PerformCARE®

CMO Service Planning Reference Guide

To promote timely delivery of services and reduce number of service plans being returned due to errors.

Please check all of the following BEFORE submitting the Service Plan to the CSA:

- □ The strategy is attached to the appropriate need and matches in desired outcome and intensity (i.e. youth will express emotions related to trauma should not be linked to a Mentor service request)
- □ The services identified in the strategy should match the service code selected. Service codes commonly used by CMO are:

H0036TJU1 (IIC Licensed), H0036TJU2 {IIC Masters), H2014TJ (Behavioral Assistant), H0018TJU1 (Needs Assessment Licensed), CSA03 (Parent Support, Family-to-Family Support), CSA11 (Educational Instruction), CSA12 (Professional Services), CSA13 (Living/Housing Expenses), CSA14 (Recreation), CSA17 (Mentoring), CSA23 (Transportation), CSA24 (Personal Care), CSAS0 (Free Services), CSA51 (School Reimbursed Services), Z5008 (Care Management, Intensive), CSC02 (Individual/Group/Family Therapy/Medication Monitoring), CSC02 (PHP - up to 90 days/390 units)

- The Strengths and Needs Assessment has been submitted and is current within **30 days** of the ISP.
- □ Strengths and Needs Assessment includes a detailed description of symptoms and risk behaviors (severity, frequency, on-set) whenever rated as moderate or severe.
- □ Clinical justification warranting level of service requested should be clearly described within the treatment plan.
- □ If the plan was returned, reasons for return described in the CSA progress note have been updated.
- □ Transition Plans include reasons for transition, the goals that have been met, current needs and how they are being addressed.
- □ The dates for all service requests with the same service code should not overlap. If requesting an overlapping authorization, please ensure that the end dates for the existing and requested authorizations are the same and provide details regarding the need for the overlapping authorization (i.e. more units required, new provider selected etc.)
- □ Services requested more than 7 days after the start date for the service must provide an explanation of the delay in the request.
- □ Do not create a new plan if there's a pending plan submitted to the CSA but not yet reviewed. Instead, request that the plan be returned via the Service Desk – <u>performcarenj.org/ServiceDesk</u>.
- Requests for services while a youth is in Out-of-Home treatment are on the JCR, not on the ISP.

Daily: Check the **My Plans** box of the Plan Approval in CYBER for any Service Plans that may have been returned by the CSA to avoid delay.