

PSYCKES-Medicaid Release Notes – Release 8.1.0

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1. New “High Fidelity Wraparound – Likely Eligible” Flag

A new “High Fidelity Wraparound – Likely Eligible” flag has been added to the Recipient Search High Need Population filter dropdown, the High Need/High Risk Advanced View, and the Clinical Summary Notifications section. High Fidelity Wraparound (HFW) is a research oriented, evidence-based care management approach that has been proven successful with children with Serious Emotional Disturbance (SED) who have significant cross-system needs. This flag captures individuals who meet the following criteria:

- **Required criteria:**
 - Children/youth ages 6-21
 - Currently Health Home enrolled
 - Current K3 Serious Emotional Disturbance (SED) status or 2 mental health diagnoses within the past year
- **Child youth must also meet at least one of the following factors:**
 - Currently or in the past year had K3 Serious Emotional Disturbance
 - Currently or in the past year received one or more of these services:
 - Psychiatric Inpatient (Article 28, 31, State PC (MHARS))
 - Residential Treatment Facility
 - Children’s Community Residence
 - Residential SUD Treatment
 - Youth ACT
 - Day Treatment
 - Partial Hospitalization
 - Home Based Crisis Intervention
 - Mobile Integration Team (MIT) – (MHARS)
 - Currently or in the past year received two or more crisis services
 - Currently or in past year attributed to Foster Care

2. Updates to High Mental Health Need Flag

The existing High Mental Health Need flag criteria has been updated to more closely align with Health Home Plus eligibility criteria to help identify the highest need individuals. The updated High Mental Health Need flag criteria is shown below:

- AOT active or expired in the past year
- ACT active or expired in the past year
- Intensive Mobile Treatment (IMT) active or within past year with MH diagnosis
- 3+ Inpt MH < 13 months
- 4+ ER MH < 13 months
- 3+ inpatient medical visits in past 13 months and have schizophrenia or bipolar past year
- Ineffectively Engaged – No Outpt MH < 12 months & 2+ Inpt MH/3+ ER MH
- State PC Inpatient Discharge < 12 months
- CNYPC Release < 12 months
- HH+ service in the past year with MH diagnosis

3. Race & Ethnicity Column Added to Recipient Search Results

A Race & Ethnicity column will now display on the Recipient Search results page, as well as within the Advanced Views (Care Coordination, High Need High Risk, Hospital Utilization, Outpatient Providers). This column will display individuals' race and ethnicity according to Medicaid data.

4. Crisis Services Section Added to the Clinical Summary

A new Crisis Services section has been added to the Clinical Summary, located between the existing Medical Outpatient Services and Hospital/ER sections. The Crisis Services section will display information on Service Type (e.g., CPEP Mobile Crisis, Residential Crisis Support, etc.), Provider, Admission/First Billed, Discharge/Last Billed, # Visits/Length of Stay, Most Recent Primary Diagnosis, and Most Recent Procedures (Last 3 Months). Crisis services will also be represented in the Integrated View of Services (IVOS) Over Time graph to support users in identifying crisis service treatment history or patterns.

5. E-Sign Consent Added to Usage Reports

E-signed PSYCKES consents that are attested to in the PSYCKES iOS mobile app, will now be reflected in the PHI (Protect Health information) Access Module and Clinical Summaries Usage Reports. The PHI Access Module Usage Report will incorporate e-signed PSYCKES consents within the "Signed Consents" bucket, and the Clinical Summaries Usage Report will reflect e-signed PSYCKES consents in the "Access Level in Effect" columns. This update allows for more accurate consent counts and access-level descriptions when running these reports.

6. Update Health Home Consent Logic to Include CCOs

Care Coordination Organizations (CCOs), providing Health Home Care Management within OPWDD, are now able to utilize the DOH Health Home Patient Information Sharing Consent within PSYCKES' enable access module. This new logic removes the requirement of an agency needing to be in the DOH MAPP system as a Health Home or Care Management Agency. To enable the DOH Health Home Patient Information Sharing Consent checkbox option within the application, CCOs will need to have billed at least one CCO case management service in the past year as well as indicate in their User Role Profile's Primary Work Setting that they work for a Health Home Administration/CCO.

7. HARP Flag Update for H1 Codes

The HARP Enrolled (H1) code is now being pulled from a new data source (the Managed Care Enrollment table) to reflect a more accurate count of HARP enrolled individuals. Previously, the H1 status was sourced from the RRE H1 code within eMedNY. As a reminder, the HARP Enrolled (H1) filter can be found in the Recipient Search "HARP Status" dropdown and within the Clinical Summary's "General" section.

8. NYC Region Broken Out into 5 Counties in Statewide Reports

In Statewide Reports, when selecting “New York City” as the Client Region or Provider Region, the 5 New York City counties will now display in the “County” dropdown. The 5 New York City counties include Bronx, Brooklyn, Manhattan, Queens, and Staten Island.

9. Events/Episode-Based Quality Flags

Historically in PSYCKES, measures’ numerators and denominators were based on the count of unique individuals. With this release, we have begun Phase 1 of transitioning some of the existing quality flags from individual-based counts to events/episodes-based counts. DOH-run Performance Tracking measures will now capture each separate event or episode (e.g., hospitalizations) to calculate a measure’s numerator and denominator. The quality flags that will now be events/episode based are listed below:

- MH Performance Tracking Measure:
 - No Follow Up after MH Inpatient - 7 Days
 - No Follow Up After MH ED Visit - 7 Days
 - No Follow Up after MH Inpatient - 30 Days
 - No Follow Up After MH ED Visit - 30 Days
 - No Engagement after MH Inpatient
 - No Intensive Care Management after MH ED Visit
 - No Intensive Care Management after MH Inpatient
- SUD Performance Tracking Measure
 - No Continuity of Care after Detox to Lower Level of Care
 - No Continuity of Care after Rehab to Lower Level of Care
 - No Follow Up After High-Intensity Care for SUD (7 days)
 - No Follow Up After High-Intensity Care for SUD (30 days)
 - No Initiation of SUD Treatment
 - No Engagement in SUD Treatment
 - No Initiation of Opioid Use Disorder (OUD) Treatment
 - No Engagement in Opioid Use Disorder (OUD) Treatment
 - No Follow Up after SUD ER Visit (7 days)
 - No Follow Up after SUD ER Visit (30 days)
- Vital Signs Dashboard - Adult
 - No Follow Up After MH ED Visit - 7 days
 - No Follow Up After MH ED Visit - 30 days
 - No Follow Up after MH Inpatient - 7 days
 - No Follow Up after MH Inpatient - 30 days
- Vital Signs Dashboard - Child
 - No Follow Up After MH ED Visit - 7 days
 - No Follow Up After MH ED Visit - 30 days
 - No Follow Up after MH Inpatient - 7 days
 - No Follow Up after MH Inpatient - 30 days

10. iOS Mobile App Release 8.1 Enhancements

To maintain parity between the iOS and web platforms, the new Crisis Services section has been added to iOS Clinical Summary. Crisis Services are located within the “Services” between “Medical Outpatient” and “Hospital/ER” sections.

Important Technical Requirement Update for iOS Mobile App

The PSYCKES iOS Mobile app will require the following updates in order to login to the app:

- 1) **iOS version 16.0 or higher** - If you are unsure what version iOS your device currently is, please navigate to Settings > General > About and look for “Software Version”
If your version is not 16.0 or higher, navigate to Settings > General > Software Update and select “Install Now” for latest update
- 2) **PSYCKES App update** – To update to the most recent version of the PSYCKES mobile app, please navigate to the App Store > Search for “PSYCKES” > Select “Update” button

NOTE: Apple’s iOS 16 operating system no longer supports certain older iPhone & iPad devices. To view which devices are compatible, please visit: <https://support.apple.com/en-us/103267>