents being submitted meet these minimum requirements.

TRAINING CURRICULUM REQUIREMENTS

The information below provides specific information for each of the training areas.

1. Medi-Cal Peer Support Specialist Training (80 hours)

Please review the "Examination Content" and "Blueprint" sections of the Exam Preparation Guide as well as the detailed information on core competencies from the Peer Certification Landscape Analysis Report.

- Training content must cover all 17 core competency areas and the course must be at least 80 training hours.
- All training content submitted must be accompanied by the "CalMHSA Curriculum Crosswalk" document. The crosswalk document serves as a guide and reference between your agency's training content and the CalMHSA training requirements. For example, the crosswalk would reference what training material (i.e., module, chapter, vignette, etc.) is used to meet the core competency training area.
- **Important Notice:** Approved Medi-Cal Peer Support Specialist trainers (80 hours) or specialization training providers may not represent themselves as Continuing Education (CE) providers. CE provider status requires a separate and formal approval process.

2. Continuing Education (CE) Course (*varies*)

A single course is required to be submitted with your application.

Acceptable CE Courses

Acceptable continued education courses for Certified Medi-Cal Peer Support Specialists must incorporate one or more of the following:

- Courses fundamental to the understanding or practice of peer support
- Courses of the discipline of peer support in which significant recent developments have occurred
- Courses of other disciplines that enhance the understanding of the practice of peer support specialists
- Courses related to the treatment of the client population being served (e.g., theoretical frameworks of recovery and wellness, intervention techniques with individuals, families, and systems of care)
- Courses that cover pragmatic aspects of clinical practice (e.g., legal or ethical issues, consultation, recordkeeping, supervision training)

Course Syllabus

- Detailed Course Outline: Provide a comprehensive outline for each section of the training course.
- Educational Goals: Clearly articulate the overarching educational goals for your course.
- Measurable Learning Objectives: Specify the measurable learning objectives, ensuring clarity and precision. For example, "At the conclusion of this course, participants will demonstrate the ability to identify five core principles of peer support."

Complete Course Curriculum

- Submit **only one complete** training course for approval that exemplifies the quality and effectiveness of your training.
- The training course **must** have a minimum of one hour of instruction and a maximum of eight hours. One hour of direct educational training instruction is equal to one hour of continuing education (CE), excluding any breaks.

Approval of CE Training Course

Once approved, any subsequent course developed by your agency may be eligible for CE hours, provided it meets CMPSS training standards and is offered in the language of the original approved course.

These eligible CE courses should promote professional development, aiming to enhance the quality of care provided within the Medi-Cal Peer Support Specialist's scope of practice.

Specification: Approved agencies will be issued a unique continuing education provider identification number. ***Rights to use the CE provider status and identification are exclusively reserved for CalMHSA-approved CE training providers*** *and may be used in accordance with the agreed upon standards.*

3. Area of Specialization (40 hours)

Each area of specialization training requires a separate application and corresponding application fee.

- The curriculum must align with the core competencies for the specific specialization for which approval is being requested. Please review the corresponding curriculum competency requirements:

1. Parent, Caregiver, Family Member Peer Curriculum Competency
2. Peer Services in Crisis Care Curriculum Competency
3. Peer Services for Unhoused Curriculum Competency
4. Peer Services for Justice Involved Curriculum Competency

- Training content must include a minimum of 40 hours of instructional training and cover all required core competencies.

- All training content submitted must be accompanied by the corresponding "Specialization Curriculum Crosswalk" document. The crosswalk document serves as a guide and reference between your agency's training content and the CalMHSA training requirements. For example, the crosswalk would reference what training material (i.e., module, chapter, vignette, etc.) is used to meet the curriculum competency training area.

- **Important Notice:** Approved Medi-Cal Peer Support Specialist trainers (80 hours) or specialization training providers may not represent themselves as Continuing Education (CE) providers. CE provider status requires a separate and formal approval process.

CERTIFICATES OF ATTENDANCE REQUIREMENTS

The following must be included in the certificate of attendance that will be issued to training participants who complete the course.

1. Participant's full legal name
2. Name of approved training agency
3. Date of the course completion
4. Number of training hours (ensure minimum training hour requirements must be met, as applicable)
5. Signature of the course instructor, provider, or provider designee
6. Course title with the following naming convention based on your application type:

    - "Medi-Cal Peer Support Specialist Training"
    - "Parent, Caregiver, and Family Member Peer"
    - "Peer Services in Crisis Care"
    - "Peer Services for Unhoused"
    - "Peer Services for Justice Involved"

COURSE EVALUATION REQUIREMENTS

The following must be included on the program evaluation form:

1. Learning objectives
2. Course appropriateness to participants' education and experience level
3. Relevance to practice
4. Effectiveness of the course
5. Suitability and/or usefulness of instructional materials
6. Currency and accuracy of the information
7. Instructor's knowledge of the subject matter and clarity of delivery
8. Instructor's responsiveness to participants

9. Technology support was adequate - i.e., questions or problems were addressed effectively and in a timely manner (asynchronous or hybrid modalities)
10. Technology was user-friendly (asynchronous or hybrid modalities)
11. Location, facilities, and administration of the program.
12. Additional feedback

PROVIDER/AGENCY BIOGRAPHY FOR CERTIFICATION WEBSITE REQUIREMENTS

The training provider information will be posted on the CalMHSA certification website. To ensure accuracy of information, please provide a complete a training provider agency biography template to submit with your application. The form should include:

1. Mission and values: A concise 150 biography explaining the provider's purpose and overall intention
2. Training modality: In-person, hybrid, online, or asynchronous
3. Training length: The required number of training hours (varies on training)
4. Training location: Where the training takes place
5. Training registration (link): The link to your website for training course registration
6. Program's training provider name contact information

ADVERTISEMENT/PROMOTIONAL MATERIAL OF TRAINING COURSES

Training providers shall ensure information publicizing a CalMHSA-approved training course is accurate and may include the following:

1. Course name (exact naming convention requirement must be met)
2. Name of approved training agency
3. Agency's logo
4. Number of training hours for course
5. Duration of training (i.e., 4 weeks, 3 weeks + hand on experience)
6. Course description
7. Learning objectives
8. Training date(s) (i.e., rolling registration, cohort style begins each month)
9. Training modality (in-person, online, and/or hybrid)

10. The instructor's name and credentials, including relevant expertise in program content
11. Fee schedule for training course, inclusive of any additional fees
12. Optional: CalMHSA logo (if requested, must use logo provided by CalMHSA)

GLOSSARY OF TERMS

1. **California Mental Health Services Authority (CalMHSA)** is the certifying entity for the certification of Medi-Cal Peer Support Specialists in California. As the certifying entity, CalMHSA also approves training providers to ensure training curriculum is met.
2. **Continuing Education (CE)** refers to the education a CMPSS receives to further develop their professional knowledge around best practices, updated laws, and/or specialized training.
3. **Continuing Education (CE) Approved Provider** refers to the approved training providers who are recognized by the certifying entity for continuing education courses. Approved providers are issued a unique CE provider identification number. Rights to use the CE provider status and identification number is exclusively reserved for approved CE training providers.
4. **Continuing Education (CE) Source** refers to the varying types of sources from which certified professionals may obtain continuing education hours to meet the education requirements for renewal of certification.
5. **Continuing Education (CE) Hour(s) Calculation** One hour of direct educational training instruction is equal to one hour of continuing education (CE), excluding any breaks.
6. **Certified Medi-Cal Peer Support Specialist (CMPSS)** Is an individual who is 18 years of age or older, who has self-identified as having lived experience with the process of recovery from mental illness, substance use disorder, or both, either as a consumer of these services or as a parent or family member of the consumer, and who has been granted certification under a county Medi-Cal Peer Support Specialist certification program.
7. **Training Provider** may be an individual person or agency(s). An individual is a person who independently offers training as a sole instructor and must be applying for themselves, not on behalf of a group (2 or more instructors) or organization.
8. **In-person** are courses taught onsite at scheduled course times so that students can interact with their instructor and classmates in person.
9. **Online** are courses that can be viewed on a computer, tablet, or mobile device.
10. **Hybrid(s)** are courses that combine onsite in-person activities with online work or instructions. These courses split time between in-person and virtual environments. Peers attend in-person courses at designated times plus engage in virtual learning activities, which may be either synchronous or asynchronous.

11. **Asynchronous** are courses that are self-paced, allowing an individual to learn on their own schedule, within a certain time period. Peers can use provided asynchronous learning elements like online audio and video and discussion forums at the time and place of their choosing.

APPLICATION CHECKLIST

Checklist for Training Provider Application Submission.

You may download a copy of this checklist here, it must be complete and included with your application files.

Note: Applications for Spanish language trainings must include participant-informing material in Spanish (e.g., policies, evaluations, certificates, etc.).

1. Application Information:
    - ☐ Completed Training Provider Application form via online website.
        - ☐ CA Business License Number, non-profit number, or exception ID provided.
        - ☐ Contact information of the dedicated training coordinator included.
        - ☐ Language in which the training will be delivered.
        - ☐ Training modality (in-person, hybrid, asynchronous, online) selected.
        - ☐ Total training hours of the course specified (must meet minimum requirements).

2. General Agency Files:
    - ☐ This completed Provider Application Checklist
    - ☐ Agency biography (150 words or fewer) using the Agency Bio Template
    - ☐ Agency logo provided (transparent .jpg or.png format).
    - ☐ Instructor(s) information/qualifications provided (CV, resume, biography, etc.).
    - ☐ Proposed training fee/cost for the course specified.
    - ☐ Proposed yearly training schedule with published dates and times provided,
    - ☐ Sample of marketing material.

3. Policies and Procedures (in the language in which the training will be delivered):
    - ☐ Documented enrollment/registration process and procedures.
    - ☐ Documented course completion information provided.
    - ☐ Process for issuance of certificate of attendance.
    - ☐ Digital sample of certificate of attendance or completion (must meet requirements).
    - ☐ Course refund/cancellation process.
    - ☐ Leave of absence request process.

☐ Reasonable accommodations (ADA) policy.

☐ Anti-discrimination and anti-harassment policy.

☐ Documented complaints process.

☐ Record retention policy documented.

☐ Process for evaluation of training course and trainer(s) documented.

☐ Digital sample of the evaluation form (must meet requirements set below).

4. Training Curriculum (one training type and language per application):

☐ New Applications Only -submit a single, combined PDF file of the training course including: Medi-Cal Peer Support Specialist Training (80 hours) PDF must include:

☐ Training content covering all 17 core competency areas with the course being a minimum of 80 training hours.

☐ Completed Curriculum Crosswalk for CMPSS Training document (separate PDF).

Continuing Education (CE) Training PDF must include:

☐ Course syllabus, including detailed course outline, educational goals, and measurable learning objectives.

☐ One training course, minimum one hour instruction time.

Area of Specialization (40 hours) Training PDF must include:

☐ Training content covering core competencies for the specified area of specialization. Review the following competencies:

- Parent, Caregiver, Family Peer Competencies
- Peer Services in Crisis Care Competencies
- Peer Services for Unhoused Competencies
- Peer Services for Justice Involved Competencies

☐ Total instructional training hours being a minimum of the 40-hour requirement.

☐ Completed Curriculum Crosswalk for Specialization document (separate PDF).

REVISION LOG

Date	Page	Section	Change
07.17.26	05-06	TRAINING PROVIDER APPROVAL PERIOD Application Review section	CalMHSA uses a standardized review process. Applications may be denied without the opportunity to revise or resubmit. Appeal is available.
	09	Renewal of CalMHSA Training Provider Recognition	Added the word 'renewal' to the application cycle graphic.
	05	Application Cycles	Updated specialization hours, and link to Website page for Becoming a Training Provider.
05.12.2026	14	Step 5 – Contract Agreement	Added additional step for contract agreement for provider clarity
	13	Step 4 – (Provider) Application Status	Added Actions to the application status for more detailed clarity to providers
03.19.2026	5	Application Cycles	Updated application cycle dates for specialized trainings.
	11	Directions for Submitting an Application	Updated information on submitting curriculum.
	12	Submission of Training Content	Updated the submission of training curriculum process for new training provider applicants, as well as the renewal process for existing training providers.
	16	Training Curriculum Requirements	Added the specialization curriculum competency links
	21	Application Checklist	Updated section on specialization trainings.
05.13.2025	5	Application Cycles	Reformat and direct to website for details.
	7	Responsible Use of AI	New section
	9	Renewal of CalMHSA Training Provider	Revision

	10	Curriculum Modification Request	New section
	14	Training Curriculum Requirements	Added Important Notice to 80-Hour providers
01.06.2025	13	Appendix	Fixed broken link
11.25.2024	6	Trainings in Spanish Language	Added that Spanish trainings are accepted during open annual cycles.
	8	Required Naming for Courses	New section about required course names.
	8	Approval of CE Training Course	Added that subsequent CE courses must be in the language of the original approved course.
	9	Quality Assurance	Separated site visit from QA review paragraph.
	19	Glossary	Added CE approved provider and CE source definitions
	21	Application Checklist	Updated Language requirement and formatting.

Website: CAPeerCertification.org

Email: peercertification@calmhsa.org