



PROVIDER ALERT

YES Program Reminders

August 1, 2020

Alert Summary: Below are important reminders pertaining to the Youth Empowerment System (YES) Program. **This alert does not contain any new requirements, but rather provides a summary of the YES Program and its origin.**

Dear Provider,

We wanted to provide some information about the YES Program to providers who may be new to the system and offer some important reminders to others. There have been many new services implemented over the past few years and we wanted to reiterate the purpose behind them. The State of Idaho designed a new mental health system of care for children and youth with serious emotional disturbance (SED) called the Youth Empowerment Services (YES) Program. The YES Program was authorized by the Idaho Department of Health and Welfare (IDHW) as part of the settlement agreement resulting from the Jeff D. class action lawsuit. The YES Program is strengths-based, family-centered, and incorporates a new collaborative team approach that focuses on providing individualized care. Implementation for the YES Program began in 2015.

Goals of YES include improving the quality of care, increasing accessibility of services, and enhancing clinical outcomes by offering a comprehensive array of services and supports. The objective is to improve quality of care and increase accountability to members and their families by measuring and communicating treatment outcomes and system performance.

All Medicaid children and youth have access to the YES system of care. However, below are the specific ways to access services via the Medicaid YES Program:

- 1) Traditional Medicaid: If a family qualifies for Medicaid under traditional income limits or through other Medicaid programs, and they do not want or need respite for their child or youth, they may access behavioral health services directly, and no further action is needed.
- 2) Traditional Medicaid wanting or needing respite for their child or youth: These families should follow the "YES Program Process" noted below.
- 3) Expanded income Medicaid: Children and youth who do not have access to traditional Medicaid may qualify for YES based on the expanded income eligibility, which is up to 300% of the Federal Poverty Guidelines (FPG).ⁱ They would also follow the "YES Program Process" below.

YES Program Process (for families in categories #2 and #3 above):

- Contact Medicaid's independent assessment provider, Liberty Healthcare, at 1-877-305-3469 to schedule an assessment. This assessment will determine whether the child or youth has SED, and Liberty Healthcare will contact the family with the results.
- If Liberty Healthcare determines that the child or youth has SED, the member or member representative would then apply for Medicaid. IDHW's Self Reliance will complete this process and send a formal notice to the member via mail.
- Once the child or youth has been approved for Medicaid coverage, the family will contact a Targeted Care Coordinator (TCC) of their choice to create a person-centered service plan (PCSP). To find a TCC, the family can call the Optum Idaho member line, 1-855-202-0973, or refer to the list of TCCs on the website at optum.idaho.com > For Network Providers > [Targeted Care Coordination](#). For the

next few months, Optum will mail the family a letter with information about next steps and how to find a TCC in their community. In addition, providers may also receive a letter showing which YES members are in active treatment at their agency but who do not have a TCC. Please work with those families to help them locate a TCC either at your agency or in your area.

- At this time, YES members will not lose Medicaid eligibility if they do not have a completed PCSP, however, the development of the PCSP should be a priority for providers working with YES members. All services are available to members and billable while the PCSP is under development. When this changes, Optum will alert families and providers of YES requirements and allow time for members to ensure they are compliant with the YES guidelines before a YES member loses eligibility in the YES program.
- If the family is over 300% FPG, they may have access to the YES Program through the Division of Behavioral Health (DBH). To start this process, visit yes.idaho.gov under the Contact Us section. You may call the number listed for general inquiries or submit a 'Contact YES' ticket.

Other Reminders:

- A YES member will have a "YES" in the Plan Name when checking member eligibility on Provider Express. Members in Foster Care do not have to have "YES" in the Plan Name in order to receive respite services. These claims will not be denied.
- Families who are working with a case manager with the Children's Developmental Disabilities Program or Children's Mental Health (CMH) for Wraparound or 20-511A may not need a PCSP from a TCC. If a family has already developed a PCSP or Plan of Service and is actively working with a department Case Manager, they will not need an additional plan developed nor are they required to work with a TCC as it is considered a duplication of services. If you are unsure if a family is working with a Department Case Manager, you can contact Medicaid for more information at 1-866-681-7062.
- Members who moved from traditional Medicaid to the YES Program for respite services and who continue to meet eligibility requirements, may move back to traditional Medicaid if respite is no longer needed or wanted. In this situation, the member does not need to obtain TCC or a PCSP nor do they need to go through the annual independent assessment process with Liberty Healthcare. These members will receive notification from IDHWs Self Reliance when it is time for their Medicaid eligibility redetermination and should complete the redetermination as they normally would.
- An independent assessment through Liberty Healthcare is an annual requirement to maintain eligibility for the YES Program. This is a federal requirement for the 1915(i) State Plan Option, which allows families with higher incomes to become Medicaid eligible and to access respite services. Liberty Healthcare will contact the member and member family within 60 days of the annual assessment due date to schedule the independent assessment.
- A YES member may be required to pay a monthly premium to maintain Medicaid eligibility from 150% to 300% FPG. Medicaid will be releasing detailed information on the premium program in Fall 2020.

Your Feedback is Important!

Optum recognizes that working to inform and empower our network providers to be successful is an important objective. Optum and the Provider Advisory Committee (PAC) are committed to listening and supporting our valued provider network community to ensure you have the resources, information, and training to successfully work with this population. The Children's Subcommittee meets the 3rd Thursday of each month and is open to all providers to attend. If you would like to participate, please contact your Provider Relations Advocate for information.

How Can I Learn More?

For more details, you can refer to the Idaho Department of Health and Welfare's YES website at yes.idaho.gov. If you would like additional training on YES, guiding principles of care, or specific services, please visit optumidaho.com > For Network Providers > [Provider Meetings & Trainings](#). You may also contact your Optum Provider Relations Advocate anytime with questions.

Thank you,
The Optum Idaho Team

¹ For more information on FPG, please refer to: healthandwelfare.idaho.gov > Food/Cash/Assistance > Apply for Assistance > [Who is Eligible](#)