Embracing the power of peer support

The use of peer support specialists—individuals who are recovering from mental health or co-occurring challenges themselves and are trained to help others with similar conditions—is recognized as an evidence-based practice and a key component of recovery-focused programs.

Today, the role of peer support specialists continues to evolve as the healthcare community discovers new approaches for incorporating the services they offer into a range of healthcare settings.

Recognizing the power of peer support

Magellan was among the first companies in the managed care field to recognize the pivotal and growing role of peer support specialists in helping individuals with mental health and co-occurring conditions as they progress toward recovery, build resiliency and improve personal health outcomes and overall well-being. We work with hundreds of peer specialists in innovative ways, directly as valued members of the Magellan team, and indirectly through our provider networks and peer-run organizations all across the country. And we continue to innovate and create new ways to expand effective peer support choices for our members nationwide.

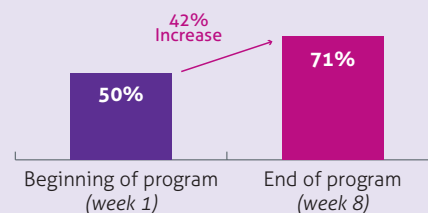## Focused on overall health and wellness

Individuals diagnosed with serious mental illness (SMI) are two to three times more likely to have other chronic medical illnesses. These individuals also die, on average, 25 years earlier than the general population in the United States.

At Magellan, we are addressing this disparity through our Peer Support Whole Health and Wellness Initiative, a partnership with the Appalachian Consulting Group. To date, we have trained more than 600 peer specialists to provide Peer Support Whole Health and Resiliency (PSWHR) services. These peer-provided services focus on the overall health of individuals by helping them establish and achieve self-determined whole health goals that promote wellness and recovery, ultimately transforming their lives.

The PSWH&W Initiative makes a difference

Among individuals with SMI participating in a PSWHR support group, there were significant improvements in key health domains that measure person-centered health outcomes, including:

- Physical activity
- Stress management/relaxation response
- Restful sleep
- Healthy eating

42% Increase

50% — Beginning of program (week 1)
71% — End of program (week 8)

Percentage of participants reporting overall health status as "above average to excellent"

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Peer support is a recognized, evidence-based practice that results in many tangible benefits. These benefits go beyond the positive impact peers have on the lives and well-being of others. Peer programs are also a good investment.

Integrated care for the best outcomes

Recognizing the lack of coordination between behavioral, physical and other health providers among individuals with serious mental illness, Magellan established its Integrated Health Home initiative—to ensure quality management of both physical and behavioral health needs through a partnership of providers. Services are delivered in a behavioral health setting, where peer support services are offered and all care is coordinated. Peer specialists trained in PSWHR partner with each individual in the program to develop an integrated wellness plan.

Learn more

To learn more about peer support and whole health planning, we invite you to review our Magellan peer support videos, *eMpowered for Wellness* e-newsletter and other resources on our nationally recognized e-Learning Center. All can be accessed at www.MagellanHealth.com/Training.

For additional information about Magellan's peer support services and how they can change lives, email ELearning@MagellanHealth.com.

Peer programs yield successful community living, cost savings

In Florida, Magellan Peer Recovery Navigators are part of three Recovery Management Programs.

- Through the programs, peer navigator engagement decreased inpatient days (see chart at right).
- The programs have saved $966,000 in inpatient costs in just three months.
- This translates to 1,381 days spent living successfully in the community rather than in a hospital.

Program 1 (N=49) Program 2 (N=64) Program 3 (N=64)

x

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3 months pre — 3 months post

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