Instructional Guide for the Certification of Need (CON)

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Certification of Need Instructions for Use

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I. Introduction

Out-of-Home (OOH) providers who are designated as a Children's System of Care (CSOC)/Medicaid provider of Psychiatric Residential Treatment Facility (PRTF) services as defined in regulation N.J.A.C. 10:75 are required to have a **Certificate of Need** (CON) approved and signed by the Medical Director at the CSA <u>prior</u> to a youth's admission. PRTF providers are designated as Program Type 59 in CYBER.

Admission Processing via YouthLink:

CON processing is automated for PRTF programs (Program Type 59) that utilize YouthLink for admission processing. This automated process is triggered when the OOH provider changes the referral's YouthLink status to 'Schedule'. This process starts a CON review and approval process at PerformCare (PC). This functionality will require these applicable OOH programs to have an approved CON before they are able to process the youth's admission via YouthLink.

Note: As the functionality automates the request for the Certification of Need, providers do not need to contact the Service Desk with requests for Certification of Need.

Manual Admission Processing (IRTS programs):

The admission process for Intensive Residential Treatment Services (IRTS) programs (Type 59 only) is manual and does not follow the above-mentioned YouthLink process. Rather, once the CSOC IRTS Liaison submits the IRTS Interim Summary and Consent to Release Protected Health Information (PHI), PerformCare will review the clinical information and approve the admission. The IRTS program will report the youth's admission via an email to PerformCare's Service Desk at which time the CON is completed, and the admission is manually processed by the CSA. Once admitted, the Continued CON is automatically generated to give the youth a CON.

The instructions in this guide refer to the OOH provider's admission process via YouthLink.

II. Accessing CYBER

CYBER can be accessed via the PerformCare website – <u>www.performcarenj.org</u>. The link is available under the CYBER menu at the top of the home page or the button at the bottom of the page. Users must log into CYBER with their Username and Password.

NJ Children's System of Contracted System Administrator – PerformCa	Care Ire*	1-877-652-7624 24 hours a day, 7 days a week		A Home	XA Language ▼ Search website	A Careers	About	A Contact
Parents and Caregivers •	Youth •	Providers •	Educators	CYBE	R Find a	Provider	En es	spañol

Each provider organization has at least two CYBER Security Administrators, and your agency's CYBER Security Administrators can set up a login and temporary password. Access will be based upon login type and security levels.

Before logging in, keep in mind...

- Every time CYBER is launched, the Username and Password is required, then click the LOGIN button to continue.
- Users are required to change their password every 90 days.

Above the login area is a statement that, CYBER users acknowledge their responsibility to protect the privacy of and to guard against the inappropriate use or disclosure the Protected Health Information (PHI) contained within the system.

This statement will appear during each log in.

Please also check the link: <u>CYBER Access Requirements</u> page on the PerformCare website for the most up-todate technical requirements (such as browser compatibility and operating systems) needed to access CYBER.

At the bottom of the login page is the version of CYBER. The server number is the last 2 digits at the end (-XX). This is helpful to note when requesting assistance.



CYBER LOGIN

As a CYBER user, I understand that my work will involve access to Protected Health Information (PHI) as defined by HIPAA (Health Insurance Portability and Accountability Act) for the purpose of providing or arranging treatment, payment, or other health care operations. I also acknowledge that I am engaged by a covered entity. I further acknowledge my responsibility to protect the privacy of and to guard against inappropriate use of disclosure of this PHI by logging in as a CYBER user.

This acknowledgement is in compliance with the Health Insurance Portability and Accountability Act (HIPAA) of 1996 and its implementation regulations. For more information on HIPAA, please go to http://www.hhs.gov/ocr/hipaa/

CYBER contains substance use diagnosis and treatment information that is protected by federal confidentiality rules (42 CFR Part 2). Users that access such confidential information pursuant to a valid written consent are prohibited from making any further disclosure of this information unless further disclosure is expressly permitted by the written consent of the person to whom it pertains or as otherwise permitted by 42 CFR Part 2. A general authorization for the release of medical or other information is NOT sufficient for this purpose. The federal rules restrict any use of the information to criminally investigate or prosecute any person with substance use treatment needs.

Please CLEAR your browser Cache before using this new version of CYBER.

Username			
			۲
	LOGIN		
Custome	r Service Request Form Forgot	Password?	

For technical support, please use the <u>Customer Service Request Form</u> link under the login.

III. Certification of Need

A Certification of Need (CON) will either be generated through:

- Manual admission processing (see Introduction for description)
- Admission processing via YouthLink and submitted to PerformCare for approval the youth's referral status is changed to SCHEDULE in YouthLink.

Admission via YouthLink

It is imperative that OOH providers utilize the SCHEDULE status properly on YouthLink, meaning that this status should only be used when a youth is <u>officially scheduled</u> for admission. At minimum, the youth's referral status should be changed to SCHEDULE at least five (5) days prior to the youth's scheduled admission date. This will provide for enough time for the CON review and approval process to take place.

Upon receipt of the automatically generated CON, PerformCare will have two (2) calendar days to review and approve the CON. The OOH provider will not be able to process the youth's admission until approval is granted. Once the CON is reviewed and approved, the OOH provider will be able to continue their normal process for admission via YouthLink. The OOH provider will not be able to admit the youth prior to the date the CON was approved.

Whether admitted via YouthLink or manually admitted, The Certification of Need is specific to the youth's Intensity of Service (IOS) need.

For youth admitted via YouthLink, the CON is not specific to the provider that initiated the CON. Once approved, the CON will be valid for 45 days from the approval date. If the youth is admitted to an OOH program, the CON will be valid for one year from the approval date.

Certificate of Need			
Form ID			
		ADMISSION C	ERTIFICATION OF NEED
		FOR INPATIENT PSYCHIATE	RIC TREATMENT
		FOR UNDER AGE 21 MEDIC	AID INDIVIDUAL
Medicaid regulations require	that certification be made by an Indeper	ident* Interdisciplinary team consisting of a	a psychiatrist and at least one other mental health professional, such as a physician, psychologist, nurse or social worker.)
For Admission.			
First Name	Last Name	Date of Birth	Cyber ID
IOS Intensive PCH for I	1/DD		
Associated YL Referral	CC	ОМ Туре	
		Annual	
Additional References			
We the undersigned, on bas	sis of clinical knowledge about the above	named individual, have made the determine	nation that:
I Inpatient treatment under t	the direction of a physician is needed.		

CMO and OOH providers will be able to view the approved Certification of Need in the youth's Treatment Plan Assessment grid.

Users will be able to review the history of the CON by clicking on the **Review History** button at the bottom of the CON. The CON Review History screen will work in the same fashion as the Treatment Plan Review History screen.

Sel	ect Action 🔹	Update Statu	SCancel	Print Rev	view History
e approved C	ON may also be print	ted in PDF format usi	ng the Print bu	itton.	
ne approved Co	UN may also be prim	ted in PDF format usi	ng the Print bu	itton.	
Assessment Type	Assessment Sub Type	Assessment /CFT Date	Author	Submitted to CSA Date	Assessment ID
Assessment Type	Assessment Sub Type	Assessment /CFT Date	Author	Submitted to CSA Date	Assessment ID
Assessment Type TREATMENT PLAN StrengthsAndNeedsA	Assessment Sub Type	Assessment /CFT Date	Author	Submitted to CSA Date	Assessment ID
Assessment Type TREATMENT PLAN StrengthsAndNeedsA OOH - CON	Assessment Sub Type	Assessment /CFT Date	Author	Submitted to CSA Date	Assessment ID

Certification of Need Types

There are three Certification of Need Types:

- 1. Initial the First CON created and associated to the youth's current YouthLink referral and IOS.
- 2. **Continued** Created **automatically by the system** for youth admitted to an OOH Program with a Provider Type 59. Also, youth that are admitted to a Program that converts from Provider Type 44 to Type 59 will automatically receive a CON with a CON Type of Continued.
- 3. **Annual** Created **automatically by the system** and assigned to PerformCare to validate the youth's IOS on an annual basis once they have been admitted to the OOH program. This occurs annually from the last CON Approved Date.

Filter by Location Program Type Indicator

OOH providers will be able to determine if a youth requires a CON for admission to a particular agency and when the approved CON is due to expire.

OOH Programs will now have their **Provider Type** (44 or 59) displayed at the end of their name in the **Filter By Location** drop down at the top of the YouthLink screen.

Filter By Lo	cation:											
Agency N	Agency Name				-	- 59						
ovider Queue	Youth Link	Census Assignm	ment History	Projected D	ischarges / Otl	nor						
ovider Queue Provider Qu	Youth Link	Census Assigni	ment History	Projected D	ischarges / Otl	nor	-				Clear Sea	arch 🔒 Print
rovider Queue rovider Qu Youth/Child ID	Youth Link eue Map	Census Assign Referral Number	ment History Status	Projected D Priority	ischarges / Oti	CON Exp Date	Youth/Child Name	Gender	Age	Case Management Entity	Clear Sea	Last Status Cha
ovider Queue 'rovider Qu Youth/Child ID	Youth Link eue Map Map	Consus Assignt Referral Number	Status Awaiting I	Projected D Priority Priority	ischarges / Otl CON Expired	CON Exp Date 07/10/2023	Youth/Child Name	Gender	Age	Case Management Entity	Clear Sea	Last Status Ch

CON Column Headings

CON - displays blank until the CON is reviewed by PerformCare, then displays a status for less than or equal to 45 days from the current date. The CON column will display these statuses:

- **Approved:** The CON has been approved and the youth's referral is ready to be admitted to an OOH program.
- InReview: The CON is currently with PerformCare for review.
- **Not Approved**: The CON is not approved, and the youth's referral cannot be admitted. Review progress notes.
- **Cancelled**: PerformCare has cancelled the CON for this youth, and the referral cannot be processed. Review progress notes.

CON Exp Date – displays the date the approved CON will expire

There are Welcome Page links for the CON on the **OOH providers Welcome Page** under the **YouthLink View** section. It will display **Approved** and **Not Approved** CONs less than or equal to 45 days from the current date. Click Refresh Total to see numbers in the parentheses.

YouthLink for CMO Providers

CMO has specific columns in YouthLink and Provider Status grids that assist in determining if a youth referral requires a CON for admission to a particular OOH agency, and when the approved CON is due to expire.

e	Welco	ome to CYBER					
-	User Name:	User Role:	User Group:				
Quick Search							Refresh Totals
First Name							Joint Care Review
Last Name							Assessments
DOB							Authorizations
MM/DD/Y	YYY III						Admissions
	1	-			(Eligibility
routhLink - Approved CON	-	Select #			Clear Search	😝 Print	YouthLink View
ite Name You	th/Child ID First Name	Last Name	IOS	Referral ID	Scheduled Date CON E	xp Date	New To YouthLink(0)
							New to Prov Queue(0)
							Accepted (7)
							Scheduled(5)
							Recently Admitted(0)
							1
							Approved CON(4)
							Approved CON(4)
							Approved CON(4) Not Approved CON(0)

Drag the bottom scrollbar to the right and CMO providers will have two columns labeled **CON** and **CON Exp Date** to the right of the Open to SRTU column in the Youth Link grid view. The CON column will display Approved, In Review, Not Approved, or Canceled. Approved CONs will display for youth with a CON that is less than or equal to 45 days from the current date. The CON Exp Date column will display the expiration date of the CON.

	5	Youth/Child	ID Referral#	105				-		
All Ad	tive	=					= Sear	ch Clear	Search	
outh Link	c								_	
Youth/Ch ID	Мар	Referral Number	Referral Status	Youth/Child	Gender A	ge Case Management Entity	Intensity Of Services	Open to SRTU	CON	CON Exp Date
	Мар						RTC			
	Map						GH 2-JDD	Yes		
							ТН			
	Map									
	Мар Мар						PCH	Yes		
	Мар Мар Мар						РСН ТН	Yes		

When a referral row is selected in the Youth Link grid, the Provider Status grid below will populate. The column in the Provider Status grid labeled **Provider Type** will indicate if the OOH provider is a **type 44** or **59.** <u>All 59 Type OOH</u> <u>providers require a CON.</u>

Referral Number	Status	Reason Description	Site Name	Provider Type	Avail Beds	Contact Name	Contact Phone	Contact Email	Youth/Child	Day
	NOTACC			44	8					0
	ASSIGN			59	4					
	NOTACC			59	0					
	NOTACC			44	0					

Additional Information for OOH Providers

An OOH provider can request an expedited review of a Certification of Need by completing the Customer Service Request Form at <u>http://www.performcarenj.org/ServiceDesk</u> or use the link to the Customer Service Request Form below.

Note: The review requires <u>two</u> approvals. A Clinician and a Medical Director or Clinical Director. If the Medical Director does not agree with the IOS at the time the CON is reviewed, the PerformCare Medical Director or Clinical Director will contact the CMO Director for any additional information. As a result of this, the Medical Director's denial of the CON will either be upheld and the IOS changed, or the CON will be approved and the youth can be admitted to the identified program.

IV. References

- PerformCare Website Training page:
 - o <u>http://www.performcarenj.org/provider/training.aspx</u>
- Instructional Guide to YouthLink for Care Management Organizations
 - <u>http://www.performcarenj.org/pdf/provider/training/care-management-organization/instructional-guide-to-youthlink-for-cmo.pdf</u>
- Instructional Guide to YouthLink for Out of Home Providers
 - <u>http://www.performcarenj.org/pdf/provider/training/out-of-home/instructional-guide-to-youthlink-for-out-of-home-ooh-providers.pdf</u>

PerformCare Customer Service

www.performcarenj.org/ServiceDesk

1-877-652-7624