

119TH CONGRESS
1ST SESSION

H. R. 2741

To address the behavioral health workforce shortages through support for
peer support specialists, and for other purposes.

IN THE HOUSE OF REPRESENTATIVES

APRIL 8, 2025

Ms. SALINAS (for herself, Ms. DAVIDS of Kansas, Mrs. WATSON COLEMAN, Ms. BONAMICI, and Mr. DOGGETT) introduced the following bill; which was referred to the Committee on Energy and Commerce, and in addition to the Committee on Education and Workforce, for a period to be subsequently determined by the Speaker, in each case for consideration of such provisions as fall within the jurisdiction of the committee concerned

A BILL

To address the behavioral health workforce shortages through
support for peer support specialists, and for other purposes.

1 *Be it enacted by the Senate and House of Representa-*
2 *tives of the United States of America in Congress assembled,*

3 **SECTION 1. SHORT TITLE.**

4 This Act may be cited as the “Providing Empathetic
5 and Effective Recovery Support Act” or the “PEER Sup-
6 port Act”.

1 **SEC. 2. DEFINITION OF PEER SUPPORT SPECIALIST.**

2 (a) IN GENERAL.—In this Act, the term “peer sup-
3 port specialist” means an individual—

4 (1)(A) who has lived experience of recovery
5 from a mental health condition or substance use dis-
6 order and who specializes in supporting individuals
7 with mental health conditions or substance use dis-
8 orders; or

9 (B) who has lived experience as a parent or
10 caregiver of an individual with a mental health con-
11 dition or substance use disorder and who specializes
12 in supporting families navigating mental health or
13 substance use service systems; and

14 (2) who is certified as qualified to furnish peer
15 support services, as described in subsection (b),
16 under a process that is determined by the State in
17 which such individual furnishes such services or de-
18 termined appropriate by the Secretary of Health and
19 Human Services.

20 (b) PEER SUPPORT SERVICES.—The services de-
21 scribed in this subsection shall be consistent with the Na-
22 tional Practice Guidelines for Peer Supporters issued by
23 the National Association of Peer Supporters (or a suc-
24 cessor publication) and inclusive of the Core Competencies
25 for Peer Workers in Behavioral Health Services of the

1 Substance Abuse and Mental Health Services Administra-
2 tion.

3 **SEC. 3. RECOGNIZING THE PEER SUPPORT SPECIALIST**
4 **PROFESSION.**

5 Not later than January 1, 2026, the Director of the
6 Office of Management and Budget shall revise the Stand-
7 ard Occupational Classification system to include an occu-
8 pational category for peer support specialists.

9 **SEC. 4. ESTABLISHING THE OFFICE OF RECOVERY.**

10 Part A of title V of the Public Health Service Act
11 (42 U.S.C. 290aa et seq.) is amended by inserting after
12 section 501C (42 U.S.C. 290aa–0b) the following:

13 **“SEC. 501D. OFFICE OF RECOVERY.**

14 “(a) IN GENERAL.—There is established, in the Sub-
15 stance Abuse and Mental Health Services Administration,
16 an Office of Recovery (referred to in this section as the
17 ‘Office’).

18 “(b) DIRECTOR.—The Office shall be headed by a Di-
19 rector who has demonstrated experience in, and lived expe-
20 rience with, mental health or substance use disorder recov-
21 ery.

22 “(c) RESPONSIBILITIES.—Through the Office of Re-
23 covery, the responsibilities of the Director shall include—

1 “(1) providing leadership in the identification of
2 new and emerging issues related to recovery support
3 services;

4 “(2) supporting technical assistance, data anal-
5 ysis, and evaluation functions in order to assist
6 States, localities, territories, Indian Tribes, and
7 Tribal organizations in developing recovery support
8 services and identifying best practices with the ob-
9 jective of expanding the capacity of, and access to,
10 recovery support services;

11 “(3) providing support for the training, edu-
12 cation, integration, and professionalization of the
13 peer support specialist workforce;

14 “(4) disseminating best practice recommenda-
15 tions with respect to peer support specialist training,
16 certification, supervision, and practice to States and
17 other entities that employ peer support specialists;

18 “(5) supporting peer support specialists with
19 ongoing professional development and retention ac-
20 tivities; and

21 “(6) developing recommendations on creating
22 career pathways for peer support specialists.

23 “(d) FUNCTIONS.—Beginning on the date of enact-
24 ment of this section, the functions of the Office shall in-
25 clude the responsibilities described in subsection (c) and

1 the functions of the Office of Recovery of the Substance
 2 Abuse and Mental Health Services Administration on the
 3 day before such date of enactment, including all of its per-
 4 sonnel, assets, authorities, obligations, and liabilities, ex-
 5 cept as otherwise specified in this section.

6 “(e) DEFINITION OF PEER SUPPORT SPECIALIST.—
 7 In this section, the term ‘peer support specialist’ has the
 8 meaning given such term in section 2 of the Providing
 9 Empathetic and Effective Recovery Support Act”.

10 **SEC. 5. RESEARCH AND RECOMMENDATIONS ON CRIMINAL**
 11 **BACKGROUND CHECK PROCESS FOR PEER**
 12 **SUPPORT SPECIALISTS.**

13 (a) IN GENERAL.—The Secretary of Health and
 14 Human Services (referred to in this section as the “Sec-
 15 retary”), in coordination with the Attorney General, shall
 16 develop a report on research and recommendations with
 17 respect to criminal background check processes for indi-
 18 viduals becoming peer support specialists.

19 (b) CONTENTS.—The report under subsection (a)
 20 shall include—

21 (1) a summary of evidence-informed literature
 22 on the effectiveness of peer support specialists in im-
 23 proving the mental health and the substance use dis-
 24 order recovery of other individuals;

1 (2) a survey of each State’s laws (including reg-
2 ulations) that contain criminal background check re-
3 quirements for serving as a peer support specialist,
4 including—

5 (A) an analysis of criminal offenses that
6 are included in State laws (including regula-
7 tions) that prevent individuals from earning a
8 peer support specialist certification or from
9 practicing as a peer support specialist;

10 (B) an analysis of requirements (if any)
11 under the State plan under title XIX of the So-
12 cial Security Act (42 U.S.C. 1396 et seq.) or
13 under a waiver of such plan relating to back-
14 ground checks for providers participating under
15 such plan or waiver and the extent to which any
16 such requirements differ from similar require-
17 ments imposed under State law (including regu-
18 lations);

19 (C) an analysis of requirements (if any) of
20 any State receiving a grant under part B of
21 title XIX of the Public Health Service Act (42
22 U.S.C. 300x et seq.) relating to background
23 checks for providers participating in a program
24 under, or otherwise providing services supported
25 by, such grant;

1 (D) a review of State laws (including regu-
2 lations) that provide exemptions from prohibi-
3 tions regarding certification or practice of peer
4 support specialists; and

5 (E) an indication of each State that has
6 gone through the process of amending or other-
7 wise changing criminal background check laws
8 (including regulations) for the certification and
9 practice of peer support specialists; and

10 (3) recommendations to States on criminal
11 background check processes that would reduce bar-
12 riers to becoming certified as peer support special-
13 ists.

14 (c) AVAILABILITY.—Not later than 1 year after the
15 date of enactment of this Act, the Secretary shall—

16 (1) post the report required under subsection
17 (a) on the publicly accessible internet website of the
18 Substance Abuse and Mental Health Services Ad-
19 ministration; and

20 (2) distribute such report to—

21 (A) State agencies responsible for certifi-
22 cation of peer support specialists;

23 (B) the Centers for Medicare & Medicaid
24 Services;

1 (C) State agencies responsible for carrying
2 out a State plan under title XIX of the Social
3 Security Act or under a waiver of such plan;
4 and

5 (D) State agencies responsible for carrying
6 out a grant under part B of title XIX of the
7 Public Health Service Act (42 U.S.C. 300x et
8 seq.).

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