Maintaining Eligibility for the Medicaid YES Program

If your youth qualifies for Medicaid through the Medicaid YES Program, there are certain steps that need to be taken to stay eligible. Those steps are below.

STEP 1: Complete a person-centered service plan (PCSP) within 90 days of becoming eligible for the Medicaid YES Program by working with your provider.

The PCSP must include all services your youth and family may use during your youth's treatment. An initial PCSP is required to be completed within 90 days to maintain eligibility for the Medicaid YES Program.

STEP 2: Complete your annual serious emotional disturbance (SED) assessment each year.

The Independent Assessor will reach out to your family 90 days prior to your annual renewal date to schedule the assessment. To determine when your renewal date is and schedule your appointment, contact the Independent Assessor.

STEP 3: Respite must be used at least one time per eligibility year *and* be in the PCSP.

The Medicaid YES Program requires that each member use Respite with a Medicaid-enrolled provider at least once per eligibility year. The eligibility year starts the day your youth becomes Medicaid YES Program eligible.

STEP 4: Update your PCSP at least annually by working with your provider.

An updated PCSP is required at least annually to maintain eligibility for the Medicaid YES Program. Please be sure to have your youth's plan updated before your annual eligibility date to prevent a gap in Medicaid YES Program coverage.

Important Contacts to Know

Independent Assessor – Liberty Healthcare: 208-258-7980 or idahoyes@libertyhealth.com
Idaho Behavioral Health Plan – Magellan Healthcare: 855-202-0973, magellanofidaho.com, or magellanidmfam@magellanhealth.com
Medicaid eligibility – Self Reliance: 877-456-1233 or mybenefits@dhw.idaho.gov
For questions about the Medicaid YES Program, please contact Medicaid's YES Program team: 208-364-1910/800-352-6044 (toll free) or YES@dhw.idaho.gov

If your youth is unable to complete all the steps above, they will not be able to remain eligible for the Medicaid YES Program, but they may still qualify for Medicaid another way, such as having traditional Medicaid or having Medicaid through Foster Care, adoption, or Katie Beckett. For information about other Medicaid programs and eligibility requirements, please visit: healthandwelfare.idaho.gov.

Please Note: State law says that families of Medicaid YES Program members whose income is between 185% and 300% of the Federal Poverty Guidelines (FPG) must pay a monthly premium. The premium is $15 per month per member. If a family is unable to pay, they may request a hardship waiver. State law also allows providers to charge a co-pay of $3.65 for some outpatient services if the family income is 133% of FPG or higher. For more information, please see the *Medicaid Cost Sharing* flyer or contact the Medicaid YES Program team.