



Understanding Community Health Workers/ *Promotores/Representatives*, Doulas, and Peer Support Specialists in Medi-Cal

Community health workers/*promotores/representatives* (CHW/P/Rs), doulas, and peer support specialists (PSSs) are critical to addressing the social determinants of health and reducing health disparities. Although these community-connected providers have existed for decades, health care safety-net programs like Medi-Cal (California's Medicaid program) increasingly recognize their contributions and are formally incorporating their services as covered benefits.

This document summarizes the definitions, intersections, and differentiations among these workforces, as defined by and covered under three Medi-Cal benefits that became effective in July 2022 and January 2023. For more perspective on how these workforces define themselves and the services they provide, please see *Understanding and Alignment Among CHW/P/Rs, Doulas, and Peer Support Specialists*. Other community-connected providers, services provided by noncertified Peer Support Workers, and potential new Medi-Cal benefits still awaiting federal approval are not discussed here.

CHW/P/Rs

CHW/P/Rs are trusted members of their community who help address chronic conditions, preventive health care needs, and health-related social needs. They may include *promotores de salud*, community health representatives, navigators, violence prevention professionals, and other nonlicensed public health workers. CHW/P/Rs have lived experience that aligns with and provides a connection between the CHW/P/R and the community or population they serve.¹

CHW/P/R services prevent disease, disability, and other health conditions or their progression; prolong life; and promote physical and mental health. CHW/P/Rs provide health education and navigation, screening and assessment, and individual support or advocacy to prevent or control chronic conditions, infectious diseases, and behavioral health conditions. They can help Medi-Cal members receive perinatal, preventive, sexual and reproductive, and oral health care and services to address environmental and climate-related

health issues, aging, injury, and domestic or community violence. CHW services are a covered preventive benefit as part of California Advancing and Innovating Medi-Cal, a five-year program that includes California's federally approved Medicaid Section 1115 and 1915(b) waivers.

Doulas

Doulas are birth workers who provide health education, advocacy, and physical, emotional, and nonmedical support for pregnant and postpartum people before, during, and after childbirth, including miscarriage, stillbirth, and abortion. They provide person-centered, culturally competent care that supports Medi-Cal members' racial, ethnic, linguistic, and cultural diversity while adhering to evidence-based best practices.²

Doula services aim to prevent perinatal complications and to improve health outcomes for birthing parents and infants. Doulas offer various types of support, including perinatal, labor, and miscarriage/abortion support and guidance; health navigation; evidence-based education for prenatal, postpartum, childbirth, and newborn/infant care; lactation support; development of a birth plan; and linkages to community-based resources. Doula services are covered as a Medi-Cal preventive services benefit and as a professional service under the freestanding birth center benefit.³

Peer Support Specialists

Peer support specialists, as defined under the PSS benefit, are those with a current state-approved Medi-Cal Peer Support Specialist Certification Program certification who meet ongoing education requirements and provide services under the direction of a behavioral health professional.⁴ Peers self-identify as, and disclose, 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 the parent or family member of the consumer.⁵ Services include culturally competent individual and group services that promote recovery, resiliency, engagement, socialization, self-sufficiency, self-advocacy, development of natural supports, and identification of strengths through structured activities such as group and individual coaching to set recovery goals and to identify steps to reach the goals.⁶

Peer support services aim to prevent relapse, empower Medi-Cal enrollees through strength-based coaching, support linkages to community resources, and educate enrollees and their families about their conditions and the process of recovery.⁷ PSS services are covered through county behavioral health plans that have opted in to the PSS benefit under their Drug Medi-Cal / Drug Medi-Cal Organized Delivery System or specialty mental health services. To date, 50 of California's 58 counties have opted in for one or both delivery systems.

Similarities and Differences Among These Workforces

CHW/P/Rs, doulas, and peers provide similar services, such as health navigation, identification of goals and preferences, nonclinical assessments and screenings, patient education, and linkages to community resources. Providers draw on their lived/living experiences; shared racial, ethnic, and linguistic backgrounds; and deep ties to their communities to build trust with and engage Medi-Cal members and their families. At the same time, these workforces are distinct, with different approaches to care, scopes of practice, qualifications, training and supervision requirements, and contracting/employment arrangements. Their services are also covered, and paid for, through different Medi-Cal financing mechanisms and delivery systems.

As CHW/P/Rs, doulas, and PSSs continue to navigate, adapt to, and influence health care programs that serve a third of all Californians, opportunities to advance common goals emerge. Individuals or community-based organizations can enroll as Medi-Cal providers, contract with county behavioral health or Medi-Cal managed care plans to provide covered services, and receive reimbursement. They also face similar financial sustainability, capacity-building, workforce development, and other challenges. Through information sharing and networking, these workforces may learn from each other's experiences, explore areas for potential alignment, and develop collective resources.

About the Author

Sunshine Moore is an independent health policy consultant focusing on strategy and business development. She works with community-based organizations, government agencies, managed care plans, and public and private health care organizations to develop strategic plans, navigate complex health policies and regulations, and implement new programs and services.

About the Foundation

The [California Health Care Foundation](#) (CHCF) is an independent, nonprofit philanthropy that works to improve the health care system so that all Californians have the care they need. We focus especially on making sure the system works for Californians with low incomes and for communities who have traditionally faced the greatest barriers to care. We partner with leaders across the health care safety net to ensure they have the data and resources to make care more just and to drive improvement in a complex system.

CHCF informs policymakers and industry leaders, invests in ideas and innovations, and connects with changemakers to create a more responsive, patient-centered health care system.

Endnotes

1. James G. Scott (director, Program Operations Div., US Centers for Medicare & Medicaid Services [CMS]) to Jacy Cooper (chief deputy dir., Health Care Programs, California Dept. of Health Care Services [DHCS]), "[California State Plan Amendment 22-0001](#)" (PDF), July 26, 2022.
2. [Medi-Cal Provider Manual: Part 2 – Doula Services](#) (PDF), DHCS, updated June 2024.
3. James G. Scott (director, Program Operations Div., CMS) to Jacy Cooper (chief deputy dir., Health Care Programs, DHCS), "[California State Plan Amendment 22-0002](#)" (PDF), DHCS, January 27, 2023.
4. Jacy Cooper (chief deputy dir., Health Care Programs, DHCS) to James G. Scott (director, Program Operations Div., CMS), "[State Plan Amendment 22-0024: Peer Support Specialists](#)" (PDF), DHCS, March 2022.
5. [S.B. 803](#), 2019–20 Leg., Reg. Sess. (Cal. 2019).
6. Shaina Zurlin (chief, Medi-Cal Behavioral Health Div., DHCS) to California Alliance of Child and Family Services et al., "[Drug Medi-Cal \(DMC\), Drug Medi-Cal Organized Delivery System \(DMC-ODS\) and Specialty Mental Health Services \(SMHS\) Peer Support Services](#)" (PDF), Behavioral Health Information Notice No: 22-026, May 6, 2022.
7. Zurlin, "Drug Medi-Cal."