



House of Representatives

General Assembly

File No. 425

February Session, 2026

Substitute House Bill No. 5480

House of Representatives, April 7, 2026

The Committee on Human Services reported through REP. GILCHREST of the 18th Dist., Chairperson of the Committee on the part of the House, that the substitute bill ought to pass.

AN ACT CONCERNING PEER SUPPORT SERVICES UNDER THE MEDICAID PROGRAM.

Be it enacted by the Senate and House of Representatives in General Assembly convened:

1 Section 1. (NEW) (*Effective July 1, 2026*) (a) As used in this section, (1)
2 "peer support services" means recovery-focused behavioral health
3 services that allow an individual the opportunity to learn to manage
4 such individual's recovery with help from a peer support specialist; and
5 (2) "peer support specialist" means an individual who (A) has
6 experience recovering from mental illness or substance use disorder,
7 and (B) is certified to provide peer recovery support under a program
8 administered by the Department of Mental Health and Addiction
9 Services.

10 (b) The Commissioner of Social Services shall amend the Medicaid
11 state plan to integrate peer support services into care teams funded
12 under the medical assistance program and provide Medicaid
13 reimbursement to peer support specialists for such services.

14 (c) Not later than August 1, 2027, the Commissioner of Social Services
 15 shall file a report, in accordance with the provisions of section 11-4a of
 16 the general statutes, with the joint standing committees of the General
 17 Assembly having cognizance of matters relating to human services and
 18 public health on (1) the number of peer support specialists provided
 19 Medicaid reimbursement, (2) the number of Medicaid enrollees such
 20 specialists serve, and (3) any outcome data on treatment provided by
 21 such specialists to such enrollees.

This act shall take effect as follows and shall amend the following sections:		
Section 1	July 1, 2026	New section

Statement of Legislative Commissioners:

In Subsec. (c)(2), "they" was changed to "such specialists" for clarity.

HS *Joint Favorable Subst.*

The following Fiscal Impact Statement and Bill Analysis are prepared for the benefit of the members of the General Assembly, solely for purposes of information, summarization and explanation and do not represent the intent of the General Assembly or either chamber thereof for any purpose. In general, fiscal impacts are based upon a variety of informational sources, including the analyst's professional knowledge. Whenever applicable, agency data is consulted as part of the analysis, however final products do not necessarily reflect an assessment from any specific department.

OFA Fiscal Note

State Impact:

Agency Affected	Fund-Effect	FY 27 \$	FY 28 \$
Social Services, Dept.	GF - Cost	See Below	See Below

Note: GF=General Fund

Municipal Impact: None

Explanation

The bill results in a cost to the Department of Social Services (DSS) associated with expanding Medicaid coverage for peer support services (recovery-focused behavioral health services). The bill requires DSS to amend the Medicaid state plan to integrate peer support services into care teams funded under the medical assistance program and provide Medicaid reimbursement to peer support specialists for such services.¹ The extent of the increased cost is dependent on utilization of the expanded service coverage and rates established.

The Out Years

The annualized ongoing fiscal impact identified above would continue into the future subject to the Medicaid rates established and service utilization.

¹ For context, peer support services are currently included under the substance use disorder residential treatment per diem rate, which ranges from approximately \$350 - \$500 and supports several levels of service.

OLR Bill Analysis

sHB 5480

AN ACT CONCERNING PEER SUPPORT SERVICES UNDER THE MEDICAID PROGRAM.

SUMMARY

This bill requires the Department of Social Services (DSS) commissioner to amend the Medicaid state plan to (1) integrate peer support services into care teams funded under the Connecticut Medical Assistance Program and (2) provide Medicaid reimbursement to peer support specialists for these services.

The bill requires the DSS commissioner to report by August 1, 2027, to the Human Services and Public Health committees on (1) how many peer support specialists received Medicaid reimbursement, (2) how many Medicaid enrollees these specialists served, and (3) any outcome data on the treatment these peer specialists provided to Medicaid enrollees.

Under the bill, “peer support services” are recovery-focused behavioral health services that teach someone how to manage their recovery with help from a “peer support specialist”. This specialist (1) has experience recovering from mental illness or substance use disorder and (2) is certified to provide peer recovery support under a Department of Mental Health and Addiction Services program.

EFFECTIVE DATE: July 1, 2026

COMMITTEE ACTION

Human Services Committee

Joint Favorable Substitute

Yea 23 Nay 0 (03/19/2026)