

Using the Customer Service Request Form

July 2019 – (01332)

PerformCARE[®]

Delivering
High-Quality
Service and Support

The Customer Service Request Form was created as a tool to streamline secure communication and simplify the process of requesting assistance from PerformCare.

It is recommended that providers complete the Customer Service Request Form to capture all the necessary details about their request.

Some general examples of a request might be:

- A technical problem
- A Medicaid question
- An access issue

This guide will detail what the Customer Service Request Form is, how to access it, and all the different types of requests a provider can make using the Form.

How Is the Form Secure?

The Customer Service Request Form resides on a webpage that uses Secure Sockets Layer (SSL) technology. This can be identified by the webpage address starting with 'HTTPS' which is an extension of the Hypertext Protocol. This extension permits secure communication over a computer network and is widely used on the Internet.

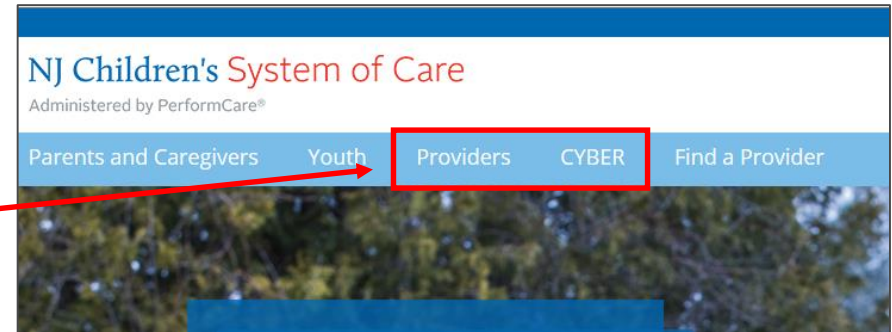
When submitting a Request Form, the information entered in the form is sent as an email from the PerformCare web server to PerformCare's ticketing system.

The email that is sent remains within the PerformCare network. It does not leave the network to go through any external email servers.

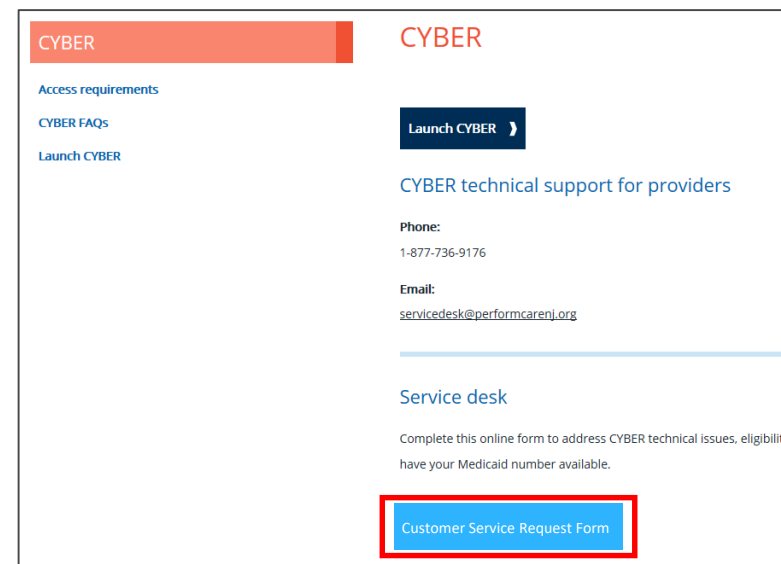
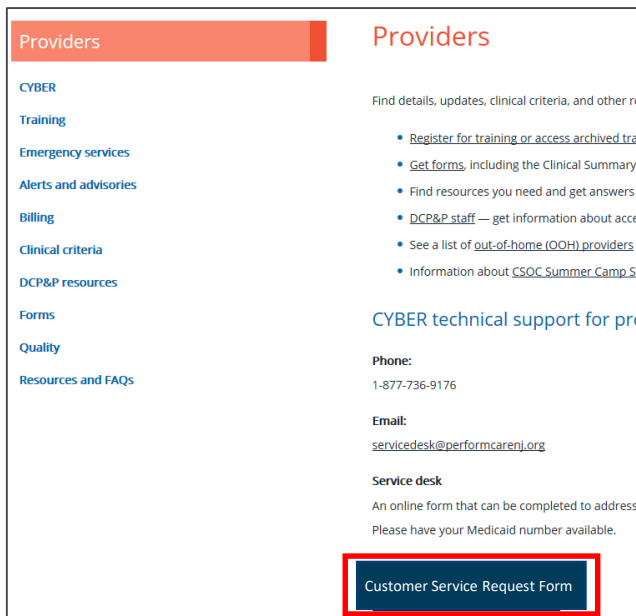
Always use the Customer Service Request Form when sending any message containing PHI.

Accessing the Customer Service Request Form

On the PerformCare website, the Customer Service Request Form can be found by clicking the links for **Providers** or **CYBER**.

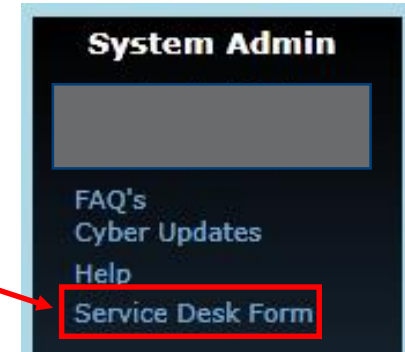


Click the **Customer Service Request Form** button and the form will open.

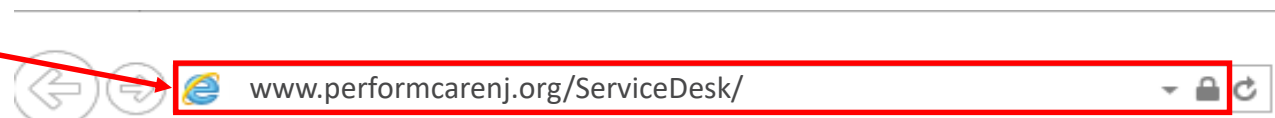


Accessing the Customer Service Request Form

Inside **CYBER** the Customer Service Request Form can be found by clicking the **Service Desk Form link** and it will redirect users to the new *Customer Service Request Form*.

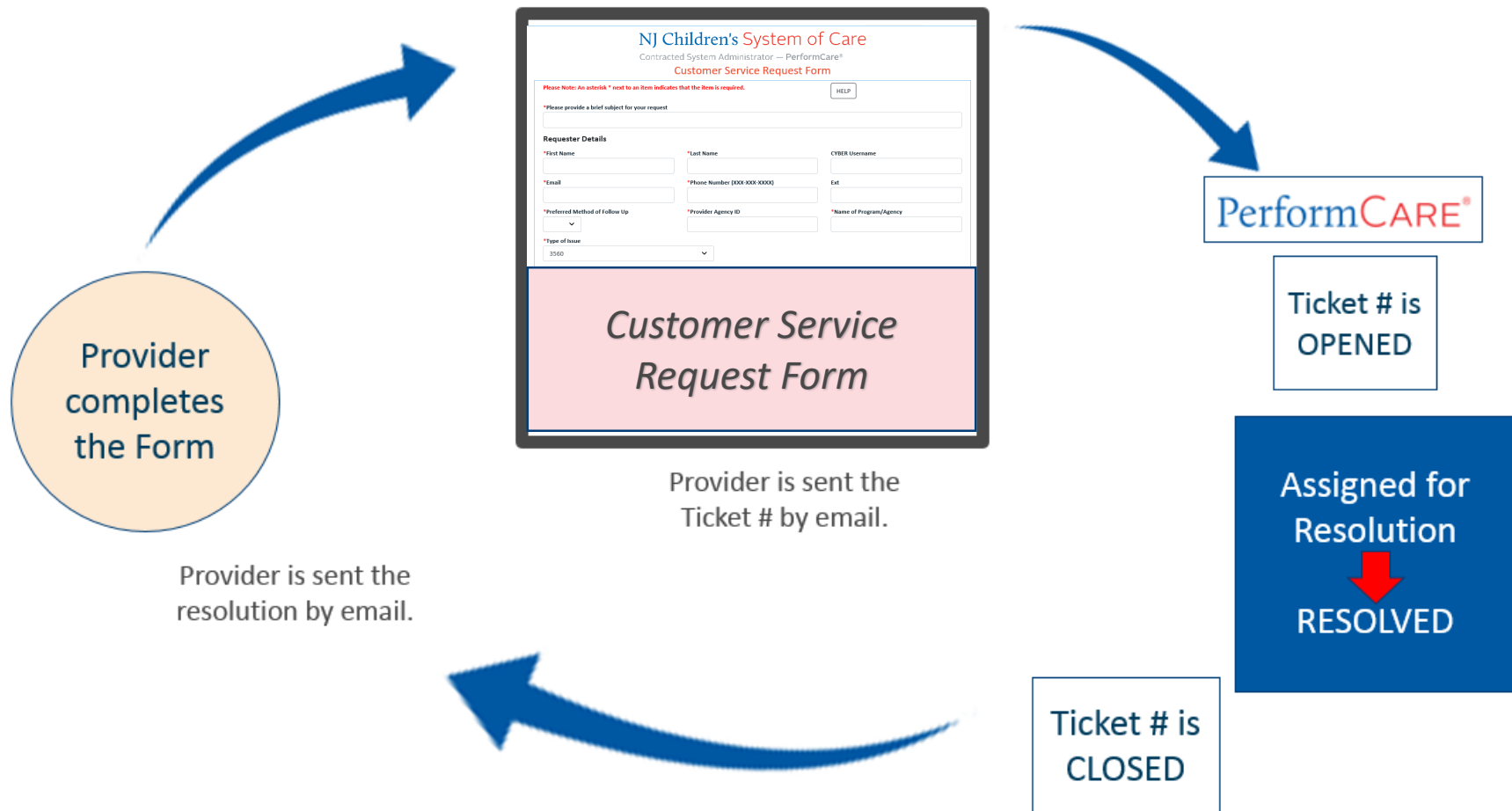


Save the **Customer Service Request Form link** as a **Favorite** and click the button to go directly to the Form: www.performcarenj.org/ServiceDesk/.



How Does the Customer Service Request Form Work?

The process begins by completing a Request Form. The completed form generates a ticket number that is emailed to the Provider and is tracked at PerformCare. Once the ticket is resolved, the Provider will receive an email with the Resolution.



The Customer Service Request Form

Subject Line – This is a brief description of the issue, similar to the subject line in an email.

Requester Details – This area collects all the contact information about the person making the request.

Type of Issue – Selecting the type of issue automatically sets what Type of Category or additional information must be collected.

Request Details – This area is structured on the type of issue selected. It can include the Type of Category, required fields of PHI data, uploaded documents and additional information.

Type of Category – Selecting the type of category also adds automatically additional information that must be collected.

Add Row – This grid section allows the requestor to add multiple rows of youth information.

Browse/Upload – This section allows the user to browse their own system for files and upload them to the form.

Submit Request button – Submits the entered information to PerformCare

NJ Children's System of Care
Contracted System Administrator — PerformCare®
Customer Service Request Form

Please Note: An asterisk * next to an item indicates that the item is required. HELP

*Please provide a brief subject for your request

Requester Details

*First Name *Last Name CYBER Username

*Email *Phone Number (XXX-XXX-XXXX) Ext

*Preferred Method of Follow Up

*Provider Agency ID *Name of Program/Agency

*Type of Issue

Request Details

*Type of Category

Remove	CYBER ID	Date From (mm/dd/yyyy)	Date To (mm/dd/yyyy)
No Rows To Show			

*Please provide additional information

Upload

An asterisk (*) next to a field on the Form indicates that it is required.

Requester Details

You must complete all the **Requester Details** (who is making the request) and the **Request Details** (what the request is for) before submitting:

- Enter a brief subject for your request* (under 200 characters).
- First Name*
- Last Name*
- CYBER Username
- Email*
- Phone number/Extension*
- Preferred method of follow up (choose from Email or Phone)*
- Provider Agency ID*
- Name of your Program/Agency*
- Type of Issue*

NJ Children's System of Care
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Customer Service Request Form

Please Note: An asterisk * next to an item indicates that the item is required. HELP

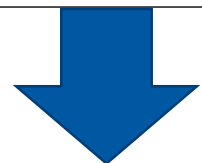
*Please provide a brief subject for your request

Requester Details

*First Name <input type="text"/>	*Last Name <input type="text"/>	CYBER Username <input type="text"/>
*Email <input type="text"/>	*Phone Number (XXX-XXX-XXXX) <input type="text"/>	Ext <input type="text"/>
*Preferred Method of Follow Up <input type="text"/>	*Provider Agency ID <input type="text"/>	*Name of Program/Agency <input type="text"/>
*Type of Issue <input type="text"/>		



When a **Type of Issue** is selected, the bottom portion of the screen will expand with additional information that will need to be entered.



An asterisk (*) next to a field on the Form indicates that it is required.

Requester Details (con't)

Certain agencies and organizations may not have a Provider Agency ID. This will include CSOC, DCP&P, OAS, FSO, Summer Camp Services providers, and providers that do not have a Medicaid ID.

If Providers *cannot locate* their Medicaid ID or if they *do not have* a Medicaid ID, they may enter:

Provider Agency ID field: 000

Name of Provider/Agency field: name of the organization or business

This will satisfy the Form's validation.

NJ Children's System of Care

Contracted System Administrator — PerformCare®

Customer Service Request Form

Please Note: An asterisk * next to an item indicates that the item is required. HELP

*Please provide a brief subject for your request

Requester Details

*First Name	*Last Name	CYBER Username
<input type="text"/>	<input type="text"/>	<input type="text"/>
*Email	*Phone Number (XXX-XXX-XXXX)	Ext
<input type="text"/>	<input type="text"/>	<input type="text"/>
*Preferred Method of Follow Up	*Provider Agency ID	*Name of Program/Agency
<input type="text"/>	<input type="text"/>	<input type="text"/>
*Type of Issue	<input type="text"/>	
<input type="text"/>	<input type="text"/>	

Select the Type of Issue / Type of Category

Some **Type of Issue** selections require specific details to in order to be addressed and resolved. This is entered in the Request Details area called **Type of Category**, for example:

When you select *Type of Issue*:

Access to Youth Record

You must select a more specific *Type of Category* such as:

- **BPS Turn Back**
- **CMO Intercounty Transfer**
- **Request to Open**
- **Request to Close**
- **Other**

The screenshot shows a web form with two main sections. The first section is titled '*Type of Issue' and contains a dropdown menu with the selected option 'Access to Youth Record'. The second section is titled 'Request Details' and contains a dropdown menu titled '*Type of Category' with a list of options: 'BPS Turn Back', 'CMO Intercounty Transfer', 'Request to Close', 'Request to Open', and 'Other'. The 'Request to Open' option is highlighted in blue. Red boxes highlight the dropdown menus in both sections.

The Customer Service Request Form includes the following features:

- Specific issues and categories to identify the request
- Document Upload feature
- Grid to enter youth information
- Required additional information text box on every request
- Help text to describe the issue and category additions

Request Details – Features

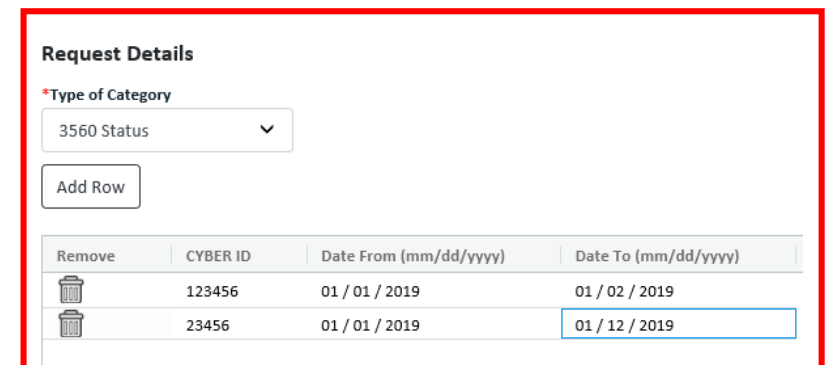
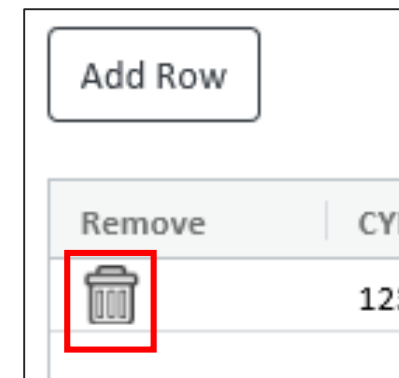
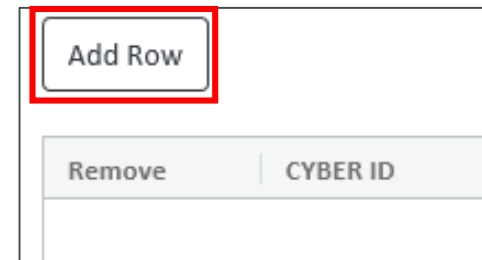
Entering in a Grid: Some Request Details include a grid allowing for entry of youth information. These grids are required, and entering as much information as is available will allow PerformCare to resolve the request in a timely manner.

Enter Data: Click ‘Add Row’ to begin entering data and click in each field to enter the data.

Remove Data: Click the ‘Trashcan’ icon in the left of each row to remove the entire row’s information.

The information for up to 15 youths may be entered.

The grid will expand as more data is entered. Preview entries before submitting.



Request Details – Features

Additional Information: Where it appears, this text box is *required* for the requester to enter more detailed information about the request. Text may be copied and pasted into the box.

Upload: This feature appears on many Request Detail screens allowing selected documentation to be uploaded to the request.



- A maximum of 5 files may be uploaded (max 20 MB each in size)
- Any file format is permitted (.PDF, .DOC, .XLS, etc.)
- A large document may need to be split into smaller documents.
- If using the Form to request Release of Information, a signed Release of Information form from the PerformCare website is required to be uploaded.
- Click the 'Trashcan' icon in the left of each row to remove the row's information.

*Please provide additional information

Enter free form text here.

Upload

Browse...

Remove	Document Name
	Information.pdf
	Information.pdf

Upload

C:\Users\yourname\Desktop Browse...

There is a document to assist providers in understanding the issues and categories in the Form. Clicking on the Help button will open a PDF document called *Customer Service Request Form Help Text*.

Please Note: An asterisk * next to an item indicates that the item is required.

HELP

PerformCARE®

Customer Service Request Form Help Text

The Help Text document will provide a brief description of the various issues and categories listed on the Customer Service Request Form.

Requester Details:

If you do not know your Provider Agency ID or work for CSOC, DCP&P, FSO or OAS please use Provider Agency ID: 000

For CSOC, DCP&P, FSO or OAS please enter Provider/Agency: CSOC, DCP&P, FSO or OAS

3560 Status - Please select this option when the provider is inquiring on the determination/status on the 3560 application.

3560 Terminations - Please select this option when the provider is requesting a 3560 Termination or any questions regarding already terminated 3560.

Add/Remove Medicaid ID from a Youth's Record - Please select this option for requesting Medicaid ID's to be added or removed from a youth's record.

Authorization Inquiry – Out of Home provider inquiry regarding missing or incorrect authorization.

Submitting the Form – What to Expect

After completing the Form, click the **Submit Request** button and all the information and documents you have uploaded will be emailed securely to PerformCare. You will receive a confirmation message.

You should receive an email identifying a ticket number for your inquiry/request within a few minutes.

The information will be stored in the ticketing system and assigned to the correct department for resolution.

When the ticket is resolved, you will receive another email stating the resolution.

Types of Issues/Categories

The next section will review the Issues and associated Categories available on the Customer Service Request Form.

Index of Types and Categories

Click the hyperlink to see the Types of Issues and their associated Types of Categories in the Customer Service Request Form.

- 3560**
 - [3560 Status](#)
 - [3560 Terminations](#)
 - [Special Requests](#)
- Access to Youth Record**
 - [Request to Open](#)
 - [Request to Close](#)
 - [BPS Turn Back](#)
 - [CMO Intercounty Transfer](#)
- Authorizations**
 - [Court Ordered 14 Day Plan](#)
 - [Delayed Dispatch Authorization](#)
 - [DAP, EDRU, IRTS or Out-of-State, Extensions](#)
 - [DAP, EDRU, IRTS or Out-of-State, Transitions](#)
 - [Missing from Program Authorization Request](#)
 - [Modify Original Authorization](#)
 - [Request Information on a Prior Authorization](#)
 - [Suspend/Cancel an Authorization](#)
- Billing Contacts**
- Complaints**
- Data Extracts - Request Modification of a Data Extract**
- Development Disability (DD) Eligibility**
- Correspondence**
- Enhancements to Reports**
- FSS Inquiry**
- General Claims Inquiries**
- General CYBER Assistance/Navigation**
 - [Request to Remove Progress Note](#)
 - [Treatment Plan/Assessment Assistance](#)
 - [YouthLink](#)
- Inquiries from DCP&P**
- Intensity of Service (IOS) Disputes/Reconsiderations**
- Letters-Request a Copy of Letters**
- Medicaid**
 - [Add/Remove Medicaid ID from a Youth's Record](#)
 - [Medicaid not Linked to Authorization](#)
 - [Wrong Medicaid Linked to Authorization](#)
- Non-Medicaid Provider Setup**
- Out-of-Home**
 - [Authorization Inquiry](#)
 - [Certification of Need](#)
 - [General Inquiries](#)
 - [Treatment Home Progress Note](#)
 - [Tier II Consultation](#)
- Policy/Procedure Question**
 - [Dispatch/Crisis Tracking Change](#)
 - [Inactive Youth](#)
 - [Reopen to Provider](#)
 - [Request to Change CMO County](#)
 - [Substance Use Inquiries](#)

- Record Modification Request**
- Report a Functional Problem with an Existing Report**
- Reporting – General Inquiries**
- Request a New Report**
- Request for Release of Information (ROI)**
- Request Updates to Provider Directory**
- Review Request**
 - [CMO SED Selection Note](#)
 - [Intensive in-Home \(IIH\) Inquiries](#)
 - [Returned Plan/Assessment Inquiry](#)
- Summer Camp Provider Issues**
- Technical Assistance**
 - [CYBER Will Not Load](#)
- Wrap Flex**
 - [Claim Denied/Returned, Claim Inquiry](#)
- Other**
 - [Other \(option on all forms\)](#)

Type of Issue: 3560

Type of Category: 3560 Status, 3560 Terminations, Special Requests

Reason to Use this Type: Inquiring about the determination status on the 3560 application, terminations, special requests, etc.

Request Details:

- Type of Category*
- CYBER ID (Add up to 15 youth)*
- Date From (mm/dd/yyyy)*
- Date To (mm/dd/yyyy)*
- Upload (optional)
- Additional information*

The screenshot displays a web form for managing 3560 issues. At the top, the 'Type of Issue' dropdown is set to '3560'. Below this, the 'Request Details' section includes a 'Type of Category' dropdown set to '3560 Status' and an 'Add Row' button. A table with columns for 'Remove', 'CYBER ID', 'Date From (mm/dd/yyyy)', and 'Date To (mm/dd/yyyy)' is shown, currently containing no data. Below the table is a text area for 'Please provide additional information' and an 'Upload' section with a 'Browse...' button.

*Required field

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Type of Issue: Access to Youth Record

Type of Category: Request to Open, Request to Close

Reason to Use this Type: Request to have access to a youth record that is closed, or request to close a youth record that is open.

Request Details:

- Type of Category*
- Check box for more than 9 youth
- CYBER ID*
- Youth First Name*
- Youth Last Name*
- Youth Date of Birth (DOB) (mm/dd/yyyy)*
- Upload (optional)
- Additional information*

The screenshot shows a web form titled "Type of Issue: Access to Youth Record". At the top, there is a dropdown menu for "Type of Issue" with "Access to Youth Record" selected. Below this is a section titled "Request Details" containing a dropdown for "Type of Category" with "Request to Open" selected. There is a checkbox labeled "Is the request for more than 9 youth?" which is currently unchecked. An "Add Row" button is located below the checkbox. A table with the following headers is shown: "Remove", "CYBER ID", "Youth First Name", "Youth Last Name", and "Youth Date of Birth (mm/dd/yyyy)". The table body is empty, displaying "No Rows To Show". Below the table is a text area with the label "*Please provide additional information". At the bottom, there is an "Upload" section with a file input field and a "Browse..." button.

*Required field

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Type of Issue: Access to Youth Record

Type of Category: BPS Turn Back, CMO Intercounty Transfer

Reason to Use this Type: Turn back a referral for a Biopsychosocial assessment, request a youth be transferred from one county to another.

Request Details:

- Type of Category*
- CYBER ID*
- Youth First Name*
- Youth Last Name*
- Youth DOB (mm/dd/yyyy)*
- Upload (optional)
- Additional information*

The screenshot displays a web form titled 'Request Details' for the issue type 'Access to Youth Record'. The form includes a dropdown menu for 'Type of Category' set to 'BPS Turn Back' and an 'Add Row' button. Below this is a table with columns: 'Remove', 'CYBER ID', 'Youth First Name', 'Youth Last Name', and 'Youth Date of Birth (mm/dd/yyyy)'. The table is currently empty, showing 'No Rows To Show'. At the bottom, there is a text area for 'Please provide additional information' and an 'Upload' section with a 'Browse...' button.

*Required field

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Type of Issue: Authorizations

Type of Category: Court Ordered 14 Day Plan

Reason to Use this Type: To submit a request or inquire about a court ordered 14 day plan.

Request Details:

- Type of Category*
- CYBER ID*
- Youth First Name*
- Youth Last Name*
- Youth DOB (mm/dd/yyyy)*
- Upload (optional)
- Additional information*

Type of Issue
Authorizations

Request Details

Type of Category
Court Ordered 14 Day Plan

Add Row

Remove	CYBER ID	Youth First Name	Youth Last Name	Youth Date of Birth (mm/dd/yyyy)
No Rows To Show				

Please provide additional information

Upload
Browse...

*Required field

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Type of Issue: Authorizations

Type of Category: Delayed Dispatch Authorization

Reason to Use this Type: Used by Mobile Response to request a dispatch be changed to a delayed dispatch.

Request Details:

- Type of Category*
- CYBER ID*
- Youth First Name*
- Youth Last Name*
- Youth DOB (mm/dd/yyyy)*
- Actual Date of Dispatch (mm/dd/yyyy)*
- Upload (optional)
- Additional information*

*Type of Issue
Authorizations

Request Details

*Type of Category
Delayed Dispatch Authorization

Add Row

Remove	CYBER ID	Youth First Name	Youth Last Name	Youth Date of Birth (mm/dd/yyyy)	Actual Date of Dispatch
No Rows To Show					

< >

*Please provide additional information

Upload
Browse...

*Required field

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Type of Issue: Authorizations

Type of Category: Detention Alternative Program (DAP), Emergency Diagnostic Reception Unit (EDRU), Intensive Residential Treatment Services (IRTS) or Out-of-State, Admissions

Reason to Use this Type: To report an admission to these types of Out-of-Home programs above.

Request Details:

- Type of Category*
- CYBER ID*
- Youth Name*
- Youth DOB (mm/dd/yyyy)*
- Admission Date (mm/dd/yyyy)*
- Program Name*
- Upload (optional)
- Additional information*

The screenshot shows a web form for adding a new authorization request. At the top, there is a dropdown menu for "Type of Issue" set to "Authorizations". Below this is a section titled "Request Details" with a dropdown for "Type of Category" set to "DAP, EDRU, IRTS or Out of State OOH Admissions". There is an "Add Row" button. Below the button is a table with columns: "Remove", "CYBER ID", "Youth First Name", "Youth Last Name", "Youth Date of Birth (mm/dd/yyyy)", and "Admission Date (mm/". The table is currently empty, displaying "No Rows To Show". Below the table is a text area for "Please provide additional information". At the bottom, there is an "Upload" section with a "Browse..." button.

*Required field

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Type of Issue: Authorizations

Type of Category: DAP, EDRU, IRTS or Out-of-State Extensions or Transitions

Reason to Use this Type: To report an extension request or a transition from these types of Out-of-Home programs above.

Request Details:

- Type of Category*
- CYBER ID*
- Youth First Name*
- Youth Last Name*
- Youth DOB (mm/dd/yyyy)*
- Program Name*
- Upload (optional)
- Additional information*

The screenshot shows a web form titled "Type of Issue". At the top, a dropdown menu is set to "Authorizations". Below this is the "Request Details" section, which includes another dropdown menu for "Type of Category" set to "DAP, EDRU or Out of State OOH Extensions". An "Add Row" button is located below the dropdown. A table with the following columns is present: "Remove", "CYBER ID", "Youth First Name", "Youth Last Name", "Youth Date of Birth (mm/dd/yyyy)", and "Program Name". The table is currently empty, displaying "No Rows To Show". Below the table is a text input field with the label "*Please provide additional information". At the bottom, there is an "Upload" section with a file input field and a "Browse..." button.

*Required field

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Type of Issue: Authorizations

Type of Category: Missing from Program Authorization Request

Reason to Use this Type: When requesting a authorization for a youth who is missing from an Out-of-Home program for up to 5 days.

Request Details:

- Type of Category*
- CYBER ID*
- Youth First Name*
- Youth Last Name*
- Youth DOB (mm/dd/yyyy)*
- Departure Start Date (mm/dd/yyyy)*
- Number of Days Missing*
- Upload (optional)
- Additional information*

The screenshot shows a web form for 'Type of Issue: Authorizations'. At the top, there is a dropdown menu for 'Type of Issue' with 'Authorizations' selected. Below this is the 'Request Details' section, which includes a dropdown for 'Type of Category' with 'Missing from Program Authorization Request' selected. An 'Add Row' button is located below the category dropdown. The main area of the form is a table with the following headers: 'Remove', 'CYBER ID', 'Youth First Name', 'Youth Last Name', 'Youth Date of Birth (mm/dd/yyyy)', and 'Departure Start Date'. The table is currently empty, displaying 'No Rows To Show'. Below the table is a text input field labeled '*Please provide additional information'. At the bottom, there is an 'Upload' section with a file input field and a 'Browse...' button.

*Required field

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Type of Issue: Authorizations

Type of Category: Modify Original Authorization, Request Information on a Prior Authorization, Suspend/Cancel an Authorization

Reason to Use this Type: When requesting changes to existing authorizations.

Request Details:

- Type of Category*
- CYBER ID*
- Authorization #*
- Youth Medicaid #*
- Upload (optional)
- Additional information*

*Type of Issue
Authorizations

Request Details

*Type of Category
Modify Original Authorization

Add Row

Remove	CYBER ID	Authorization #	Youth Medicaid ID #
No Rows To Show			

*Please provide additional information

Upload
Browse...

*Required field

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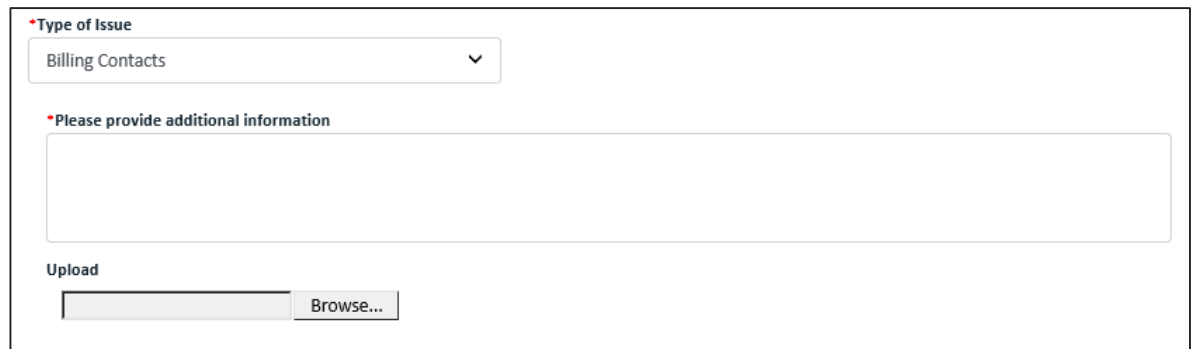
Type of Issue: Billing Contacts

Type of Category: None

Reason to Use this Type: To inform PerformCare of the billing contact person at the agency.

Request Details:

- Additional information*
- Upload (optional)



The screenshot shows a web form with the following elements:

- A dropdown menu labeled "Type of Issue" with "Billing Contacts" selected.
- A red asterisk followed by the text "Please provide additional information" above a large text input field.
- An "Upload" section with a file input field and a "Browse..." button.

*Required field

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Type of Issue: Complaints

Type of Category: None

Reason to Use this Type: To make a complaint. This is only for Providers. Please include details.

Request Details:

- Additional information*
- Upload (optional)

The screenshot shows a web form with the following elements:

- A dropdown menu labeled "Type of Issue" with "Complaints" selected and a downward arrow.
- A red asterisk followed by the text "Please provide additional information" above a large, empty text input field.
- An "Upload" section with a file input field and a "Browse..." button.

*Required field

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Type of Issue: Data Extracts - Request Modification of a Data Extract

Type of Category: None

Reason to Use this Type: When requesting modifications to an existing data extract.

Request Details:

- Report Number* (ex. NJ1499)
- Additional information*
- Upload (optional)

The screenshot shows a web form with the following elements:

- Type of Issue:** A dropdown menu with the selected option "Data Extracts - Request Modification of a Data Extract".
- Request Details:**
 - Report Number:** A required text input field.
 - Upload:** A file upload area with a "Browse..." button.
 - Please provide additional information:** A large text area for providing extra details.

*Required field

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Type of Issue: Development Disability (DD) Eligibility Correspondence

Type of Category: None

Reason to Use this Type: To inquire about DD Eligibility in youth record, etc.

Request Details:

- CYBER ID*
- Youth First Name*
- Youth Last Name*
- Youth DOB (mm/dd/yyyy)*
- Upload (optional)
- Additional information*

*Required field

The screenshot displays a web form titled 'Request Details' for the issue type 'DD Eligibility Correspondence'. At the top, there is a dropdown menu showing 'DD Eligibility Correspondence'. Below this is a section labeled 'Request Details' containing an 'Add Row' button. A table with the following headers is shown: 'Remove', 'CYBER ID', 'Youth First Name', 'Youth Last Name', and 'Youth Date of Birth (mm/dd/yyyy)'. The table body is empty, displaying 'No Rows To Show'. Below the table is a text area with the prompt '*Please provide additional information'. At the bottom, there is an 'Upload' section with a file input field and a 'Browse...' button.

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Type of Issue: Enhancements to Reports

Type of Category: None

Reason to Use this Type: When requesting enhancements to existing reports.

Request Details:

- Report Number* (ex. NJ1499)
- Additional information*
- Upload (optional)

The screenshot shows a web form with the following elements:

- A dropdown menu labeled "Type of Issue" with "Enhancements to Reports" selected.
- A section titled "Request Details" containing a required field "Report Number" (marked with a red asterisk).
- An "Upload" section with a file input field and a "Browse..." button.
- A large text area labeled "Please provide additional information" (marked with a red asterisk).

*Required field

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Type of Issue: FSS Inquiry

Type of Category: None

Reason to Use this Type: Inquiries about FSS authorization modifications, transfers, applications, admissions, FSS Link, etc.

Request Details:

- CYBER ID*
- Youth First Name*
- Youth Last Name*
- Youth DOB (mm/dd/yyyy)*
- Upload (optional)
- Additional information*

*Required field

The screenshot shows a web form for 'FSS Inquiry'. At the top, there is a dropdown menu labeled '*Type of Issue' with 'FSS Inquiry' selected. Below this is a section titled 'Request Details' containing an 'Add Row' button. Underneath is a table with columns: 'Remove', 'CYBER ID', 'Youth First Name', 'Youth Last Name', and 'Youth Date of Birth (mm/dd/yyyy)'. The table is currently empty, displaying 'No Rows To Show'. Below the table is a text area labeled '*Please provide additional information'. At the bottom, there is an 'Upload' section with a file input field and a 'Browse...' button.

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Type of Issue: General Claims Inquiries

Type of Category: None

Reason to Use this Type: To inquire about an issue or return of a CMS 1500 form, claim, denial, payment. Use for non-Medicaid claims only.

Request Details:

- CYBER ID*
- Authorization #*
- Upload (optional)
- Additional information*

The screenshot displays a web form for 'General Claims Inquiries'. At the top, there is a dropdown menu labeled '*Type of Issue' with 'General Claims Inquiries' selected. Below this is the 'Request Details' section, which includes an 'Add Row' button and a table with columns for 'Remove', 'CYBER ID', and 'Authorization #'. The table is currently empty, showing 'No Rows To Show'. At the bottom of the form, there is an 'Upload' section with a file input field and a 'Browse...' button, followed by a text area labeled '*Please provide additional information'.

*Required field

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Type of Category: Request to Remove Progress Note

Reason to Use this Type: Requesting to remove a progress note entered into the wrong youth's record.

Request Details:

- Type of Category*
- CYBER ID*
- Youth First Name*
- Youth Last Name*
- Note Type*
- Note Date*
- Note Time*
- Note ID
- Additional information*
- Upload (optional)

The screenshot shows a web form with the following fields and sections:

- Type of Issue:** A dropdown menu with "General CYBER Assistance/Navigation" selected.
- Request Details:**
 - Type of Category:** A dropdown menu with "Request to Remove Progress Note" selected.
 - CYBER ID:** A text input field.
 - Youth First Name:** A text input field.
 - Youth Last Name:** A text input field.
 - Note Type:** A text input field.
 - Note Date (mm/dd/yyyy):** A text input field.
 - Note Time:** A text input field.
- Note ID:** A text input field.
- Please provide additional information:** A large text area for notes.
- Upload:** A file input field with a "Browse..." button.

*Required field

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Type of Category: Treatment Plan/Assessment Assistance

Reason to Use this Type: Requesting assistance with a plan or assessment, returning an unapproved plan or assessment (where applicable)

Request Details:

- Type of Category*
- CYBER ID*
- Youth First Name*
- Youth Last Name*
- Type of Plan*
- Additional information*
- Upload (optional)

*Required field

The screenshot shows a web form with the following fields and sections:

- Type of Issue:** A dropdown menu with "General CYBER Assistance/Navigation" selected.
- Request Details:** A section header.
- Type of Category:** A dropdown menu with "Treatment Plan/Assessment Assistance" selected.
- CYBER ID:** A text input field.
- Youth First Name:** A text input field.
- Youth Last Name:** A text input field.
- Type of Plan:** A text input field.
- Please provide additional information:** A large text area for notes.
- Upload:** A section with a file input field and a "Browse..." button.

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Type of Category: YouthLink

Reason to Use this Type: To inquire about YouthLink regarding census, referrals, admissions, etc.

Request Details:

- CYBER ID*
- Youth First Name*
- Youth Last Name*
- Additional information*
- Upload (optional)

*Type of Issue
General CYBER Assistance/Navigation

Request Details

*Type of Category
YouthLink

*CYBER ID

*Youth First Name

*Youth Last Name

*Please provide additional information

Upload
 Browse...

*Required field

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Type of Category: None

Reason to Use this Type: To make inquiries from DCP&P regarding specific youth.

Request Details:

- CYBER ID*
- Additional information*
- Upload (optional)

The screenshot shows a web form for creating a request. At the top, there is a dropdown menu labeled '*Type of Issue' with 'Inquiries from DCP&P' selected. Below this is a section titled 'Request Details'. It contains a text input field for '*CYBER ID'. Underneath is an 'Upload' section with a file selection box and a 'Browse...' button. At the bottom of the form is a large text area labeled '*Please provide additional information'.

*Required field

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Type of Category: None

Reason to Use this Type: Requesting information about previously requested IOS dispute or reconsideration.

Request Details:

- CYBER ID*
- Additional information*
- Upload (optional)

The screenshot shows a web form with the following fields and sections:

- Type of Issue:** A dropdown menu with the selected option "Intensity of Service (IOS) Disputes/Reconsiderations".
- Request Details:** A section header.
- CYBER ID:** A required text input field.
- Upload:** A file upload area with a "Browse..." button.
- Please provide additional information:** A large text area for providing extra details.

*Required field

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Type of Issue: Letters-Request a Copy of Letters

Type of Category: None

Reason to Use this Type: To request a copy of a letter of any kind, identified by letter number (located in the bottom right corner of the letter).

Request Details:

- Letter Number
- Additional information*
- Upload (optional)

The screenshot shows a web form with the following elements:

- Type of Issue:** A dropdown menu with the selected option "Letters – Request a Copy of Letters".
- Request Details:**
 - Letter Number:** A text input field.
 - Upload:** A file upload area with a "Browse..." button.
- Please provide additional information:** A large text area for providing extra details.

*Required field

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Type of Issue: Medicaid

Type of Category: Add/Remove Medicaid ID from a Youth's Record, Medicaid not Linked to Authorization, Wrong Medicaid Linked to Authorization.

Reason to Use this Type: Address Medicaid issues related to authorizations and request corrections.

Request Details:

- Type of Category*
- CYBER ID*
- Youth SSN (Last 4 digits)*
- Youth Medicaid ID #*
- Upload (optional)
- Additional information*

The screenshot shows a web form for creating a Medicaid issue request. At the top, there is a dropdown menu for 'Type of Issue' with 'Medicaid' selected. Below this is a section titled 'Request Details' containing a dropdown for 'Type of Category' with 'Add/Remove Medicaid ID from a Youth's Record' selected, and an 'Add Row' button. Underneath is a table with columns: 'Remove', 'CYBER ID', 'Youth SSN (Last 4 Digits)', and 'Youth Medicaid ID #'. The table is currently empty, displaying 'No Rows To Show'. Below the table is a text area for 'Please provide additional information'. At the bottom, there is an 'Upload' section with a file input field and a 'Browse...' button.

*Required field

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Type of Issue: Non-Medicaid Provider Setup

Type of Category: None

Reason to Use this Type: Select this option to request a new Non-Medicaid Provider set up for authorization purposes.

Request Details:

- Business Name*
- Tax ID #*
- Phone*
- Email Address*
- Address*
- City*
- State*
- Zip Code*
- Additional information*
- Upload (optional)

The screenshot shows a web form titled "Non-Medicaid Provider Setup". At the top, there is a dropdown menu for "Type of Issue" with "Non-Medicaid Provider Setup" selected. Below this is a section titled "Request Details" containing several required fields marked with a red asterisk: "Business Name", "Tax ID #", "Address", "City", "State" (a dropdown menu), "Zip Code", "Phone Number (XXX-XXX-XXXX)", and "Email". There is also an "Upload" section with a file input field and a "Browse..." button. At the bottom, there is a large text area for "Please provide additional information".

*Required field

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Type of Issue: Out-of-Home

Type of Category: Authorization Inquiry, General Inquiries, Treatment Home Progress Note, Tier II Consultation

Reason to Use this Type: For clinical inquiries related to Out-of-Home treatment.

Request Details:

- Type of Category*
- CYBER ID*
- Additional information*
- Upload (optional)

The screenshot shows a web form for submitting a request. At the top, there is a dropdown menu labeled '*Type of Issue' with 'Out of Home' selected. Below this is a section titled 'Request Details' containing a dropdown menu for '*Type of Category' with 'Authorization Inquiry' selected. Underneath is a text input field for '*CYBER ID'. A large text area follows, labeled '*Please provide additional information'. At the bottom, there is an 'Upload' section with a file input field and a 'Browse...' button.

*Required field

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Type of Issue: Out-of-Home

Type of Category: Certification of Need

Reason to Use this Type: Inquiries about the Certification of Need.

Request Details:

- Type of Category*
- CYBER ID*
- Out-of-Home (OOH) Program Name*
- Additional information*
- Upload (optional)

The screenshot shows a web form titled "Request Details" for "Out of Home" issues. It includes a dropdown menu for "Type of Issue" (set to "Out of Home"), a dropdown for "Type of Category" (set to "Certification of Need"), and input fields for "CYBER ID" and "OOH Program Name". There is a large text area for "Please provide additional information" and an "Upload" section with a "Browse..." button.

*Required field

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Type of Issue: Policy/Procedure Question

Type of Category: Dispatch/Crisis Tracking Change, Inactive Youth, Reopen to Provider, Request to Change CMO County, Substance Use Inquiries

Reason to Use this Type: *Dispatch/Crisis Tracking Change* is used by MRSS to request changes to a dispatch; *Inactive Youth* is to report an inactive youth; *Reopen to Provider* is a request for access when the youth record has been closed for more than 60 days; *Request to Change CMO County* is used by CMO when the wrong county is opened; *Substance Use Inquiries* are for substance use questions.

Request Details:

- Type of Category*
- CYBER ID*
- Additional information*
- Upload (optional)

The screenshot shows a web form with the following fields and sections:

- *Type of Issue:** A dropdown menu with "Policy/Procedure Question" selected.
- Request Details:**
 - *Type of Category:** A dropdown menu with "Dispatch/ Crisis Tracking Change" selected.
 - *CYBER ID:** An empty text input field.
 - *Please provide additional information:** A large empty text area.
- Upload:** A section containing an empty file input field and a "Browse..." button.

*Required field

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Type of Issue: Record Modification Request

Type of Category: None

Reason to Use this Type: To request a modification to a youth's record, such as request to remove an uploaded document.

Request Details:

- CYBER ID*
- Youth First Name
- Youth Last Name
- Additional information*
- Upload (optional)

The screenshot shows a web form for a 'Record Modification Request'. At the top, there is a dropdown menu labeled '*Type of Issue' with 'Record Modification Request' selected. Below this is a section titled 'Request Details' containing three input fields: '*CYBER ID', 'Youth First Name', and 'Youth Last Name'. Underneath these is an 'Upload' section with a file input field and a 'Browse...' button. At the bottom is a large text area labeled '*Please provide additional information'.

*Required field

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Type of Issue: Report a Functional Problem with an Existing Report

Type of Category: None

Reason to Use this Type: To report issues with an existing report.

Request Details:

- Report Number* (ex. NJ1499)
- Additional information*
- Upload (optional)

The screenshot shows a web form with the following sections:

- Type of Issue:** A dropdown menu with the selected option "Report a Functional Problem with an Existing Report".
- Request Details:**
 - Report Number:** A required text input field.
 - Upload:** A file upload area with a "Browse..." button.
 - Please provide additional information:** A large text area for providing extra details.

*Required field

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Type of Issue: Reporting – General Inquiries

Type of Category: None

Reason to Use this Type: To make general inquiries about reports.

Request Details:

- Additional information*
- Upload (optional)

The screenshot shows a web form with the following elements:

- A dropdown menu labeled "Type of Issue" with the selected value "Reporting - General Inquiries".
- A red asterisk followed by the text "Please provide additional information" above a large, empty text input field.
- An "Upload" section with a file input field and a "Browse..." button.

*Required field

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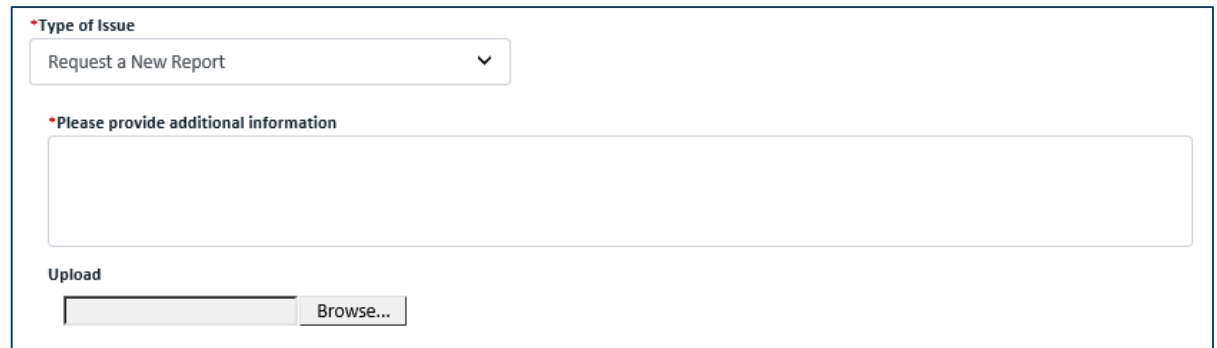
Type of Issue: Request a New Report

Type of Category: None

Reason to Use this Type: To request a new report.

Request Details:

- Additional information*
- Upload (optional)



The screenshot shows a web form for 'Request a New Report'. At the top, there is a dropdown menu labeled 'Type of Issue' with a red asterisk indicating it is a required field. The dropdown is currently set to 'Request a New Report'. Below this is a text area labeled 'Please provide additional information' with a red asterisk. At the bottom, there is an 'Upload' section with a file input field and a 'Browse...' button.

*Required field

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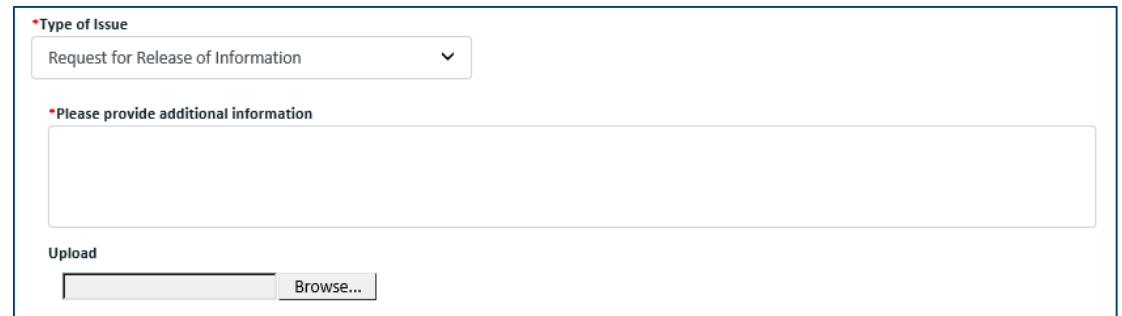
Type of Issue: Request for Release of Information (ROI)

Type of Category: None

Reason to Use this Type: Inquire about a Release of Information. If an ROI is being requested, see requirement below.

Request Details:

- Additional Information*
- Upload* (ROI form must be uploaded to use this form)



The screenshot shows a web form with the following elements:

- A dropdown menu labeled "Type of Issue" with "Request for Release of Information" selected.
- A red asterisk followed by the text "Please provide additional information" above a large empty text input field.
- An "Upload" section with a file input field and a "Browse..." button.

The ROI form can be found here: <http://www.performcarenj.org/pdf/provider/roi-form.pdf>

*Required field

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Type of Issue: Request Updates to Provider Directory PerformCARE®

Type of Category: None

Reason to Use this Type: To request updates to the PerformCare Provider Directory (<http://performcarenj.prismisp.com/?brandcode=pcnj>)

Request Details:

- Additional Information*
- Upload (optional)

***Type of Issue**

Request Updates to Provider Directory ▼

***Please provide additional information**

Upload

*Required field

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Type of Issue: Review Request

Type of Category: CMO SED Selection Note, Intensive in-Home (IIH) Inquiries, Returned Plan/Assessment Inquiry

Reason to Use this Type: *CMO SED Selection Note* used to request the Note, *Intensive in-Home (IIH) Inquiries* used by IIH providers to make inquiries, *Returned Plan/Assessment Inquiry* used by any provider to request a plan or assessment be returned.

Request Details:

- Type of Category*
- CYBER ID*
- Additional information*
- Upload (optional)

The screenshot shows a web form for submitting a 'Review Request'. At the top, there is a dropdown menu labeled 'Type of Issue' with 'Review Request' selected. Below this is a section titled 'Request Details'. Inside this section, there is a dropdown menu for 'Type of Category' with 'CMO SED Selection Note' selected. Below that is a text input field for 'CYBER ID'. Underneath is a large text area labeled 'Please provide additional information'. At the bottom of the form, there is an 'Upload' section with a file input field and a 'Browse...' button.

*Required field

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Type of Issue: Summer Camp Provider Issues

Type of Category: None

Reason to Use this Type: For Camp providers to make inquiries about Camp.

Request Details:

- Additional information*
- Upload (optional)

The screenshot shows a web form with the following elements:

- A dropdown menu labeled "Type of Issue" with a red asterisk indicating it is required. The selected option is "Summer Camp Provider Issues".
- A text input field with a red asterisk and the label "Please provide additional information".
- An "Upload" section with a file input field and a "Browse..." button.

*Required field

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Type of Issue: Technical Assistance

Type of Category: CYBER Will Not Load

Reason to Use this Type: To request assistance or inquire about CYBER technical issues in this category.

Request Details:

- Type of Category*
- Email Address*
- Telephone Number*
- Type of Browser*
- Additional information*
- Upload (optional)

The screenshot shows a web form for submitting a request. At the top, there is a dropdown menu for 'Type of Issue' with 'Technical Assistance' selected. Below this is a section titled 'Request Details'. It contains a dropdown for 'Type of Category' with 'CYBER Will Not Load' selected. There are three input fields: 'Email', 'Phone Number (XXX-XXX-XXXX)', and 'Type of Internet Browser being used'. At the bottom, there is an 'Upload' section with a file input field and a 'Browse...' button.

*Required field

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Type of Issue: Wrap Flex

Type of Category: Claim Denied/Returned, Claim Inquiry

Reason to Use this Type: To inquire in general about claims, denied claims or returned claims.

Request Details:

- Type of Category*
- CYBER ID*
- Authorization #*
- Claim #*
- Upload (optional)
- Additional information*

*Required field

The screenshot shows a web form with the following elements:

- Type of Issue:** A dropdown menu with 'Wrap Flex' selected.
- Request Details:**
 - Type of Category:** A dropdown menu with 'Claim Denied/Returned' selected.
 - Add Row:** A button.
- Table:** A table with columns: Remove, CYBER ID, Authorization #, Claim #. The table is currently empty, displaying 'No Rows To Show'.
- Additional Information:** A text area with the label '*Please provide additional information'.
- Upload:** A file input field with a 'Browse...' button.

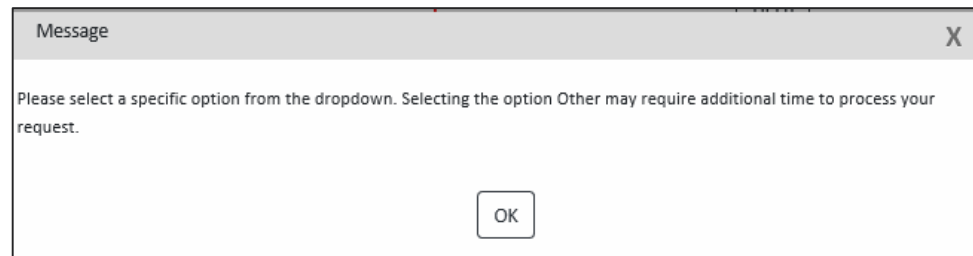
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Type of Issue: (Other option on all forms)

Type of Category: Other

Reason to Use this Type: For use in any Type of Issue when the user is unsure in which specific category to put the request.

When selecting Other, you will receive a Message encouraging a specific selection.



Request Details:

- Additional information*
- Upload (optional)

A screenshot of a form section. At the top, there is a dropdown menu labeled '*Type of Issue' with 'Other' selected. Below this is a text area labeled '*Please provide additional information'. At the bottom, there is an 'Upload' section with a file input field and a 'Browse...' button.

*Required field

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Questions?

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