

# NJ Children's System of Care

Contracted System Administrator — PerformCare®

## Children's InterAgency Coordinating Council (CIACC) Summary of Activity All Counties County - December 2025

### - Children & Youth Who Accessed the System of Care -

**Call Activity:** Demographics on youth for whom there was a call to PerformCare during the report period. This includes newly registered youth (those for whom this month was the first contact they have ever had with the NJ CSOC). Race/Ethnicity follows the census categories and there may be missing data as these are voluntary fields.

Population Summary		
Total Unique Youth with Call Activity in Report Month		6,093
Newly Registered Youth in Report Month		2,112
Gender		
Male	3,573	58.6%
Female	2,520	41.4%
Age at time of call		
0-4	476	7.8%
5-10	2,270	37.3%
11-13	1,238	20.3%
14-17	1,665	27.3%
18-20	428	7.0%
21	8	0.1%
>21	8	0.1%

Race		
AMERICAN INDIAN/ALASKA NATIVE	4	0.1%
ASIAN	249	4.1%
BLACK OR AFRICAN AMERICAN	1,587	26.0%
NATIVE HAWAIIAN AND OTHER PACIFIC ISLANDER	3	0.0%
WHITE	2,133	35.0%
Two Or More Races	395	6.5%
SOME OTHER RACE	1,279	21.0%
DECLINED	54	0.9%
UNKNOWN	389	6.4%
Ethnicity		
Hispanic or Latino	2,549	41.8%
Non-Hispanic or Latino	3,295	54.1%
No Ethnicity Data	249	4.1%

**Caller Type Distribution:** Based on the total number of calls in the report period. The types are based on selection options used by PerformCare's Member Service Specialists to document call sources.

Total Calls in Report Month	9,681	
Caller Type - External Partner Group		
988 Call Specialist	3	0.0%
Adolescent Housing Hub Provider (AHH)	0	0.0%
Childrens Inpatient or Partial Hospital Provider	129	1.3%
College or University	0	0.0%
County Administrator	0	0.0%
Court Personnel	1	0.0%
Department of Corrections (DOC)	0	0.0%
Department of Human Services (DHS)	1	0.0%
Division of Child Protection & Permanency (DCP&P)	317	3.3%
Elementary/Middle School	54	0.6%
FCIU	0	0.0%
High School	21	0.2%
Juvenile Justice Commission/Juvenile Detention Center (JJC/JDC)	3	0.0%
NJ Child Abuse Hotline	0	0.0%
Police	30	0.3%
Psychiatric Emergency Service Staff (PESS)	5	0.1%
Shelter	0	0.0%
Youth Advocate	0	0.0%
Other	184	1.9%
External Partners Subtotal	748	7.7%

Caller Type - Caregiver Group		
Family/Custodial Family Member	98	1.0%
Minor with Child	0	0.0%
Parent/Legal Guardian	6,655	68.7%
Resource Parent	60	0.6%
Self (18-21)	240	2.5%
Self (Under 18)	21	0.2%
Caregiver/Youth Subtotal	7,074	73.1%
Caller Type - CSOC Provider Group		
Behavioral Assistance/Intensive in Community	347	3.6%
Children's System of Care (CSOC)	0	0.0%
CMO (Care Management Organization)	92	1.0%
CSOC Out of Home Provider	3	0.0%
Family Functional or Multi-Systemic Therapy	17	0.2%
Mobile Response Stabilization Services (MRSS)	33	0.3%
Provider (Other)	550	5.7%
Substance Use Treatment Provider	22	0.2%
CSOC Provider Subtotal	1,064	11.0%
I&R Calls Not Attached to a Youth	795	8.2%

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Call Reason & Resolutions: are based on selection options used by PerformCare's Member Service Specialists to document types of calls. A call can have multiple reasons and resolutions.

Reason for Call		
988 LifeLine Warm Transfer	1	0.0%
Adolescent Housing Hub	216	2.1%
Authorizations, Claims & Eligibility	216	2.1%
Caller Providing Information About a Member	71	0.7%
Caller Providing Information About a Youth	94	0.9%
Caller Requesting Information	1,668	16.5%
In Home Service Request	5,791	57.2%
Infected / Exposed COVID-19 Virus	0	0.0%
Intellectual/Developmental Disability Inquiry	1,482	14.6%
Intermediate Unit Admission	8	0.1%
No Service Access COVID-19 Virus	0	0.0%
Out of Home Service Request	12	0.1%
Reconsiderations & Concerns	15	0.1%
Referred by 988 LifeLine	2	0.0%
Requested Services Not Accessed Through PerformCare	149	1.5%
Substance Use Related	66	0.7%
Technical Issues	164	1.6%
Other	164	1.6%
<b>Total</b>	<b>10,119</b>	

Call Resolution		
Access and Record Maintenance	893	4.8%
Adolescent Housing Hub Related	21	0.1%
Contacted Child Abuse Hotline	11	0.1%
Contacted Police	14	0.1%
COVID-19 Related	1	0.0%
DCP&P Related	0	0.0%
DD/ID Family Support Application Completed	322	1.7%
DD/ID Wrap Services	0	0.0%
I/DD Eligibility Related	183	1.0%
Information Documented	5,909	31.5%
IU Admission Processed	17	0.1%
Referred for Bio-Psycho-Social Assessment	460	2.5%
Referred for Medical Clearance	2	0.0%
Referred to Current Insurance	8	0.0%
Referred to External System Partner	3,203	17.1%
Referred to FCIU	1	0.0%
Referred to Outpatient Services	143	0.8%
Service Authorization Related	131	0.7%
Substance Use Related	1	0.0%
Transferred internally to Clinical, Care Connector, Quality or Service Desk	5,404	28.8%
Warm Transfer to 988	3	0.0%
Other	2,014	10.7%
<b>Total</b>	<b>18,741</b>	

### - Active Children & Youth (Those youth who have an authorization for service in the Reported Month) -

Active Children & Youth: The remaining data in this report represents all youth with active authorizations during any point in the reporting month: those receiving any sort of service that we track or authorize. These may vary from point in time or admission reports elsewhere available.

Gender		
Male	17,825	58.1%
Female	12,836	41.9%
Age		
0-4	1,172	3.8%
5-10	10,112	33.0%
11-13	6,453	21.0%
14-17	10,013	32.7%
18-20	2,841	9.3%
21	68	0.2%
>21	2	0.0%
<b>Total Unique Active Youth in Report Month</b>	<b>30,661</b>	

Race		
Otherasian	1	0.0%
White	12,174	39.7%
Black Or African American	7,627	24.9%
American Indian/Alaska Native	25	0.1%
Asian	1,179	3.8%
Native Hawaiian/Other Pacific Island	17	0.1%
Some Other Race	5,492	17.9%
Two Or More Races	2,169	7.1%
Declined	298	1.0%
Unknown	1,679	5.5%
Ethnicity		
Hispanic or Latino	12,218	39.8%
Non-Hispanic or Latino	17,280	56.4%

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No Ethnicity Data	1,163	3.8%
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**Service Distribution of Active Youth in Report Period:** **Authorized CSOC Services** are services assigned or managed by the CSA, PerformCare. **Referrals & Other Authorizations** come from the CMO Individualized Service Plans submitted to the CSA for review.

Authorized CSOC Services		Percentage of total Auths
Behavioral Assistance	7,655	9.4%
Biopsychosocial Assessment	840	1.0%
Care Management	19,945	24.5%
Family Functional or Multi Systemic Therapy	104	0.1%
Family Support Services (I/DD)	7,813	9.6%
Intensive in Community	29,948	36.7%
Intensive In Home	1,332	1.6%
Intermediate Inpatient Unit	12	0.0%
Mobile Response Initial	2,639	3.2%
Mobile Response Stabilization	7,223	8.9%
Out of Home Treatment	1,578	1.9%
Substance Use Treatment	25	0.0%
Wrap Flex Services	2,419	3.0%
<b>Total</b>	<b>81,533</b>	

Referrals & Other Authorizations from CMO ISP's		Percentage of total Auths
Bundled Services requested by the Care Management Organization (CMO)	111	2.7%
Community Based Services	1,464	35.0%
DCP&P Contracted	4	0.1%
Inpatient	27	0.6%
Juvenile Justice Service	1	0.0%
Outpatient Referral (OP Prog Note & UM Referral)	261	6.2%
Peer Support	787	18.8%
Private Insurance	122	2.9%
School Reimbursed Service	1,408	33.6%
Transportation	1	0.0%
<b>Total</b>	<b>4,186</b>	

**Out of Home Treatment (OOH) Population:** Based on youth home address, not address of the OOH providers. Reflects admission data and includes any youth open at any time during report period.

All Youth in OOH Treatment		Percentage
Crisis Stabilization & Assessment Program	34	3.6%
Detention Alternative	0	0.0%
Emergency Diagnostic Residential Unit	0	0.0%
Group Home	49	5.2%
I/DD Treatment	207	21.8%
Intensive Residential Treatment	41	4.3%
Psychiatric Community Home	135	14.2%
Residential Treatment Center	168	17.7%
Specialty Bed	177	18.6%
Substance Use Treatment	33	3.5%
Treatment Home	107	11.3%
<b>Total</b>	<b>951</b>	

### - Indicators of Cross-System Impact -

These numbers are duplicated and incomplete as a single youth may have more than one type of insurance/eligibility and reporting is voluntary. (3560 is a CSOC only Medicaid look alike eligibility identification number; NJ Family Care is a federal and state funded health insurance program for income eligible New Jersey families; SSI is a Medicaid only coverage for youth determined disabled and receiving Supplemental Security Income (SSI))

Funding Type	
Medicaid Type - 3560	6,900
Medicaid Type - Family Care	9,236
Medicaid Type - Supplemental Security Income (SSI)	3,038
Private Insurance	1,746

# NJ Children's System of Care

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## Children's InterAgency Coordinating Council (CIACC) Summary of Activity

### All Counties County - December 2025

#### - Special Population Involvement: I/DD & Camp Activity

**Descriptions:** Below you will find information about services and supports requested and authorized in the report month for youth who are eligible for Developmental Disability Services or seeking eligibility. **Applications** approved are reflected in the total eligible number. **Family Support Services** are requested by a telephone application and may include more than one request per youth. **Assistive technology** typically requires an assessment be completed by a third party before a device or modification is approved. Some services are not available in all areas.

**Summer Camp** applications are displayed cumulatively for the year, so will remain static after the camp season begins and reset to zero in January.

Services requested through the I/DD Family Support Application in Report Month	
After School Respite	94
Agency Respite	89
Assistive Technology: Assessment	25
Educational Advocacy	16
Overnight Respite	6
Self Hired Respite	215
Weekend Recreation	76
<b>Total</b>	<b>521</b>

Authorized FSS Services in Report Month	
After School Respite	912
Agency Respite	767
Assistive Technology: Assessment	0
Assistive Technology: Device/Mod	135
Educational Advocacy	26
Overnight Respite	0
Self Hired Respite	2,865
Weekend Recreation	272
<b>Total</b>	<b>4,977</b>

Intellectual/Developmental Disabled (I/DD) Population	
DD Eligibility Apps Received in Report Month	201
DD Eligibility Apps Approved in Report Month	126
Currently Eligible Youth	14,637

2026 Cumulative Summer Camp Applications Received	
Camp Applications Received	86
One to One Applications Received	17

I/DD youth with Care Management Entity Attachment in Report Month	
Care Management	2,843
Mobile Response Stabilization Service	125

2025 Camp Related Authorizations	
Approved Camp Authorizations	1,265
Approved One to One Aid Authorizations	608

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## Children's InterAgency Coordinating Council (CIACC) Summary of Activity All Counties County - December 2025

### - Substance Use Involvement -

Youth can present to the New Jersey System of Care as having a Substance Use (SU) Indicator in various ways. For the purposes of this report we are considering as indicators:

1. A call with an SU Reason or Resolution Code entered in the report period.
2. An open SU Tracking Element active at any time in the report period.
3. An Active SU Authorization or SU related Wrap Flex Authorization active at any time in the report period.
4. An indication via a Strength & Needs Assessment created in the report period. (score of 1, 2 or 3 in Risk Behaviors)
5. An indication as the result of a Clinical Triage completed in the report period.
6. A substance use specifier on YouthLink.

The 'All Unique Youth' count below represents the unique youth with at least one of the 6 types of indicators. All Demographic distributions are based on this unique population. Counties represented here are based on the parents home county or designated 'Mailing Address'; if there is no parent address or mailing address the CYBER Facesheet address is used. 'Unknown' county will include both youth with missing county data or Out of State youth.

All Unique Youth with a Substance Use Indicator	1,202
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### Demographics (All percentages calculated from 'All Unique Youth')

Gender - SU Population		
Male	657	54.7%
Female	545	45.3%

Age Group - SU Population		
5-10	8	0.7%
11-13	100	8.3%
14-17	867	72.1%
18-20	221	18.4%
21	6	0.5%
>21	0	0.0%

Race - SU Population		
AMERICAN INDIAN/ALASKA NATIVE	2	0.2%
ASIAN	17	1.4%
BLACK OR AFRICAN AMERICAN	370	30.8%
NATIVE HAWAIIAN AND OTHER PACIFIC ISLANDER	1	0.1%
WHITE	396	32.9%
Two Or More Races	78	6.5%
SOME OTHER RACE	232	19.3%
DECLINED	12	1.0%
UNKNOWN	94	7.8%

Ethnicity - SU Population		
Hispanic or Latino	500	41.6%
Non-Hispanic or Latino	634	52.7%
Other	68	5.7%

County - Statewide SU Population		
ATLANTIC	42	3.5%
Bergen	70	5.8%
Burlington	56	4.7%
CAMDEN	124	10.3%
CAPE MAY	14	1.2%
CUMBERLAND	34	2.8%
ESSEX	119	9.9%
GLoucester	40	3.3%
Hudson	75	6.2%
HUNTERDON	10	0.8%
MERCER	65	5.4%

County - Statewide SU Population		
Middlesex	111	9.2%
Monmouth	73	6.1%
MORRIS	23	1.9%
Ocean	89	7.4%
PASSAIC	91	7.6%
SALEM	7	0.6%
SOMERSET	26	2.2%
SUSSEX	18	1.5%
Union	94	7.8%
WARREN	15	1.2%
UNKNOWN	6	0.5%

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### Populations & Services

*Living Situation includes entire unique population. If youth was in OOH anytime in report period they are counted as OOH.*

*DD Eligible, CMO and Outpatient counts include only those youth with one or both of those elements.*

*The SU Outpatient count includes both Outpatient and Intensive Outpatient services.*

*(Unique Populations are defined above the Demographic section of this report.)*

Unique Substance Use Populations		Outpatient Services (SUT01, 02, 03)	
Unique Youth with Call Reason or Resolution Indicator	59	Outpatient & Intensive OP	18
Unique Youth with SU Tracking Element Indicator	91	Active with CMO	
Unique Youth with SU Authorization Indicator	184	Active with CMO	944
Unique Youth with SU Wrap Flex (CSA20) Indicator	2	Active with DD	
Unique Youth Open SU Module Indicator	772	DD Eligible	69
Unique Youth Triage Form Indicator	257	Living Situation	
Unique Youth with SU Indicator - OOH Referral	13	In Community	985
		Out of Home	218

### Specific Substance Usage Distribution

*Population details - Youth in this table are included based on the most recent Substance Use (SU) Module completed within 120 days prior to the report start date. The SU Module is an additional series of assessment items activated when a score of 1,2 or 3 is entered in the SU item of the Strength & Needs Assessment. A youth can have multiple substances identified per SU Module completed. Because of this the totals in this table will not match the unique number of SU Modules completed for the report month.*

Substance	Currently Indicated	Historically Indicated	Both (History & Current)
Alcohol	52	10.9%	287
Amphetamine	0	0.0%	17
Barbiturates	0	0.0%	1
Benzodiazepines	3	0.6%	21
Cannabis	288	60.6%	630
Cocaine	3	0.6%	28
Ecstasy	1	0.2%	19
Hallucinogens	2	0.4%	40
Inhalants	7	1.5%	11
Opiates - Heroin	0	0.0%	7
Over the Counter Drugs	1	0.2%	17
Rx Prescription	3	0.6%	19
Synthetic Cannabis	23	4.8%	38
Tobacco	45	9.5%	136
Other - Opiates	2	0.4%	23
Other Drugs	45	9.5%	72
<b>Total</b>	<b>475</b>		<b>1,366</b>
			<b>154</b>

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### **Other Metrics - School Attendance, Legal Involvement and Insurance Coverage**

*School Attendance scores are counted only for assessments completed 120 days prior to the start date of the report period.*

*Legal Involvement is reported from the Legal Module/Seriousness item. This module is opened when a 1, 2 or 3 is entered in the Legal Involvement question on the Strength & Needs Assessment.*

*Insurance Coverage is determined by Medicaid numbers associated with Authorizations active during the report period with the exception of 'Private Insurance' which is identified via the TPL tab in CYBER. These counts are not unique as a youth can have different Medicaid numbers for different authorizations.*

Assessment Score	Assessment Score Distribution - School Attendance - SU Population	
0	Attends school regularly	516
1	Having problems with attendance	215
2	Having challenges with attendance	157
3	Youth is generally truant or refusing to go to school	64
N/A	Not Applicable	169

Legal Involvement - SU Population	
Legal Involvement - Case Pending	211
Legal Involvement - Probation/Parole	211
No Legal Involvement	203

Insurance Coverage - SU Population	
NJ Family Care	420
Supplemental Security Income (SSI)	111
3560/State Only	218
Third Party Liability (TPL)	42
No Insurance	48

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#### CYBER Call Reason / Resolution Definitions & Report Mapping

Call Reason	Call Reason Description	CIACC Group
988 Warm Transfer	When Caller Type is a 988 Call Specialist and needs to be Warm transferred to Clinical	988 LifeLine Warm Transfer
AHH-Referral Cancellation	Caller is calling to cancel the referral request for housing	Adolescent Housing Hub
AHH-Seeking Housing Information	Caller is seeking information about the AHH or any of the programs involved in it	Adolescent Housing Hub
AHH Youth Supportive Housing	Caller is requesting housing	Adolescent Housing Hub
Access Issue	Caller is inquiring about eligibility of youth for CSA services	Authorizations Claims & Eligibility
Authorization-Billing/Claims Inquiry	Provider requesting authorization modification authorization suspension authorization information Medicaid eligibility claims processing	Authorizations Claims & Eligibility
Record Updates	Caller requesting to update address provide TPL information or provide social security number; provider requesting to be reopened to the youth's record for documentation purposes MRSS requesting changes to Crisis Tracking Form	Caller Providing Information About a Member
Caller Providing Information	Approved third party or provider providing/relaying information to register new youth or supplement the record content	Caller Providing Information About a Youth
Follow Up to Treatment Request	Family provider or approved third party inquiring about an existing authorized service.	Caller Requesting Information
Information Requested	Requesting information about PerformCare NJ Children's System of Care or community resources	Caller Requesting Information
Policy and Procedure Inquiry	Caller requesting information regarding a policy or procedure	Caller Requesting Information
Requesting Information about a Youth	Caller requesting information pertaining to the youth	Caller Requesting Information
Treatment plan Inquiry	Caller inquiring about receipt review or outcome of a treatment/service plan	Caller Requesting Information
Service Request for Behavioral Health (BH)	Family or CSOC provider seeking services for new youth or seeking new services for existing youth	In Home Service Request
Infected/Exposed COVID-19 Virus	If the caller advises that someone in the household is infected exposed or is at risk of exposure to COVID-19. Process the call as per our normal procedures making sure that this information is adequately and clearly documented in the record	Infected / Exposed COVID-19 Virus
DD/ID-Inquiry Eligibility	Caller requesting information regarding the eligibility process for youth to obtain DD/ID services	Intellectual/Developmental Disability Inquiry
DD/ID - Inquiry for Family Support Services	Caller requesting Family Support Services for youth with DD/ID service needs	Intellectual/Developmental Disability Inquiry
DD/ID-Other-	Specify reason in Call Reason Comments box	Intellectual/Developmental Disability Inquiry
Intermediate Unit (IU) Admission	IU will report admission to PC telephonically within one business day of admission; Member Services will use Call Reason: 'IU Admission'	Intermediate Unit Admission
No Service Access COVID-19 Virus	If caller advises that there has been a service interruption due to COVID-19 for CSOC Services only	No Service Access COVID-19 Virus

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Family Affected by Super Storm Sandy:	No longer in use	Other
Other	specify reason in Call Reason Comments box)	Other
DCP&P Out of Home Referral Request	DCP&P personnel requesting to complete a telephonic review or inquiring about the DCP&P OOH fax pilot	Out of Home Service Request
Out of Home Treatment Request	Provider or family requesting OOH placement or status about OOH referral previously made.	Out of Home Service Request
Reconsideration/Complaint –	Caller requesting reconsideration of an IOS determination caller requesting to file a formal complaint or caller complaining about services received	Reconsiderations & Concerns
Provider IOS Dispute	Provider calling to dispute IOS previously determined by PerformCare	Reconsiderations & Concerns
Quality of Care Concern	Caller reporting a quality-of-care concern	Reconsiderations & Concerns
Referred by 988 Lifeline:	When the caller says they were referred to PerformCare by a 988 Call Specialist. You will be able to edit the Call Reasons after registration	Referred by 988 LifeLine
Service Request	Caller requesting service that is not accessed through PerformCare such as speech pathologist boot camp music therapy etc.	Requested Services Not Accessed Through PerformCare
SUT Provider Clinical Review/LOCI	Contracted substance use treatment provider is requesting level of care indicator for substance abuse services	Substance Use Related
SUT-Other	Specify reason in Call Reason Comments box	Substance Use Related
SUT Provider Calls	Substance use treatment provider is calling for information or providing information on youth or has a policy/contracting inquiry billing inquiry etc.	Substance Use Related
SUT-Service Request for Substance Abuse Services	Family or CSOC provider seeking services for new youth or seeking new services for existing youth.	Substance Use Related
Technology question	Calls pertaining to use of CYBER technical issues password/log in issues	Technical Issues
CSAP IDD	Call is related to Crisis Stabilization and Assessment	

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Call Resolution	Call Resolution Description	CIACC Group
Access to Youth's Record Granted to Provider	Call center staff enters a Tracking Element for provider to access a youth's record	Access and Record Maintenance
Record Updated	Updated information in the record upon caller's request such as the address TPL information social security number or changes made to MRSS Crisis Tracking Form etc.	Access and Record Maintenance
Registration Completed	Youth has been registered in Cyber	Access and Record Maintenance
AHH Registration Completed	Staff completed registration for new youth requesting AHH but the checklist was not completed	Adolescent Housing Hub Related
DD/ID Eligible Youth for AHH –	Youth is DD/ID Eligible and does not meet the criteria for the AHH	Adolescent Housing Hub Related
AHH Referral Cancelled	Youth no longer in need of AHH	Adolescent Housing Hub Related
AHH- Incomplete AHH Request	Youth Checklist is not complete	Adolescent Housing Hub Related
AHH 22 or over	Youth is aged 22 or over not eligible for AHH	Adolescent Housing Hub Related
AHH- Referred Youth to Shelter	Youth referred to Shelter (contact information given)	Adolescent Housing Hub Related
AHH-Referred to AHH	Youth Checklist (AHH Referral) placed on AHH Link	Adolescent Housing Hub Related
Contacted SCR	Caller required warm transfer to State Central Registry for abuse/neglect concern	Contacted Child Abuse Hotline
Referred to SCR/APS	Caller required warm transfer to State Central Registry or Adult Protective Services for abuse/neglect concern	Contacted Child Abuse Hotline
Contacted Police	Caller required urgent police response due to emergency situation	Contacted Police
Family Declined Services COVID-19	Caller declined offered services due to infection exposure or fear of exposure to COVID-19	COVID-19 Related
Recommended Service Not Available COVID-19	If service that was recommended by PerformCare was not available due to COVID-19 (either due to suspension of service or provider was unable to staff). In this instance an alternate service may have been offered and/or accepted	COVID-19 Related
DCP&P Telephonic Review Completed	Care Coordinator completed a telephonic review with DCP&P personnel and posted the referral on Youth Link	DCP&P Related
DCP&P Telephonic Review Incomplete	Care Coordinator did not complete telephonic review	DCP&P Related
DD/IDD- Family Support Application Referral –	Staff Completed a Family Support Services Application for the Dd/ID Eligible family	DD/ID Family Support Application Completed
DD/IDD- Wrap Services	Youth referred for wrap services	DD/ID Wrap Services
DD/ID Referred for DD Eligibility Application-	Youth referred to Apply for DD Eligibility Application	I/DD Eligibility Related
DD/ID Youth Registration Completed –	Registration completed for youth with DD/ID service needs	I/DD Eligibility Related
Information Documented	Documented received information	Information Documented

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Information Provided	Provided information about PerformCare NJ Children's System of Care community resources or existing authorized services; providing verbal information pertaining to youth	Information Documented
Provided Service Information & Referral	Provided information and referral for a service in the community not authorized by PerformCare	Information Documented
IU Admission Processed	Intermediate Unit Admission processed authorization created and provider opened in tracking	IU Admission Processed
Other	Specify in Comment box	Other
Referred for Biopsychosocial Assessment	Facilitated referral for and authorized Needs Assessment / Biopsychosocial	Referred for Bio-Psycho-Social Assessment
Referred for Medical Clearance	Referred caller for Medical Clearance	Referred for Medical Clearance
Referred to Current Insurance Provider	Referred caller to current insurance provider for information access to services and service acquisition	Referred to Current Insurance
Referred to Current Provider	Referred caller to current provider for information access to services and/or service acquisition	Referred to External System Partner
Referred to CSOC	Referred caller to CSOC for policy related questions about services	Referred to External System Partner
Referred for MRSS	Facilitated referral for and authorized MRSS dispatch	Referred to External System Partner
Referred for Psychiatric Screening	Referred for mental health screening	Referred to External System Partner
Referred to FCIU	Referred caller to FCIU for services	Referred to FCIU
Referred to Outpatient Services	Youth referred to the outpatient level of care	Referred to Outpatient Services
Declined Services	Caller declined offer for service authorization. (Was previously Refused Services)	Service Authorization Related
Authorization Request Processed	Request for service pertaining to new modified or suspended authorizations	Service Authorization Related
Service Request not Available through NJ Children's System of Care	Caller requesting a service that is not available through CSOC	Service Authorization Related
SUT- Referred for Detox	Caller referred for detox program	Substance Use Related
SUT- Consent Required	PerformCare staff is unable to process request due to lack of consent on file	Substance Use Related
SUT- Provided Service Information & Referral	Caller does not meet eligibility criteria for contracted substance use treatment services and was provided information and referral for community services/Medicaid providers referred back to their commercial insurance provider or county administrator	Substance Use Related
SUT- LOCI Completed	Care Coordinator completed level of care indicator with contracted substance use treatment provider	Substance Use Related
Referred Internally to Quality Improvement Department	Transferred caller to QI for resolution emailed QI quality of care concern complaint provider IOS Dispute or reconsideration	Transferred internally to Clinical Care Connector
Referred Internally (PC) for Resolution	Transferred caller to a supervisor for resolution	Transferred internally to Clinical Care Connector
Referred Internally to Service Desk	Transferred caller to Service Desk for resolution or emailed service desk for resolution	Transferred internally to Clinical Care Connector

# NJ Children's System of Care

Contracted System Administrator — PerformCare®

## Children's InterAgency Coordinating Council (CIACC) Summary of Activity All Counties County - December 2025

Transferred to Care Connector	Caller transferred to Care Connector que for resolutions. The resolution will help determine who is responsible for resolving unresolved calls in the call queue	Transferred internally to Clinical Care Connector
Transferred to Clinical Queue	Caller transferred to clinical queue for resolution. (MSS will enter this resolution and select Accept and Keep Call Open. The resolution will help determine who is responsible for resolving unresolved calls in the call queue.)	Transferred internally to Clinical Care Connector
Warm Transfer to 988	When you need to transfer the caller back to 988 Lifeline	Warm Transfer to 988