

Medi-Cal Peer Support Specialist Certification Preparation Guide







October 2026

CalMHSA

California Mental Health Services Authority

Medi-Cal
Peer Support Specialist
Certification Preparation Guide

Prepared by:

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DIRECTOR FOREWORD



Congratulations on your dedication to enhancing your professional growth and your willingness to share your recovery journey to inspire others. The California Mental Health Services Authority extends its gratitude for the unwavering advocacy for the integration of peer support in mental health and substance use disorder programs within the public behavioral health system. The ongoing efforts of individuals, families, communities, and various stakeholders have made a significant impact, as demonstrated by the enactment of Senate Bill 803. This landmark legislation has provided the public behavioral health system with a vital mechanism for peer support and workforce expansion.

We recognize the Department of Health Care Services' efforts in championing the Peer voice within its Medi-Cal programs. This commitment plays a crucial role in fostering a supportive environment for peer specialists.

Furthermore, the advocacy and backing from the CalMHSA Stakeholder Advisory Council Members, alongside continuous community support for the establishment of a standardized certification for Medi-Cal Peer Support Specialists in California, are highly valued. Their contributions are instrumental in advancing the peer support movement within the state.

CalMHSA stands united with you in the conviction that recovery is achievable. We look forward to continuing our collaborative efforts to enhance peer support services and to create a more inclusive and supportive mental health and substance use disorder treatment landscape in California.

Learn more about Medi-Cal Peer Support services on the Department of Health Care Services website.

Learn more about Medi-Cal Peer Support Specialist certification on the CalMHSA website: CAPeerCertification.org

Sincerely,

CalMHSA
California Mental Health Services Authority

California Mental Health Services Authority

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Introduction and Purpose

INTRODUCTION



The Medi-Cal Peer Support Specialist Certification Examination is required for all applicants seeking to be a certified Medi-Cal Peer Support Specialist (PSS) in the State of California. Peer Support Specialists play a key role in the prevention, early intervention, treatment, and recovery process of individuals living with mental health and substance use disorders.

With the passing of Senate Bill 803, the Department of Health Care Services (DHCS) established core competencies, a Code of Ethics for Medi-Cal Peer Support Specialists and developed statewide standards for certification programs. The California Mental Health Services Authority (CalMHSA) was selected by county public behavioral health plans as the certifying body for the certification of Medi-Cal Peer Support Specialists. In January 2022, the Human Resources Research Organization (HumRRO) began a project with CalMHSA to examine the knowledge and job skills necessary for certification as a Medi-Cal Peer Support Specialist. CalMHSA contracted HumRRO's support to develop the Medi-Cal Peer Support Specialist Certification Examination.

PURPOSE OF THE GUIDE

This guide is designed as a study aid to help you prepare for taking the Medi-Cal Peer Support Specialist Certification Examination. The more familiar you are with test-taking strategies, the more you will be able to focus on applying your knowledge rather than on the testing environment. To do your best on the Medi-Cal Peer Support Specialist certification exam, it is important that you take the necessary time to prepare for the test and develop the skills that will help you. **PLEASE NOTE**: this guide is meant to help you prepare for the exam by highlighting what to expect and is not intended to be used as study material. This guide is divided into sections that discuss:

- The knowledge to be tested in the exam.
- Tips for preparing for the exam.
- Examples of exam questions.

This guide was developed by HumRRO in consultation with CalMHSA. It is important to note that the test questions are designed for the Medi-Cal Peer Support Specialist certification process and are not exhaustive.

Peer Support Specialist Basics

To accurately reflect the work of a Peer Support Specialist, HumRRO conducted a job task analysis survey to determine which knowledge and job skills statements are critical to the job. CalMHSA's executive team sent out announcements with the survey link, inviting individuals, stakeholders, community members and relevant organizations to participate in the survey. With subject matter experts with different backgrounds from multiple locations and across various roles, we gained a diverse perspective, resulting in a complete picture of the job.

The survey was accessed by 1,486 participants to rate the knowledge and job skills. Of the participants, approximately 694 (47%) surveys were completed and used in the final analysis.

Survey participants represented diverse perspectives and backgrounds. All participants were 18 and older. Gender identity consisted of cisgender and non-cisgender viewpoints. Demographic composition included those from White, Hispanic or Latino, Black or African American, Asian, American Indian or Alaskan Native, and self-identified racial/ethnic backgrounds. Participants primarily spoke English, Spanish and Chinese, though other languages were also represented. Participants had a range of educational attainments, spanning from some high school to professional degrees. Some, but not all participants, had experience as a Peer Supporter. Lastly, participants indicated working with differing populations like individuals who are unhoused, children, and LGBTQIA+ communities, as well as in crisis services.

MEDI-CAL PEER SUPPORT SPECIALIST CORE COMPETENCIES

1. The concepts of hope, recovery, and wellness
2. The role of advocacy
3. The role of consumers and family members
4. Psychiatric rehabilitation skills and service delivery, and addiction recovery principles, including defined practices
5. Cultural and structural competence trainings
6. Trauma-informed care
7. Group facilitation skills
8. Self-awareness and self-care
9. Co-occurring disorders of mental health and substance use
10. Conflict resolution
11. Professional boundaries and ethics
12. Preparation for employment opportunities, including study and test-taking skills, application and résumé preparation, interviewing and other potential requirements for employment
13. Safety and crisis planning
14. Navigation of, and referral to, other services
15. Documentation skills and standards
16. Confidentiality
17. Digital literacy

Examination Content

The Medi-Cal Peer Support Specialist certification exam is a 120-item multiple-choice test. Candidates will have 2.5 hours to complete the exam. The exam is designed to measure a candidate's competency in the following eight dimensions, which are broken down further in the **Examination Blueprint:**



1. Administration Responsibilities
   Examples of information: Ability to keep health records, adhere to professional standards, maintain confidentiality, collaborate with others, and basic computer skills.

2. Behavioral Health Foundations
   Examples of information: Knowledge of mental health and substance use disorders and their associated treatments and recovery approaches; knowledge of peer recovery approaches and techniques to support recovery and wellbeing.

3. Interpersonal Skills
   Examples of information: Active listening, empathy, self-disclosure about lived experience, resilience, and self-awareness, self-care, cultural awareness, trust, and mutual respect.

4. Recovery Support
   Examples of information: Knowledge of traditional behavioral health support and harm reduction models, recognition of differences between the Peer Support Worker role and clinical provider role, person-centered destigmatizing language, coaching, effective coping strategies.

5. Advocacy
   Examples of information: Promotion of self-advocacy, empowerment skills, stigma, formal channels of advocacy.

6. Community Inclusion
   Examples of information: Encouraging engagement with social networks and building and strengthening social skills, serving as a liaison, empowerment in community-based activities.

7. Resource Linkage
   Examples of information: Assist in accessing community services and resources, visit/explore community resources, identify and secure resources related to treatment, recovery, and wellness.

8. Crisis Management
   Examples of information: Ability to identify helpful resources, develop strategy for planning/managing behavioral health crises, identify signs of behavioral health crises, engage in supportive response skills and encouragement.

The development of a valid exam begins with a job analysis, or a clear and concise definition of the tasks, knowledge and skills needed for a competent job performance. HumRRO conducted a job task analysis survey to determine which knowledge and job skills statements are critical to the job of a Peer Support Specialist.

Participants who accessed the survey were asked to rate knowledge and job skills statements on: (1) how frequently the task described in the statement is performed, (2) how often the knowledge is used, and (3) how vital each knowledge and job skill is to the job of a Peer Support Specialist.

Participants were asked to provide ratings for the frequency and importance of each knowledge and job statement on a six-point Likert scale.

- The frequency with which a Peer Support Specialist performs a work activity in their current job was measured from “0 = Never” to “5 = Hourly or more (several times an hour or more)”
- The importance of the work activity to effective performance as a Peer Support Specialist was measured from “0 = Not part of the work” to “5 = Extremely important”

Overall, the job task analysis results show that most job tasks were conducted with a minimum frequency of “Weekly” to “Daily” and had a minimum importance of "Important" to "Very important" according to respondents. The average rating and variation in importance scores for each topic area provides evidence that all job and knowledge statements are relevant to the Peer Support Specialist role and, therefore, essential to the Medi-Cal Peer Support Specialist certification exam.

The **Examination Blueprint** identifies the number of questions per dimension, as well as the number of items per job task within each dimension, necessary to ensure the exam results reflect the individual competency of the test taker.



Examination questions are written by certified individuals or those deemed subject matter experts (SMEs) in the Peer Support field. SMEs are trained in item writing best practices and assisted by psychometrics when writing the questions. To ensure that the exam questions are comprehensive and accurately portray the diverse backgrounds of Peer Support Specialists, the SMEs are from different locations, maintain roles in a variety of work settings, work with a variety of consumers and have experience as Peer Supporters.

All examination questions are written in a multiple-choice format with three or four response options. One of these options represents the BEST response and credit is granted only for selection of this response.

The Medi-Cal Peer Support Specialist certification exam is composed of three types of questions: 1) understand or recall, 2) apply and 3) analyze.

- **Understand/recall questions** are considered less rigorous items requiring foundational knowledge of terminology, definitions, and basic concepts. These questions will take less time to read through and answer since they are less mentally taxing and contain only one sentence.

  Example: What is a Peer Support Specialist?

- **Application and analysis questions** are written at a more complex level to assess skill and mastery of Peer Support job activities and responsibilities. More cognitively complex questions, such as application and analysis, require some critical thinking and problem-solving. Therefore, they will take more time to read through and answer.

  - **Apply questions** contain one sentence that provides context and then the question. So, there are two sentences total in this type of exam question.

    Example: A consumer[1] tells a Peer Support Specialist they want to make friends but does not know how. What action would the Peer Support Specialist take to support the consumer?

  - **Analyze questions** contain two sentences that provide background information and then the question. So, there are three sentences total in this type of exam question.

    Example: A consumer mentions a topic that is unfamiliar to the Peer Support Specialist. The Peer Support Specialist asks their team members for clarity on the topic, but the team members are also unfamiliar with the topic. What is the next action the Peer Support Specialist would take?

PLEASE NOTE: These sample items are not exhaustive and should not be used to prepare for the exam. They are simply standards to familiarize you with the format of the types of questions. Please refer to the tips and practice questions in the **Best Practices for Exam Preparation** and **Practice Examination Questions** sections for ways to optimize your success on the exam.

[1]The definition of a "consumer" is included in the **Glossary**.

EXAMINATION BLUEPRINT

Table 1. Administrative Responsibilities

1. Administrative Responsibilities (9.9%)	Items per Knowledge, Skills & Abilities (KSA)
1.1. Document the Peer support services in a thorough and timely manner in the individual's health record.	2
1.2. Maintain professional standards and boundaries by observing the guidelines established by the agency you represent.	2
1.3. Maintain confidentiality related to mental health and substance use treatment and services, both internally and externally, to the agency.	3
1.4. Collaborate with multidisciplinary team members to coordinate care (e.g., post-hospitalization, post-incarceration re-entry services, residential treatment).	1
1.5. Participate in agency staff meetings, training, individual/group supervision, care coordination meetings and other relevant professional meetings.	1
1.6. Use basic computer skills to navigate the internet, conduct research and communicate with team members about the individual's care needs.	1
Subtotal	**10**

Table 2. Behavioral Health Foundations

2. Behavioral Health Foundations (11.6%)	Items per Knowledge, Skills & Abilities (KSA)
2.1. Knowledge of mental health conditions and available treatment options across the lifespan.	2
2.2 Knowledge of substance use challenges and available treatment options across the lifespan.	3
2.3. Be familiar with resiliency, recovery and wellness approaches and techniques specific to individuals with mental health needs.	3
2.4. Be familiar with recovery approaches and Peer support techniques specific to individuals with substance use challenges.	3
Subtotal	**11**

Table 3. Interpersonal Skills

3. Interpersonal Skills (16.9%)	Items per Knowledge, Skills & Abilities (KSA)
3.1. Use active listening skills and/or motivational interviewing techniques to identify and understand the individual's unique needs.	2
3.2. Use empathy to recognize the individual's unique experiences, perceptions, and worldview.	2
3.3. Use effective self-disclosure as a tool to validate the individual's lived experience to promote hope, resiliency, and coping strategies.	2
3.4. Use lived experience with recovery to engage, model and demonstrate that individuals can achieve resiliency and wellness.	2
3.5. Practice self-awareness to ensure that the individual's resiliency and recovery remain the focal point of the Peer support relationship.	2
3.6. Practice self-care to engage in activities to reduce stress, maintain personal health and work-life balance.	2
3.7. Work effectively with individuals from diverse backgrounds, being respectful and responsive to their cultural beliefs and practices.	2
3.8. Build trust and mutual respect by seeking permission and partnership from the individuals for every phase of the recovery and wellness journey.	2
3.9. Model an equitable relationship of giving and receiving between the individual and the Peer Support Worker.	1
Subtotal	**17**

Table 4. Recovery Support

4. Recovery Support (15%)	Items per Knowledge, Skills & Abilities (KSA)
4.1. Knowledge of the peer consumer and family member recovery movement and/or harm reduction models.	1
4.2. Understand the difference between the role of a Peer support worker and clinical providers in the individual's care.	1
4.3. Knowledge of traditional behavioral health and harm reduction models.	1
4.4 Introduce and explore person-centered destigmatizing language choices.	2
4.5. Provide consensual, individualized, ongoing guidance, coaching and support to ensure self-determination for individuals.	1
4.6 Utilize specific tools and models (e.g., harm reduction, mindfulness) to assist individuals in creating their own wellness and recovery plans.	1
4.7. Assist individuals in identifying their personal interests, goals, strengths and barriers to wellness.	2
4.8. Help individuals brainstorm strategies and problem-solve solutions to overcome barriers.	1
4.9. Help individuals cultivate problem-solving skills to make informed, independent decisions.	1
4.10. Share and model effective coping techniques and self-help strategies to promote resiliency, recovery and wellness for individuals.	1
4.11. Provide individuals with tools or knowledge to support a self-driven perspective in collaboration with other service providers.	2
4.12. Explore ambivalence to support individuals in devising wellness and recovery plans for desired change.	1
Subtotal	**15**

Table 5. Advocacy

5. Advocacy (12.1%)	Items per Knowledge, Skills & Abilities (KSA)
5.1. Promote self-advocacy to help individuals establish personal needs, goals and objectives as their focal points of rehabilitation, resiliency, recovery and wellness.	5
5.2. Assist individuals in developing empowerment skills and combating stigma (i.e., public, structural, and self) through self-advocacy.	5
5.3. Use formal channels to advocate for the individual's rights to services.	2
Subtotal	**12**

Table 6. Community Inclusion

6. Community Inclusion (9.6%)	Items per Knowledge, Skills & Abilities (KSA)
6.1. Use Peer support practices to increase social networks, deepen social relationships, and cultivate a meaningful role for individuals.	2
6.2. Assist individuals in increasing social support networks of relatives, friends and/or significant others.	2
6.3. Assist individuals in building interpersonal and social skills to engage the community and professional resources.	2
6.4. Serve as a liaison for collaboration with individuals, agency staff, family, friends, community partners and other relevant stakeholders (e.g., politicians, coalitions, and special interest groups).	2
6.5. Empower individuals to take advantage of opportunities at varying levels of involvement in community-based activities (e.g., work, school, relationships, advocacy groups, physical activity, self-directed hobbies, volunteering, etc.).	2
Subtotal	**10**

Table 7. Resource Linkage

7. Resource Linkage (12.7%)	Items per Knowledge, Skills & Abilities (KSA)
7.1. Assist individuals in accessing community services and community resources, including social service benefits (e.g., Medicaid, public assistance, and housing).	4
7.2. Share community resources for mental health and substance use challenges.	2
7.3. Visit community resources with individuals to assist them in becoming familiar with potential opportunities.	2
7.4. Assist individuals in identifying and securing resources for all aspects of treatment, recovery, and wellness, including transitions in care (e.g., post-hospitalization, post-incarceration re-entry services, residential treatment).	5
Subtotal	**13**

Table 8. Crisis Management

8. Crisis Management (12.1%)	Items per Knowledge, Skills & Abilities (KSA)
8.1. Identify community resources that individuals can turn to for immediate help in a behavioral health crisis.	3
8.2. Help individuals develop an advanced strategy for planning and managing behavioral health crises.	3
8.3. Identify signs and symptoms of a behavioral health crisis and activate supportive response skills where necessary.	2
8.4. Provide encouragement and ongoing support to individuals through the resolution of the behavioral health crisis.	4
Subtotal	**12**

Best Practices for Exam Preparation

ELIGIBILITY REQUIREMENTS AND REGISTRATION

The Medi-Cal Peer Support Specialist Certification Exam is administered exclusively by CalMHSA. Eligibility requirements were established by the Department of Health Care Services. Registration processes are determined by CalMHSA. Candidates interested in taking the Medi-Cal Peer Support Specialist certification exam must do so through the CalMHSA certification website. Information can be found at www.capeercertification.org/.

Upon application approval, candidates will receive information from CalMHSA on how to schedule the certification exam. The exam is proctored by a third-party agency, Pearson VUE. The certification exam is available both, online with live proctoring and in-person at local test centers in California. Candidates can learn more about the exam process on the CalMHSA certification website.

Rescheduling, Cancelling and Missed Examinations

Candidates are responsible for rescheduling and cancelling exam appointments. Appointments must be cancelled or rescheduled **PRIOR** to the scheduled exam date.

- For online testing, you may cancel or reschedule your exam at any time, **up to 1 hour** before your scheduled appointment.
- For in-person testing centers, you may cancel or reschedule the exam any time, **up to 48-hours** before the scheduled appointment.
- Candidates who do not reschedule or cancel the exam in accordance with the rescheduling/cancellation policy or candidates who do not appear for the scheduled appointment, forfeit the exam fee.

To reschedule or cancel your exam online:

1. Log into the Exam portal: https://home.pearsonvue.com/calmhsa with the user id and password you generated when you created your profile
2. Select the Medi-Cal Peer Support Specialist Certification Exam
3. Click the Reschedule or Cancel link
4. Follow the steps to reschedule the exam or to confirm your cancellation.
5. Be sure to review your selections and click Confirm Reschedule or Cancellation on the final step
6. Check your email for your new appointment confirmation or cancellation confirmation

Note: If you do not receive a confirmation email, your exam appointment has not been rescheduled or cancelled.

Reschedule or Cancel by Phone

Call 1-888-536-1460, Option 8
Available Monday–Friday, 7:00 a.m.–7:00 p.m. Central Time.

Please note, candidates are required to show their valid, government issued identification card with photo to take the exam. Candidates without a valid identification card will not be permitted to take the exam, will be considered a "no-show," and forfeit exam fees.

Learn more about the rescheduling, cancelling, and missed exams on the CalMHSA certification website.

Reasonable Accommodation

Reasonable accommodation requests for taking the certification exam are available to candidates. Candidates must submit a reasonable accommodation request form completed by their healthcare provider. CalMHSA approves reasonable accommodations for taking the certification examination on a case-by-case basis. CalMHSA has a 30-day processing time for request. Additionally, make sure to review the "Comfort Aid List" for additional resources that do not require a prior request.

Learn more about reasonable accommodation requests on the CalMHSA certification website.

TEST ADMINISTRATION DETAILS

Test Administration Overview

The Medi-Cal Peer Support Specialist Certification Exam is a multiple-choice exam consisting of 120 questions. Each question has four possible responses from which to choose. Candidates have 2.5 hours to complete the exam. There is a 10-minute break halfway through the exam after candidates complete Question 60. Please note, following the 10-minute break, due to exam security, a candidate will not be permitted to go back, and review previously answered questions.

The exam is proctored through Pearson Vue. The certification exam is available through online, live proctoring and in-person at local test centers in California. The exam is open and accessible throughout the year.

A valid government-issued identification matching the first and last name as your certification application is required take the Medi-Cal Peer Support Specialist certification exam.

For on-line exam, be sure to check your computer system prior to the exam date to ensure your computer and operating system are compatible with Pearson Vue's requirements.

Learn more about test administration on the CalMHSA certification website.

Please note, any attempts to cheat during the exam will be considered a major infraction and will result in termination of the exam. Candidates who cheat or attempt to cheat may face sanction. Learn more about the Code of Ethics for Medi-Cal Peer Support Specialists and violation guidelines on the CalMHSA certification website.

Any violations of exam security by attempts to compromise exam integrity will result in permanent denial of application for Medi-Cal Peer Support Specialist certification.

Scoring

Determining a Passing Score

A candidate's exam score is based on the total number of questions answered correctly.

The passing scores for the Medi-Cal Peer Support Specialist certification exam were established through a process called standard setting. During standard setting, a panel of subject matter experts (SMEs) working in the Peer Support field determined the level of knowledge a candidate must demonstrate in order to pass the exam. This level of knowledge is then referred to as a cut score. All candidates that meet or exceed the cut score for the exam will earn a passing mark. On each exam, there are pilot items. Pilot items do not influence final scores or a pass/no pass status. They are not uniquely identified on examinations and appear randomly. CalMHSA uses pilot items to pilot newly written items to ensure quality of future exams and provides verification that questions are relevant to competency.

Receiving Score

Generally, after completing the exam, candidates receive an auto-score result on the computer screen ("Pass" or "No Pass"). Additionally, candidates will receive a candidate report with information on how they performed on each of the eight focus areas of the exam. The candidate report is also accessible on your Pearson VUE customer account and can be accessed anytime.

Exam Retake Policy

Candidates interested in retaking an exam may do so by submitting a new application and applicable fees on the CalMHSA certification website following the exam. While there is no waiting period for submitting an exam retake application, there are processing times for CalMHSA to receive exam results and update its database. CalMHSA recommends waiting 7-14 days after taking the exam to submit the request. Candidates must log into their application on the CalMHSA certification website, pay the retake fee, and submit the request. Candidates are permitted to attempt the exam a total of three times during the 12 months certification application approval period.

Appeals Process

If you disagree with your score, you will have the opportunity to appeal it. For information on how to file an appeal, please contact us at peercertification@calmhsa.org

RECOMMENDED STUDY SKILLS

Goal Setting

Setting specific, realistic goals is one way you can prepare for the test. However, it is important to set time aside to plan out goals that work for *you*. Consider how you most effectively study and build that into the goals that you set. Example goals:

- Review the exam preparation guide in its entirety.
- Commit to studying at a specific time, or a certain amount of time, on certain days.

Time Management

Preparing for an exam is a commitment that requires a substantial amount of time. To effectively use the time, it is important to keep track of deadlines and monitor how you are using your time. Example time management strategies:

- Use a calendar and mark the exam date in it.
- Use a timer to schedule study sessions and break sessions.

Organization

With test preparation, you may encounter various resources that you wish to use to study, or you may have other sources of content that you wish to organize for future use. It can be helpful to develop an organizational system for these sources. Organization strategies include:

- Create study checklists to stay on track of content.
- Use flashcards to organize and review key concepts.

Active Learning

Learning and retention of information can be facilitated using active learning strategies. Rather than engaging with learning material in only one way (e.g., reading), it can be helpful engage with it in multiple ways (e.g., highlighting important concepts while reading). Active learning strategies include:

Group similar ideas and concepts together while studying.

Annotate important concepts while reading.

STUDYING FOR THE TEST

To focus your efforts, you should look at the knowledge areas listed in the **Examination Content** and then try to find information and relevant examples of that knowledge area.

Here is an example:

Pretend you are a Peer Support Specialist and are trying to find information about community support resources. If you only had this study material for this test, where would you look? Think through the other knowledge areas in this same way.

Think about these tips in your study efforts as well:

- Create sample questions based on the source material and the knowledge areas. Learn and/or memorize areas that appear relevant for the critical knowledges listed above.
- Use flash cards to help you memorize key information. Create these by using 3x5 index cards with key issues on the front and answers on the back.
- Think of other ways to memorize information using mnemonics, such as memory formulas and phrases.
- Write notes on the important information you discover during your studies. Some people remember better after writing things down.
- Some candidates have said that forming a study group with others has proved helpful. Each member could provide outlines or key concepts/issues from certain parts of the source material. How these relate to the various knowledge areas could be discussed.
- Space out your study time rather than cramming at the last minute.

EFFECTIVE TEST TAKING STRATEGIES

The following tips will help you prepare for the test:

- Be sure to eat before the test. Some foods, such as fresh fruits and vegetables, can help to reduce stress. Foods that can increase stress should be avoided (e.g., artificial sweeteners, chocolate, fried foods, junk food).
- For candidates interested in taking the exam through on-line platform, be sure to watch a short video on what to expect.
- For candidates interested in taking the exam at an in-person test center, be sure to watch review information on what to expect.
- Review Pearson Vue's detailed policies and procedures for test takers.
- Prepare for the test mentally. Visualize yourself being calm and collected during the test.
- Have confidence that you will do well. Stay calm and avoid putting too much pressure on yourself. Some anxiety is normal, but if you feel overwhelmed and anxious, your test performance may suffer. Instead, focus on doing the best you can.
- If necessary, use relaxation techniques to calm yourself. For example, take several slow, deep breaths or stretch to help you relax.

Learn more about the exam administration and what to expect on the CalMHSA certification website.

READING THE TEST QUESTIONS AND PICKING ANSWERS

Know how many hours and minutes you have to complete the exam. You will have **2.5 hours (150 minutes)** to complete the entire 120-question exam. You are responsible for monitoring your use of the allotted time.

The amount of time it takes to read a question will depend on the question type. As a reminder, the Medi-Cal Peer Support Specialist certification exam is composed of three types of questions: **1)** understand/recall, **2)** apply, and **3)** analyze. The understand/recall questions may take less time to read through and answer since they are considered less mentally taxing. Application and analysis questions will take more time to read through and answer since they require some critical thinking and problem-solving. A further breakdown of each question type can be found in the **Examination Content** section of this guide.

Tips for Answering Multiple-Choice Questions

Think about the following when reading the questions:

- Read the directions carefully. Then, re-read the instructions to ensure you understand them.
- Read the entire test question and each possible answer carefully before choosing the answer you think is best. A common mistake is to choose the first answer that you come to that "sounds good." Don't fall into this trap!
- If you find yourself overthinking a question, go ahead and answer the question but note this so you can return to it later. You could mark the "Review" box if you want to review your answer after you finish going through all the questions. If you want to revisit questions, be sure to leave enough time to revisit those questions.
- Do not "read into" the question or possible answers. Look at the question as it is asked.
- Do not get stuck on words or sentences you do not understand: You may still get the main idea of the sentence or paragraph without understanding the individual word or the individual sentence.

Keep these ideas in mind when picking an answer:

- Use the process of elimination. Try to decide if any of the options are clearly wrong to you. Once you have eliminated one option, your chance of choosing the correct answer increases.
- Do not believe the myth that suggests that "C" is the most common correct answer. The correct answer is distributed across A, B, C and D. If you pick the same letter for all of your answers (A, B, C or D), your result will be a low score on the test.
- DO NOT LEAVE ANY QUESTION UNANSWERED. Knowing the answer is best, of course, but guessing is still better than leaving a question blank. You will have the opportunity to review your answers at the end of the exam and make any changes before the 2.5 hours allotted to take the exam ends.
- The exam does NOT have any of the following types of answers:
  - All of the above
  - None of the above
  - A and B

TEST ANXIETY

Test anxiety is a common experience characterized by feelings of worry, fear, or apprehension before or during exams. It can manifest in physical symptoms such as increased heart rate, sweating, and difficulty concentrating, negatively impacting performance and overall well-being. To combat test anxiety, candidates can employ various strategies. Firstly, practicing relaxation techniques such as deep breathing, progressive muscle relaxation, or mindfulness meditation can help alleviate stress and promote a sense of calmness. Additionally, adopting effective study habits, such as breaking down study material into manageable chunks, using mnemonic devices, and practicing active recall, can boost confidence and reduce anxiety by enhancing preparedness. Seeking support from others like teachers, mentors, coaches, or mental health professionals can also provide valuable reassurance and guidance. Finally, maintaining a balanced lifestyle with adequate sleep, regular exercise, and healthy nutrition can contribute to overall resilience and better stress management, helping individuals navigate test anxiety more effectively.

Glossary

A

Adult: an individual who is 18 years of age or older.

Advocacy: involves providing patients and caregivers with the necessary support and education to empower them to make informed decisions about their healthcare journey. Advocates act as allies, ensuring that individuals feel supported and guided, making their experience within the healthcare system as smooth and positive as possible.

B

Beneficiary/Recipient: an individual who receives peer services through a Medi-Cal program.

C

California Mental Health Services Authority (CalMHSA): the certifying entity approved by the California Department of Health Care Services (DHCS) to certify Peer Support Specialists, Peer Support Specialist training entities and Peer Support Specialist continuing education providers.

Certification: indicates an individual has met the certification standards for Medi-Cal Peer Support Specialist.

Certifying Entity indicates CalMHSA, the organization selected by California counties, with a plan approved by the Department of Health Care Services, to certify Medi-Cal Peer Support Specialists and approve training providers.

Code of Ethics: a set of guidelines a certified Medi-Cal Peer Support Specialist in California adheres to around their roles and responsibilities and levels of responsibility in which they function professionally.

Consumer: a person who is receiving mental health and/or substance use disorder (behavioral health services) in a public county behavioral health delivery system.

Continued Education: the education a professional receives to further develop their professional knowledge around best practices, updated laws and/or specialized training.

Core Competencies: minimum knowledge base necessary to perform role or job activities as a Medi-Cal Peer Support Specialist in California.

County Reciprocity: the recognition of certified Medi-Cal Peer Support Specialists by public county behavioral health plans.

Culturally Appropriate Services: a certified Medi-Cal Peer Support Specialist is promoting engagement in a manner that best aligns with the cultural beliefs and practices of the person they serve.

D

Dual Relationship: a Medi-Cal Peer Support Specialist's non-therapeutic relationship with a recipient of care. It includes any activity identified as not allowed within the Code of Ethics.

G

Grandparenting Process: the process by which an individual who is employed as a Peer on January 1, 2022, or prior to that date, is eligible to seek certification as a Medi-Cal Peer Support Specialist so long as they meet the eligibility criteria and successfully pass the state-approved exam (ended 6/30/2023).

I

Initial Certification: the process for an applicant to become certified as a Medi-Cal Peer Support Specialist for the first time so long as they meet the eligibility criteria and successfully pass the state-approved exam.

L

Lived Experience: an individual's first-hand experience with a mental health and/or substance use challenges, including the process of recovery and engagement of resiliency within that experience.

M

Medi-Cal: California's Medicaid health care program that includes a variety of medical services for children and adults with a qualifying income or medical condition.

Medi-Cal Peer Support Specialist: 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.

Medi-Cal Peer Support Specialist Services: culturally appropriate services that promote engagement, socialization, recovery, self-sufficiency, self-advocacy, development of natural supports and identification of strengths. Medi-Cal Peer Support Specialist services include, but are not limited to, prevention services, support, coaching, facilitation or education that is individualized and is conducted by a certified Medi-Cal Peer Support Specialist.

N

Natural Supports: the personal connections to an individual's community that enhances the quality of their life.

O

Out-of-State Reciprocity: the recognition that an individual has received certification for peer support from another state and they meet the qualifications specified under the policies in this document.

P

Peer: persons who share similar understanding of experiences with mental health and/or substance use challenges.

Peer Support Specialist: this term is used interchangeably with Medi-Cal Peer Support Specialist within the context of this document.

Prevalent Languages: a non-English language identified by the California Department of Health Care Services as a threshold language under the state's Medi-Cal programs.

R

Renewal: meeting the requirements set forth in this policy for renewal of one's Medi-Cal Peer Support Specialist certification. The recertification occurs in two-year intervals.

Recovery: process of change through which individuals improve their health and wellness, live a self-directed life and strive to reach their full potential. This process of change recognizes cultural diversity and inclusion and honors the different routes to resilience and recovery based on the individual and their cultural community.

Resiliency: an individual's capacity to successfully meet life's challenges, nurtured to have a sense of self-determination, mastery, and hope.

S

Self-advocacy: the ability of an individual to effectively communicate, convey, negotiate or assert his or her own interests, desires, needs and rights; it involves making informed decisions and taking responsibility for those decisions.

T

Training Entity: an organization that has received approval from the certifying entity to provide training for the Medi-Cal Peer Support Specialist certification program.

Trauma Focused: maintaining awareness of the impact traumatic experiences may have on an individual and the influence this trauma may have on the choices they make in their life.

V

Valid Certificate: a certificate that is active, in good standing, and is not expired, suspended, revoked or inactive.

W

Wellness: the conscious and deliberate process of creating and adapting patterns of behavior that lead to improved health in the following dimensions: emotional, financial, social, spiritual, educational/occupational, physical, intellectual, and environmental.

Practice Examination Questions

These practice examination questions are similar to those that will appear on the exam. After answering these questions, check your responses against the answer key. The percentages in each focus area denotes the percentage of questions on the exam.

Administration Responsibilities (10%)

1. A consumer expresses they want to give the Peer Support Specialist a gift to show their appreciation for the help they have received. How would the Peer Support Specialist respond?

   A. Accept the consumer's present if the purchased item is less than $25.
   B. Ask the consumer to instead consider donating to a relevant charity.
   C. Thank the consumer for their thoughtfulness before declining the gift.
   D. Tell the consumer that is unnecessary since they are just doing their job.

2. A Peer Support Specialist is meeting with a consumer's care team to discuss the consumer's failure to follow through on their treatment goals. What action would the Peer Support Specialist take to support the consumer?

   A. Provide the care team with an update on what steps the consumer has taken since the last team meeting.
   B. Attend the meeting without contributing to the conversation since there is no peer support update.
   C. Ask each member of the care team what they have been doing to help the consumer achieve their goals.
   D. Take detailed notes to relay the comments to the consumer during the next peer support session.

3. A Peer Support Specialist takes handwritten notes during a check-in with a consumer. If the Peer Support Specialist is not able to enter the notes into the consumer's electronic file right away, how would they proceed?

   A. File the notes in a locked drawer to retrieve and enter later.

   B. Turn the notes upside down so the contents are not visible.

   C. Ask another Peer supporter to enter the notes for them.

4. A consumer thinks their diet may have a negative impact on their mental health. What can the Peer Support Specialist do to help?

   A. Ask the consumer about their interest in seeing a nutritionist for an assessment.

   B. Recommend that the consumer start taking a daily multivitamin.

   C. Educate the consumer on good nutrition and healthy cooking habits.

Behavioral Health Foundations (11%)

5. What is the goal of the harm reduction model for substance use challenges?

   A. Diminished rate of judicial system exposure and incarceration.
   B. Decreased overdose risk and improved access to systems of care.
   C. Enhanced community engagement and relationship building.
   D. Increase in self-assessment of confidence and self-worth.

6. A consumer with a history of depression tells the Peer Support Specialist they are starting to experience symptoms of an oncoming depressive episode. What action would the Peer Support Specialist take to support the consumer?

   A. Advise consumer to speak to their doctor.
   B. Share what medications for depression worked for the Peer Support Specialist.
   C. Call the consumer's family for additional support.
   D. Ask the consumer to think about what may be causing them to feel that way.

7. A peer, who has been to multiple substance use treatment facilities, asks their Peer Support Specialist if a specific program worked for them. What is an appropriate response for the Peer Support Specialist to give?

   A. Tell the peer about Narcotics Anonymous as it is the only way to stay sober in their wellness journey.
   B. Share what worked for the Peer Support Specialist while mentioning there are multiple pathways to recovery.
   C. Ask what their substance of choice is so the Peer Support Specialist can decide what facility would be best.

8. A consumer with a history of substance use disorder has been discharged from treatment and is currently residing in a sober living home. The consumer reports that their roommates are using drugs. What action should the Peer Support Specialist take to assist the consumer?

   A. Notify the landlord of the living environment about the roommates' ongoing substance use.
   B. Encourage the consumer to have conversations with each roommate to address the issue.
   C. Explore various living arrangement options with the consumer to ensure their safety and sobriety.

Interpersonal Skills (17%)

9. A consumer has been spending the last few weeks joking around and not taking group seriously. How would the Peer Support Specialist support the consumer?

    A. Tell the consumer this is not a laughing matter.
    B. Request to be reassigned to a different consumer.
    C. Encourage the consumer to look into a profession as a comedian.
    D. Continue to stay focused on the consumer's recovery goals.

10. A consumer explains that it is taboo for someone to share their struggles with family members in their culture. How would the Peer Support Specialist support the consumer?

    A. Ask a Peer Support Specialist from the same culture as the consumer to give the consumer advice.
    B. Roleplay or act out with the consumer ways the consumer can raise the topic with loved ones.
    C. Tell the consumer to disclose their feelings regardless of how they think others may respond.
    D. Share a time the Peer Support Specialist had an uncomfortable conversation with a loved one.

11. A Peer Support Specialist works at an inpatient psychiatric unit. What is the purpose of a Peer Support Specialist self-disclosing their lived experience to a consumer in this setting?

    A. Normalize their symptoms.
    B. Encourage their compliance.
    C. Inspire hope and possibility.

12. The consumer discloses a past trauma during their intake and asks for mental health assistance. How should the Peer Support Specialist respond?

    A. Acknowledge the courage to openly share to gain better understanding of need.
    B. Document the information shared and follow mandated reporting procedures.
    C. Continue the intake process and report the information to the appropriate treatment team member.

Recovery Support (15%)

13. A consumer is frustrated because several different service providers are not communicating well when it comes to their care. How can the Peer Support Specialist support this consumer?

    A. Encourage the consumer to request a team meeting so all staff can connect.
    B. Assure the consumer that this lack of communication happens all the time.
    C. Advise the consumer to change their therapist and psychiatrist.
    D. Write a formal complaint to management on behalf of the consumer.

14. A consumer tells a Peer Support Specialist that they have a lot of situational stress that is not a result of their diagnosis. What action would the Peer Support Specialist take in supporting the consumer?

    A. Tell the consumer their feelings are normal, and they should not worry.
    B. Assist the consumer in developing a wellness plan to address their concerns.
    C. Advise the consumer of stronger anxiety medication options to try.
    D. Take the consumer to a 12-step meeting to support their overall wellness.

15. A consumer has chosen to put off mental health care until they are ready to give up their intravenous substance use. How can the Peer Support Specialist respond in a way that promotes harm reduction?

    A. Encourage the consumer to attend support groups for complete abstinence from substances.
    B. Share a list of organizations that provide clean needles and syringes to individuals who use substances.
    C. Create a plan with the consumer that addresses their mental health issues instead of their substance use.

16. A new Peer Support Specialist wants to better understand how peer coaching can support a consumer's wellness and recovery. They are curious about the various approaches used to empower consumers to make decisions about their own lives. What is the importance of these approaches?

    A. Persuade consumers to make healthy life choices.
    B. Focus on prescribing specific actions to consumers.
    C. Foster consumers' ability to create informed solutions.

Advocacy (12%)

17. A Peer Support Specialist is working with a consumer with serious mental illness who has been in inpatient treatment for several months. Prior to a treatment team meeting, the consumer says to the Peer Support Specialist, "I don't know why I'm even going. They are just going to keep me here anyway." Which action would the Peer Support Specialist take to encourage self-advocacy?

    A. Utilize the consumer's dissatisfaction with their current situation as encouragement to formulate a better recovery plan.
    B. Model an effective action by sharing a time when the Peer Support Specialist assertively communicated their own needs and desires.
    C. Assist the consumer during the treatment team meeting by directly advocating on the consumer's behalf with team members.
    D. Educate the consumer on why the health care providers in the treatment team may have different perspectives.

18. A consumer says they were not hired at a job because of their disability. What actions should the Peer Support Specialist take?

    A. Educate the consumer on state disability laws before offering a referral to an advocacy agency.
    B. Call the authorities, as a human rights violation has just occurred.
    C. Advise them to apply somewhere else that is closer to your office.
    D. Arrange a boycott of the place of business and tell your friends.

19. A consumer wants to share their recovery journey but recognizes self-stigma is holding them back. How would the Peer Support Specialist support the consumer?

    A. Redirect the conversation to a topic that is more comfortable for the consumer.
    B. Share openly about their own lived experience with the consumer's permission.
    C. Encourage the consumer to share their lived experience despite their concerns.

20. A consumer is seeking assistance in combating stigma through self-advocacy. What action would the Peer Support Specialist take?

    A. Encourage the consumer to rely solely on support groups for empowerment.
    B. Speak on behalf of the consumer without involving them in the process.
    C. Work with the consumer to develop confidence in speaking up for themself.

Community Inclusion (10%)

21. A consumer expressed feeling overwhelmed with the requirements of their probation officer and service providers. How can a Peer Support Specialist assist the consumer with navigating the expectations?

    A. Offer to set up a meeting to speak with the providers on behalf of the consumer.
    B. Help the consumer arrange a meeting with both parties to discuss their viewpoint.
    C. Encourage the consumer to use a calendar to manage their appointments.
    D. Develop a plan with the consumer on how they could manage multiple tasks.

22. A consumer wants to use their experience with managing their mental illness to help others. How can the Peer Support Specialist help the consumer to accomplish this goal?

    A. Assist the consumer by providing encouragement, direction and support of their advocacy desires.
    B. Encourage the consumer to become a public speaker in order to share their experience.
    C. Provide the consumer with a list of agencies that would be willing to have the consumer present.
    D. Refer the consumer to their mental health provider for further direction.

23. What strategy would a Peer Support Specialist use to help a consumer get involved in the community?

    A. Inform the consumer that community events can increase people's anxiety levels.
    B. Advocate for the consumer by signing them up for participation in community programs.
    C. Provide resources about local community organizations that align with the consumer's interests.

24. A consumer reports feeling lonely and asks the Peer Support Specialist (PSP) for connections in the community. How would the Peer Support Specialist assist the consumer?

    A. Give the PSP's view about the strengths of being on their own to the consumer.
    B. Share the PSP's story about meeting new people with the consumer.
    C. Allow the consumer to hang out with the PSP's friends over the weekend.

Resource Linkage (13%)

25. What action is a primary duty of a Peer Support Specialist in assisting a consumer in the community?

    A. Reviewing a consumer's finances to help them pay for insurance.
    B. Advising a consumer on a dispute regarding Medi-Cal.
    C. Helping a consumer access a local mental health plan.
    D. Discussing with a provider specific coding to insure coverage.

26. A consumer would like to support a neighborhood rally but has anxiety about attending. They believe their anxiety would not be an issue if they were accompanied by their Peer Support Specialist. What action would the Peer Support Specialist take?

    A. Recommend the consumer practice breathing exercises.
    B. Suggest the consumer stay home to avoid overstimulation.
    C. Inform the consumer it is not worth the effort of people's time.
    D. Participate in the activity as requested by the consumer.

27. A consumer has been struggling with substance use disorder and is ready to become sober. What action would the Peer Support Specialist take to encourage the consumer?

    A. Share that 12-step programs are ideal for recovery.
    B. Advise the consumer to stop all substances immediately.
    C. Provide the consumer with information on available recovery resources.

28. A consumer received notice that their Medi-Cal may be cancelled because they did not respond to a correspondence letter asking for additional information. What action can the Peer Support Specialist take to support the consumer?

    A. Assist the consumer with completing the information and making an appointment with social services.
    B. Educate the consumer on the importance of responding to letters from government agencies.
    C. Empower the consumer to take personal responsibility for losing their benefits.

Crisis Management (12%)

29. What are two key components of a person-centered pre-crisis plan?

    A. A list of emergency contacts and a no-suicide contract.
    B. An Advance Directive and a list of local community programs.
    C. A wellness toolbox and list of known potential stressors.
    D. A medical history and medication adherence plan.

30. A consumer tells a Peer Support Specialist that they are struggling to create a plan for managing future behavioral health crises. What action would the Peer Support Specialist take to support the consumer?

    A. Refer the consumer to resources that can help with their planning.
    B. Suggest the consumer visit their health care provider to create a plan.
    C. Help the consumer come up with a plan together.
    D. Create a plan for the consumer without assistance from them.

31. A Peer Support Specialist and a consumer are developing a safety plan. What is the best way for the Peer Support Specialist to support the consumer with creating the plan?

    A. Advise the consumer to search the internet for a plan.
    B. Tell the consumer that creating a plan is not necessary.
    C. Empower the consumer to contribute their own ideas to the plan.

32. What would the Peer Support Specialist do to assist a consumer who is experiencing a behavioral health crisis?

    A. Call the crisis line in the presence of the consumer.
    B. Tell the consumer to calm down and things may not be that bad.
    C. Schedule an appointment to discuss their mental health challenges.

Answer Key

1. **Key**: C

   KSA Dimension: 1. Administrative Responsibilities

   KSA: 1.2. Maintain professional standards and boundaries by observing the guidelines established by the agency you represent.

   Rationale: This response differentiates itself from the detractors by its acknowledgement of the consumer's intentions while also maintaining the standards outlined in the "Integrity" portion of the Peer Code of Ethics.

2. **Key**: A

   KSA Dimension: 1. Administrative Responsibilities

   KSA: 1.5. Participate in agency staff meetings, training, individual/group supervision, care coordination meetings and other relevant professional meetings.

   Rationale: The response is correct as it respects the unique role of other members of the care team while appropriately advocating for the consumer from the Peer provider perspective.

3. **Key**: A

   KSA Dimension: 1. Administrative Responsibilities

   KSA: 1.3. Maintain confidentiality related to mental health and substance use treatment and services, both internally and externally, to the agency.

   Rationale: HIPAA regulations specify that any handwritten notes pertaining to a consumer's mental health must be kept confidential. The reference is an example of the guidance given to Peer Support Specialists on how to manage confidentiality in written materials.

4. Key: A

   KSA Dimension: 1. Administrative Responsibilities

   KSA: 1.4. Collaborate with multidisciplinary team members to coordinate care (e.g., post-hospitalization, post-incarceration re-entry services, residential treatment).

   Rationale: Peer Support Specialists working with multidisciplinary teams have additional tools at their disposal; they can work collaboratively with team members who have other specializations to improve outcomes for consumers. In this situation, the consumer flags a concern (diet/nutrition) that is not within the Peer Support Specialist's area of expertise. The Peer Support Specialist would then collaborate with the treatment team to make a referral to the consumer's primary care physician to address their concerns.

5. **Key**: B

   KSA Dimension: 2. Behavioral Health Foundations

   KSA: 2.4. Be familiar with recovery approaches and peer support techniques specific to individuals with substance use challenges.

   Rationale: The key is correct because per the Substance Abuse and Mental Health Services Administration (SAMHSA), research has demonstrated that a harm reduction approach for individuals with substance use challenges substantially reduces the risk of overdose death and promotes linkages to care.

6. **Key**: A

   KSA Dimension: 2. Behavioral Health Foundations

   KSA: 2.1. Knowledge of mental health conditions and available treatment options across the lifespan.

   Rationale: This response is correct as it directs the consumer to speak with their health care provider.

7. **Key**: B

   KSA Dimension: 2. Behavioral Health Foundations

   KSA: 2.2 Knowledge of substance use challenges and available treatment options across the lifespan.

   Rationale: Sharing lived experience and mentioning there are multiple paths to recovery is correct because the Peer Support Specialist is sharing their personal experience and not making a choice for the peer.

8. **Key**: C

   KSA Dimension: 2. Behavioral Health Foundations

   KSA: 2.2 Knowledge of substance use challenges and available treatment options across the lifespan.

   Rationale: Exploring various living arrangement options with the consumer is the correct answer because it empowers the consumer and gives them the ability to decide for themselves.

9. **Key**: D

   KSA Dimension: 3. Interpersonal Skills

   KSA: 3.5. Practice self-awareness to ensure that the individual's resiliency and recovery remain the focal point of the peer support relationship.

   Rationale: This is the best option as it refocuses on the consumer’s needs and wants.

10. **Key**: B

    KSA Dimension: 3. Interpersonal Skills

    KSA: 3.7. Work effectively with individuals from diverse backgrounds, being respectful and responsive to their cultural beliefs and practices.

    Rationale: This option maintains the established relationship between Peer provider and consumer while also providing the consumer with self-directed communication strategies for addressing the situation

11. **Key**: C

    KSA Dimension: 3. Interpersonal Skills

    KSA: 3.3. Use effective self-disclosure as a tool to validate the individual's lived experience to promote hope, resiliency, and coping strategies.

    Rationale: From the Medi-Cal Code of Ethics, one of the code of ethics is to: Share own lived experience to provide hope and inspiration for recovery.

12. **Key**: A

    KSA Dimension: 3. Interpersonal Skills

    KSA: 3.4. Use lived experience with recovery to engage, model, and demonstrate that individuals can achieve resiliency and wellness.

    Rationale: Acknowledgment of the courage to openly share is the correct response because it promotes resilience within the consumer's recovery/wellness process.

13. **Key**: A

    KSA Dimension: 4. Recovery Support

    KSA: 4.11. Provide individuals with tools or knowledge to support a self-driven perspective in collaboration with other service providers.

    Rationale: This option encourages consumer to self-advocate for their needs and wants with their care team.

14. **Key**: B

    KSA Dimension: 4. Recovery Support

    KSA: 4.6. Utilize specific tools and models (e.g., harm reduction, mindfulness) to assist individuals in creating their own wellness and recovery plans.

    Rationale: This is a correct response because it utilizes a specific model to help the consumer build the right tools to use in the scenario.

15. **Key**: B

    KSA Dimension: 4. Recovery Support

    KSA: 4.3. Knowledge of traditional substance use services and harm reduction models.

    Rationale: Sharing a list of organizations differentiates itself from the distractors because it is the only one that speaks to the harm reduction approach. The peer has expressed their reluctance to quit and the belief that they must give up their use is holding them back from other healthy treatments. As SAMHSA explains, supplies of clean needles and syringes are a component of harm reduction, which can keep the consumer safe until they are ready to commit to abstinence and shows that their work with the Peer Support Specialist does not require complete sobriety.

16. **Key**: C

    KSA Dimension: 4. Recovery Support

    KSA: 4.5. Provide consensual individualized, ongoing guidance, coaching and support to ensure self-determination for individuals.

    Rationale: Fostering the consumer's ability to create informed solutions is the correct choice as it emphasizes the importance of respecting consumers' autonomy and empowering them to make informed decisions about their own lives. It promotes self-determination and acknowledges that consumers are the experts in their own experiences.

17. **Key**: B

    KSA Dimension: 5. Advocacy

    KSA: 5.1. Promote self-advocacy to help individuals establish personal needs, goals and objectives as their focal points of rehabilitation, resiliency, recovery and wellness.

    Rationale: The correct answer differentiates itself from other distractors because it is directly related to competency 2 (the role of advocacy). Here, the Peer Support Specialist is modeling self-advocacy through social learning by directly stating how they self-advocated in a similar situation. This action is addressed on page 10 of the Peer Certification Landscape Analysis Report.

18. **Key**: A

    KSA Dimension: 5. Advocacy

    KSA: 5.2

    Rationale: This is a correct response because educating the consumer on this issue will empower them to voice their concerns appropriately.

19. **Key**: B

    KSA Dimension: 5. Advocacy

    KSA: 5.2. Assist individuals in developing empowerment skills and combating stigma (i.e., public, structural and self) through self-advocacy.

    Rationale: Sharing lived experience is correct because sharing openly about one's own lived experience has been found to be helpful in reducing stigma around mental health. Through disclosure of personal challenges, the Peer Support Specialist has overcome, the consumer can listen and relate about their own recovery. This approach recognizes the consumer can benefit from the mutuality created by the Peer Support Specialist and help combat internalized stigma.

20. **Key**: C

    KSA Dimension: 5. Advocacy

    KSA: 5.2. Assist individuals in developing empowerment skills and combating stigma (i.e., public, structural, and self) through self-advocacy.

    Rationale: Working with the consumer to develop their confidence is correct because collaborating with the client to identify their rights, develop assertiveness skills and create an individualized self-advocacy plan aligns with the principles of peer support. It empowers the client to understand their rights, build their assertiveness skills and take ownership of their self-advocacy journey.

21. **Key**: B

    KSA Dimension: 6. Community Inclusion

    KSA: 6.4. Serve as a liaison for collaboration with individuals, agency staff, family, friends, community partners and other relevant stakeholders (e.g., politicians, coalitions, and special interest groups).

    Rationale: This option encourages supporting the consumer to self-advocate for their needs and wants with their care team.

22. **Key**: A

    KSA Dimension: 6. Community Inclusion

    KSA: 6.5. Empower individuals to take advantage of opportunities at varying levels of involvement in community-based activities (e.g., work, school, relationships, advocacy groups, physical activity, self-directed hobbies, volunteering, etc.).

    Rationale: This option is correct because it encourages and supports the consumer’s expressed goal while providing a variety of pathways to achieve it.

23. **Key**: C

    KSA Dimension: 6. Community Inclusion

    KSA: 6.1. Use peer support practices to increase social networks, deepen social relationships and cultivate a meaningful role for individuals.

    Rationale: Providing resources is the correct answer because one of the core competencies for Peer Support Specialists is to share information/resources with the consumer so the consumer can explore on their own as a part of the self-advocacy initiative.

24. **Key**: B

    KSA Dimension: 6. Community Inclusion

    KSA: 6.1. Use Peer Support practices to increase social networks, deepen social relationships and cultivate a meaningful role for individuals.

    Rationale: Sharing their story is correct because according to Category III of the Core Competencies, Peer Supporters can provide support through their personal stories.

25. **Key**: C

    KSA Dimension: 7. Resource Linkage

    KSA: 7.1. Assist individuals in accessing community services and community resources, including social service benefits (e.g., Medi-Cal, public assistance, and housing).

    Rationale: This option is a partial statement of Competency 7.1 regarding resource linkages and is the only correct option.

26. **Key**: D

    KSA Dimension: 7. Resource Linkage

    KSA: 7.1. Assist individuals in accessing community services and community resources, including social service benefits (e.g., Medi-Cal, public assistance, and housing).

    Rationale: Participates in community activities with peers when requested.

27. **Key**: C

    KSA Dimension: 7. Resource Linkage

    KSA: 7.2. Share community resources for mental health and substance use challenges.

    Rationale: The Peer Supporter is not a medical doctor and, therefore, cannot properly advise the consumer to stop using. Although sharing lived experience can be helpful, the Peer Supporter would not want to discourage the consumer from trying a 12-step program or other program that the consumer may benefit from. The best answer is to provide the consumer with available resources to address their needs and quit safely.

28. **Key**: A

    KSA Dimension: 7. Resource Linkage

    KSA: 7.1. Assist individuals in accessing community services and community resources, including social service benefits (e.g., Medi-Cal public assistance and housing).

    Rationale: Assisting the consumer with completing the information is correct because it supports the consumer in meeting their goal through connection with a community agency. Educating the consumer on the importance of responding to letters is incorrect because educating the consumer does not support them in meeting the goal of maintaining their benefits. Empowering the consumer to take responsibility is incorrect because it does not address the issue at hand.

29. **Key**: C

    KSA Dimension: 8. Crisis Management

    KSA: 8.2. Help individuals develop an advanced strategy for planning and managing behavioral health crises.

    Rationale: A pre-crisis plan will always rely on self-observation and include supports that can help the consumer when they are starting to feel unwell.

30. **Key**: C

    KSA Dimension: 8. Crisis Management

    KSA: 8.2. Help individuals develop an advanced strategy for planning and managing behavioral health crises.

    Rationale: This option acknowledges the role of Peer providers in supporting consumers with advanced planning for crisis supports while maintaining the involvement of the consumer in the development of the resource.

31. **Key**: C

    KSA Dimension: 8. Crisis Management

    KSA: 8.2. Help individuals develop an advanced strategy for planning and managing behavioral health crises.

    Rationale: Peer Support Specialists should emphasize simple, safe and non-invasive personal strategies and skills. It is not ethical or appropriate for the Peer Support Specialist to give voice to their personal bias. This is a personalized safely plan and requires the Peer Support Specialist to empower the consumer to create a meaningful plan.

32. **Key**: A

    KSA Dimension: 8. Crisis Management
    KSA: 8.1. Identify community resources that individuals can turn to for immediate help in a behavioral health crisis.

    Rationale: Calling the crisis line in the consumer's presence is an appropriate response because the crisis line would connect the consumer to the most appropriate behavioral health resources to address the crisis.

CalMHSA Contact Information

To learn more about Medi-Cal Peer Support services, visit the Department of Health Care Services website (www.dhcs.ca.gov/services/Pages/Peer-Support-Services.aspx).

To learn more about Medi-Cal Peer Support Specialist certification, visit the CalMHSA website (CAPeerCertification.org).

If you have any questions about the certification in general or about the certification exam, email peercertification@calmhsa.org.

If you have any questions about the appeals process and accommodations, email peercertification@calmhsa.org.

To register for the Medi-Cal Peer Support Specialist certification exam, once your application has been approved, visit the Pearson VUE website [https://home.pearsonvue.com/Clients/CalMHSA.aspx].

For technical issues or concerns either before or during the test, contact Pearson VUE [1-888-536-1460]



CalMHSA

California Mental Health Services Authority