Dear Provider:

The Medicaid (Serious Emotional Disturbance) SED Program was developed as part of the Youth Empowerment Services (YES) System of Care. YES provides options for families who need care for their child with SED. Strengths-based and family-centered, it incorporates a team approach that focuses on providing individualized care for children and youth.

Person Centered Plans are a requirement for Members who meet Medicaid eligibility requirements\(^1\) after receiving an Independent Assessment with Liberty Healthcare. The Division of Behavioral Health (DBH) and Family and Children’s Services (FACS) currently facilitate the development of the Person Centered Plans, and the role of Optum is reviewing completed plans to ensure compliance to the Code of Federal Regulations (CFR), specifically 42 CFR 441.725.

Person Centered Planning takes place in a Child and Family Team (CFT) meeting facilitated by a DBH or FACS facilitator, who will work with the family to identify who needs to be included in the team and then initiate the process. The Person Centered Plan is developed based on the needs and strengths identified through the Comprehensive Diagnostic Assessment and the Child and Adolescent Needs and Strengths (CANS) functional assessment with consideration of the family’s preferences. It is a document that all team members can use as a reference and includes the member’s assessed needs, strengths, preferences, goals, and the services recommended to achieve those goals. With Member/Family consent, the final document should be shared with the providers and utilized in the treatment planning process.

Beginning July 1, 2018, providers who participate in the CFT meetings can seek reimbursement for this service. Information about the new service has been communicated in previous provider alerts and can be found in the Optum Idaho Provider Manual at optumidaho.com.

---

\(^1\) Members who are diagnosed with a SED and whose income is at 185-300% of the Federal Poverty Level
Please keep the following things in mind:

- Providers do not need to wait for the Person Centered Plan to be approved to begin providing services.\(^2\)
- The CFT meetings include the youth, their family, their providers, and other individuals the youth/family believe can be helpful in developing and implementing a care plan that will assist them in achieving their treatment goals. This process helps ensure that treatment is driven by the youth and family and facilitates participation by all behavioral health providers.
- If there is disagreement on the Member’s diagnoses, this should be discussed in the Child and Family Team meeting, and documented on the Person Centered Plan under the Resolution Strategy section. The Member’s/Family’s voice and choice should drive the development of the plan, and providers should discuss how they will resolve any diagnostic differences.
- The CANS must be updated every 90 days on the ICANS platform by the primary treating therapist who has the direct relationship with the child/youth. If the primary therapist has not obtained CANS certification, the CANS updates will be completed by DBH/FACS staff until the therapist obtains certification and access to the ICANS platform.
- The Person Centered Plan is updated by the DBH facilitator and Child and Family Team:
  - At least annually
  - When the CANS assessment indicates a change is needed to the Person Centered Plan
  - When the child/family requests it
- Optum approval of Person Centered Plans is not an authorization for services, but is rather to ensure that the submitted plan contains all elements required by the Code of Federal Regulation for Home and Community Based Services.
- Providers will continue to develop individualized treatment plans for the specific services they are providing. These plans should align with the Comprehensive Diagnostic Assessment, CANS assessment, and Person Centered Plan.

If you have any questions, please contact:
- Your Optum Idaho Network Manager
- Optum YES email box: optum.idaho.yes@optum.com

Thank you,

Optum Idaho .......................................................... Idaho Department of Health and Welfare

---

\(^2\) However, prior authorization requirements still apply to some services.