

PerformCARE[®]

Instructional Guide to Third Party Liability (TPL) Functionality in CYBER

Third Party Liability (TPL) CYBER Functionality

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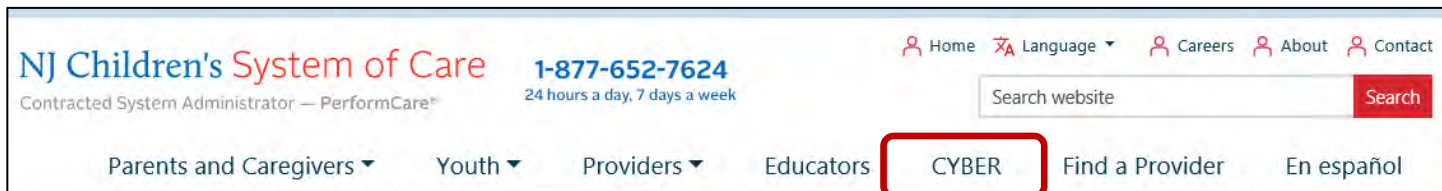
I. Introduction

The Third Party Liability (TPL) functionality in CYBER collects private health insurance information and stores it on the Face Sheet Insurance tab of youth record. TPL information is requested and entered by PerformCare's associates. Presumptive Eligibility (PE) Entities at Care Management Organizations (CMO) and Mobile Response Stabilization Services (MRSS) also have this ability. All CYBER users that have access to a youth's record will have the ability to access and view the Insurance tab of the Face Sheet; only PerformCare, CSOC, and PE Entities (CMO and MRSS) will have the ability to add records, edit existing records, and copy and delete records that have not been marked as "Complete" or "Verified".

Note: The insurance information gathered in CYBER is only for the youth; in some instances, a youth may not be covered under the same insurance as their parent or legal guardian. The Insurance tab and the records listed there should only hold information for the youth. In addition, the only insurance coverage that is being gathered and entered into CYBER at this time is Medical/Surgical and Mental Health coverage. Other coverage, such as Dental, Pharmaceutical and Vision, are not a part of this CYBER release and may be included in the future.

II. Accessing CYBER

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



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

Before logging in, keep in mind...

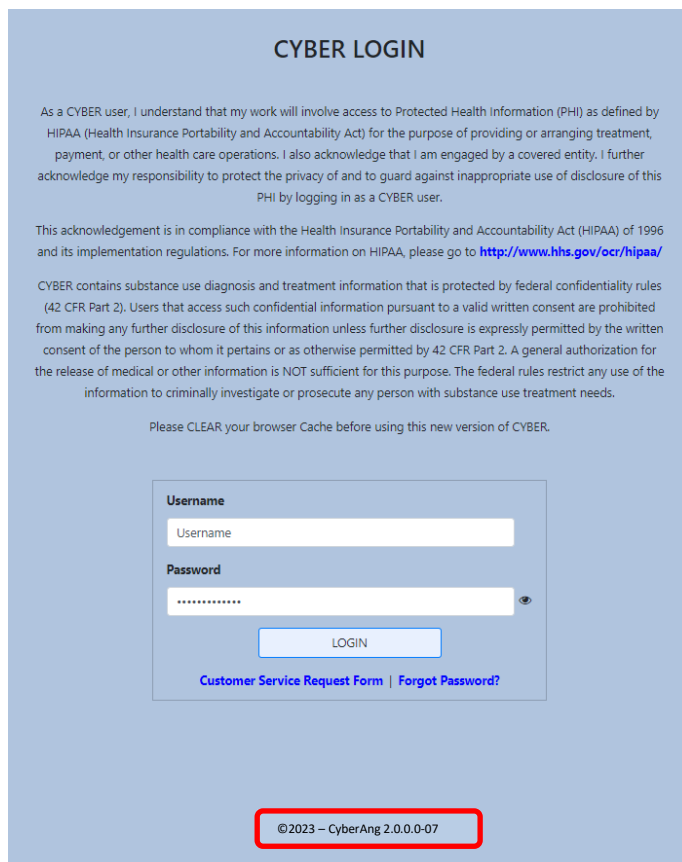
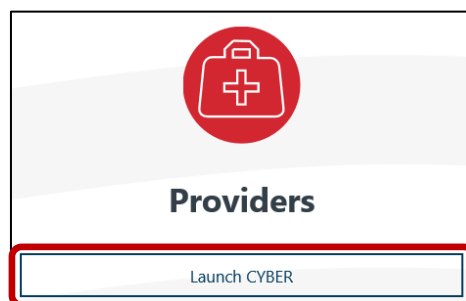
- Every time CYBER is launched, the **Username and Password is required, then click the LOGIN button to continue.**

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

This statement will appear during each log in.

Please also check the link: [CYBER Access Requirements](#) page on the PerformCare website for the most up-to-date technical requirements (such as browser compatibility and operating systems) needed to access CYBER.

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



III. Accessing Third Party Liability Information

To access the TPL information for a youth, users will need to locate the correct youth's record by using the Quick Search function from the Welcome Page (1), or the Youth/Child Search (2).

The screenshot shows the PerformCARE interface. On the left is a navigation menu with links: Security Administrator, Youth / Child Search (highlighted with a red box and labeled '2'), FSS Link, My Active Youth, and Out of Home. On the right is the 'Quick Search' form (labeled '1' in a box). The form includes a 'Youth/Child ID' dropdown menu, and input fields for 'First Name', 'Last Name', and 'DOB' (with a date picker icon). The 'DOB' field contains the placeholder text 'MM/DD/YYYY'.

Once the correct record has been located, the user will need to navigate to the Insurance tab of the youth's Face Sheet.

The screenshot shows the navigation tabs for the Face Sheet: Dashboard, Demographics, Episodes, Provider, Supports, Dx/Med, Eligibility, Insurance (highlighted with a red box), Legal, and Doc*.

The user will find the TPL records for the youth, as well as the Medicaid HMO/Managed Care records for the youth that also appear on the Eligibility tab of the Face Sheet.

IV. Insurance Tab

The screenshot shows the Insurance tab interface. At the top are navigation tabs: Dashboard, Demographics, Episodes, Provider, Supports, Dx/Med, Eligibility, Insurance (highlighted with a red box), Legal, and Doc*. Below the tabs are input fields for First Name, Last Name, Middle, and DOB. There is a checkbox for 'Parent/Guardian indicates the youth has TPL.' and two buttons: 'Add Insurance' and 'Clear Search'. Below these are two tabs: 'Active Insurance' (selected) and 'All Insurance'. A table displays the insurance records:

Source	Type	Status	Start Date	End Date	Sent Date	Date Entered	Description	Comment
OIT	CAID/NJFC						Status: 485 Plan A Child 6-19 100% to 13...	
OIT	CAID/NJFC I						Horizon/Medigroup	

The Insurance tab includes the youth's First and Last Name, Middle Initial and Date of Birth from the Demographics tab. These fields cannot be edited; if changes are needed, they must be done from the Demographics tab.

The tab includes an "Add Insurance" button, which allows the user to open a new blank TPL record, and a toggle which defaults to viewing "Active Insurance". When set to Active Insurance, the grid will populate with only the TPL and Eligibility records that have no End Date or an End Date in the future. When the filter is set to "All Insurance", all of the youth's TPL and Eligibility records, regardless of End Date or Status, will appear in the grid.

The grid includes:

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- Source – indicates where the record originated; users will see OIT (Medicaid Managed Care record), the State Medicaid Fiscal Agent (Medicaid record), CYBER TPL (TPL record entered manually into CYBER on the Insurance tab) or CYBER 3560 (TPL record manually entered into CYBER from the 3560 Application)
- Type – description of the type of insurance that is detailed in the record
- Status – indicates the status of the record; only CYBER TPL, CYBER 3560 and the State Medicaid Fiscal Agent sourced records will have a status. One of three statuses will appear:
 - Open – indicates the record is not complete and is open for editing and deletion
 - Complete – indicates that a user has entered information into all required fields and the record is now locked to editing and deletion. The record will be sent to OMIG for verification
 - Verified – indicates the record has been returned to PerformCare from the State Medicaid Fiscal Agent and the insurance information has been verified as being correct
- Start Date – start date of the insurance coverage
- End Date – end date, or termination date, of the insurance coverage
- Sent Date – date the record was sent to OMIG for verification; only CYBER TPL and CYBER 3560 records will have a date in this column
- Comment – currently not being used
- Description – details on the coverage type and/or name of the insurance carrier

All records in the grid can be opened by double clicking the row to show further details.

This is an example of an open details window for a Medicaid HMO/Managed Care record.

The screenshot shows a window titled "Medicaid HMO" with a close button (X) in the top right corner. Below the title bar, the text "TPL Managed Care Data" is displayed. The data is organized into two rows of three input fields each. The first row contains "Case No.", "Person No." (with the value "20"), and "Plan Code". The second row contains "Effective Date" (with the value "11/01/2012"), "Termination Date", and "COMP. Effective Date". At the bottom center of the window is a "Close" button.

Note: Medicaid HMO/Managed Care records cannot be edited. This information is automatically fed into CYBER by the State Medicaid Fiscal Agent's system.

Insurance Details Source Cyber TPL

YOUTH INFORMATION

LAST NAME *	FIRST NAME *	DATE OF BIRTH *	SSN	YOUTH/CHILD ID	MEDICAID
<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>
ADDRESS 1		ADDRESS 2		CITY	STATE ZIP
<input type="text"/>		<input type="text"/>		<input type="text"/>	<input type="text"/> NJ <input type="text"/>

YOUTH INSURANCE INFORMATION

LAST NAME *	FIRST NAME *	DATE OF BIRTH *	<input type="checkbox"/> SAVE AS ABOVE	<input type="checkbox"/> INSURANCE CARD PRESENT
<input type="text"/>	<input type="text"/>	<input type="text"/> MM/DD/YYYY <input type="text"/>		
ADDRESS 1		ADDRESS 2		CITY STATE ZIP
<input type="text"/>		<input type="text"/>		<input type="text"/> <input type="text"/> <input type="text"/>

POLICY HOLDER INFORMATION

LAST NAME *	FIRST NAME	SSN *	INSURER CODE	INSURANCE CARRIER *	INSURER PHONE
<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>
INS. ADDRESS 1		INS. ADDRESS 2		CITY	STATE ZIP
<input type="text"/>		<input type="text"/>		<input type="text"/>	<input type="text"/> <input type="text"/>

INSURANCE INFORMATION

POLICY NUMBER *	GROUP NUMBER	COVERAGE TYPE *	RELATIONSHIP *	EFFECTIVE DATE	TERMINATION DATE
<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/> MM/DD/YYYY <input type="text"/>	<input type="text"/> MM/DD/YYYY <input type="text"/>

EMPLOYER INFORMATION

EMPLOYER CODE	EMPLOYER NAME	EMPLOYER PHONE	ADDRESS 1	ADDRESS 2	CITY	STATE	ZIP
<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>

INSURANCE DETAILS COMMENT

This is an example of the Insurance Details window for any TPL records manually entered into CYBER.

V. Insurance Details Screen for TPL Records

The first section is for **Youth Information**.

YOUTH INFORMATION


LAST NAME *	FIRST NAME *	DATE OF BIRTH *	SSN	YOUTH/CHILD ID	MEDICAID
<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>
ADDRESS 1		ADDRESS 2		CITY	STATE ZIP
<input type="text"/>		<input type="text"/>		<input type="text"/>	<input type="text"/> NJ <input type="text"/>

Note: All fields marked with an asterisk () are required fields; all must be completed for the record to be submitted for verification by OMIG.*

All of the fields in this section will automatically populate from the youth's Face Sheet; the fields cannot be edited from the Insurance Details screen. All changes must be made on the Demographics tab of the Face Sheet.

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The second section is for **Youth Insurance Information**.

YOUTH INSURANCE INFORMATION					
LAST NAME *	FIRST NAME *	DATE OF BIRTH *	<input type="checkbox"/> SAME AS ABOVE <input type="checkbox"/> INSURANCE CARD PRESENT		
<input type="text"/>	<input type="text"/>	MM/DD/YYYY 			
ADDRESS 1	ADDRESS 2	CITY	STATE	ZIP	
<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	

This section was added to differentiate between the information found on the Face Sheet, and what is found on the youth's insurance card. If the information is the same, the user can select the "Same As Above" checkbox, which will populate all fields with the same information from the Youth Information area of the Insurance Details (above).

Note: PE Entities should select the checkbox for "Insurance Card Present", when they have seen the insurance card for the policy that covers the youth.



The third section is for **Policy Holder Information**.

POLICY HOLDER INFORMATION					
LAST NAME *	FIRST NAME	SSN *	INSURER CODE	INSURANCE CARRIER *	INSURER PHONE
<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>
INS. ADDRESS 1	INS. ADDRESS 2	CITY	STATE	ZIP	
<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	

Although listed as required, if the Last Name and/or SSN of the Policy Holder is not available or is unknown, the user should enter "N/A" into the fields to fulfill the requirement.

Insurance Carrier, and its associated contact information fields, are all manually entered. Care should be taken when completing this field, since this information will aid in verifying the insurance coverage.

The fourth section is for **Insurance Information**.

INSURANCE INFORMATION					
POLICY NUMBER *	GROUP NUMBER	COVERAGE TYPE *	RELATIONSHIP *	EFFECTIVE DATE	TERMINATION DATE
<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	MM/DD/YYYY 	MM/DD/YYYY 

The Policy Number may be listed as the "ID Number" on the insurance card for the youth.

Coverage Type now includes only three options – Medical/Surgical, Mental Health, Medical/Surgical/Mental Health.

Relationship includes an option for "Parent/Other"; this is the relationship of the policyholder to the youth.

Effective Date and Termination Date, if not completed by the user, will be completed by OMIG during the verification process.

The final section is for Employer Information.

EMPLOYER INFORMATION								
EMPLOYER CODE	EMPLOYER NAME	EMPLOYER	PHONE	ADDRESS 1	ADDRESS 2	CITY	STATE	ZIP
<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>
INSURANCE DETAILS COMMENT								
<input type="text"/>								

Although none of the fields in this section is required, completing them will assist in the insurance verification process.

The final component of the Insurance Details screen is the action button row.

<input type="button" value="Save"/>	<input type="button" value="Save & Close"/>	<input type="button" value="Copy"/>	<input type="button" value="Complete"/>	<input type="button" value="Delete"/>	<input type="button" value="Cancel"/>
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- Save – saves 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 completed, the record will be locked for editing and will be sent to 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 – currently not being used.

VI. TPL Verification Process

Once all the required fields in a TPL entry have been entered and have been marked “Complete”, it will be automatically sent to the Office of the Medicaid Inspector General (OMIG) for verification; only records that contain a Medicaid ID number for the youth will be sent to OMIG for verification. Once the insurance coverage has been verified, OMIG transmits the information to the State Medicaid Fiscal Agent, who will then send a verified record to PerformCare NJ. The verified record will have a Source of the name of the State Medicaid Fiscal Agent and a Status of “Verified”.

TPL records will have one of three statuses on the Insurance tab – Open, Complete, Verified. Open indicates that the record is open for editing and deletion, and is not verified. Complete indicates that all required fields have been finished. Once the user has indicated that the record is complete by clicking the “Complete” button, the record can no longer be edited or deleted and the record is going to be sent to OMIG for verification. Completed records will have a date in the “Sent” column on the Insurance tab once they have been sent to OMIG. Verified indicates that the TPL information has been verified by OMIG, and returned to PerformCare by the State Medicaid Fiscal Agent; these records cannot be edited or deleted from CYBER.

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There is automatic data gathering of Medicaid/3560 coverages (such as PE/NJ FamilyCare/HMO/3560 eligibility number) that may appear in the Insurance tab of the youth's CYBER record. When a Medicaid/3560 is approved, it is automatically recorded under the youth's Insurance tab and sent electronically to OMIG to be verified.

Please note that these coverages below are not considered TPL. Reminder, TPL is private health insurance information only.

- PE/Medicaid (NJ FamilyCare)
- HMO
- 3560 eligibility number

In addition, Premium Support Special Program Code (SPC) information will be shown/identified in the insurance (TPL) tab. The purpose of the Premium Support Program (PSP) is to provide financial support to adults and children to help cover the cost of employer-sponsored health insurance. Eligible PSP youth are assigned by Medicaid SPC codes of 50, 51, 52, 53, 54, 55, 56, 57, 58, and 59. These SPC codes are considered TPL, which designate that the family has TPL private insurance, when the premium is too high to pay. In these cases, Medicaid pays the TPL premium.

VII. TPL and 3560 Interaction

While TPL can stand alone from the 3560 Application, there are instances when a 3560 Application will not be available for submission without a complete TPL record in the system for the youth.

In a 3560 Application, the user will navigate to the Household Information tab.

The screenshot shows the 'Household Information' tab of a '3560 Request' form. The form is divided into several sections: 'Home Address' with fields for Apt.#/Floor, Area, Home Phone, and Cell Phone; 'City' with fields for State (pre-filled with NJ), Zip, County, and Language Spoken at home (pre-filled with ENGLISH); and 'Mailing Address, if different' with fields for Apt.#/Floor, City, State (pre-filled with NJ), Zip, and County. Below these sections are two expandable sections: 'List ALL Parents/Guardians in the Household' and 'List ALL Children UNDER THE AGE OF 21 Living in the Household'. The 'List ALL Children...' section is highlighted with a red box and contains an 'Add New' button. At the bottom, a table lists children with columns for First Name, Last Name, SSN, DOB, Date of Entry, and Related to Parent 1.

Double-clicking on the row with the youth's name (in the **Children Under The Age Of 21** area) will open up the details window to view any Information about the youth's Insurance coverage.

The screenshot shows a web application window titled "Add New Child Info". The form contains the following fields and options:

- First Name: [Text Input]
- Last Name: [Text Input]
- SSN: [Text Input]
- Birth Date: [Date Picker]
- Race: [Dropdown Menu]
- Gender: M F
- Other health insurance now?: Yes No (highlighted with a red box)
- Full-time Student: Yes No
- Other health insurance with in the past 3 months?: Yes No
- US Citizen/Legal Resident: Yes No
- Date of Entry: [Date Picker]
- Unpaid medical bills for the last 3 months?: Yes No
- Pregnant: Yes No
- How this child is related to the 1st parent?: Child Stepchild Other
- How this child is related to the 2nd parent?: Child Stepchild Other

At the bottom of the form, there are four buttons: "Accept", "Cancel", "Delete", and "View Insurance".

If the youth currently has health insurance, then the user must select “Yes” for “Other health insurance now?” This will open the Insurance tab of the youth’s Face Sheet in a new window (leaving the 3560 Application open in the background).

The user must do one of the following actions: *complete* an existing “open” TPL record, *delete* an existing “open” TPL record and start a new record, or click on the “Add Insurance” button to enter a new TPL record for the youth.

In order to submit the 3560 Application, a completed TPL record must be on file for the youth. If the TPL record is not complete, the user will be unable to submit the 3560 Application.

- If there is a saved TPL record that was started by another user, the current user (as long as they have the appropriate rights in CYBER) can complete the record in order to submit the 3560 Application. In addition, if there is a completed TPL record and an open TPL record for the youth, as long as the termination/end date for the coverage in the completed record is in the future or has not been entered, the 3560 Application can be submitted.

If the youth currently does not have health insurance, the user must select “No” for “Other health insurance now?” If there is an open TPL record for the youth, the user will receive a warning message indicating that there is an open record. This will not prevent the user from submitting the 3560 Application.

- By choosing “No”, the user is indicating that the youth does not currently have other health insurance coverage at the time that the 3560 Application is being completed.

Note: 35605 is an eligibility number that ONLY covers FSS services for Developmentally Disabled (DD) determined youth. This eligibility number is automatically generated by PerformCare. Number generation is triggered when a youth is admitted into an FSS program, and is receiving FSS services (i.e. creation of an approved prior authorization).

VIII. References

PerformCare Website Training page <http://www.performcarenj.org/provider/training.aspx>

- Instructional Guide to the CYBER Face Sheet - General Trainings for all CSOC Providers Section
<https://www.performcarenj.org/pdf/provider/training/cyber-face-sheet.pdf>
- 3560 and TPL Data Collection – Billing and Claims Section
<https://www.performcarenj.org/pdf/provider/training/billing-claims/3560-tpl-data-collection-cyber.pdf>

Appendix A: Acronyms

3560	Medicaid “look-alike” that acts like a NJ FamilyCare Medicaid eligibility number; Except , it only covers authorized services for youth active in CSOC. 3560 is payer of last resort and only a CME can apply for 3560 number.
3560-5xxx	This eligibility number ONLY covers FSS services for Developmental Disabled (DD) determined youth.
BPS Assessment	Biopsychosocial/Assessment
CME	Care Management Entity – Either CMO or MRSS
CMO	Care Management Organization
CSA	Contract System Administrator
CSOC	Children System of Care
DOS	Date of Service
State Medicaid Fiscal Agent	The State Medicaid Fiscal Agent is the vendor that manages and processes Medicaid.
Eligibility	A youth that has coverage such as Medicaid NJ Family Care, 3560, ...etc.
MRSS	Mobile Response and Stabilization Services
NJ FamilyCare	An insurance program for youth & low-income families in New Jersey (Formally known as Medicaid of New Jersey).
OMIG	Medicaid Inspector General
PE	Presumption Eligibility is an associate assigned from each county in New Jersey to oversee youth’s record and works along with Mobile Response & Care Management Organizations.
PE eligibility number	Presumptive Eligibility Number (e.g. 2530xxxxx) is a temporary Medicaid number assigned to Youth until the PE can verify/collect all legal/financial documentation.
Prior Authorization Number	A computer generated and unique number that indicates approved service code and units; this number is required to bill for services rendered.
PSP	Premium Support Program
SPC	Special Program Code administered by NJ FamilyCare (Medicaid)
TPL	Third Party Liability- Private health insurance

PerformCare Customer Service
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