Annex A Addendum Presentation
Objectives of this Training

- CSOC, PerformCare and CYBER
- Security for Annex A Addendum (AAA)
- Accessing the AAA
- Creating the AAA
- Completing by Section
- Submission/Validations
- Renewing/Modifying
- Updating Contact Info by PIF
- Copying Annex A
- References
The Children’s System of Care (CSOC) is a division of the Department of Children and Families in the State of New Jersey. The Division services youth with emotional and behavioral health challenges, children with developmental and intellectual disabilities and their families, as well as youth who are struggling with substance use challenges.

The Children’s System of Care is committed to providing these services based on the strengths and needs of the child and family in a family-centered, community-based environment.

PerformCare is the Contracted Systems Administrator or the CSA for the System of Care administering the services included within the System of Care in New Jersey.

Our staff include Member Service Specialists who are the first point of contact within the call center, a full clinical team including a dedicated Review team a dedicated unit just for DCP&P involved youth, and units for Billing and Eligibility, Reporting, Training and Quality Improvement.
What is CYBER

CYBER is an Internet-based repository (database) with security to manage and control access to youth records by multiple providers.

CYBER contains health information about children in the State of New Jersey with behavioral health, developmental and intellectual disability and substance use challenges. It also contains the work and documentation of the many providers who assist those youth.

You as a provider will be using the functions of CYBER to document admission and transition of youth in your care.
Welcome Page

After logging in, users land on the Welcome Page*. The Welcome Page within CYBER allows users the ability to view and access Out of Home functions and activity.

Security Administrators set up users with System Functions / Manage Access

Click the Provider Details button to access either the OOH Provider Information File (PIF) or the Annex A Addendum area

*User views, links and buttons may vary depending on the user type and security levels.
The Security Administrator has access to create and modify and assist users with their CYBER security and password.

Out of Home CYBER user security options:

- **Title**
  - RESADM – Security Administrator
  - RESCM – Care Manager
  - RESSUP - Supervisor
  - RESMGR - Manager
  - RESEXE - Executive
  - RESDIR/CE – Director/Chief Executive

- **RESDOCATTACH and RESDOCATTACHRead**
  - add both groups to view and attach documents

- **Level**
  - Level 1 – General access
  - Level 2 – Anomaly management
  - Level 3 – Anomaly management and Reporting

- **Hierarchy**
  - Plan Level 1 – no submission to CSA
  - Plan Level 2 – can submit to CSA or Plan Level 3
  - Plan Level 3 – can submit to CSA

- **Annex A Admin Group** – Access AAA button
- **Annex A Edit** – Allow editing
- **Annex A Provider Read Only** – No editing
Features and Navigation

- **Buttons** (push buttons) – Buttons take the user to another area in the system or initiate an action (e.g. Accept, Save, Save & Close, Print, Cancel, Delete, Submit)

- **Links** – links will display data in grids or open a youth record

- **Scrollbars** – top to bottom and left to right

- **Grids** – columns and rows can be sorted; some can be double-clicked to open an item

- **Accordions** – feature that opens and closes sections to allow for more data on the screen

- **Checkboxes** – check once to display a selection, check again to remove

- **Dropdown menus** – click to display the information below and select

- **Text fields** – open boxes of text
Provider Details

Annex A Addendum
Contract document that identifies specifiers

Provider Information File
Area that displays Annex A specifiers by Location
Annex A Addendum Screen

Pending AAA Details
• Submitted and Unsubmitted AAA

Approved AAA Details
• Approved
• Denied

Filtering by Program
• All
• Select one program at a time
Submission Types

**New** - very first Annex A Addendum for the program; if returned, in the Agency Information section only Contract Begin Date and Contract End Date may be changed by the provider.

**Renewal** - renews any Addendum after the first Annex A; can be created 90 days before the existing Contract End Date ends.

**Modify** - make changes any time after a contract begins. The following fields may not be edited by the provider during a Modification:

- Contract Begin Date
- Contract End Date
- Contract Number
- Mod #
- Mod Effective Date
- Provider Type
- Program Type

**Update Contact Information** – allows changes to the Contact Information section only

**Admin Changes** - allows changes to the Contract Begin Date, Site Details, and Comments. Admin Changes also allows the user to identify a date for when the changes became effective.
New/Renew Annex A Addendum
Creating Annex A – Section by Section

Agency information

• Program ID
• Contract Begin/End
• Medicaid Provider ID#
• Agency Name
• Contract Number
• Provider Type
• Program Type

Agency Contact Info

• All required except website
• Enter Zip and select City/County
Population Served

- Gender Served
- Ages Served
- Additional Information
- Languages Spoken by Staff

The Populations Served accordion will open to the Gender Served and Ages Served areas (which document the population that served for the entire program, across all sites); both of these are required areas and at least one Gender selection and at least one Age selection must be made in each area.

There is a **Navigation menu** at the top of the accordion that allows users to choose which section of Populations Served to navigate to.
Population Served (cont)

- IQ
- Assault
- Fire Setting
- Eating Disorders
- Runaways
- Sexuality
- Sexual Behavior
- Trauma History
- Suicide
- Self Injurious Behavior
- Substance Use
- Juvenile Justice Issues
- Destructive Behavior
- Psychiatric Hospitalization
- Primary Psychiatric Diagnosis
- Genetic/Congenital Disorders
- Self-Help/Development Skills
- Medical Conditions
- Education

In general, checking any checkbox in a specifier section indicates that the program serves individuals with needs under that section. Leaving a specifier blank indicates the program does not serve this specific need; any specifiers completely left blank will print with an indication of “No”.

TRAUMA HISTORY

1. Victim of:
   - a. Physical Abuse
   - b. Sexual Abuse
   - c. Emotional Abuse
   - d. Medical Trauma
   - e. Natural Disaster

2. Witness to:
   - a. Family Violence
   - b. Community Violence
   - c. Witness/Victim to Criminal Activity
Specifiers

Some specifiers will have No, Yes and Required as selection options.

Selecting **No** indicates that the program does not serve youth that have this need; youth with this need will not be automatically matched with the program in YouthLink.

Selecting **Yes** indicates that the program does serve youth with this need and they will be automatically matched with the program in YouthLink.

Selecting **Required** indicates that the program only serves youth with this need; unless this need is indicated on the referral, the youth will not be automatically matched with the program in YouthLink. If a youth has all other specifiers indicated on their referral, but do not possess the one that is required by the program, they will not be matched to the program in YouthLink.

These specific indicators are:
- IQs 69 and below
- Sexual Behavior
- Substance Use
- Genetic/Congenital Disorders - Cerebral Palsy
- Self-Help/Developmental Skills – IDD
- Medical Conditions – Pregnancy, Diabetes, Visually Impaired, Hearing Impaired
Population Served (cont)

Additional sections about the programs appear at the end of the Populations Served and all are required.

**Special Expertise** – N/A is ok if none

**Capacity** of Contracted Beds must match with the upcoming Site Details.

**Accreditation** selection is required - either an accreditation and inspection dates. None may be selected if no accreditation is required.

**General Comments** – N/A is ok if none
To add a new site, the user can click **Create New Site** button at the bottom of the Site Details grid. A *New Annex A Site* window will then open.

All of the fields in Site Details are required except email and fax number; at least one selection must be made within *Ages Served* and *Gender Served*. 
To edit an existing site, the user can double-click the row with the site in the grid. The selected Annex A Site window will open.

All of the fields in Site Details are required except email and fax number.

An active site can be inactivated. If a selected site is inactive, it can be reactivated here. Changes can be made to site name, address and phone numbers. Ages Served, Gender and Capacity across all sites in Site Details should be reviewed to ensure they match Total of Contracted beds in Capacity in Population Served.
Ages Served, Gender Served, and Capacity in Site Details across all sites MUST total the entered information in the Populations Served accordion. Here are some examples:

- If your agency has 3 sites with 10 youth in each, the Population Served Contracted Beds must equal 30.

- If your agency has a site for ages 2-6 and a second site for ages 16-21, Population Served should have ages 2-6 and 16-21 checked or it will show a validation error.

*Licensed Capacity and Contracted Beds do not have to be the same. Your site may have more Licensed beds than CSOC Contracted beds.*
All areas of **Physical Environment** are required; at least one selection must be made in each area and the Mass Transit Access Describe text box is required.

Under Bedroom Type, the corresponding text box for the selection made must be completed with the appropriate number of rooms.
Service Provided – Part A

Under Part A - Clinical Services, the user should check off either Agency, Community or both options for any of the listed Clinical Services that are provided through the contracted per diem rate. If a service is not provided through contracted per diem rate, neither Agency nor Community should be selected.

Under Independent Living Curriculum/Life Skills Training, a Type must be selected for Agency or Community options.

Under Part A - Allied Services, the text box labeled “Other” is a required field; if the user has nothing additional to add, entering “N/A” will fulfill the field requirement.
Service Provided – Part B

Under Part B – Other Services, Educational Services – At least one Educational Service type must be selected; check either Agency or Community, or both may be selected. Also required is the text box, “Describe how educational program is supported by agency”.

Under Medical Services, all three of the text boxes are required.
Under **Community Based Opportunities**, the only required field is the text box; no others are required, however either Agency or Community, or both may be selected.
Clinical Model

Users will find a grid when the Clinical Model accordion opens. In order to add information, click the Add Clinical Model button at the bottom of the accordion. Doing so will open the Create a New Clinical Model window.

All fields are required for each Model entered and at least one Model must be entered in order to submit the Addendum successfully.
Clinical Model (cont)

Clinical Models

• **Intensity** menu includes *Family, Group, Individual and Other*; if Other is chosen, the Intensity text box immediately below becomes a required field.

• **Frequency** menu includes *Weekly, Biweekly, Monthly and Annually*.

• **Duration of Occurrence** menu currently only has *Hours* as an duration option.

Users can add as many Clinical Models that are necessary to document their model for clinical services.
In the **Team Members to Child Rations** section, completion of every row is not required. However, if you complete a field within a row (including Credentials), the entire row becomes required.

As fields are completed within a row, the # Children Served boxes will automatically populate with the number of Contracted Beds entered into the Populations Served accordion. (If the user changes the number of Contracted Beds, this field will automatically update.)

Note: Scroll right to complete the required Hours Per Child/Week column.

*Please include only staff in proportion to CSOC contracted beds, not the total number of program staff. Including all staff that may be part of a larger program could result in inflated hours per youth numbers.*
Every field in the **Performance Based Outcomes** accordion is required; each can accept a whole number with two numbers after a decimal point (if necessary).

<table>
<thead>
<tr>
<th>PERFORMANCE BASED OUTCOMES</th>
</tr>
</thead>
<tbody>
<tr>
<td><strong>I Length of Stay</strong></td>
</tr>
<tr>
<td>Please calculate the following:</td>
</tr>
<tr>
<td>Average length of stay for residents discharged in the last contract year = ( A ) Days</td>
</tr>
<tr>
<td>Goal for this contract year = AVG LOS from ( A ) above less 10% = ( B ) Days</td>
</tr>
</tbody>
</table>

<table>
<thead>
<tr>
<th><strong>II Discharge Destination</strong></th>
</tr>
</thead>
<tbody>
<tr>
<td>Please choose a percentage as a performance goal for each of the following:</td>
</tr>
<tr>
<td>( A ) % of discharged youth will go to less restrictive settings.</td>
</tr>
<tr>
<td>( B ) % of ( A ) above that are still in less restrictive 3 months post discharge</td>
</tr>
<tr>
<td>( C ) % of ( A ) above that are still in less restrictive settings 6 months post discharge</td>
</tr>
</tbody>
</table>

<table>
<thead>
<tr>
<th><strong>III Improvement in Needs Assessment Scores</strong></th>
</tr>
</thead>
<tbody>
<tr>
<td>What percentage of youth discharged 6 to 18 months prior to the end of current contract year will have an overall improvement (lower scores) across the Behavioral/Emotional Needs, Risk Behaviors, and Life Domain Functioning assessment domains when comparing each child’s assessment just prior to admission with their assessments closest to 8 months post admission.</td>
</tr>
<tr>
<td>( % )</td>
</tr>
</tbody>
</table>
Miscellaneous Stipulations

The Miscellaneous Stipulations accordion houses the statement that the Annex A submission is an agreement to the abide by CSOC policies.

Under **Referral and Admission Process**, the user is required to choose one selection in the each of the two facility areas.

Upon submission of this electronic document, no signed hard copies of the Annex A are required to be provided to CSOC Contracting. **Users do not have the ability to upload or attach their weekly staffing and schedules to the Addendum.** Please refer to the Contract Administrator regarding submission of weekly schedules.
The Comments accordion will be enabled once the user submits the Addendum to CSOC. This area will be used for CSOC Contracting staff to document reasons regarding a return of an Addendum for changes, or regarding a denial.

Once the document has been returned and you make changes or updates, the Comments accordion may be utilized to communicate back to Contracting regarding the changes made. The Comments accordion is not part of the contract, so it will not print with the rest of the document.
At any point in your entry process, you can click Submit to see if you have missed a validation. You will see detailed validations regarding entries that are required.

On the Addendum, the missing or incorrect fields will be highlighted in a color, making them easier to locate.

4. Diabetes

- No
- Yes
- Required
Action Buttons

Save – saves the Annex A; system will display a saving symbol and respond with *Record is Saved* message; user may continue working.

Print – Print may be used after the Annex A is saved the first time. It will show a Draft watermark until it is approved.

Submit – when the user submits the Annex A it will check the validations. If the document is complete, the Annex A will become read-only to the OOH until it is returned or approved.

Delete – allows the user to delete an unsubmitted Annex A only.

To close the Annex A - click the X in the upper corner
Renew Annex A

The Renewal option is used when an Annex A Addendum is nearing its contract term end. Use the Renewal option up to 90 days before the end date of the current contract. Prior to that, the Renewal functionality will not be available.

- Select the appropriate program from the drop-down menu
- The historical record of all Addendum activity in the bottom grid will be displayed (Approved/Denied Details)
- Click on the New/Renew button at the bottom of the window to create a Renewal Addendum
- The Renewal will be pre-populated with all of the information from the last approved Addendum.

It is strongly recommended that the Renewal Addendum should be completely reviewed prior to submission.
Modify Annex A Addendum
Modify Annex A

A Modification should be submitted when there are changes to the program, such as a change to the number of contracted beds or a change in the population that the program serves.

A Modification may be created once a program has an approved, active Annex A Addendum.

The start or effective date of the contract has passed by one day.

- Choose a program from the drop down
- Select the Modify Annex A Addendum button
- Once the Modify button has been selected, the user will receive confirmation that the Modification has been created and the document will open.
Modify Annex A

The document that opens is the active and approved current Addendum; by choosing a Modification, the system allows the user to make any necessary changes to the entire document.

The user must open the Agency Information accordion and enter an effective date for the Modification.

- Effective date can be changed by CSOC after submission
- Effective Date must be equal to, or after, the Contract Begin date of the active Addendum
- Will display in the Approved/Denied grid
Update Contact Information
Updating Contact Info using the Annex A

If you only need to change the Agency Contact Information accordion, you can:

• Click the Provider Details button on Welcome Page
• Click Annex A Addendum button
• Select the program from the drop down menu
• Click the “Update Contact Information” button
• Only the Agency Contact Info section will be available for editing
• Save and Submit the Annex A

This type of change does not require a review.
Update Admission Contact from PIF

You may update Admission Contact Information directly on the Provider Information File (PIF).

- Click **Provider Details** button
- Click the **OOH PIF** button
- Select the program **Location** from the drop down menu at the top of the screen. The screen will populate with all the PIF details.
- Change only **Admission Contact, Contact Phone, and Contact Email**
- Click **Submit**
Admin Changes

New/Renew Annex A Addendum  Modify Annex A Addendum  Update Contact Information  Admin Changes  Copy Annex A Addendum
Admin Changes

The Administrative Change Annex A Addendum allows a user to only change information in the program’s Site Details.

- Changes can include moving the number of beds at one site to another site
- Activating/Inactivating a site
- Adding a new site
- Changing the gender and/or ages served at a site within existing target population and parameters

**Important Note:** These selections still need to fit into the parameters chosen within Populations Served, even though that accordion is not available for use in the Admin Change Addendum; if users need to make changes to the Populations Served accordion, a Modification is recommended instead.
Admin Changes (cont)

To complete a change to Site Details you must also do the following:

Enter the **Admin Changes Effective Date** – this is the date when the changes to Site Details go into effect

- *If Effective Date is in past or on the date of approval, changes will be updated the following day.*
- *If Effective Date is in future, the PIF will update on the Effective Date*

Enter the **Comments** area of the Addendum to document why the changes were made, or to give further information about the changes made to Site Details.
Copy Annex A Addendum
The Copy Annex A functionality is used when the OOH provider has a new program and wants to copy the Addendum of an existing program.

• You can copy from an approved Annex A Addendum to a new Annex A Addendum only.

• If the Annex A is in Saved, Submitted, or Returned for Changes status, it cannot be copied to a new Annex A.

• Using the Copy Annex A feature, the entire new Annex A Addendum will be available for edit and should be carefully reviewed.

• The copied Addendum will have all the required validations when you attempt to submit to CSOC.
1. Click the dropdown and locate the new program name.
2. Click on the **Copy Annex A Addendum** button will open up a list of the last available Addendums for *every* program the user has access to for copying into a new program’s Addendum.
3. Single click a row in the grid to select an Addendum to copy, and then select the **Copy Annex A Addendum** button.
4. A warning message will appear reminding the user that a copy will occur. Click OK.

The new Annex A Addendum will be created for the program.
PerformCare Training web page:
http://www.performcarenj.org/provider/training.aspx

Annex A Addendum Section:
https://www.performcarenj.org/provider/training.aspx#annexa
  • Guide to the Annex A Addendum

Security Section: http://www.performcarenj.org/provider/training.aspx#security
  • CYBER Password Reset Functionality, Security Administrator Guide, Secure Email
Customer Service Request Form

Clinical, Billing or Technical issues or questions should be reported to the Service Desk.

Click the link for the secure Customer Service Request Form

www.performcarenj.org/ServiceDesk

Complete the form by identifying:

• The Requestor’s name (person reporting the issue), agency and contact information
• Select a type of issue
• Describe the question, technical problem or issue
• Upload screenshots of the issue or identify youth records
Secure Email

Request Form replies may be communicated via Secure Email. Review the *Quick Reference Guide to Secure Email* on how to register and open secure emails.

Need Assistance?

Training questions? Email the PerformCare Training Unit:
• PCNJTraining@performcarenj.org

PerformCare:
• Phone 1-877-652-7624
• Customer Service Request Form
  www.performcarenj.org/ServiceDesk

Policy and Contracting questions: 1-609-888-7200
• CSOC Service Line Manager
• Annex A Contracting

Important Contact Information for CSOC Providers:
• http://www.performcarenj.org/pdf/provider/training/general-csoc/important-contact-information-for-csoc-providers.pdf
Care is the heart of our work.