3560 and Third Party Liability Data Collection in CYBER

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The purpose of this presentation is to provide an overview and updates on the following:

- 3560 Application
- 3560 Termination Requests
- Third Party Liability (TPL) data collection in CYBER
Social Security Number Access

The 3560 Application is for use by Care Management Organizations (CMO) and Mobile Response and Stabilization Services (MRSS) presumptive eligibility (PE) users to provide State Medicaid coverage to youth in the NJ Children’s System of Care.

Social Security Number (SSN) access for CMO and MRSS users must have security groups SSN_3560_Read and SSN_Update added to their usernames to view and edit social security numbers in youth records in CYBER. SSN will appear masked to all users without the SSN security groups. The SSN is editable in the following locations:

- Demographics tab
- Insurance tab (Insurance Details)
- 3560 Application Requests (for Parents/Guardians and Youth/Child)

Note: The 3560 is not the same as Medicaid. It does not have any NJ FamilyCare (NJFC) medical benefits associated with the package. The 3560 is generated specifically for youth that are authorized for CSOC services that are not otherwise NJFC eligible. In these situations, the 3560 allows for the service to be billed through the Medicaid system for CSOC provider reimbursement.

This document assumes that the user has security access to view and edit the youth SSN.
3560 Application Requests
3560 Application Requests

To access and create a 3560 Application for a youth:

• First locate the accurate youth’s CYBER record
• Click on the **Eligibility Request** button on the bottom left-hand side menu in CYBER.
• Make sure 3560 Request tab is active
3560 Application Requests

- 3560 Application Request grid includes the name of the PE entity
- Data in the grid will display with the oldest record first; columns can be sorted by clicking on column headings.

**3560 Applications sent to CSOC**

3560 applications escalated to CSOC for review do not have a timeframe for processing; once a determination is made the PE Entity will be notify, via email, by PerformCare with CSOC’s decision.
CMO and MR PE Entities and PerformCare have the ability to create a new 3560 Application Request:

- **Create New from selected**- New 3560 application with pre-populated information from the previous 3560 application.
- **Create New from scratch**- Create a new 3560 application
- **Open Selected Application**- Open selected 3560 application
• **Always** check the start date of an existing eligibility segment on the Eligibility tab prior to creating a new Application Request.

• If there is an overlap of coverage (dates) of both applications, the user will be unable to submit the new Application.
Both Medicaid Ineligible and Denied by Medicaid have two selection menus for use if 'Yes' is checked; allowing the user to select two reasons for each.

If a Term Reason is selected, the user is required to include a Requested End Date.

Its important to include any non-clinical notes in the comments; that can justify the 3560 request.
• **Immigration Status** exists in both menus for Ineligibility and Reason for Denial

• 777-00-0000 is used as SSN **only** for a ‘resident without documentation’

• If youth is US Citizen/Legal Resident without SSN please use a generic number 123-45-6789 and add the reason in the Comment Box for not having a SSN

This document assumes that the user has security access to view and edit the youth SSN.
3560 Request Tab – Termination Reasons

Reasons for 3560 termination:
• Youth has other Medicaid/NJ FamilyCare (NJFC)
• Youth is no longer in the system of care
• Youth turns 21/No CSOC extension
• Youth is in OOH and potentially eligible for Medicaid or NJ FamilyCare
• Youth/parents/legal guardian has moved out of state
• Parents/legal guardian not engaged in the Medicaid application process
• Parents/legal guardian elects to disenroll from CSOC SOC
• CSOC discretion to request 3560 eligibility termination
• Death of the Youth
• Other
• Home
Household Information Tab

Demographic information will to populate from the youth’s Face Sheet.

- The youth’s First and Last name should display only what appears on birth certificate
- Date of birth, gender and SSN should also populate
- Click the plus (+) to enter each parent(s) information

This document assumes that the user has security access to view and edit the youth SSN.
Household Information Tab – Parents/Guardians in the Household

- Please note that the SSN field is no longer required for parents/legal guardians.
Household Information Tab –
Add Children Under 21 to the Household

- Select youth’s relation to parent(s) – If NJ FamilyCare considers the Legal Guardian as 'fiscally responsible' for the youth, include them on the 3560 application as the 'Parent'.
Household Information Tab –
Add Children Under 21 to the Household

- Social Security Number (SSN) is required for the applicant youth requesting 3560 coverage. (If Demographics are completed on the Face Sheet, the applicant’s SSN, First Name, Last Name and date of birth will automatically populate to the 3560 application.) If not completed, user will be unable to submit the 3560 request.
- 777-00-0000 is used as SSN only for a ‘resident without documentation’
- If youth is US Citizen/Legal Resident without SSN please use a generic number 123-45-6789 and add the reason in the Comment Box for not having a SSN
- Answer youth’s Student Status question
- Answer youth’s Legal Status question
- Date of Entry should not be used for US citizens
- ‘Pregnant’ is not a required field; but we encourage to answer the question. If the youth is pregnant, this information should be entered in the Comments box of the first tab for an enriched benefit.

This document assumes that the user has security access to view and edit the youth SSN.
Add Children Under 21 to the Household - View Insurance

• Clicking on 'View Insurance' button will bring up the youth’s current insurance information (from the Insurance tab of the Face Sheet).
• If the youth has Third Party Liability (TPL, or private health insurance) enter the Policy holder information.
• Enter required Policy number (the application will be rejected without a valid policy number)
• Do not add NJFC/3560 as previous coverage
The youth insurance information can be viewed from the 3560 application or on the Insurance tab of the youth’s Face Sheet.

The **Youth Insurance Information** window allows users to see the youth’s **Current** and **All** (current and past) insurance coverage listed on the screen grid; while not having to navigate away from the 3560 Application.

See [Third Party Liability](#) for more information.
When information is entered in the Employer fields, **Work Income** and **Type of Employment** become required.

If the user selects 'Yes' for Changed jobs in the last six months, the **Former Employer** and **Date Job Ended** fields become required.
Income Information – Add Income

- When the user enters an amount for Other income, at least one checkbox for the source of the income must be selected.
- Add parent(s) employer name, address and phone number (if available)
- Mark Type of Employment
- Add Date job started
- Add Work Income (before taxes)
- Please round up to nearest whole dollar (Do not include cents. i.e. $2459 is appropriate)
- Indicate ‘How often paid?’
- If the parent(s) income is substantial please add the information in the Comments Box
- Add Other income and mark sources (if applicable)
Approval Tab

• If the CSA has entered a Start/Term date, and the Application is reviewed by CSOC, the CSOC dates will take precedence.

• When the PerformCare or CSOC accept/reject the application, the date and time will appear in the Comments box.

• Calculated Results area will populate, according to the information logged in the youth’s record.

• Do not add a termination date unless the request is for **Gap in Coverage**

• Comments should not include youth’s treatment or diagnosis

• Please click Submit. If the application is just saved, it is considered incomplete.
Eligibility Tab

The Eligibility Tab displays the same information that is on the Eligibility tab of the youth’s Face Sheet.

**Please note:** 3560-5xx numbers are different than 'regular' 3560 numbers as they cover *respite services ONLY.*

_A youth can receive both a 3560-5xx and 3560 eligibility number._

**Unsent Authorizations**

The youth must be NJFC/Medicaid eligible at the start date of the authorization period in order for the authorization to be considered a NJFC/Medicaid authorization and transmit into the DXC system. Check the eligibility tab to confirm the youth’s NJ FamilyCare/3560 number is showing with the correct start and end dates to cover the prior authorization. Please note that it takes 7 business days for the NJ FamilyCare/3560 number to attach to the authorization. PerformCare feeds authorizations to DXC Technology on Tuesdays and Thursdays **ONLY**. If the authorization has not been sent after 7 business days from the day the authorization was created, please contact PerformCare by using the Customer Service Request Form: [www.performcarenj.org/servicedesk/](http://www.performcarenj.org/servicedesk/)
3560 Termination Requests
3560 Termination Requests

- To access/create a **3560 Termination** for a youth:
- First locate the youth’s CYBER record,
- Then click on the Eligibility Request button on the bottom left-hand side menu in CYBER.
- Click the 3560 Terminations tab
3560 Termination Requests

- 3560 Termination Request grid now includes the name of the Entity that submitted the Application.
- Data in the grid will display with the oldest record first; columns can be sorted by clicking on column headings.
Clicking on the **Open/Add Termination** button will allow the user to create a new Termination Request for the youth.

If there are no open 3560 records available for termination, the user will receive an error message and will be unable to create the termination.

- This will prevent multiple termination requests from being submitted for the same 3560 number.
3560 Termination Requests

The 3560 number drop down box will list all the youth’s open and qualified for 3560 termination.
3560 Termination Requests

- The **Term Date** box (<M/d/yyyy>) for PerformCare/CSOC will be active based upon users log-in.

- PerformCare and CSOC can Accept or Reject a 3560 Termination request. **CSA Accept Reject Status** and **CSOC Accept Reject Status** have a drop-down menu; which includes **Accepted**, **Rejected** and new 'Clear Status' option. Selecting 'Clear Status' will default to a blank box.

- **Save** button will save the request as is and allow the user to return to the 3560 Termination Request at a later time.
3560 Auto-Terminations
3560 Auto-Terminations

- CYBER has the ability to automatically terminate 3560 numbers.
- CMO/MRSS, BA/IIC, OOH, PerformCare and CSOC users will have a link on their Welcome Page Under the Eligibility accordion 3560 Auto-Term – which will list the 3560 numbers that were automatically terminated.
- Numbers will remain on this grid for 1 day after termination.
- Users will also see 3560 numbers on the Term Eligibility link for the youth (in My Active Youth tab). Numbers will remain on this grid for 30 calendar days after termination.
**Auto-Termination – When and How**

- If a youth **has a currently active 3560 number and is eligible for NJFC/Medicaid**, thus creating an **overlap** in coverage, the 3560 number will be **auto-terminated** the day before the Medicaid Effective Date.

- If the 3560 number was **opened after the NJFC/Medicaid became effective**, the 3560 number will be **auto-terminated** the day after it was opened.

- If an active 3560 number exists for a **youth that has been transitioned from CMO/MRSS into the community** (meaning the youth will no longer be enrolled with a PE Entity). The 3560 number will be **auto-terminated** on the last day of the month following the close of access to the youth in CYBER.
Auto-Termination

- When a youth enters an Out-of-Home (OOH) facility and has an open 3560 number, the system will auto-terminate the 3560 on the last calendar day of the month following the Episode end date.
  - Only 3560 numbers or segments that began prior to Episode will be auto-terminated.
  - The Referral Date for the Episode will be used to calculate the date for auto-termination.
Auto-Termination – When and How

• When a **youth turns 21** and has an open 3560 number, the system will auto-terminate the 3560 on the last calendar day of the youth’s birth month.
  
  o The auto-termination will be created in the system 2 months prior to the termination date; CME will see the upcoming termination on the Expiring Eligibility link of their Welcome Page.

• If there has been **no activity in a youth’s record for 90 days** (no Treatment Plans, Authorizations or Progress Notes have been entered), the system will auto-terminate the 3560 on the last day of the month following the 91st day of inactivity.
Auto-Termination – When and How

• In addition, CYBER will auto-terminate 3560 numbers after they have been active for a year.
  
  o The annual auto-termination will be scheduled 60 days in advance so that users will see it on their Welcome Page (Expiring Eligibility).

  o The termination date will be the last day of the month prior to the month in which the 3560 number was initially opened.
3560 Terminations

When user clicks on the **Eligibility Requests button** and **3560 Termination tab** in the youth’s record:

- Auto-Terminated 3560 numbers will appear in the Termination tab where users can view all terminations assigned to youth recorded.

- The PerformCare Accept Reject Status Comments field will be populated with 'Auto Terminated' along with the reason for the auto-termination.

*Note: If a user has created a 3560 Termination request manually, it will be processed even if the 3560 number falls into one of the previously mentioned termination categories.*
Third Party Liability (TPL)
Third Party Liability

• Third Party Liability (TPL) functionality within CYBER allows users to enter the youth’s family private health insurance. This youth information is accessible in CYBER Insurance tab (located in the Face Sheet) and in the 3560 Application.

• This functionality will also include automatic data gathering of NJ FamilyCare (Medicaid)/HMO/MCO coverages, as well as 3560 eligibility information.

• The Medicaid information that displays on the youth’s Eligibility tab will continue to show there, but also appears on the Insurance tab so that all Eligibility/Insurance information can be viewed in one grid.
Third Party Liability

- Any CYBER user that has access to a youth’s record will have access to the Insurance tab.
- Only CSA, CSOC, and PE Entities will have the ability to add or edit TPL information.
- Any TPL records created by a CYBER user can be opened (double-click on record in the grid) and edited.
- Any non-CYBER created records (those that are fed into the system from DXC Technology or OIT) cannot be edited and can only be reviewed in the Insurance grid.
The Face Sheet’s **Insurance tab** will include the youth’s First Name, Last Name and DOB.

This grid will also include:

- **Source** – CYBER (manually entered), DXC Technology Medicaid, OIT
- **Type** – Type of coverage; TPL, 3560, NJ FamilyCare, etc.
- **Start and End Dates** - of insurance coverage
- **Comment** – to be used by PE Entities regarding the youth’s insurance coverage
- **Description** – Coverage Type; HMO, Major Medical, Medicare Supplemental, etc.

- To create a new TPL record, click on the ‘Add Insurance' button.
- The Add New Insurance window will open.
By default, only the **Active Eligibility** insurance will appear in the grid. To see all insurance that the youth has been covered in while in the Children’s System of Care, click the toggle link for '**All Eligibility**'.
Third Party Liability – Add New Insurance

The Source and Youth Information will populate automatically.

Insurance Carrier – choose the appropriate company from the menu that appears after user starts to enter information; the remainder of the insurance fields will populate.

Policy Information can be found on the insurance card (see next slide for a sample).

*There are no required fields; users can Save & Close without completing.
Sample Insurance Card

- **ID Number** = Policy Number
- **RxGrp** = Group Number
Third Party Liability – Add New Insurance

Action Buttons

• **Save** – allows to save the record and keep the window open for further editing

• **Save & Close** – will save the record and close it, returning the user to the Insurance tab

• **Copy** – duplicates the existing TPL information record in the Insurance tab grid

• **Complete** – runs a validation on the required fields to check for completeness; if all fields are filled in, the record will be locked for editing and will be sent to the Office of the Medicaid Inspector General (OMIG) for verification. If the fields are not completed, the user will receive an error message, stating which fields are missing and indicating that the record has not been saved.

• **Delete** – available only for records that have a status of 'open'.

• **Cancel** – will cancel any actions taken prior to a Save.

• **View Comment** – an Insurance Details Comment may be entered by clicking this button.
If you have questions about the 3560 Application and/or Termination Request functionality or the TPL functionality, please review the existing training documentation at:

https://www.performcarenj.org/provider/training.aspx

For technical or procedure issues, please use the Customer Service Request Form.

PerformCare Customer Service

www.performcarenj.org/ServiceDesk/
1-877-652-7624
Care is the heart of our work.