NJ Children's System of Care

Contracted System Administrator — PerformCare®

Children's InterAgency Coordinating Council (CIACC) Summary of Activity
CAPE MAY County - February 2026

- 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	64
Newly Registered Youth in Report Month	24

Gender		
Male	36	56.3%
Female	28	43.8%

Age at time of call		
0-4	5	7.8%
5-10	21	32.8%
11-13	11	17.2%
14-17	27	42.2%

Race		
AMERICAN INDIAN/ALASKA NATIVE	0	0.0%
ASIAN	0	0.0%
BLACK OR AFRICAN AMERICAN	4	6.3%
NATIVE HAWAIIAN AND OTHER PACIFIC ISLANDER	0	0.0%
WHITE	41	64.1%
Two Or More Races	7	10.9%
SOME OTHER RACE	12	18.8%
DECLINED	0	0.0%
UNKNOWN	0	0.0%

Ethnicity		
Hispanic or Latino	23	35.9%
Non-Hispanic or Latino	39	60.9%
No Ethnicity Data	2	3.1%

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 regarding youth from this County	81

Caller Type - External Partner Group		
988 Call Specialist	0	0.0%
Adolescent Housing Hub Provider (AHH)	0	0.0%
Childrens Inpatient or Partial Hospital Provider	3	3.7%
College or University	0	0.0%
County Administrator	0	0.0%
Court Personnel	0	0.0%
Department of Corrections (DOC)	0	0.0%
Department of Human Services (DHS)	0	0.0%
Division of Child Protection & Permanency (DCP&P)	5	6.2%
Elementary/Middle School	0	0.0%
FCIU	0	0.0%
High School	0	0.0%
Juvenile Justice Commission/Juvenile Detention Center (JJC/JDC)	0	0.0%
NJ Child Abuse Hotline	0	0.0%
Police	0	0.0%
Psychiatric Emergency Service Staff (PESS)	0	0.0%
Shelter	0	0.0%
Youth Advocate	0	0.0%
Other	0	0.0%
External Partners Subtotal	**8**	**9.9%**

Caller Type - Caregiver Group		
Family/Custodial Family Member	1	1.2%
Minor with Child	0	0.0%
Parent/Legal Guardian	60	74.1%
Resource Parent	0	0.0%
Self (18-21)	0	0.0%
Self (Under 18)	0	0.0%
Caregiver/Youth Subtotal	**61**	75.3%

Caller Type - CSOC Provider Group		
Behavioral Assistance/Intensive in Community	6	7.4%
Children's System of Care (CSOC)	0	0.0%
CMO (Care Management Organization)	1	1.2%
CSOC Out of Home Provider	0	0.0%
Family Functional or Multi-Systemic Therapy	1	1.2%
Mobile Response Stabilization Services (MRSS)	0	0.0%
Provider (Other)	4	4.9%
Substance Use Treatment Provider	0	0.0%
CSOC Provider Subtotal	**12**	**14.8%**

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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	0	0.0%
Adolescent Housing Hub	0	0.0%
Authorizations, Claims & Eligibility	2	2.2%
Caller Providing Information About a Member	1	1.1%
Caller Providing Information About a Youth	0	0.0%
Caller Requesting Information	16	17.4%
In Home Service Request	61	66.3%
Infected / Exposed COVID-19 Virus	0	0.0%
Intellectual/Developmental Disability Inquiry	11	12.0%
Intermediate Unit Admission	0	0.0%
No Service Access COVID-19 Virus	0	0.0%
Out of Home Service Request	0	0.0%
Reconsiderations & Concerns	0	0.0%
Referred by 988 LifeLine	0	0.0%
Requested Services Not Accessed Through PerformCare	1	1.1%
Substance Use Related	0	0.0%
Technical Issues	0	0.0%
Other	0	0.0%
Total	**92**	

Call Resolution		
Access and Record Maintenance	14	8.3%
Adolescent Housing Hub Related	0	0.0%
Contacted Child Abuse Hotline	0	0.0%
Contacted Police	0	0.0%
COVID-19 Related	0	0.0%
DCP&P Related	0	0.0%
DD/ID Family Support Application Completed	2	1.2%
DD/ID Wrap Services	0	0.0%
I/DD Eligibility Related	2	1.2%
Information Documented	38	22.5%
IU Admission Processed	0	0.0%
Referred for Bio-Psycho-Social Assessment	8	4.7%
Referred for Medical Clearance	0	0.0%
Referred to Current Insurance	0	0.0%
Referred to External System Partner	38	22.5%
Referred to FCIU	0	0.0%
Referred to Outpatient Services	0	0.0%
Service Authorization Related	1	0.6%
Substance Use Related	0	0.0%
Transferred internally to Clinical, Care Connector, Quality or Service Desk	58	34.3%
Warm Transfer to 988	0	0.0%
Other	8	4.7%
Total	**169**	

- 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 recieving any sort of service that we track or authorize. These may vary from point in time or admission reports elsewhere available.

Gender		
Male	201	55.1%
Female	164	44.9%

Age		
0-4	14	3.8%
5-10	106	29.0%
11-13	77	21.0%
14-17	132	36.1%
18-20	35	9.6%
21	1	0.3%
>21	1	0.3%

Total Unique Active Youth in Report Month	365

Race		
White	252	69.0%
Black Or African American	36	9.9%
Asian	4	1.1%
Some Other Race	34	9.3%
Two Or More Races	36	9.9%
Unknown	3	0.8%

Ethnicity		
Hispanic or Latino	98	26.8%
Non-Hispanic or Latino	263	72.1%
No Ethnicity Data	4	1.1%

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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	149	14.5%
Biopsychosocial Assessment	13	1.3%
Care Management	299	29.1%
Family Functional or Multi Systemic Therapy	0	0.0%
Family Support Services (I/DD)	29	2.8%
Intensive in Community	370	36.0%
Intensive In Home	5	0.5%
Intermediate Inpatient Unit	0	0.0%
Mobile Response Initial	37	3.6%
Mobile Response Stabilization	59	5.7%
Out of Home Treatment	28	2.7%
Substance Use Treatment	0	0.0%
Wrap Flex Services	39	3.8%
Total	**1,028**	

Referrals & Other Authorizations from CMO ISP's		Percentage of total Auths
Bundled Services requested by the Care Management Organization (CMO)	9	13.8%
Community Based Services	1	1.5%
DCP&P Contracted	0	0.0%
Inpatient	0	0.0%
Juvenile Justice Service	0	0.0%
Outpatient Referral (OP Prog Note & UM Referral)	1	1.5%
Peer Support	49	75.4%
Private Insurance	5	7.7%
School Reimbursed Service	0	0.0%
Transportation	0	0.0%
Total	**65**	

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.*

CAPE MAY Youth Currently in OOH Treatment		Percentage
Crisis Stabilization & Assessment Program	1	4.8%
Detention Alternative	0	0.0%
Emergency Diagnostic Residential Unit	0	0.0%
Group Home	1	4.8%
I/DD Treatment	5	23.8%
Intensive Residential Treatment	1	4.8%
Psychiatric Community Home	3	14.3%
Residential Treatment Center	2	9.5%
Specialty Bed	5	23.8%
Substance Use Treatment	0	0.0%
Treatment Home	3	14.3%
Total	**21**	

Statewide Youth Currently in OOH Treatment		Percentage
Crisis Stabilization & Assessment Program	40	4.3%
Group Home	39	4.2%
I/DD Treatment	200	21.7%
Intensive Residential Treatment	42	4.6%
Psychiatric Community Home	126	13.7%
Residential Treatment Center	169	18.4%
Specialty Bed	174	18.9%
Substance Use Treatment	27	2.9%
Treatment Home	103	11.2%
Total	**920**	

- 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	58
Medicaid Type - Family Care	159
Medicaid Type - Supplemental Security Income (SSI)	38
Private Insurance	16

Children's InterAgency Coordinating Council (CIACC) Summary of Activity
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- 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	1
Agency Respite	1
Assistive Technology: Assessment	0
Educational Advocacy	1
Overnight Respite	0
Self Hired Respite	3
Weekend Recreation	2
Total	**8**

Authorized FSS Services in Report Month	
After School Respite	1
Agency Respite	2
Assistive Technology: Assessment	0
Assistive Technology: Device/Mod	0
Educational Advocacy	0
Overnight Respite	0
Self Hired Respite	19
Weekend Recreation	0
Total	**22**

Intellectual/Developmental Disabled (I/DD) Population	
DD Eligibility Apps Received in Report Month	2
DD Eligibility Apps Approved in Report Month	1
Currently Eligible Youth	121

I/DD youth with Care Management Entity Attachment in Report Month	
Care Management	29

2026 Cumulative Summer Camp Applications Received	
Camp Applications Received	0
One to One Applications Received	0

2025 Camp Related Authorizations	
Approved Camp Authorizations	0
Approved One to One Aid Authorizations	0

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- 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	13

Demographics *(All percentages calculated from 'All Unique Youth')*

Gender - SU Population		
Male	7	53.8%
Female	6	46.2%

Age Group - SU Population		
5-10	0	0.0%
11-13	0	0.0%
14-17	11	84.6%
18-20	1	7.7%
21	1	7.7%
>21	0	0.0%

Race - SU Population		
AMERICAN INDIAN/ALASKA NATIVE	0	0.0%
ASIAN	0	0.0%
BLACK OR AFRICAN AMERICAN	2	15.4%
NATIVE HAWAIIAN AND OTHER PACIFIC ISLANDER	0	0.0%
WHITE	9	69.2%
Two Or More Races	0	0.0%
SOME OTHER RACE	2	15.4%
DECLINED	0	0.0%
UNKNOWN	0	0.0%

Ethnicity - SU Population		
Hispanic or Latino	2	15.4%
Non-Hispanic or Latino	11	84.6%

County - Statewide SU Population		
ATLANTIC	34	2.9%
BERGEN	74	6.2%
Burlington	58	4.9%
CAMDEN	120	10.1%
CAPE MAY	13	1.1%
CUMBERLAND	25	2.1%
Essex	133	11.2%
GLOUCESTER	39	3.3%
Hudson	81	6.8%
HUNTERDON	11	0.9%
Mercer	66	5.6%

County - Statewide SU Population		
Middlesex	109	9.2%
MONMOUTH	69	5.8%
MORRIS	28	2.4%
Ocean	80	6.8%
Passaic	81	6.8%
SALEM	5	0.4%
SOMERSET	29	2.4%
SUSSEX	13	1.1%
UNION	81	6.8%
WARREN	27	2.3%
UNKNOWN	9	0.8%

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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	
Unique Youth with Call Reason or Resolution Indicator	0
Unique Youth with SU Tracking Element Indicator	0
Unique Youth with SU Authorization Indicator	1
Unique Youth with SU Wrap Flex (CSA20) Indicator	0
Unique Youth Open SU Module Indicator	9
Unique Youth Triage Form Indicator	3
Unique Youth with SU Indicator - OOH Referral	0

Outpatient Services (SUT01, 02, 03)	
Active with CMO	
Active with CMO	11
Active with DD	
DD Eligible	1
Living Situation	
In Community	10
Out of Home	3

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	2	20.0%	4	36.4%	0	0.0%
Amphetamine	0	0.0%	0	0.0%	0	0.0%
Barbiturates	0	0.0%	0	0.0%	0	0.0%
Benzodiazepines	0	0.0%	0	0.0%	0	0.0%
Cannabis	6	60.0%	7	63.6%	3	100.0%
Cocaine	0	0.0%	0	0.0%	0	0.0%
Ecstasy	0	0.0%	0	0.0%	0	0.0%
Hallucinogens	1	10.0%	0	0.0%	0	0.0%
Inhalants	0	0.0%	0	0.0%	0	0.0%
Opiates - Heroin	0	0.0%	0	0.0%	0	0.0%
Over the Counter Drugs	0	0.0%	0	0.0%	0	0.0%
Rx Prescription	0	0.0%	0	0.0%	0	0.0%
Synthetic Cannabis	1	10.0%	0	0.0%	0	0.0%
Tobacco	0	0.0%	0	0.0%	0	0.0%
Other - Opiates	0	0.0%	0	0.0%	0	0.0%
Other Drugs	0	0.0%	0	0.0%	0	0.0%
Total	**10**		**11**		**3**	

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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	9
1	Having problems with attendance	3
2	Having challenges with attendance	0
3	Youth is generally truant or refusing to go to school	0
N/A	Not Applicable	0

Legal Involvement - SU Population	
Legal Involvement - Case Pending	3
Legal Involvement - Probation/Parole	3
No Legal Involvment	2

Insurance Coverage - SU Population	
NJ Family Care	3
Supplemental Security Income (SSI)	1
3560/State Only	4
Third Party Liability (TPL)	1
No Insurance	0

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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

Children's InterAgency Coordinating Council (CIACC) Summary of Activity
CAPE MAY County - February 2026

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