



State of New Jersey  
Department of Human Services  
Division of Medical Assistance & Health Services

# NEWSLETTER

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Volume 12 No. 7

January 2002

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**TO:** All Providers – **For Action**  
Health Maintenance Organizations – **For Information**

**SUBJECT:** Children's System of Care Initiative Identification Cards for  
Medicaid/NJ FamilyCare Eligible Children

**EFFECTIVE:** Immediately

**PURPOSE:** 1. To clarify that children enrolled in both Medicaid/NJ FamilyCare and the Children's System of Care Initiative (CSOCI) will receive two eligibility identification cards; and

2. To explain the CSOCI messages returned by the Recipient Eligibility Verifications System and the Medicaid Eligibility Verification System (REVS/MEVS).

**BACKGROUND:** Medicaid Newsletter Volume 12, No. 01, dated January 2002, informed providers of the distribution of the Children's System of Care Initiative (CSOCI) eligibility identification cards, indicating covered mental health services for those children enrolled in the CSOCI.

**ACTION:** Effective immediately, CSOCI-enrolled beneficiaries who are also eligible for Medicaid/NJ FamilyCare benefits will receive both their regular Medicaid/NJ FamilyCare eligibility identification card *and* a separate identification card indicating their enrollment in the CSOCI. The CSOCI card will be blue in color, and will identify the child as a CSOCI child with a 12-digit CSOCI eligibility identification number. The number for a child who is eligible for Medicaid/NJ FamilyCare and enrolled in the CSOCI will be identical to their Medicaid/NJ FamilyCare number. As explained in Newsletter Volume 12, No. 01, dated January 2002, for a beneficiary enrolled in the CSOCI who is not

eligible for Medicaid/NJ FamilyCare, the first 4 digits of the 12-digit identification number will be "3560."

A CSOCI eligibility identification card does not indicate eligibility for benefits other than the specified mental health services, even if the beneficiary is receiving Medicaid/NJ FamilyCare benefits. Beneficiaries should present their traditional Medicaid/NJ FamilyCare eligibility identification card to providers as proof of eligibility for all other services.

Only those beneficiaries listed on the CSOCI eligibility identification card are eligible to receive mental health services as part of the CSOCI under the auspices of a CMO; the card does not indicate CSOCI eligibility for family members not listed on the card, even if those family members are receiving Medicaid/NJ FamilyCare benefits.

If a beneficiary presents a CSOCI eligibility identification card, the provider must contact the child's CMO prior to rendering services. If the beneficiary does not know the name of his or her CMO Care Coordinator, please use the attached CMO Directory to contact the child's CMO. The child's CMO is in the child's county of residence, based on the child's home address. The CMO Directory will be updated and distributed as new CMO services are phased in throughout the state.

**In order to ensure appropriate reimbursement is received, providers must remember that:**

1. The CSOCI card is not to be used for services other than those provided as part of a CSOCI-approved ISP.
2. All mental health services for CSOCI-enrolled children must be included in the ISP and authorized by the CMO before services are rendered.
3. The Child/Family ISP Team may be outreaching individual providers to arrange for services to the CMO child. Providers are urged to contact the CMO and confirm that the services have been authorized to ensure that appropriate reimbursement is received.
4. Providers who render any services to a beneficiary who presents a CSOCI card without confirming that the services are part of a CSOCI or CMO-approved ISP may not receive reimbursement for those services (from either Unisys or the CMO).
5. All claims must be filed in accordance with the procedures in the provider's specific provider manual and N.J.A.C. 10:49.

Providers may obtain CSOCI eligibility information in the following ways:

- ς Telephone inquiry to Unisys through the Recipient Eligibility Verification System (REVS) at 1-800-676-6562;
- ς Accessing the eligibility file through the use of a Medicaid Eligibility Verification System (MEVS) vendor; or
- ς By examining the Medicaid/NJFamilyCare card or the CSOCI card.

If the beneficiary is enrolled in CSOCI, the following message will be returned by the REVS/MEVS system: "Services limited to Special Program Package E." If the beneficiary also has Medicaid or NJFamilyCare, or some other form of health benefits, the message will notify the provider of this as well. The total health benefits available to the beneficiary are a combination of the two messages.

### **Questions?**

If you have questions or need additional information about the CSOCI, please contact the CMO in your county or visit our Website at [www.njkidsoc.org](http://www.njkidsoc.org).

If you have questions about the CSOCI eligibility card, please contact your local Medical Assistance Customer Center or the Medicaid Hotline at 1-800-356-1561.

If you have questions regarding billing procedures, please contact Unisys Provider Services at: 1-800-776-6334.

**RETAIN THIS NEWSLETTER BEHIND THE NEWSLETTER TAB  
(BLUE TAB MARKED "5")**



# Children's System of Care Initiative Care Management Organization Directory

January 2002

## Burlington County

Partners for Kids and Families  
122 Burrs Road  
Mt. Holly, NJ 08060

(609) 261-0001

Sue Ryan, Executive Director

## Monmouth County

Monmouth Cares  
Vantage Point 100  
Route 36  
West Long Branch, NJ 07764

(732) 222-8008

Kathy Collins, Executive Director

## Union County

Families and Community Together (FACT)  
3 Monroe St.  
Union, NJ 07083.

Phone: 908-686-9090

Fax: 908-686-9131.

Richard Hlavacek, Executive Director

# CSOCI Eligibility Identification Card Sample

The child / children listed on the attached ID card is / are enrolled in the Department of Human Services' Children's System of Care Initiative (CSOCI). CSOCI eligibility does not replace or reduce services that the listed beneficiary(s) are entitled to under any other public assisted health program in which they are enrolled. It provides the following mental health services that may not be available under other program(s).

- Screening, Evaluation & Diagnostic Services
- Multi-System Assessment
- Care Management
- Selected Psych. Hospital Inpatient Services
- Other individualized support and wraparound services available through the CMO
- Group Home Care
- Specialized Community Residential Care
- Individual, Group and Family Therapy
- Medication Management
- Inpatient Psychiatric Care Residential Facilities
- Partial Care
- Intensive In-Home Services
- Behavioral Assistance
- Parental Support Services
- Crisis Stabilization Beds
- Mobile Crisis/Emergency Services

If you are currently enrolled in another program, your CSOCI eligibility number may be the same as your existing eligibility number, or you may have been assigned a unique number for your CSOCI eligibility. In either case, present this card to your provider when receiving mental health services, and continue using your existing card for all other services. This card may not be used to obtain services other than those provided by CSOCI.

You (if you are 18 or older) or your Parent, Legal Guardian, or Representative must sign this card on the line above the words "Beneficiary's Signature".

**Please contact the local Medical Assistance Customer Center or call 1-800-356-1561 if:**

1. You have any questions about the use of this card; or
2. Any changes are needed to this card due to missing or incorrect information, address change, or other; or
3. This card is lost, stolen, or damaged.

↓ REMOVE ID CARD ALONG THIS PERFORATION ↓

STATE OF NEW JERSEY  
DEPARTMENT OF HUMAN SERVICES

## CSOCI ELIGIBILITY IDENTIFICATION CARD

BENEFICIARY NAME	DOB	P.N.	SVC. PKG.
	20	E	

CSOCI IDENTIFICATION NUMBER 1234567890

VALID FROM \_\_\_\_\_ TO \_\_\_\_\_

ADDITIONAL HEALTH COVERAGE INFORMATION

\_\_\_\_\_  
BENEFICIARY SIGNATURE

CSOCI

CSOCI REV. 08/09/2001

DIVISION OF MEDICAL ASSISTANCE  
AND HEALTH SERVICES  
PO BOX 712  
TRENTON NJ 08625-0712

RETURN SERVICE REQUESTED

FIRST CLASS MAIL  
U.S. POSTAGE  
PAID  
  
TRENTON NJ  
Permit No. 21

**NOTE: These cards will be BLUE in color**