NEW YORK
STATE OF
OPPORTUNITY.

Office of
Mental Health

New PSYCKES Features Release 7.4.0

We will begin shortly

To hear the webinar, click "Call Me" in the Audio Connection box and enter your phone number - the WebEx system will call your phone

If you do not see the Audio Connection box, go to the top of your WebEx screen, click "Communicate" > "Audio Connection" > "Join Teleconference"

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Medical Informatics | PSYCKES
Office of Population Health & Evaluation
March 29, 2022

Q&A via WebEx

- All phone lines are muted
- Access "Q&A" box in WebEx menu at the right of your screen; if you expanded the view of the webinar to full screen, hover cursor over bar at top of screen to see menu
- Type questions using the "Q&A" feature
  - Submit to "all panelists" (default)
  - Please do not use Chat function for Q&A
- Slides will be emailed to attendees after the webinar

Agenda

- PSYCKES Overview

- Demonstration of New Features in Release 7.4.0
  - Race & Ethnicity View in My QI Report
  - Enhancements to Health Home Care Management Quality Indicator Set
  - Housing Program Type Filters in Utilization Reports
  - Home Care Services in Utilization Reports
  - POP enhancement: Add specific CORE services to the POP program type drop-down
  - iOS Mobile App Release 5.1: Services Over Time Graph on iPad

- Training & Technical Support

PSYCKES Overview

What is PSYCKES?

- A secure, HIPAA-compliant online application for sharing Medicaid claims and encounter data and other state administrative data

- Designed to support data-driven clinical decision-making, care coordination and quality improvement

- Ongoing data updates

  – Clinical Summary updated weekly

  – Quality Indicator reports updated monthly

Who is Viewable in PSYCKES?

- Over 10 million NYS Medicaid enrollees (currently or past)
  - Fee for service claims
  - Managed care enrollees, all product lines
  - Dual-eligible (Medicare/Medicaid) and Medicaid/Commercial

- Behavioral Health Population (any history of):
  - Psychiatric or substance use service,
  - Psychiatric or substance use diagnosis, OR
  - Psychotropic medication

- Provides all data – general medical, behavioral health, residential

What Data is Available in PSYCKES?

- Clinical Summary provides up to 5 years of data, updated weekly

- All Medicaid FFS claims and Managed Care encounter data, across treatment settings
  - Medications, medical and behavioral health outpatient and inpatient services, ER, care coordination, residential, lab, and more!

- Multiple other state administrative databases (0-7 day lag):
  - Health Home enrollment & CMA provider (DOH MAPP)
  - Managed Care Plan & HARP status (MC Enrollment Table)
  - MC Plan assigned Primary Care Physician (Quarterly, DOH)
  - State Psychiatric Center EMR
  - Assisted Outpatient Treatment provider contact (OMH TACT)
  - Assertive Community Treatment provider contact (OMH CAIRS)
  - Adult Housing/Residential program Information (OMH CAIRS)
  - Suicide attempt (OMH NIMRS)
  - Safety plans/screenings and assessments entered by providers in PSYCKES MyCHOIS
  - IMT and AOT Referral Under Investigation (DOHMH)

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Quality Indicators "Flags"

- PSYCKES identifies clients flagged for quality concerns in order to inform the treating provider or network and to support clinical review and quality improvement
- When a client has an applicable quality flag, the provider is allowed access to that individual's Clinical Summary
- Examples of current quality flags include:
  - No diabetes monitoring for individuals with diabetes and schizophrenia
  - Low medication adherence for individuals with schizophrenia
  - No follow-up after MH inpatient within 7 days; within 30 days
  - High utilization of inpatient/emergency room, Hospital Readmission
  - HARP Enrolled-Not Assessed for HCBS, HARP Enrolled, Not Health Home Enrolled

7.4.0 New Features!

Race & Ethnicity
View in My QI Report

Race & Ethnicity View

- My QI Report has a new "View" capability, currently with two options: "Standard" (default) and "Race and Ethnicity"

- The "Race and Ethnicity" view displays the percentage and number of clients flagged for each of the quality indicators, broken out by different race and ethnicity groups

- In the table, the columns displayed for each quality indicator include:
  - Total (for this agency)
  - Native American
  - Asian
  - Black
  - Pacific Islander
  - White
  - Multiracial
  - Hispanic or Latinx

Race & Ethnicity (continued)

- The race/ethnicity view is applied to both the numerator and the denominator to calculate each percentage
- When reviewing race & ethnicity view, it should be noted:
  - Clients who identified more than one race in their Medicaid registration are represented in the "Multiracial" group
  - Clients who identified Hispanic or Latinx as their ethnicity are represented in the "Hispanic or Latinx" group only
  - Clients for which race is unknown are included in the "Total" number but are not represented in a separate race/ethnicity group.

MAIN STREET CLINIC

Quality Indicator Overview As Of 03/01/2022

ⓘ View: [Race & Ethnicity ▾]   PDF   Excel

Standard
Race & Ethnicity

REGION: ALL   COUNTY: ALL   SITE: ALL   PROGRAM TYPE: ALL   AGE: ALL   MC PRODUCT LINE: ALL   MANAGED CARE: ALL

Filters   Reset

Indicator Set   Indicator

Indicator Set ▲

100%

BH QARR - DOH Performance Tracking Measure - as of 09/01/2021

BH QARR - Improvement Measure

General Medical Health

About QI Report Views

All views display: Indicator Name, Population   ✕

View	Columns Displayed
Standard Displays quality indicator prevalence rates for the organization compared to the region and statewide prevalence rates.	Eligible Population, # with QI Flag, %, Region %, Statewide %
Race & Ethnicity Displays quality indicator prevalence rates for clients in different race and ethnicity groups. Available in the "Indicator Set" and "Indicator" tabs.	Total % (for this organization), Native American, Asian, Black, Pacific Islander, White, Multiracial, and Hispanic or Latinx. Clients for which race is unknown are included in the "Total" number, but are not represented as a separate race/ethnicity group.

Close

❮Provider Search

MAIN STREET CLINIC

Quality Indicator Overview As Of 02/01/2022

View: Race & Ethnicity ▾   PDF   Excel

REGION: ALL   COUNTY: ALL   SITE: ALL   PROGRAM TYPE: ALL   AGE: A...   Reset

This view is available for both the "Indicator Set" and "Indicator" tabs, broken out by different race and ethnicity groups

Indicator Set | Indicator
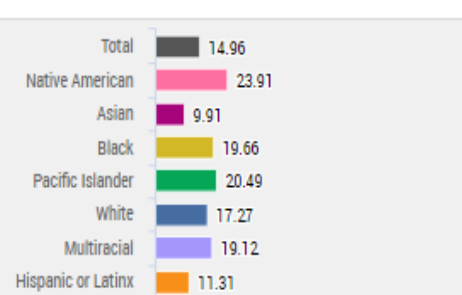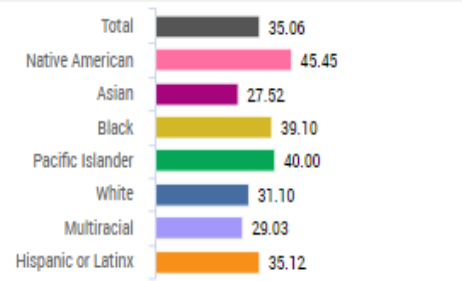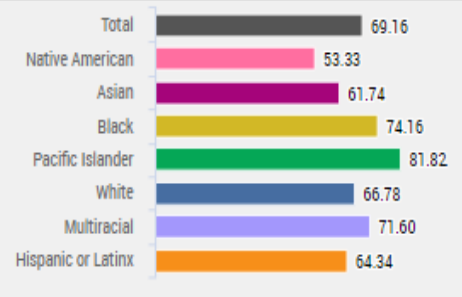
Clients with QI Flags by Percentage (%) and Number

Indicator Set ▲	Population	Total ■	Native American ■	Asian ■	Black ■	Pacific Islander ■	White ■	Multiracial ■	Hispanic or Latinx ■	
BH QARR - DOH Performance Tracking Measure - as of 09/01/2021	All	69.16% / 4,384	53.33% / 16	61.74% / 163	74.16% / 1,673	81.82% / 18	66.78% / 577	71.60% / 58	64.34% / 877	Total 69.16 / Native American 53.33 / Asian 61.74 / Black 74.16 / Pacific Islander 81.82 / White 66.78 / Multiracial 71.60 / Hispanic or Latinx 64.34
BH QARR - Improvement Measure	All	35.06% / 1,565	45.45% / 10	27.52% / 60	39.10% / 646	40% / 6	31.10% / 204	29.03% / 18	35.12% / 340	Total 35.06 / Native American 45.45 / Asian 27.52 / Black 39.10 / Pacific Islander 40.00 / White 31.10 / Multiracial 29.03 / Hispanic or Latinx 35.12
General Medical Health	All	14.96% / 7,381	23.91% / 33	9.91% / 329	19.66% / 2,109	20.49% / 25	17.27% / 945	19.12% / 87	11.31% / 1,140	Total 14.96 / Native American 23.91 / Asian 9.91 / Black 19.66 / Pacific Islander 20.49 / White 17.27 / Multiracial 19.12 / Hispanic or Latinx 11.31

Scale: 25% 50% 75% 100%

MAIN STREET CLINIC

Quality Indicator Overview As Of 03/01/2022

‹ Provider Search

ⓘ View: [Race & Ethnicity ▾]

PDF   Excel

REGION: ALL   COUNTY: ALL   SITE: ALL   PROGRAM TYPE: ALL   AGE: ALL   MC PRODUCT LINE: ALL   MANAGED CARE: ALL
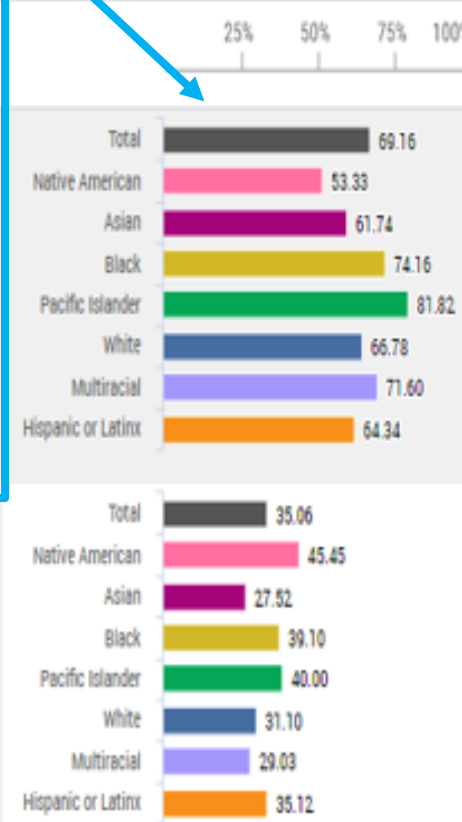
Filters   Reset

A bar chart to the right of the table offers another way to review the data in this view

Indicator Set

Clients with QI Flags by Percentage (%) and Number

Indicator Set ▲	Population	Total ■	Native American ■	Asian ■	Black ■	Pacific Islander ■	White ■	Multiracial ■	Hispanic or Latinx ■
BH QARR - DOH Performance Tracking Measure - as of 09/01/2021	All	69.16% 4,384	53.33% 16	61.74% 163	74.16% 1,673	81.82% 18	66.78% 577	71.60% 58	64.34% 877
BH QARR - Improvement Measure	All	35.06% 1,565	45.45% 10	27.52% 60	39.10% 646	40% 6	31.10% 204	29.03% 18	35.12% 340

Bar chart (BH QARR - DOH Performance Tracking Measure):
Total 69.16, Native American 53.33, Asian 61.74, Black 74.16, Pacific Islander 81.82, White 66.78, Multiracial 71.60, Hispanic or Latinx 64.34

Bar chart (BH QARR - Improvement Measure):
Total 35.06, Native American 45.45, Asian 27.52, Black 39.10, Pacific Islander 40.00, White 31.10, Multiracial 29.03, Hispanic or Latinx 35.12

‹ Provider Search

MAIN STREET CLINIC
Quality Indicator Overview As Of 03/01/2022

ℹ️ View: Race & Ethnicity ▾   PDF   Excel

REGION: ALL   COUNTY: ALL   SITE: ALL   PROGRAM TYPE: ALL   AGE: ALL   MC PRODUCT

Users can hover over the specific race/ethnicity bar to find both the numerator (clients with QI flag) and the denominator (eligible population) which provides the prevalence

Indicator Set

Clients with QI Flags by Percentage (%) and Number

Indicator Set ▲	Population	Total ■	Native American ■	Asian ■	Black ■	Pacific Islander ■	White ■	Multiracial ■	Hispanic or Latinx ■	25% 50% 75% 100%
BH QARR - DOH Performance Tracking Measure - as of 09/01/2021	All	69.16%	53.33%	61.74%	74.16%	81.82%	66.78%	71.60%	64.34%	Total 69.16 / Native American 53.33 / Asian : 163/264 / Asian 61.74 / Black 74.16 / Pacific Islander 81.82 / White 66.78 / Multiracial 71.60 / Hispanic or Latinx 64.34
		4,384	16	163	1,673	18	577	58	877	
BH QARR - Improvement Measure	All	35.06%	45.45%	27.52%	39.10%	40%	31.10%	29.03%	35.12%	Total 35.06 / Native American 45.45 / Asian 27.52 / Black 39.10 / Pacific Islander 40.00 / White 31.10 / Multiracial 29.03 / Hispanic or Latinx 35.12
		1,565	10	60	646	6	204	18	340	

File   Home   Insert   Page Layout   Formulas   Data   Review   View   Help   🖉 Share   💬 Commer

H25

▲	A	B	C	D	E	F	
1	Provider: MAIN STREET CLINIC; Filters: REGION: ALL, COUNTY: ALL, SITE: ALL, PROGRAM TYPE: ALL, AGE: AL						
2							
3							
4							
5							

When the "Race and Ethnicity" view is selected, the Excel export displays the numerator, denominator, and percentage information for each of the groups

▲	Name	Population	EligiblePopulation	QIFlagPopulation	Total %	Native American # QI Flag	Native American Eligible Population	Native American %	Asian # QI Flag	Asian Eligible Population	Asian %	Black # QI Flag
6												
7	BH QARF	All	6339	4384	69.16	16	30	53.33	163	264	61.74	1673
8	BH QARF	All	4464	1565	35.06	10	22	45.45	60	218	27.52	646
9	General	All	49329	7381	14.96	33	138	23.91	329	3320	9.91	2109
10	Health H	Adult 18+	5144	4831	93.92	28	32	87.5	159	167	95.21	1909
11	High Util	All	49366	17614	35.68	66	138	47.83	806	3323	24.26	5053
12	Polypha	All	4563	506	11.09	3	18	16.67	22	309	7.12	130
13	Prevent	Adult	39980	519	1.3	1	115	0.87	23	2801	0.82	177
14	Readmis	All	15033	3290	21.89	20	54	37.04	154	838	18.38	1162
15	Readmis	All	10247	1529	14.92	8	33	24.24	83	625	13.28	504
16	Substan	Adol & Adult (	5590	4073	72.86	16	27	59.26	113	135	83.7	1543
17	Treatme	Adult 18-64	2126	1007	47.37	5	10	50	35	104	33.65	422
18												

Enhancements to Health Home Care Management Quality Indicator Set

Health Home Care Management – Adult Measures

- Enhancements were made to the Quality Indicator set called "Health Home Care Management – Adult" in My QI Report, Statewide Reports, Recipient Search, and client-level Clinical Summary, if applicable

- Revised: **Eligible for Health Home Plus – No Health Home Plus Service Past 12 Months**
  - Instead of just using the PSYCKES calculation to identify individuals eligible for Health Home Plus, the measure is now also using DOH MAPP Health Home tracking system
  - When looking to see if a client had a Health Home Plus service or not in the past 12 months, PSYCKES is looking both at Medicaid billing and the DOH MAPP system for an indication of a Health Home Plus level of service

New Health Home Care Management – Adult Measures

- **Eligible for Health Home Plus – No Health Home Plus Service Past 3 Months**
  - Identifies adults who are eligible for Health Home Plus, as of the latest refresh, but have not received a Health Home Plus level of service anytime in the past 3 months
  - Denominator: Individuals identified as eligible for Health Home Plus, according to either the PSYCKES calculation or the DOH MAPP system, as of the latest refresh
  - Numerator: Individuals who have not had a Health Home Plus level of service anytime in the past 3 months according to the DOH MAPP system.

New Health Home Care Management – Adult Measures

- **HH Enrolled, Eligible for Health Home Plus – Not Entered as Eligible in DOH MAPP Past 3 Months**
  - Identifies adults who are currently enrolled in a Health Home and are eligible for Health Home Plus but have not been identified as Health Home Plus eligible in DOH MAPP in the past 3 months
  - Denominator: Individuals currently enrolled in a health home who are also eligible for Health Home Plus according to either the PSYCKES calculation or the DOH MAPP system, as of the latest refresh
  - Numerator: Individuals who have not been indicated as eligible for Health Home Plus in the DOH MAPP system anytime in the past 3 months.

MAIN STREET CLINIC

Quality Indicator Overview As Of 03/01/2022

‹ Provider Search   ● View: [Standard ▾]   PDF   Excel

REGION: ALL   COUNTY: ALL   SITE: ALL   PROGRAM TYPE: ALL   AGE: ALL   MC PRODUCT LINE: ALL   MANAGED CARE: ALL   [Filters]   Reset

Indicator Set: Health Home Care Management - Adult

Indicator Set	Indicator

Indicator	Population	Eligible Population	# with QI Flag	%	Regional %	Statewide %	25% 50% 75% 100%
HARP Enrolled - Not Health Home Enrolled	Adult 21+	4,111	3,587	87.25	77.15	76.33	87.25 / 77.15 / 76.33
HARP-Enrolled - No Assessment for HCBS	Adult 21+	4,111	3,191	77.62	73.52	75.66	77.62 / 73.52 / 75.66
Eligible for Health Home Plus - Not Health Home Enrolled	Adult 18+	1,972	1,589	80.58	68.59	59.20	80.58 / 68.59 / 59.20
Eligible for Health Home Plus - No Health Home Plus Service Past 12 Months	Adult 18+	**Revised** 72	1,771	89.81	80.91	67.33	89.81 / 80.91 / 67.33
Eligible for Health Home Plus - No Health Home Plus Service Past 3 Months	Adult 18+	1,972	1,866	94.62	86.62	75.11	94.62 / 86.62 / 75.11
HH Enrolled, Eligible for Health Home Plus - Not Entered as Eligible in DOH MAPP Past 3 Months	Adult 18+	**New** 327	136	41.59	31.42	21.54	41.59 / 31.42 / 21.54
Health Home Care Management - Adult Summary	**Adult 18+**	**5,144**	**4,831**	**93.92**	**85.11**	**85.17**	93.92 / 85.11 / 85.17

Recipient Search

Limit results to [50 ▾]   **Search**   Reset

Recipient Identifiers

| **Medicaid ID** | SSN | OMH State ID | OMH Case # |

First Name | Last Name | DOB

[AB00000A] [ ] [ ] [MM/DD/YYYY]

Characteristics as of 03/24/2022

Age Range [ ] To [ ] Gender [▾]

Race [▾]

Ethnicity [▾]

County of Fiscal Responsibility [▾]

Population [▾]

High Need Population [▾]

AOT Status [▾]

Alerts & Incidents [▾]

Managed Care Plan & Medicaid

Managed Care [▾]

MC Product Line [▾]

Medicaid Enrollment Status [▾]

Children's Waiver Status [▾]

HARP Status [▾]

HARP HCBS Assessment Status [▾]

HARP HCBS Assessment Results [▾]

Quality Flag as of 03/01/2022   📋 Definitions

HARP Enrolled - Not Health Home Enrolled - (updated weekly)
HARP-Enrolled - No Assessment for HCBS - (updated weekly)
Eligible for Health Home Plus - Not Health Home Enrolled
Eligible for Health Home Plus - No Health Home Plus Service Past 12 Months
Eligible for Health Home Plus - No Health Home Plus Service Past 3 Months
HH Enrolled, Eligible for Health Home Plus - Not Entered as Eligible in DOH MAPP Past 3 Months
High Mental Health Need
Antipsychotic Polypharmacy (2+ >90days) Children
Antipsychotic Two Plus

...vices: **Specific Provider** as of 03/01/2022   [Past 1 Year ▾]

Provider [ ]

Region [▾] County [▾]

Current Access [▾]

Service Utilization [▾] Number of Visits [▾]

...vice Setting: Service Detail: Selected

‹ Modify Search

9 Recipients Found

❶ View: Standard ▾   PDF   Excel

	Quality Flag	Eligible for Health Home Plus - No Health Home Plus Service Past 3 Months
AND	[Provider Specific] Provider	MAIN STREET CLINIC

Maximum Number of Rows Displayed: 50

Name ▲	Medicaid ID ⬍	DOB ⬍	Gender ⬍	Medicaid Quality Flags ⬍	Medicaid Managed Care Plan ⬍	Current PHI Access ⬍
QUFTRVJVRA TUbUQq7FTEm	Qq2nMpan MEE	MTAIMTAIM TauOA	TQ LQ MpM	HHPlus No HHPlus Service > 12 mos, HHPlus No HHPlus Service > 3 mos, HHPlus Not HH Enrolled, High MH Need, No Outpt Medical		PSYCKES Consent
QUnNRUbEQQ TaVVTUFO	UqMtM9Uo Nb2	N8yqLpEvN T6	R6 LQ N9M	HHPlus No HHPlus Service > 12 mos, HHPlus No HHPlus Service > 3 mos	Healthfirst PHSP, Inc.	No Access
QVZBTEzT SEVDVEzS RQ	VqQnN9MrO Ee	MoypMSyn OTap	TQ LQ	2+ ER-BH, 2+ ER-MH, 4+ Inpt/ER-BH, 4+ Inpt/ER-MH, Adher-AP (DOH), HARP No Assessment for HCBS, HHPlus No HHPlus Service > 12 mos, HHPlus No HHPlus Service > 3 mos, HHPlus Not	MetroPlus Health Plan	Quality Flag
QaFSVUNI RqFM	UbMnNTQo Nb2	OCypLpEvo DM	TQ LQ Mp6	Candidate, HARP No Assessment for HCBS, HHPlus No HHPlus Service > 12 mos, HHPlus No HHPlus Service > 3 mos, HHPlus Not Entered in MAPP > 3 mos, High MH Need, POP High User, Readmit 30d - BH to BH, Readmit 30d - MH to MH	Fidelis Care New York	Quality Flag

NOTE: If the Health Home Care Management – Adult indicators are the ONLY indicators a client meets criteria for, users will not be able access the client's Clinical Summary

QUFTRVJVRCm TUbUQq7FTEm
Clinical Summary as of 3/24/2022

📄 PDF

❮ Recipient Search

ℹ About included data sources

| **Brief Overview** | 1 Year Summary | 5 Year Summary |

Data with Special Protection ⦿ Show ○ Hide
This report contains all available clinical data.

DOB: MTAlMTAlMTauOA (MpM Yrs)
Address: M92 QqzVUbQ UrQ QVBU NSm QVVCVVJOLA Tbai MTMmM9E

Medicaid ID: Qq2nMpanMEE
Managed Care Plan: No Managed Care(FFS Only)
MC Plan Assigned PCP: N/A

Medicare: No

HARP Status: Eligible Pending Enrollment (H9)
HARP HCBS Assessment Status: Never Assessed
Medicaid Eligibility Expires on:

Current Care Coordination

Medicaid Eligibility Alert	This client uses the New York State of Health (NYSoH) enrollment system for Medicaid recertification • For more information contact NYSoH at 1-855-355-5777.
High Mental Health Need due to:	1+ Inpt MH in past 12 months
Health Home Plus Eligibility	This client is eligible for Health Home Plus due to: State PC Inpatient Discharge < 12 months

Alerts & Incidents · all available

Most Recent

| 3 | Suicidal Ideation (3 Inpatient) | 8/29/2020 | AUBURN COMMUNITY HOSPITAL(Inpatient - MH) |

Active Quality Flags · as of monthly QI report 3/1/2022

General Medical Health
No Outpatient Medical Visit > 1Yr

Health Home Care Management - Adult
Eligible for Health Home Plus - No Health Home Plus Service Past 12 Months • Eligible for Health Home Plus - No Health Home Plus Service Past 3 Months • Eligible for Health Home Plus - Not Health Home Enrolled

High Mental Health Need
1+ Inpt MH in past 12 months

Diagnoses Past Year

Behavioral Health (1)	Most Recent: Bipolar I
	Most Frequent (# of services): Bipolar I (2)
Medical	No Medicaid claims for this data type in the past year

Housing Program Type Filters in Utilization Reports

New Housing Program Types

- The following housing "Program Type" filters were added to Utilization Reports in the "Filters" box:
  - Apartment Support
  - Apartment Treatment Model
  - Congregate Support
  - Congregate Treatment Model
  - Family Care
  - SRO Community Residence
  - Supported Housing Community Services
  - Supported Single Room Occupancy
- The data source for identifying clients served by these programs is the OMH CAIRS database

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PDF   Excel

PROVIDER: . MAIN STREET CLINIC

(AIRS)   Filters   Reset

Medicaid Managed Care Plan and Product Line

Utilization Reports Client Filters

The distribution of Medicaid Managed Care Pla...   nt Medicaid clients.

Managed Care Plan

[▼]

Managed Care Product Line

[▼]

Population Type

[▼]

Program Type

[▼]

Name		LTC Partial Cap	Medicaid Advantage
Agewell New York			1
Fidelis Care New York			
HealthPlus			
Healthfirst PHSP, Inc.			
Integra MLTC Inc			1
MetroPlus Health Plan			
Molina Healthcare of New York			
VNSNY Choice Select Health			1
Medicaid Managed Care Plan Total (A)		2	3
Medicaid Fee For Service* (B)		1	
Medicaid All Client Total (A + B)			3

Clinic - Medical Specialty - MH Dx/Svc
Clinic - SU Specialty
Clinic - Unspecified Specialty
Clinic - Unspecified Specialty - MH Dx/Svc
Day Treatment - MH Specialty
Educational Support Services
Employment - Intensive Employment Support
Health Home - Enrolled
Health Home - Outreach
Home Care Services
Housing - Apartment Treatment Model (Source: OMH CAIRS)
Housing - Community Residence - MH Specialty
Housing - Congregate Treatment Model (Source: OMH CAIRS)
Housing - OMH Oversight Housing/Residential - Any (Source: OMH CAIRS)
Housing - SRO Community Residence (Source: OMH CAIRS)
Housing - Supported Housing Community Services (Source: OMH CAIRS)
Intermediate Care Facility - DD
PROS - MH Specialty
Waiver Services - ALL
Waiver Services - OPWDD

-- Current Clients are defined as individuals who receiv...   t year 03/01/2021 - 03/01/2022.

-- The Managed Care Plan and Product Line were refre...

* Medicaid Fee for service count includes any client who lost their Medicaid coverage during the report time period.

MAIN STREET CLINIC

PDF   Excel

PROVIDER: MAIN STREET CLINIC   PROGRAM TYPE: HOUSING - SUPPORTED HOUSING COMMUNITY SERVICES (SOURCE: OMH CAIRS)   Filters   Reset

| Medicaid Managed Care Plan and Product Line | Provider Network | Service Settings and Volume |

The distribution of Medicaid Managed Care Plans and Product Lines for   MAIN STREET CLINIC's   current Medicaid clients.

Name	Total Clients	Mainstream	HARP	HIV SNP	LTC FIDA-IDD	LTC MAP	LTC PACE	LTC Partial Cap	Medicaid Advantage
Agewell New York	1								1
Fidelis Care New York	1	1							
HealthPlus									
Healthfirst PHSP, Inc.									
Integra MLTC Inc									
MetroPlus Health Plan									
Molina Healthcare of New York	1	1							
VNSNY Choice Select Health	1								1
Medicaid Managed Care Plan Total (A)	15	11				1			3
Medicaid Fee For Service* (B)	12								
Medicaid All Client Total (A + B)	27	11				1			3

When applying one of the new housing program type filters, the information in all three tabs of Utilization Reports will reflect clients served by that program type, in that agency, and provides the breakdown of those clients in each tab

-- Current Clients are defined as individuals who received a Medicaid billed service from   MAIN STREET CLINIC   in the past year 03/01/2021 - 03/01/2022.

-- The Managed Care Plan and Product Line were refreshed as of the 03/24/2022.

* Medicaid Fee for service count includes any client who lost their Medicaid coverage during the report time period.

Home Care Services in Utilization Reports

Home Care Services in Utilization Reports:

- A new column called "Home Care" was added to the "Provider Network" tab of Utilization Reports

- This column displays the number of clients in the user's agency, or the selected agency, who are receiving Home Care services from any other provider agency

- Sort the "Provider Network" table by clicking on the "Home Care" column header to reveal the most common agencies who are providing home care services to the agency's clients

MAIN STREET CLINIC

PDF Excel

PROVIDER: MAIN STREET CLINIC

Filters   Reset

| Medicaid Managed Care Plan and Product Line | **Provider Network** | Service Settings and Volume |

The distribution of agencies providing services to MAIN STREET CLINIC's current Medicaid clients.

Provider Name	Total Clients	IP-Medical	IP-SUD	IP-MH	ER/CPEP Medical	ER/CPEP MH	ER/CPEP SUD	OP-Medical	OP-SUD	OP-MH	OP-DD	Health Home	Residential/ Living	Home Care	Pharm	Other Services
Unduplicated Count of Clients	11,094	932	87	686	3,094	970	192	10,007	344	2,197	519	2,839	3,082	2,152	9,359	9,850
*MEDS OOS PHYSICIAN & OTHE	3,783							2,010					1,089	709		1,545
COORDINATED BEHAVIORAL CARE, INC.	1,701							107		110		1,619	622	620		
SOUTHWEST BROOKLYN HEALTH HOME LLC	296							22		21		268	136	136		
COMMUNITY CARE MANAGEMENT PARTNERS	181							9		24		151	81	81		
MONTEFIORE MEDICAL CENTER	1,462	112		32	360	50	7	1,154	8	128		98	76	74	36	809
NORTH SHORE- LONG ISLAND JEWISH HEALTH SYSTEM	176	9			19	5		57		9		54	69	69	3	35

Enhancement to Managed Care POP Data Entry Portal

Added specific CORE services to the POP program type drop-down:

- A new CORE program type filter was added within the POP "Intensive Care Transition Services" data entry portal, located in the existing "Program Type" filter dropdown
  - Community Oriented Recovery and Empowerment (CORE) service provider
- This new program type filter will display when users open a brand-new POP Care Transition episode, as well as when users add Care Transition Services to existing POP episodes

‹ Clinical Summary

POP Intensive Care Transition Services for SMITH, JOHN

To start an episode of care transition services you must enter the index inpatient/ER event and a care transition service.

Index Inpatient/ER Event   Hospital inpatient or ER services initiating this episode of intensive care transition services

Hospital Name	Index Event Type	Admission Date	Discharge Date
	⌄		

First Care Transition Service

Service Type	⌄
Program Type	Community Oriented Recovery and Empowerment (CORE) service provider ⌄
Provider Agency	ACT
	Behavioral Health Home and Community Based Service (HCBS) provider
	Community Oriented Recovery and Empowerment (CORE) service provider
	Bridger Service
	Bridger Service - Peer
Date of Service	Certified Community Based Health Care (CCBHC) provider
	Certified Home Care agencies
	Crisis Residential Services: Intensive Crisis Residence
	Crisis Residential Services: Residential Crisis Support
Mode of Contact	Crisis Residential Services: Children's Crisis Residence
	Critical Time Intervention (CTI)
Individual Involved	Health Home/Care Manager
	Licensed Independent Practitioner Group Practice
	Mobile Integration Team (MIT)
	Mobile Crisis Team
	OPWDD Care Management
	Other Peer Provider Service

iOS Mobile App Release 5.1: Services Over Time Graph on iPad

NEW YORK STATE OF OPPORTUNITY. | Office of Mental Health
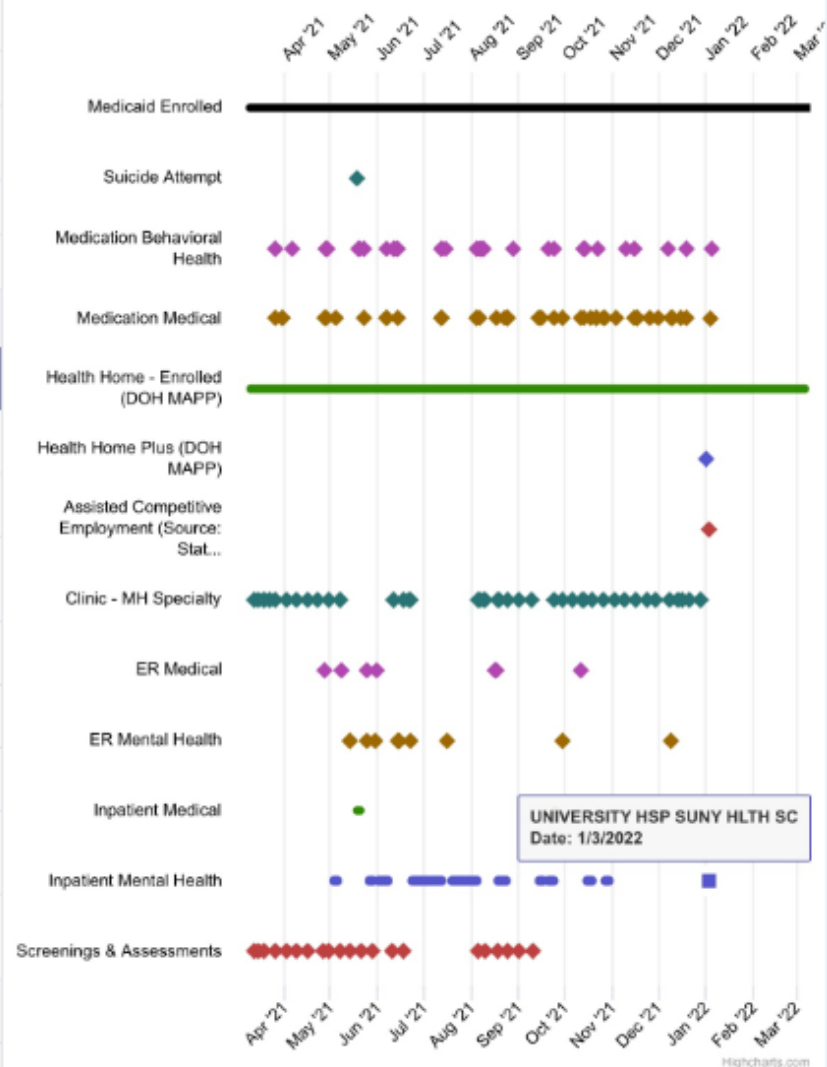
Services Over Time Graph:

- The graph uses dots to represent distinct services/medication pickups and lines to represent continuous services (e.g., hospital inpatient stays) in past year
- Tap on the dots/lines within the graph to see hover-over details such as dates and provider names
- Pinch the screen to zoom into a specific time frame. Use the "Reset" button at the top right corner to return the graph to its full size

PSYCKES Training & Technical Support

PSYCKES Training

- PSYCKES website: www.psyckes.org

- PSYCKES Training Webinars
  - Live webinars: Register on PSYCKES Training Webinars page
  - Recorded webinars: Slides and recordings available
    - Using PSYCKES Quality Indicator Reports
    - Navigating PSYCKES Recipient Search for Population Health
    - Using the PSYCKES Clinical Summary
    - Consent, Emergency, Quality Flag: PSYCKES Levels of Access
    - PSYCKES Mobile App for iPhones & iPads
    - Using PSYCKES from Home
    - Introduction to PSYCKES
    - Where to Start: Getting Access to PSYCKES

- PSYCKES User's Guides & Short How-To Videos
  - www.psyckes.org > PSYCKES Training Materials

Action needed for your PSYCKES access: RSA 8 digit PIN by April 11

OH

omh.sm.its.psyckes-help <psyckes-help@OMH.NY.GOV>
To PSYCKES-USERS@LISTSERV.OMH.NY.GOV

↩ Reply   ↩ Reply All   → Forward   •••

Mon 3/28/2022 9:39 AM

📄 EXISTING PROVIDER PARTNER - Reset_PIN_Instructions.pptx ⌄ 767 KB	📄 EXISTING STATE EMPLOYEE USER_Reset_PIN_Instructions.pptx ⌄ 752 KB	📄 NEW USERS - First_Time_Login_Instructions_for_PSYCKES.pdf ⌄ 663 KB

Dear PSYCKES User,

If you have not done so already, you will need to change your PIN number for your RSA token to be 8 digits by **April 11, 2022**. Instructions for how to change your PIN to 8 digits are attached and the specific PIN requirements are listed below. We recommend making this change as soon as possible to prevent login errors. This change is being required by the OMH security team in order to enhance security of all OMH applications.

Specific 8-digit PIN requirements include:

- PIN must contain 8 numeric digits
- Cannot start with a 0 (zero)
- Cannot have sequential or consecutive numbers (forward or reverse) such as 11111111, 12341234, 12345678, or 12344321
- You cannot reuse one of five recently used PINs

Instructions for how to change your PIN to 8 digits are attached; please follow the instructions that correspond to your user type:

- Existing users of OMH applications such as PSYCKES:
  - If you are a **provider partner (non-state employee)** who currently has a PIN that is **less than 8 digits**, please reference EXISTING PROVIDER PARTNER USER - Reset_PIN_Instructions
  - If you are a **state employee** who currently has a PIN that is **less than 8 digits**, please reference: EXISTING STATE EMPLOYEE USER - Reset_PIN_Instructions
- New users of OMH applications such as PSYCKES:
  - If you have recently been granted access to a secure OMH application, such as PSYCKES, but have not yet logged in and therefore have not created a PIN yet, please reference NEW USERS - First_Time_Login_Instructions_for_PSYCKES

If you have any questions, please do not hesitate to contact the PSYCKES Help team at PSYCKES-help@omh.ny.gov.

Sincerely,

PSYCKES Team – Office of Mental Health
330 Fifth Avenue, New York, NY 10001
PSYCKES-Help@omh.ny.gov | www.psyckes.org

> All PSYCKES Users will need to update their PIN Number to 8-digits for their RSA token by April 11, 2022

Helpdesk Support

- PSYCKES Help (PSYCKES support)
  - 9:00AM – 5:00PM, Monday – Friday
  - PSYCKES-help@omh.ny.gov

- ITS Help Desk (Token, Login & SMS support)
  - Provider Partner OMH Helpdesk:
    - 1-800-435-7697; healthhelp@its.ny.gov
  - OMH Employee ITS Helpdesk:
    - 1-844-891-1786; fixit@its.ny.gov