

PSYCKES-Medicaid

Recipient Search User's Guide



**Office of
Mental Health**

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Recipient Search

Overview

Recipient Search allows users to identify a cohort of recipients who meet search criteria or perform a search to find a specific recipient in PSYCKES-Medicaid. For example, if an agency would like to identify all recipients who are flagged for a particular quality flag and have received services in a specific service setting, a user could use Recipient Search to generate a list of recipients who meet that search criteria.

Accessing Recipient Search

Click the “Recipient Search” button on the PSYCKES-Medicaid menu header to access the Recipient Search menu (Figure 1).

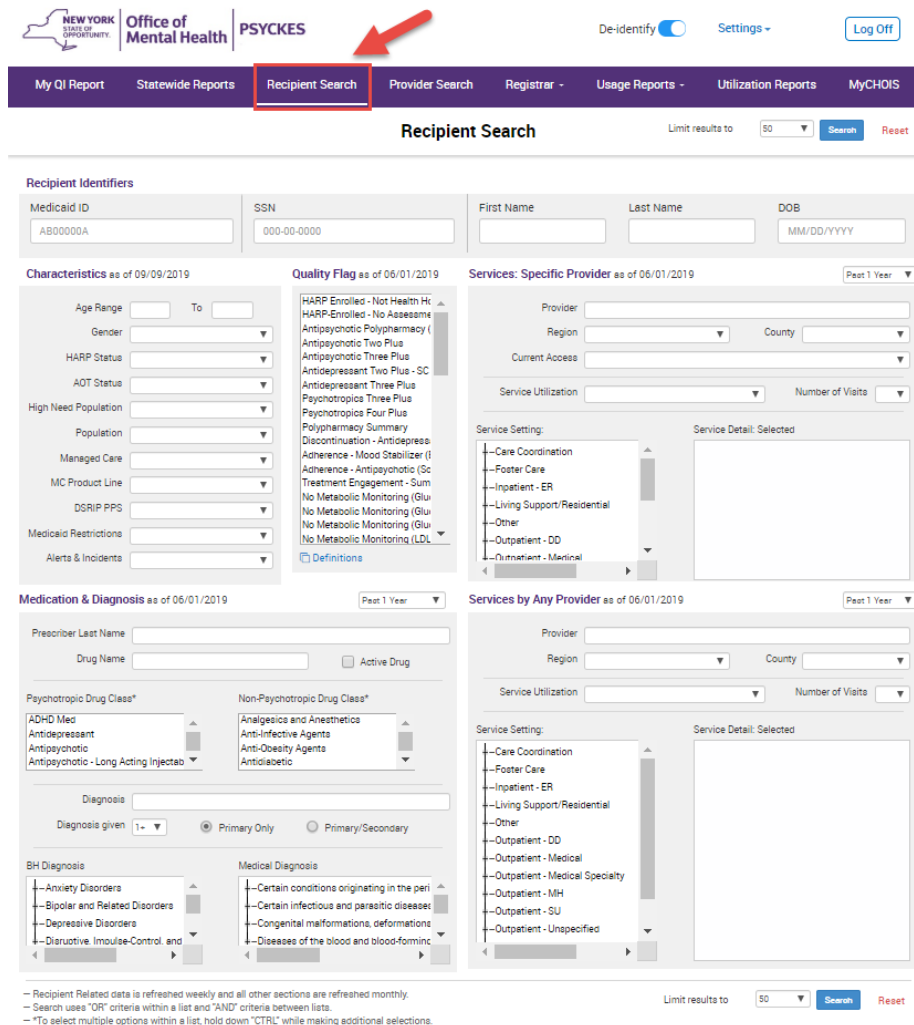


Figure 1. Recipient Search Menu

Recipient Search Fields

Users can search for recipients by any combination of the fields listed below. Similar fields have been grouped together in boxed categories in Recipient Search.

Recipient Identifiers

Search for individual recipients through personal identifiers:

- Medicaid ID
- Social Security Number (SSN)
- First Name
- Last Name
- Date of Birth (DOB)

A PSYCKES user may perform a Recipient Identifier search to enable access to client-level data. This can be done by attesting that the recipient's consent was obtained, it is a clinical emergency, or the recipient is being served by or transferred to the provider agency. Detailed information about these options is available in the *PSYCKES-Medicaid Registrar Menu User's Guide*.

Enabling Access to Client-Level Data via Recipient Identifier search

The following steps detail how access can be enabled for client-level data in Recipient Search (Figure 2):

- 1 Login to PSYCKES.
- 2 Hover mouse over "Recipient Search" menu.
- 3 Enter any combination of the below recipient identifiers and click Search:
 - Medicaid ID
 - SSN
 - First Name – *at least first two characters required, if entered*
 - Last Name – *full last name required, if entered*
 - DOB – *enter to improve search results when searching with name*
- 4 Search results will appear. Confirm recipient match, and click "Change PHI Access Level" link on the rightmost column.

Note: If search yields more than 10 recipients, a message will appear indicating that there are too many recipients matching search criteria, along with a list of strategies to narrow search results.
- 5 Follow steps on screen to attest to right to access data, and verify identity.

Step 1: Select reason for having a right to access the client's Medicaid data

- If the *client signed consent*, select:
 - **Client signed the PSYCKES consent form or, for lead Health Homes and Care Management Agencies only, the Health Home Patient Information Sharing Consent form, DOH-5055** – With signed consent, PSYCKES users at the agency will have access to all available Clinical Summary data for three years after the consent was entered, or three years after the last Medicaid claim from the agency has been processed by the New York State Medicaid Program, whichever is later.
- In the *absence of signed consent*, select all that apply:
 - **Attestation of Clinical Emergency** – Checking this box will only give the user the ability to view all available Clinical Summary data for 72 hours. Users are allowed to print the client's Clinical Summary during this time and place it in the client's chart.
 - **Attestation of Service: Client is currently served by / being transferred to [provider agency name]** – Checking this box will only give the user the ability to view a client's Clinical Summary data if the client has an active quality flag and it will not provide access to data with special protections (HIV, substance use information, family planning, genetic testing).

Step 2: Indicate the way in which the client's identity has been verified and submit

- Attest client has been identified via the following:
 - Check the box next to "Service provider attests to client identity," if you or someone at your agency has experience with the client or;
 - Select the types of identification presented by the client from the two drop-down lists.
- Complete the PHI Access Module process by clicking one of the following buttons:
 - Click "**Submit and go to client's Clinical Summary**" to complete the process of enabling access to client's Clinical Summary to all users at your agency and proceed to the client's Clinical Summary;
 - Click "**Submit and Quit**" to complete the process of enabling access to client's Clinical Summary to all users at your agency and return to the main Recipient Search screen or;
 - Click "**Quit and do not submit**" to cancel the process of enabling access to that client's data and return to the main Recipient Search screen.

The screenshot shows the PSYCKES Recipient Search interface. At the top, there is a navigation bar with options like 'My QI Report', 'Statewide Reports', 'Recipient Search', 'Provider Search', 'Registrar', 'Usage Reports', and 'Utilization Reports'. A red circle '1' highlights the 'Log Off' button in the top right corner. Below the navigation bar, the 'Recipient Search' section is active, showing search criteria: First Name 'JOHN', Last Name 'SMITH', and DOB 'MM/DD/YYYY'. A red arrow points to the 'Search' button. Below the search results, a red circle '2' highlights the '1 Recipients Found' section. A table lists the recipient details for John Smith, including his Medicaid ID (AB12345C), date of birth (10/13/1965), address (123 Main Street, New York, NY 11111), and managed care plan (Fidelis Care New York). A red arrow points to the 'Change PHI Access Level' link in the table. Below the table, a red circle '3' highlights the consent form section. The consent form has two steps: 'Step 1: Why are you allowed to view this data?' and 'Step 2: How do you know this is the correct person?'. Step 1 includes options for 'Client signed the PSYCKES Consent Form' and 'Attestation of Clinical Emergency' or 'Attestation of Service'. Step 2 includes options for 'Service Provider attests to client identity' and 'Client provided 1 photo ID or 2 forms of non-photo ID'. At the bottom of the consent form, there are buttons for 'Submit and View client's Clinical Summary', 'Submit and Quit', and 'Quit and do not submit'.

Figure 2. Recipient Search: Changing PHI Access Level – Example recipient search using first and last name

Recipient Characteristics

Search for groups of recipients through their characteristics.

- Age Range
- Gender
- HARP Status
- AOT Status
- *High Need Population
- Population
- Managed Care
- MC Product Line
- DSRIP PPS
- Medicaid Restrictions
- Alerts & Incidents

***High Need Population filter**

Note - This filter includes the following options:

- POP High User
- POP: Potential Clozapine Candidate
- OnTrackNY Early Psychosis Program enrollment
- Transition Age Youth – Behavioral Health
- OPWDD NYSTART – Eligible
- Health Home Plus Eligible

Quality Flags

Search for groups of recipients who are positive for specific quality flags. The quality flags are organized within the following indicator sets:

- BH QARR Improvement Measure
- General Medical Health
- Health and Recovery Plan
- High Utilization – Inpt/ER
- Polypharmacy
- Preventable Hospitalization
- Readmission Post-Discharge from any Hospital
- Readmissions Post-Discharge from this Hospital
- Substance Use Disorders
- Treatment Engagement

Medication & Diagnosis

Search for groups of recipients through their medication and diagnosis information.

- Prescriber Last Name
- Drug Name
- Active Drug status
- Psychotropic Drug Class
- Non-Psychotropic Drug Class
- Diagnosis
- Number of times diagnosis was given
- Primary or Secondary Diagnosis status
- Behavioral Health Diagnosis category
- Medical Diagnosis category

Search recipients currently on a specific drug

When searching by a specific drug name, in the Medication & Diagnosis box category, users can check the “Active Drug” box next to search for recipients currently taking that medication.

Services by a Specific Provider

Search for groups of recipients through their use of specific provider services. For provider-level users, the “Provider” field will automatically display their provider agency name without the option of changing the specific provider. State-level users have the option of entering a provider agency name in this field if desired.

- Provider
- Region
- County
- Current Access Status
- Service Utilization
- Number of Visits
- Service Setting

Search recipients consented to the agency

In the “Current Access Status” drop-down menu, select the options called “Active Consent” and then click “Search”.

Expand service setting to select specific setting

Services by Any Provider

Search for groups of recipients through their use of any other provider services (Figure 3).

- Provider
- Region
- County
- Service Utilization
- Number of visits
- Service Setting

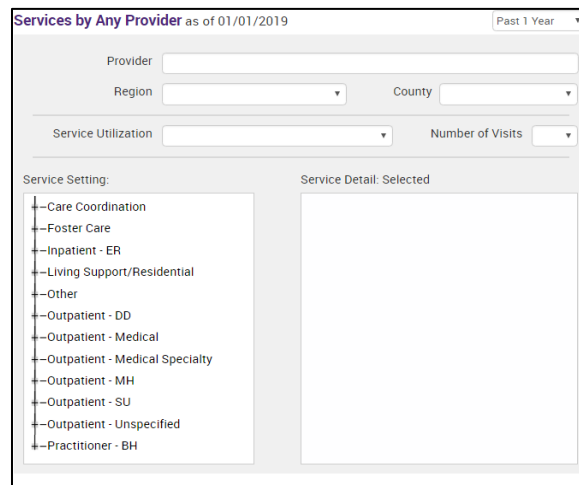


Figure 3. Services by Any Provider

Search Logic

Users may select up to four options within a field (e.g., Quality Flags, Service Settings) by holding down the “Ctrl” button on their keyboard and selecting multiple options (Figure 4).

The algorithm for the search function is set up such that *selections within a field follow the “OR” logic* (e.g. search results within the Psychotropic Drug Class field will yield recipients on Antidepressants OR Antipsychotics if both are selected).

In contrast, *selections between different field boxes follow the “AND” logic* (e.g. search results between the Psychotropic Drug Class and BH Diagnosis fields will yield recipients that are on an Antipsychotic medication AND have had a diagnosis of Bipolar Disorder if both are selected).

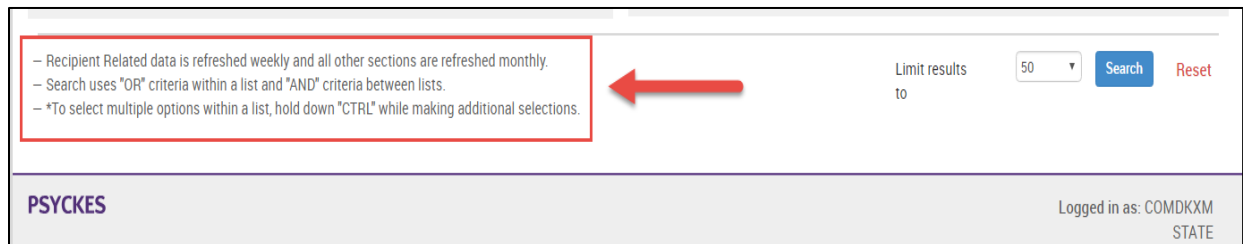


Figure 4. Recipient Search Logic

Recipient Search Tips

When using Recipient Search, consider the below tips (Figure 5):

Expand Service Setting categories

The Service Setting filter, located in the Services by Provider boxes, lists multiple categories of service utilization for which a user can search. Click on the “+” icon to the left of each service category to expand the list of services with each category. The Service Detail box will list the services selected each search.

Select multiple options within search fields

Use the “Ctrl” key on your keyboard to select up to 4 different options within each field.

Increase number of names for search results

The Recipient Search function defaults to display 50 recipients for each search. To view more names, select a larger number in the “Limit results to” dropdown filter located at the top and bottom right corner of the Recipient Search screen.

Reset search criteria

Click the “Reset” button at the top and bottom right corner of the screen to reset all filters.

The screenshot displays the Recipient Search interface with several filter sections:

- Characteristics as of 09/09/2019:** Includes fields for Age Range, Gender, HARP Status, AOT Status, High Need Population, Population, Managed Care, MC Product Line, DS RIP PPS, Medicaid Restrictions, and Alerts & Incidents.
- Quality Flag as of 06/01/2019:** Lists various flags such as HARP Enrolled - Not Health Hor, Antipsychotic Polypharmacy (2), and Psychotropics Three Plus.
- Services: Specific Provider as of 06/01/2019:** Includes dropdowns for Provider, Region, County, Current Access, Service Utilization, and Number of Visits. A red circle highlights the Service Setting list, which includes Care Coordination, Foster Care, Inpatient - ER, Living Support/Residential, Other, Outpatient - DD, and Outpatient - Medical.
- Medication & Diagnosis as of 06/01/2019:** Includes fields for Prescriber Last Name, Drug Name, and Active Drug. It also features dropdowns for Psychotropic and Non-Psychotropic Drug Classes, and sections for BH and Medical Diagnoses.
- Services by Any Provider as of 06/01/2019:** Similar to the Specific Provider section, but with a red arrow pointing to the "Limit results to" dropdown, which is currently set to 50. A red box highlights the Search and Reset buttons.

At the bottom of the interface, there are instructions: "Recipient Related data is refreshed weekly and all other sections are refreshed monthly", "Search uses 'OR' criteria within a list and 'AND' criteria between lists.", and "To select multiple options within a list, hold down 'CTRL' while making additional selections."

Figure 5. Recipient Search: Search Tips

Recipient Search Results

After selecting desired search criteria, click on the “Search” button at the top and bottom right corner of the screen. A list will generate of recipients that meet the search criteria (Figure 6).

Clinical Summary

Users can access a recipient’s Clinical Summary by clicking on the recipient’s name on the search results list (see *PSYCKES-Medicaid Clinical Summary User’s Guide* for more information on the Clinical Summary).

Note: Provider-level users can access recipient-level data only for recipients with one or more quality flags, a clinical emergency, or for those who have provided consent. Medicaid recipients will appear in the Recipient Search results only after a Medicaid claim has been submitted by the provider agency for the recipient and paid by DOH, or after consent has been obtained. Dual Eligible consumers will not be displayed in Recipient Search unless some part of their services is covered by Medicaid.

Modify Search Results

Search criteria can be modified by clicking on the “Modify Search” button.

Export Search Results

Users can export the generated list of search results to PDF or Excel by clicking on the corresponding icon on the top right corner of the screen.

Name	Medicaid ID	DOB	Gender	Quality Flags	Managed Care Plan	Current PHI Access
Afcjcec Hiifjei	Ddbdhec Daedgfj	01/01/9999	Feggfad Eiaeidb		Healthfirst PHSP, Inc.	No Access
Afcjcec Hiifjei	Accfidd Eeegff	01/01/9999	Ebaefdj Bdaecac	2+ ER-Medical	Fidelis Care New York	Quality Flag
Afcjcec Hiifjei	Jbgbedd Fhacfea	01/01/9999	leefeh Ceffthb			All Data - Consent
Afcjcec Hiifjei	Afjaeja Cdjddaa	01/01/9999	Fecadbc lbafdiag	2+ Inpt-BH, 2+ Inpt-MH, 4+ Inpt/ER-BH, Adher-AP, Readmit 30d - BH to BH, Readmit 30d - MH to MH	Healthfirst PHSP, Inc.	Quality Flag
Afcjcec Hiifjei	Afhhdde Foneeci	01/01/9999	Aaibfjh	BH QARR - DOH, HARP No Health	Amerigroup New	Quality

Figure 6. Recipient Search Results