



**Office of
Mental Health**

PSYCKES

PHI Access Module Webinar

We will begin shortly

Slides will be emailed to attendees after the webinar

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2015

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 green 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
- Note: slides will be emailed to attendees after the webinar

Overview

- PSYCKES overview
- Access to client data
- Using the PSYCKES PHI Access Module
 - Set up and print PSYCKES Consent form
 - Attest to right to view client Clinical Summary
 - Withdrawal of consent
- Searching for clients in Recipient Search
- Implementing PSYCKES PHI Access Module
- Resources
- Question & Answer

What is PSYCKES?

- A secure, HIPAA-compliant web-based platform for sharing Medicaid claims data
- Designed to support clinical decision-making and quality improvement
- Ongoing data updates

Data Available in PSYCKES

- 5 million Medicaid enrollees, currently or historically, in the Behavioral Health population (BH service/diagnosis/medication)
- Clinical Summary provides up to 5 years of claims data for NYS Medicaid enrollees, including FFS and managed care
 - All Medicaid-reimbursable services for which a claim was submitted and paid, across treatment settings
- Quality Indicator Overview provides provider/system level performance on indicators developed for quality concern
 - Promotes QI by providing lists of recipients served by provider who meet criteria for quality concerns

Quality Indicators

“Flags”

- PSYCKES identifies clients flagged for quality concern in order to inform the treating provider and to support clinical review and quality improvement
- When a client has a quality flag, the provider is allowed access to that individual’s Clinical Summary
- Examples of current quality flags include:
 - Medication-Related, e.g., Polypharmacy, High dose
 - Acute Care Utilization, e.g., High utilization, Readmission
 - Health Promotion and Care Coordination, Behavioral health and medical

Access to Client Data in PSYCKES

Clients are assigned to an agency/hospital in one of two ways:

- Automatically: Client had a billed service at the facility within the past 9 months
- Manually: Through the PHI Access Module
 - Signed consent
 - Emergency (72 hours)
 - Attest client is served by / being transferred to agency prior to billing and/or signed consent

Access to Client Data without consent

- Certain data provided without consent...
 - Positive for any quality concern flagged in PSYCKES
 - At least one billed service anywhere in your agency/hospital in past 9 months
- Rationale: monitor quality and safety of Medicaid program
- Does not include Protected Health Information (PHI) with special protections
 - Substance use information/treatment
 - HIV
 - Genetic information
 - Reproductive / family planning

Access to Client Data

with consent - PHI Access Module

- Expanded access
 - Search among all Medicaid enrollees in the Behavioral Health population, including those not yet linked to your agency/hospital through Medicaid billing and those not positive for a quality flag
 - Includes information with special protections (substance use, HIV, genetic information, family planning)
- Access to client-level data
 - With consent
 - In clinical emergencies (limited duration, 72 hours)
- Advantage of obtaining consent:
 - Access to data remains in effect until client is discharged (3 years after last bill) or client withdraws consent

Client Data for Providers: Comparison

Access Type	Quality Flag?	Any Client Data?	Data with Special Protection? (SUD, HIV, Family Planning, Genetic)	Duration
Billed service in past 9 months	No	No, client name only	No	9 months after last service
	Yes	Yes	No	While flag is active, up to 9 months after last service
Attest client is being served at agency	No	No, client name only	No	9 months after last service
	Yes	Yes	No	While flag is active, up to 9 months after last service
Clinical Emergency	n/a	Yes	Yes, all data	72 hours
Consent	n/a	Yes	Yes, all data	3 years after last service

The PHI Access Module

Note: Formerly the
“Consent Module”



**Office of
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PHI Access Module Overview

- Use the PHI Access Module to attest to your facility's right to view client-level information in PSYCKES
- Only staff with "PSYCKES-Registrar" role can use PHI Access Module
 - Provider decides which staff should have Registrar role
 - Security Manager designates user roles using SMS
 - PSYCKES-Medicaid role
 - AND*
 - PSYCKES-Registrar role
 - Staff with Registrar role see the Registrar Menu when they login to PSYCKES
- After Registrar attests to facility's right to access client-level data, any PSYCKES user within the agency/hospital can then access client data

PHI Access Module Overview

Registrar Menu comprised of 3 sub-menus

- PHI Access menu
 - Enable access to client's clinical summary
 - Register client's withdrawal of consent
 - Deactivate an attestation of service
- Consent Forms menu
 - Print PSYCKES Consent form and Withdraw Consent form
- Administration menu
 - Enter contact information for facility that will pre-populate in PSYCKES Consent form

PHI Access Menu

- Enable access to client's clinical summary
 - Search for client in PSYCKES
 - Attest to right to view data
 - Signed consent
 - Clinical emergency
 - Client is being served by / transferred to facility prior to billing and/or signed consent
 - Attest to / verify identity of the client
- Register Client's Withdrawal of Consent
- De-activate an attestation of service

Obtaining Consent

- Only the PSYCKES Consent form or Health Home consent form 5055 (lead Health Home only) may be used
 - PSYCKES Consent form can be printed from Registrar Menu
- Client is asked to sign PSYCKES Consent Form
 - Must use designated form
- Give copy of consent form to client
- Original is retained in the client's medical record

Login to PSYCKES: QI Overview Screen



Log Off

- My QI Report
- Statewide Reports
- Recipient Search
- Provider Search
- Registrar Menu
- Usage Report
- User Settings

De-Identify

Quality Indicator Overview As Of 07/01/2014

Provider Details

Find Provider

Provider: Main Street Health Center

Export PDF Excel

Modify Filter

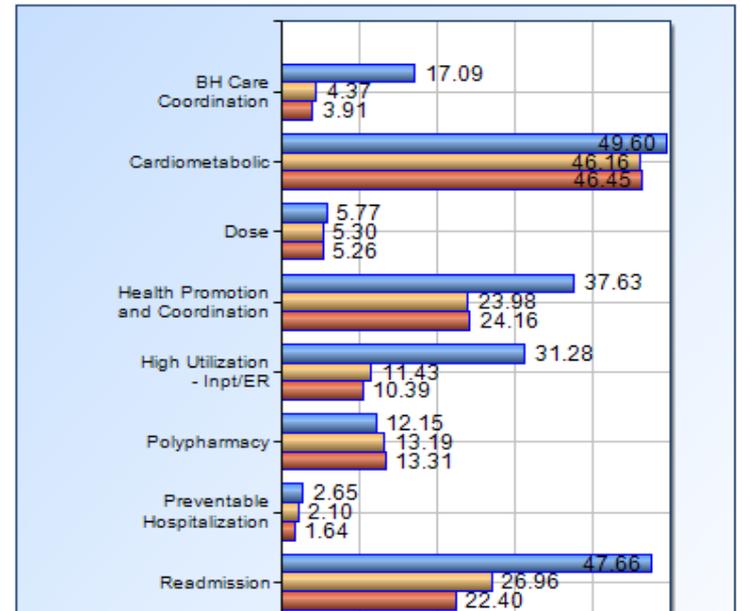
Region:ALL, County:ALL, Site:ALL, Attending:ALL, Program Type:ALL, Age:ALL, Population:ALL, Managed Care Program:ALL

Select Indicator Set for Details

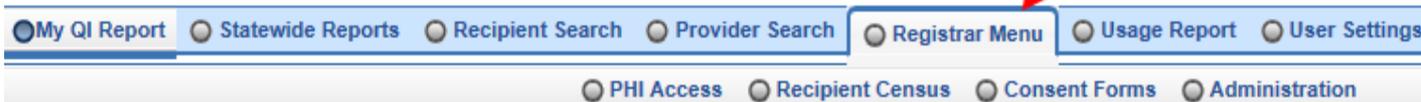
Report View Type: Report Only Graph Only Both

Indicator Set

Indicator Set ^	Population	Eligible Population	# with QI Flag	%	Regional %	Statewide %
BH Care Coordination	All	19,245	3,289	17.09	4.37	3.91
Cardiometabolic	All	1,250	620	49.60	46.16	46.45
Dose	All	4,821	278	5.77	5.30	5.26
Health Promotion and Coordination	All	19,245	7,242	37.63	23.98	24.16
High Utilization - Inpt/ER	All	19,245	6,020	31.28	11.43	10.39
Polypharmacy	All	2,748	334	12.15	13.19	13.31
Preventable Hospitalization	Adult	16,212	429	2.65	2.10	1.64
Readmission	All	4,461	2,126	47.66	26.96	22.40
Youth Indicator	Child	655	151	23.05	23.36	24.78



Registrar Menu



Quality Indicator Overview As Of 07/01/2014

Provider Details Find Provider

- Attestation for accessing PHI is handled through the Registrar Menu
- Registrar Menu tab only appears if the user has been granted PSYCKES-Registrar access

Administration Tab



Psyches Administration Menu

[Add/Edit Provider Details for consent form](#) ←

You will use this function to add/edit provider name and phone number displayed in consent form

- Before printing the consent form, fill in the blanks in the form using the Administration menu

Edit / Add Provider Information for Consent Form



- My QI Report
 - Statewide Reports
 - Recipient Search
 - Provider Search
 - Registrar Menu
 - Usage Report
 - User Settings
-
- PHI Access
 - Recipient Census
 - Consent Forms
 - Administration

[Return to Administration Menu](#)

Add/Edit Provider Information for Consent Form

Name of Provider

Main Street Health Center

Name or title of person at Provider/Hospital to contact to report improper use of PSYCKES PHI:

Phone number of person at Provider/Hospital to contact to report improper use of PSYCKES PHI:

(___) ___-____ Ext.

Name or title of person at Provider/Hospital to contact for PSYCKES Withdrawal of Consent form:

Phone number of person at Provider/Hospital to contact for PSYCKES Withdrawal of Consent form:

(___) ___-____ Ext.

Name or title of person at Provider/Hospital to give PSYCKES Withdrawal of Consent form to:

Submit

Registrar Menu

PSYCKES Consent Form



Psyckes Medicaid - Print Consent Form ([English Version](#))([Spanish Version](#))

Psyckes Medicaid - Print Withdraw Consent Form ([English Version](#))([Spanish Version](#))

- Print PSYCKES Consent Forms
 - English and Spanish
 - Consent and Withdrawal of Consent
- Best practice: PSYCKES form pre-printed and available on hard copy

Registrar Menu

PHI Access Menu



PSYCKES Medicaid Protected Health Information (PHI) Access Menu

 Enable access to client's Clinical Summary by attesting to one or more of the following:

- Client signed a consent form
- Client data is needed due to clinical emergency
- Client is served at/is being transferred to your provider agency

Register client's withdrawal of consent to disable access to client data.

Note: under certain circumstances (e.g., client quality flag), your provider agency may still have access to limited client data.

Deactivate an attestation of service that created a manual link between a client and your provider agency.

Note: Clients may still be linked to your provider agency based on Medicaid data.

1. Click PHI Access sub-menu
2. Click Enable access to client's Clinical Summary

PHI Access Menu:

Enabling Access

- Step 1: Find client in database
 - Search by Medicaid ID or Social Security Number
 - Confirm search results are correct
- Step 2: Attest to right to access client's data
 - Client signed PSYCKES consent form or Health Home consent form (lead Health Home only)
 - Clinical emergency
 - Client is served at / being transferred to agency/hospital prior to billing and/or signed consent

PHI Access Menu:

Enabling Access

- Step 3: Verify client's identity
 - Provider attests to client's identity
 - Verify client provided 2 forms of ID

- Save and exit

OR

Save and proceed to Clinical Summary

Step 1: Search for Recipient

Enter client's Medicaid ID or Social Security Number, and click "search"



- My QI Report
- Statewide Reports
- Recipient Search
- Provider Search
- Registrar Menu
- Usage Report
- User Settings
- PHI Access
- Recipient Census
- Consent Forms
- Administration

Step 1

Enter client's Medicaid ID or Social Security Number and click Search.

Medicaid ID: SSN (XXX-XX-XXXX):



Search Results:

Medicaid ID:

Name

Address

City State Zip

DOB (MM/DD/YYYY) Age Sex

Is this the correct person?

Step 1: Confirm Search Results

PSYCKES will ask Registrar to verify that the client's information is correct

Step 1

Enter client's Medicaid ID or Social Security Number and click Search.

Medicaid ID: SSN (XXX-XX-XXXX):

Search Results:

Medicaid ID:

XY00000X

Name

Minnie Mouse

Address

123 Main Street

City

New York

State

NY

Zip

10001

DOB (MM/DD/YYYY)

01/01/2003

Age

11

Sex

F

Is this the correct person?

Step 1: Confirm Search Results

If incorrect, click No, search again; If correct, click Yes to continue

Step 1

Enter client's Medicaid ID or Social Security Number and click Search.

Medicaid ID: SSN (XXX-XX-XXXX):

Search Results:

Medicaid ID:

Name

Address

City

State

Zip

DOB (MM/DD/YYYY)

Age

Sex

Is this the correct person?

Step 2: Attest to Right to Access Data

Step 2

Attestation for right to access client's Medicaid data (Select at least one option):

1. Client signed the Consent Form 
(Access to all data for three years after the last Medicaid claim)
2. In the absence of signed consent, you may get limited access to client's clinical data. Please check all that apply:
 - a. Attestation of Clinical Emergency 
(Access to all data for 72 hours)
 - b. Attestation of Service: Client is currently served by/ being transferred to Main Street Health Center 
(Clinical Summary data is available only if the client has an active quality flag. In the absence of consent, specially protected information such as HIV, family planning, substance use treatment etc. will be excluded.)

1. Check box 1 if client granted consent and signed PSYCKES Consent Form

2. If no consent was obtained, check box 2a if it is a clinical emergency or 2b if client is being served by/ transferred to agency/hospital

Step 2: Options for Attestation to Right to Access Data - Consent

- Client signed consent form
 - PSYCKES Consent Form
 - Health Home Consent Form (lead Health Home only)
- Clinically, consent is the single best option
 - Obtaining consent is always better than not obtaining consent
 - You will get all of the PHI data, for up to 3 years
 - You will get data even if the client is not positive for a quality flag

Step 2: Options for Attestation to Right to Access Data – Clinical Emergency

New York State Public Health Law Section 4900.3

"Emergency condition" means a medical or behavioral condition, the onset of which is sudden, that manifests itself by symptoms of sufficient severity, including severe pain, that a prudent layperson, possessing an average knowledge of medicine and health, could reasonably expect the absence of immediate medical attention to result in (a) placing the health of the person afflicted with such condition in serious jeopardy, or in the case of a behavioral condition placing the health of such person or others in serious jeopardy; (b) serious impairment to such person's bodily functions; (c) serious dysfunction of any bodily organ or part of such person; or (d) serious disfigurement of such person.

Step 2: Options for Attestation to Right to Access Data – Attestation of Service

- When to use:
 - Clients for whom you do not yet have consent
 - Clients with whom you are beginning to work but have not billed for yet
 - At the point of intake or during the first few months of treatment
 - Program provides clinical Medicaid services, but does not bill Medicaid (e.g., non-billable partner in a health home or a state-operated inpatient service)
- Level of access:
 - Does not include data with special protections (HIV, SUD, Reproductive)
 - Community providers (not operated by OMH) have access for up to 9 months after last billed service, if client is positive for a quality flag
 - State-op providers have access for up to 3 years, regardless of quality flag status

Step 3: Identity Verification

Select forms of ID from drop-down list, or attest to client identity

Check box to indicate provider attests to client identity OR use drop-down lists to verify that client provided 2 forms of ID

Client has been identified via the following actions:

Service Provider attests to client identity

--OR--

Client presented the following 2 forms of documentation to identify themselves:

Identification 1 :

Select from drop-down list

Select from drop-down list

U.S. Passport, with photograph and name of the individual;

Driver's license or ID card issued by a state or outlying possession of the United States with photograph and name of the individual;

ID Card issued by US Federal, NY State or NY local government agency or entity, with photograph and name of the individual;

Social security card;

Voter's registration card;

Military dependent's ID card;

US Coast Guard Merchant Mariner card;

Native American tribal document;

Driver's license issued by a Canadian government authority;

Foreign passport with I-551 stamp or attached INS Form I-94 indicating unexpired employment authorization;

Alien Registration Receipt Card with photograph (INS Form I-151 or I-551);

Temporary Resident Card (INS Form I-688);

Employment Authorization Card (INS Form I-688A);

Reentry Permit (INS Form I-327);

Refugee Travel Document (INS Form I-571);

Employment Authorization Document issued by the INS which contains a photograph (INS Form I-688B);

Credit or bank card that is verified to be currently valid;

Current credit check to a recognized resource that confirms the information on the primary photo-ID;

Submit and Quit or Submit and Go to Clinical Summary

Step 2

Attestation for right to access client's Medicaid data (Select at least one option):

1. Client signed the Consent Form
(Access to all data for three years after the last Medicaid claim)

2. In the absence of signed consent, you may get limited access to client's clinical data. Please check all that apply:
 - a. Attestation of Clinical Emergency
(Access to all data for 72 hours)

 - b. Attestation of Service: Client is currently served by/ being transferred to NYC-HHC Bellevue Hospital Center
(Clinical Summary data is available only if the client has an active quality flag. In the absence of consent, specially protected information such as HIV, family planning, substance use treatment etc. will be excluded.)

Step 3

Client has been identified via the following:

Service Provider attests to client identity

--OR--

Client presented the following 2 forms of documentation to identify him/herself:

Identification 1 :

Select from drop-down list

Identification 2 :

Select from drop-down list





Clinical Summary

Impact of Entering Consent or Clinical Emergency

- The Clinical Summary
 - Heading contains demographic information, Managed Care Plan, Quality Indicator status
 - Current Care Coordination Contact Information
 - Integrated View of Services Overtime
 - Medications, Outpatient Services, Hospitalizations, Labs
- Show/Hide Enhanced PHI Toggle
 - After consent or clinical emergency is entered in the PHI Access Module, you will see an additional feature in the Clinical Summary to show and hide enhanced PHI
 - Enables HIV, Substance Use, Family Planning be visible or hidden from view

Clinical Summary Header

Select time frame, note level of access,
With consent: toggle between show/hide enhanced PHI



[My QI Report](#) [Statewide Reports](#) [Recipient Search](#) **[Provider Search](#)** [MyPSYCKES](#) [Registrar Menu](#) [Usage Report](#)

De-Identify Data

Clinical Summary

Export to PDF Excel CCD

[Return to Quality Indicator Results](#)

[Care Coordination](#) | [Medication: BH](#) | [Medication: Medical](#) | [BH Outpatient](#) | [Medical Outpatient](#) | [Hospital/ER Dental](#) | [Vision](#) | [Support/Residential](#) | [Lab & Pathology](#) | [Radiology](#) | [Medical Equipment](#) | [Transportation](#)

OMH PHI **Please choose summary period** [Last 6 months](#) [Last Year](#) [Last 2 Years](#) [All Available \(up to 5 years\)](#)

Clinical Report Date: 6/5/2014 (This report contains all available clinical data.) **Enhanced PHI** Show Hide

Name: [Ebhefnj Dcebida](#)

Medicaid ID: JGFDGAD
AFJDFGF

Managed Care Plan: MetroPlus Health Plan

Address: Eaddajd Ggdjjca, Bechefg Efiegfb, Icabijj Cbhffbe,
Aehggcj Cibahjd
Phone Number:

DOB: 01/01/9999
Age: 999

Medicaid Eligibility: SAFETY NET W/O DEPRIV
Medicare: No

Indicator Set	Quality Flags (as of monthly QI report 4/1/2014)	Quality Flag Definitions
BH Care Coordination	3+ Inpatient - BH	
Hospital ER Utilization	4+ Inpatient/ER - All 4+ Inpatient/ER - BH Readmission - All BH 7 day	

Behavioral Health Diagnoses - Primary and Secondary Dx (most frequent shows first, click diagnoses for more information)

[Substance Abuse](#) | [Major Depressive Disorder](#) | [Alcohol Abuse](#) | [Attention Deficit Disorder](#) | [Bipolar Disorder](#)

Clinical Summary Header

Select time frame, note level of access,
With consent: toggle between show/hide enhanced PHI



[My QI Report](#) [Statewide Reports](#) [Recipient Search](#) [Provider Search](#) [MyPSYCKES](#) [Registrar Menu](#) [Usage Report](#)

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OMH PHI **Please choose summary period** [Last 6 months](#) [Last Year](#) [Last 2 Years](#) [All Available \(up to 5 years\)](#)

Clinical Report Date: 6/5/2014 (This report does not contain clinical data with special protection - consent required.) **Enhanced PHI** Show Hide

Name: [Ebhefhj Dcebida](#) Medicaid ID: JGFDGAD AFJDFGF Managed Care Plan: MetroPlus Health Plan

Address: [Eaddajd Ggdjjca, Bechefg Efiegfb, Icabiij Cbhffbe, Aehggcj Cibahjd](#) DOB: 01/01/9999 Medicaid Eligibility: SAFETY NET W/O DEPRIV
Phone Number: Age: 999 Medicare: No

Indicator Set	Quality Flags (as of monthly QI report 4/1/2014)	Quality Flag Definitions
BH Care Coordination	3+ Inpatient - BH	
Hospital ER Utilization	4+ Inpatient/ER - All 4+ Inpatient/ER - BH Readmission - All BH 7 day	

Behavioral Health Diagnoses - Primary and Secondary Dx (most frequent shows first, click diagnoses for more information)

[Major Depressive Disorder](#) | [Attention Deficit Disorder](#) | [Bipolar Disorder](#)

Clinical Summary Header

Without consent: no option to show enhanced PHI



- My QI Report
- Statewide Reports
- Recipient Search
- Provider Search
- MyPSYCKES
- Registrar Menu
- Usage Report

De-Identify Data

Clinical Summary

Export to PDF Excel CCD

[Return to Quality Indicator Results](#)

[Care Coordination](#) | [Medication: BH](#) | [Medication: Medical](#) | [BH Outpatient](#) | [Medical Outpatient](#) | [Hospital/ER Dental](#) | [Vision](#) | [Support/Residential](#) | [Lab & Pathology](#) | [Radiology](#) | [Medical Equipment](#) | [Transportation](#)

OMH PHI **Please choose summary period** Last 6 months Last Year Last 2 Years All Available (up to 5 years)

Clinical Report Date: 6/5/2014 (This report does not contain clinical data with special protection - consent required.)

Name: Ebhefhj Dcebida	Medicaid ID: JGFDGAD AFJDFGF	Managed Care Plan: MetroPlus Health Plan
Address: Eaddajd Ggdjjca, Bechefg Efiegfb, Icabiij Cbhffbe, Aehggcj Cibahjd	DOB: 01/01/9999	Medicaid Eligibility: SAFETY NET W/O DEPRIV
Phone Number:	Age: 999	Medicare: No

Indicator Set	Quality Flags (as of monthly QI report 4/1/2014)	Quality Flag Definitions ?
BH Care Coordination	3+ Inpatient - BH	
Hospital ER Utilization	4+ Inpatient/ER - All 4+ Inpatient/ER - BH Readmission - All BH 7 day	

Behavioral Health Diagnoses - Primary and Secondary Dx (most frequent shows first, click diagnoses for more information)

[Major Depressive Disorder](#) | [Attention Deficit Disorder](#) | [Bipolar Disorder](#)

Outpatient Services: Behavioral Health and Medical

Provider, dates, # of visits, diagnosis, procedures, practitioner

▼ Behavioral Health Services					See All Service Details	OMH PHI	View: <input type="radio"/> Graph <input checked="" type="radio"/> Table	
Service Type	Provider	First Date Billed	Last Date Billed ▼	Number of Visits	Most Recent Primary Diagnosis	Most Recent Procedures (Last 3 Months)	Practitioner	See Service Details
Clinic - SU Specialty	ST LUKES ROOSEVELT HSP CTR	5/22/2014	6/2/2014	4	Schizo-Affective Type Schizophrenia, Unspecified State [295.70]	<ul style="list-style-type: none"> - Alcohol And/Or Drug Screenin - Alcohol And/Or Drug Services - Alcohol/Subs Interv 15 -30mn - Office/Outpatient Visit New 		
Clinic - SU - Methadone Maintenance Treatment Program	ST LUKES ROOSEVELT HSP CTR	5/19/2014	5/19/2014	1	Opioid Type Dependence, Unspecified Use [304.00]	<ul style="list-style-type: none"> - Routine Venipuncture 		
Clinic - Medical Specialty	PROJECT RENEWAL	11/8/2013	1/19/2014	2	Alcohol Abuse, Unspecified Drinking Behavior [305.00]	<ul style="list-style-type: none"> - Alcohol And/Or Drug Services 		
Clinic - Medical Specialty	ST LUKES ROOSEVELT HSP CTR	9/4/2013	12/11/2013	3	Other And Unspecified Alcohol Dependence, Unspecified Drinking Behavior [303.90]	<ul style="list-style-type: none"> - Assay Dipropylacetic Acid - Hepatitis B Surface Ag Eia - Hepatitis C Ab Test - Routine Venipuncture - Syphilis Test Non-Trep Qual 		

Hospital/ER Services: Integrated Behavioral/Medical

Service type, provider, diagnosis, admission/discharge dates, length of stay, procedures

Hospital/ER Services		See All Service Details		OMH PHI		View: <input type="radio"/> Graph <input checked="" type="radio"/> Table	
Service Type	Provider	Admission	Discharge Date/Last Date Billed	Length of Stay	Most Recent Diagnosis	Procedure(s)	See Provider Detail
Inpatient BH	AREBA CASRIEL INSTITUTE	3/2/2012	4/2/2012	31	Substance Abuse		
Inpatient BH	BELLEVUE HOSPITAL CENTER	2/22/2012	2/23/2012	1	Schizoaffective Disorder		
Inpatient BH	ST BARNABAS HOSPITAL	12/3/2011	12/21/2011	18	Major Depressive Disorder		
Inpatient BH	INTERFAITH MEDICAL CENTER	10/11/2011	11/2/2011	22	Schizoaffective Disorder		
ER BH	JAMAICA HOSPITAL MED CTR	10/2/2011	10/4/2011	1	Mental Illness	- Ther/Proph/Diag Inj Sc/Im	
CPEP	BETH ISRAEL MEDICAL CENTER PSYCH	10/4/2011	10/4/2011	1	Mental Illness	- Drug Screen, Single	
Inpatient BH	NY HOSPITAL	9/2/2011	9/30/2011	28	Substance Abuse		

Clinical Summary: Export Data to PDF, Excel, CCD

To select section(s), click or “Shift”+click or “Ctrl”+click.



My QI Report Statewide Reports Recipient Search Provider Search MyPSYCKES Registrar Menu Usage Report

De-Identify Data

Clinical Summary

[Return to Search Results](#)

Export to PDF Excel CCD

OMH PHI **Please choose summary period** Last 3 months Last 6 months

Clinical Report Date: 5/8/2014 (This report contains all available clinical data.) Enhance

Name: [Feihhad Ccfdcac](#) Medicaid ID: IFJEDHE CFDIBDF

Indicator Set	Quality Flags (as of monthly QI report 3/1/2014)
BH Care Coordination	Adherence - Antipsychotic (Schz) 3+ Inpatient - BH
Cardiometabolic	Drug (Olanzapine) and Cardiometabolic Condition (AP + Hypertension
Health Promotion and Coordination	No Outpatient Medical Visit >1 Yr
Hospital ER Utilization	4+ Inpatient/ER - All 4+ Inpatient/ER - BH Readmission - All BH 7 day

Behavioral Health Diagnoses - Primary and Secondary Dx (Most Recent Shows First)

Adjustment Disorder | Bipolar Disorder | Delusional Disorder | Other Nonpsychotic Mental Disorder | Other Psychotic Disorder | Personality, Impulse Control Disorders | Schizoaffective Disorder | Schizophrenia | Somatoform, Factitious Disorder | Substance Abuse

Age: 999

Definitions ?

Export Options

Sections

- All sections - Summary data
- Selected section(s) - Summary data
- Selected section(s) - All available data

Quality Flag

- Integrated View of Services Over Time
- Behavioral Health Diagnoses - Primary and Secondary Dx
- Medical Diagnoses - Primary and Secondary Dx (Most Rec
- Medication Behavioral Health
- Medication Medical

Export Cancel

Clinical Summary:

Export data to PDF

New York State Office of Mental Health- Confidential (Contains Protected Health Information)

Clinical Summary Report for Last 6 months

Name : Bbediif Bedachh Medicaid ID: Edfiead Ddfeede DOB: 01/01/9999 (999 Yrs)
Medicaid Eligibility: SSI Managed Care Plan: Healthfirst PHSP, Inc. Medicare: No
(Clinical report date:3/5/2015) (This report contains all available clinical data.)

Current Care Coordination Contact Information

Health Home (Enrolled) : SOUTHWEST BROOKLYN HEALTH HOME LLC (Begin Date: 01-JAN-14), Main Contact: Madeline Rivera 718-283-7098, mrivera2@maimonidesmed.org Care Management (Enrolled) : CAMBA INC - This information is updated weekly from DOH Health Home file.

Quality Flag - History

Indicator Set	Quality Flag	First Flag	Most Recent Flag	# Of Months Flagged	Active
Polypharmacy	Psychotropics Four Plus	12/1/2010	12/1/2014	17	Yes
Readmission	Readmission - All BH 30 day	8/1/2011	12/1/2014	39	Yes
High Utilization - Inpt/ER	4+ Inpatient/ER - BH	8/1/2011	12/1/2014	39	Yes
High Utilization - Inpt/ER	4+ Inpatient/ER - Med	8/1/2011	12/1/2014	35	Yes
High Utilization - Inpt/ER	4+ Inpatient/ER - All	8/1/2011	12/1/2014	39	Yes
Cardiometabolic	AP + Obesity Risk	8/1/2011	12/1/2014	29	Yes

Search for Consented Recipients

- After a Registrar enters consent, any staff who has access to PSYCKES for the facility can access the Clinical Summary
- Use Recipient Search menu to search for consented clients
- Search for individual with Medicaid ID, SS#, name, DOB
- Generate list of all consented clients by filtering for "Active Consent Only"

Recipient Search

Search by Medicaid ID, Social Security #, or Name

My QI Report Statewide Reports **Recipient Search** Provider Search MyPSYCKES Registrar Menu Usage Reports User Settings De-Identify

Recipient Identifiers
Medicaid ID: or SSN: or First Name: Last Name: DOB: MM/DD/YYYY

Recipient Characteristics - as of: 03/05/2015 **Quality Flag*: 01/01/2015** **Definitions**

Age Group: Select Age Range Gender: Any Managed Care: Select MCO Population: All

Polypharmacy Summary
Antipsychotic Three Plus
Antipsychotic Two Plus
Antidepressant Three Plus
Antidepressant Two Plus - SC
Psychotropics Four Plus
Psychotropics Three Plus

Services by a Specific Provider: 01/01/2015 Past 1 Year

Provider: Main Street Health Center
Region: Select Region County: Select County
Current Access Status: PSYCKES Census(Billing, Consent, ER, Attestation of service)
Service Utilization: Select Setting Type Number of Visits: --
Service Setting*: Care Coordination, Living Support/Residential, Other, Outpatient - DD
Service Detail: Selected

Medication & Diagnosis: 01/01/2015 Past 1 Year

Prescriber Last Name:
Drug Name:
Active Drug:

Psychotropic Drug Class*: Antidepressant, Antipsychotic, Anxiolytic/Hypnotic, Mood Stabilizer, Side-Effect Management, Stimulant
Non-Psychotropic Drug Class*: Analgesics and Anesthetics, Anti-Infective Agents, Anti-Obesity Agents, Antidiabetic, Antihyperlipidemic, Antihypertensive

Diagnosis:
Diagnosis given: 1+ times Primary Only: Primary/Secondary:

BH Diagnosis*: Adjustment Disorder, Anxiety Disorder, Attention Deficit Disorder, Autism & Pervasive Developmental Disorder, Bipolar Disorder, Conduct Disorder
Medical Diagnosis*: Certain Conditions Originating in the Perinatal Period, Complications of Pregnancy, Childbirth, and the Puerperium, Congenital Anomalies, Diabetes, Diseases of the Skin and Subcutaneous Tissues, Diseases of the Blood and Blood-Forming Organs

Services by Any Provider: 01/01/2015 Past 1 Year

Provider(Optional):
Region: Select Region County: Select County
Service Utilization: Select Setting Type Number of Visits: --
Service Setting*: Care Coordination, Foster Care, Inpatient - ER, Living Support/Residential
Service Detail: Selected

- 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.
- *To select multiple options within a list, hold down "CTRL" while making additional selections.

Maximum No. of Rows to be displayed: 50 **Search** Reset

Search Results

Click on recipient name to view client level data

Access type: All Data - Consent

[My QI Report](#) [Statewide Reports](#) [Recipient Search](#) [Provider Search](#) [MyPSYCKES](#) [Registrar Menu](#) [Usage Reports](#) [User Settings](#) De-Identify

Modify Search

Total Number of Recipients: 1

Maximum Number of Rows Displayed: 50

Medicaid ID - XXXXXXXX
[Provider Specific] Provider Name - Main Stree Health Center

Export PDF Excel

Name	Medicaid ID	DOB	Gender	Quality Flags	Current PHI Access
Deabehb Dbdibeb	Ghfcfbg Faaijcd	01/01/9999	Bijiaaj Effecah	DoseAD	All Data - Consent

Recipient Search

Search for cohorts of recipients by service setting, age, quality flag, diagnosis, drug or drug class, etc.

My QI Report Statewide Reports **Recipient Search** Provider Search MyPSYCKES Registrar Menu Usage Reports User Settings De-Identify

Recipient Identifiers
Medicaid ID: or SSN: or First Name: Last Name: DOB:

Recipient Characteristics - as of: 03/05/2015 **Quality Flag*: 01/01/2015** **Definitions**

Age Group: Select Age Range
Gender: Any
Managed Care: Select MCO
Population: All

Polypharmacy Summary
Antipsychotic Three Plus
Antipsychotic Two Plus
Antidepressant Three Plus
Antidepressant Two Plus - SC
Psychotropics Four Plus
Psychotropics Three Plus

Medication & Diagnosis: 01/01/2015 **Past 1 Year**

Prescriber Last Name:
Drug Name: Seroquel
Active Drug:

Psychotropic Drug Class*:
Antidepressant
Antipsychotic
Anxiolytic/Hypnotic
Mood Stabilizer
Side-Effect Management
Stimulant

Non-Psychotropic Drug Class*:
Analgesics and Anesthetics
Anti-Infective Agents
Anti-Obesity Agents
Antidiabetic
Antihyperlipidemic
Antihypertensive

Diagnosis:
Diagnosis given: 1+ times Primary Only: Primary/Secondary:

BH Diagnosis*:
Adjustment Disorder
Anxiety Disorder
Attention Deficit Disorder
Autism & Pervasive Developmental Dis
Bipolar Disorder
Conduct Disorder

Medical Diagnosis*:
Certain Conditions Originating in the Pe
Complications of Pregnancy, Childbirth,
Congenital Anomalies
Diabetes
Diseases of Skin and Subcutaneous Ti
Diseases of the Blood and Blood-Formi

Services by a Specific Provider: 01/01/2015 **Past 1 Year**

Provider: Main Street Health Center
Region: Select Region County: Select County
Current Access Status:
PSYCKES Census(Billing, Consent, ER, Attestation of service)

Service Utilization: Select Setting Type Number of Visits: --

Service Setting*:
Care Coordination
Living Support/Residential
Other
Outpatient - DD

Service Detail: Selected

Services by Any Provider: 01/01/2015 **Past 1 Year**

Provider(Optional):
Region: Select Region County: Select County
Service Utilization: Select Setting Type Number of Visits: --

Service Setting*:
Care Coordination
Foster Care
Inpatient - ER
Living Support/Residential

Service Detail: Selected

- 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.
- *To select multiple options within a list, hold down "CTRL" while making additional selections.



Maximum No. of Rows to be displayed: 50

Search

Reset

Search Results for Cohort

Sample search: Clients on Seroquel

Check PHI Access column to see if you have access to clients' Clinical Summaries
Click on recipient name to view Clinical Summary



- My QI Report
- Statewide Reports
- Recipient Search**
- Provider Search
- Registrar Menu
- Usage Report
- User Settings

Modify Search

Total Number of Recipients: 15
Maximum Number of Rows Displayed: 50

Drug Name - SEROQUEL
[Provider Specific] Provider Name - Main Street Health Center

Export PDF Excel

Name	Medicaid ID	DOB	Gender - Age	Quality Flags	PHI Access
Cehcqdf Fcieide	Iefefdi Eafefcd	12/31/9999	Feggfad Elaaidb		No Access
Cehcqdf Fcieide	Fjaaaab Edgfdic	12/31/9999	Ddfdbaf Bbefhad	4+ Inpt/ER-All, 4+ Inpt/ER-Med	Quality Flag
Cehcqdf Fcieide	Gcfthef Adfiidd	12/31/9999	Bgehehg Dfejabg		All Data - Consent
Cehcqdf Fcieide	Ceacadd Dbaaibh	12/31/9999	Aaegffb Gjfacgb	4+ Inpt/ER-All, 4+ Inpt/ER-Med	Quality Flag
Cehcqdf Fcieide	Jdaeadf Afeaaajc	12/31/9999	Dcicfbb Fcecdfc		No Access
Cehcqdf Fcieide	Cfegdde Djddeba	12/31/9999	Abjedhh Icdgape	4+ Inpt/ER-All, 4+ Inpt/ER-Med	Quality Flag
Cehcqdf Fcieide	Baibgfd		Ebaefdj		

“No Access” to Clinical Summary

Users see this message if they attempt to access a Clinical Summary for a recipient who has no consent, no quality flag, and no emergency status



[My QI Report](#) [Statewide Reports](#) [Recipient Search](#) [Provider Search](#) [Registrar Menu](#) [Usage Report](#) [User Settings](#)

[De-Identify](#)

Clinical Summary

[Return to Search Results](#)

Access to clinical data is available only under the following circumstances:

1. Recipient has an active quality flag AND has received service(s) in your agency in the past 12 months. OR
2. Recipient has signed consent. OR
3. Recipient has a clinical emergency.

For more information about access to client-level data in PSYCKES, please check the PSYCKES [FAQ's](#) or please ask your supervisor or e-mail PSYCKES-Help@omh.ny.gov.

Search for Consented Clients

Once a client's consent is entered, anyone with PSYCKES access at the facility can view the client's clinical information

Recipient Characteristics - as of: 03/05/2015 **Quality Flag*: 01/01/2015** [Definitions](#)

Age Group: Polypharmacy Summary
Gender: Antipsychotic Three Plus
Managed Care: Antipsychotic Two Plus
Population: Antidepressant Three Plus
 Antidepressant Two Plus - SC
 Psychotropics Four Plus
 Psychotropics Three Plus

Medication & Diagnosis: 01/01/2015 Past 1 Year

Prescriber Last Name:

Drug Name: Active Drug:

Psychotropic Drug Class*: Non-Psychotropic Drug Class*:

Antidepressant Antipsychotic Anxiolytic/Hypnotic Mood Stabilizer Side-Effect Management Stimulant	Analgesics and Anesthetics Anti-Infective Agents Anti-Obesity Agents Antidiabetic Antihyperlipidemic Antihypertensive
--	--

Diagnosis:

Diagnosis given: times Primary Only: Primary/Secondary:

BH Diagnosis*: Medical Diagnosis*:

Adjustment Disorder Anxiety Disorder Attention Deficit Disorder Autism & Pervasive Developmental Dis Bipolar Disorder Conduct Disorder	Certain Conditions Originating in the Pe Complications of Pregnancy, Childbirth Congenital Anomalies Diabetes Diseases of Skin and Subcutaneous Tiss Diseases of the Blood and Blood-Formi
---	---

Services by a Specific Provider: 01/01/2015 Past 1 Year

Provider:

Region: County:

Current Access Status:

PSYCKES Census(Billing, Consent, ER, Attestation of service) ←

PSYCKES Census(Billing, Consent, ER, Attestation of service) ←

Active Consent ←

Attestation of Service only

Emergency

Linked through Medicaid Billing only (Limited access with Quality Flag)

--- Care Coordination

--- Living Support/Residential

--- Other

--- Outpatient - DD

Services by Any Provider: 01/01/2015 Past 1 Year

Provider(Optional):

Region: County:

Service Utilization: Number of Visits:

Service Setting*: Service Detail: Selected

--- Care Coordination

--- Foster Care

--- Inpatient - ER

--- Living Support/Residential

- 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.

Maximum No. of Rows to be displayed:

Search for Clients: Recipient Search vs. PHI Access Module

- Recipient Search
 - All PSYCKES users have access
 - Search returns clients already connected to your agency/hospital
 - Claims data, or
 - PHI Access Module
- Registrar Menu / PHI Access Module
 - Search all clients in PSYCKES database
 - Available only to those with “Registrar” access
 - Used to enable access to client for all users
 - Client then appears in Recipient search

PHI Access Module: Withdrawal of Consent

Withdrawal of Consent

- Clients have the right to withdraw consent
- Withdraw Consent form must be used and is available through the:
 - PSYCKES application Registrar Menu
 - PSYCKES public website
- After client signs the Withdraw Consent form, the Registrar uses PHI Access menu to register client's withdrawal of consent
- Facility may still have access to client data if client is positive for a quality flag and facility bills Medicaid for them
- Attestation to service can also be de-activated

Registrar Menu: Withdraw Consent



PSYCKES Medicaid Protected Health Information (PHI) Access Menu

Enable access to client's Clinical Summary by attesting to one or more of the following:

- Client signed a consent form
- Client data is needed due to clinical emergency
- Client is served at/is being transferred to your provider agency

Register client's withdrawal of consent to disable access to client data.

Note: under certain circumstances (e.g., client quality flag), your provider agency may still have access to limited client data.

Deactivate an attestation of service that created a manual link between a client and your provider agency.

Note: Clients may still be linked to your provider agency based on Medicaid data.

Release: 4.9.3

Withdraw Consent: Search by Medicaid ID



[Log Off](#)

My QI Report Statewide Reports Recipient Search Provider Search Registrar Menu Usage Report User Settings

PHI Access Recipient Census Consent Forms Administration

Register client's withdrawal of consent

Medicaid ID:

XXXXXXXX

Search

Clear

[PHI Access](#)



Office of
Mental Health

Withdraw Consent: Verify Client ID and Withdraw

My QI Report Statewide Reports Recipient Search Provider Search Registrar Menu Usage Report User Settings

PHI Access Recipient Census Consent Forms Administration

Register client's withdrawal of consent

Medicaid ID:

[PHI Access](#)

Results:

Name	DOB	Address	Medicaid ID	
XXXX XXXXX	XX/XX/XX	XXXXXXXXXX	XXXXXXXXXX	<input type="button" value="Withdraw"/>



Withdraw Consent:

Consent Withdrawn

[My QI Report](#) [Statewide Reports](#) [Recipient Search](#) [Provider Search](#) [Registrar Menu](#) [Usage Report](#) [User Settings](#)

Consent withdrawal for recipient: XXXXXXXX

Register client's withdrawal of consent

Medicaid ID:

Search

Clear

[PHI Access](#)



Usage Report

PSYCKES Consent

My QI Report
 Statewide Reports
 Recipient Search
 Provider Search
 MyPSYCKES
 Registrar Menu
 Usage Reports
 User Settings
 De-Identify

PSYCKES Users
 PHI Access Module
 Clinical Summaries
 MyPSYCKES Usage Report

PHI Access Module Usage

Provider: Main Street Health Center

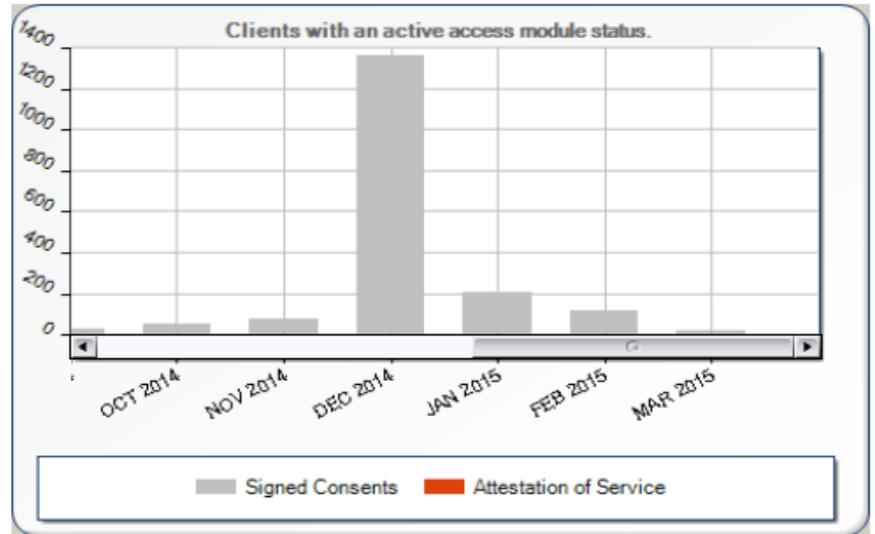
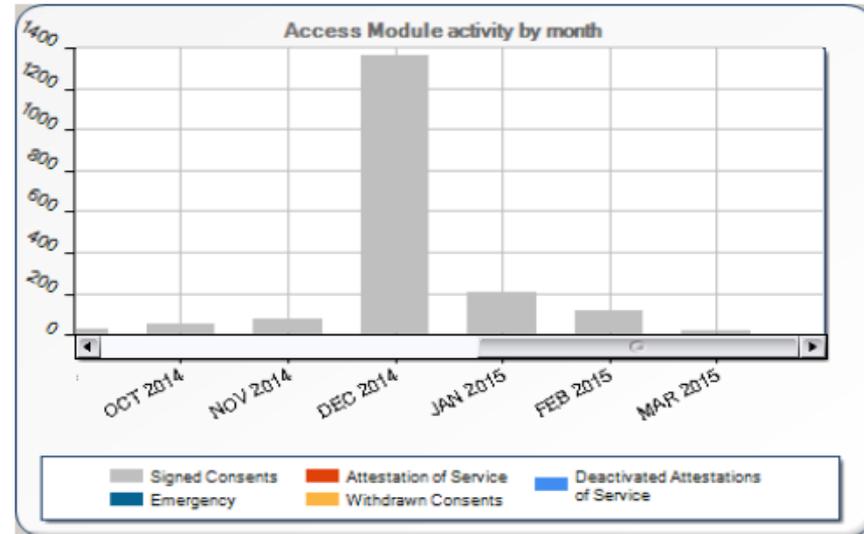
Date Range: 03/09/2014 to 03/08/2015, Graph Interval: Monthly

Setting: All, Role in Organization:All, Licensed Profession:All

[Modify Filter](#)

Summary of PHI Access Module usage during the selected date range

Export to PDF Excel



Total number of clients entered during the selected date range

Signed Consents	Emergency	Attestation of Service	Total Clients Entered	Withdrawn Consents	Deactivated Attestation of Service
1984 (100%)	0	0	1,984	1	0

Usage Report

Consent Activity

Total number of clients entered during the selected date range

Signed Consents	Emergency	Attestation of Service	Total Clients Entered	Withdrawn Consents	Deactivated Attestation of Service
1984 (100%)	0	0	1,984	1	0

PHI Access Module usage during the selected date range, by user

User Name ▲	Current User Profile			PHI Access Module Use during Selected Date Range					
	Setting	Role in Organization	Licensed Profession	Total Clients Entered	Attestation of Service	Total Signed + Emergency	Signed Consents (%)	Emergency (%)	2 Forms of ID (%)
Robert Bob	BHO - Behavioral Health Organization	Leadership		69	0	69	69 (100%)	0	0
Jane Doe	Health Home Administration	Quality Management		2	0	2	2 (100%)	0	0
John Smith	BHO - Behavioral Health Organization, Case Management, Health Home Administration, Mental Health - Outpatient	Administrative Support , Leadership		437	0	437	437 (100%)	0	0
Adam Main	Mental Health - Outpatient	Leadership	Licensed Clinical Social Worker	1	0	1	1 (100%)	0	0

Implementation

Implementing PSYCKES PHI Access Module

- Establish policies, procedures, and responsibilities
- Train staff on work flow and how to use PSYCKES
 - “PSYCKES Train the Trainer webinar”
- Inform clinical staff about value of implementation
 - Data with special protections in PSYCKES Clinical Summary to support clients’ treatment
- Customize PSYCKES Consent form with facility’s information
- Designate staff (clinic manager, PSYCKES point person) to use PSYCKES to monitor use:
 - Create a list of consented/un-consented clients
 - Use the "Usage Reports" available in PSYCKES to:
 - Track # of consent forms entered (aggregated and by Registrar)
 - Track # of Clinical Summaries viewed

Establish Policies and Procedures for PHI Access Module

- How to identify potential PSYCKES clients
 - All Medicaid Enrollees
- When to obtain consent from clients
 - PSYCKES Consent form is pre-printed and accessible to staff
 - Include consent form in intake package for new clients
 - Front desk staff obtain consent before appointment for current clients
 - Discuss Consent form with client during time of treatment update (e.g., clinician is provided the form for use during treatment session)
- Who should have Registrar role to use PHI Access Module
 - Front desk clerical staff
 - Clinical staff providing treatment
 - Decide whether the person obtaining consent will also be the Registrar, who attests in PSYCKES that consent was obtained

Establish Policies and Procedures for PHI Access Module

- How to provide the Registrar with client information needed to attest in PSYCKES consent was obtained
 - Medicaid ID or Social Security #
 - Consent or Clinical Emergency
 - Forms of ID obtained from client
- How to obtain client IDs and document client identity
 - Request client bring 2 forms of ID (acceptable forms listed in PHI Access Module step 3), make copies of forms of ID, attach to consent form
 - Alternatively, follow facility's established procedures for verifying identity
- Who will file PSYCKES Consent form in the client's medical record (paper chart or EMR)

Establish Policies and Procedures for PHI Access Module

- Identify staff authorized to certify a clinical emergency
- How will clients' Clinical Summaries be viewed
 - Registrar prints Clinical Summary and places it in client's chart
 - Clinical Summary is attached to EMR
 - Treatment provider(s) login to PSYCKES to view Clinical Summary
- Who will register client's withdrawal of consent if requested by client
- If a client declines consent when first asked, will they be asked again in the future; if so, how will this be tracked
- Include PSYCKES work flow and training when new staff come on board

Resources

PSYCKES Website

www.psyckes.org ~ Navigation bar at left

Office of Mental Health

Ann Marie T. Sullivan, M.D., Commissioner

Governor Andrew M. Cuomo

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Log Into PSYCKES

[About PSYCKES](#)

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[News](#)

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[Initiatives](#)

[Freestanding Clinics](#)

[Hospital Collaborative](#)

[Children's Collaborative](#)

[OASAS Programs](#)

[Assertive Community Treatment \(ACT\)](#)

[Care Management](#)

[Emergency Rooms](#)

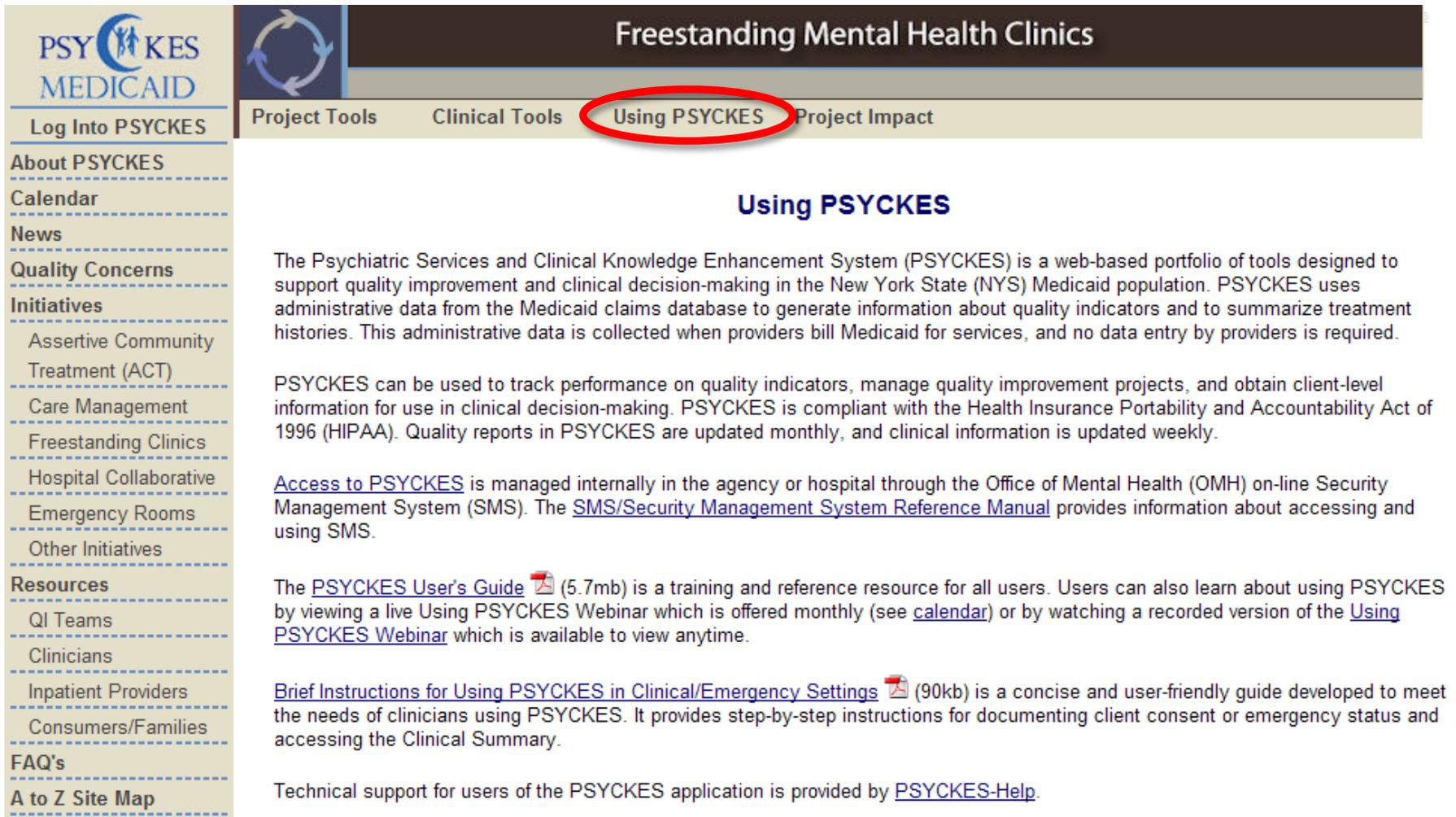
[Other Initiatives](#)

PSYCKES Medicaid Home



Comments or questions about the information on this page can be directed to the [PSYCKES Team](#).

PSYCKES Website: “Using PSYCKES” in All Sections



The screenshot shows the PSYCKES website interface. The top navigation bar includes links for Project Tools, Clinical Tools, **Using PSYCKES** (circled in red), and Project Impact. The main content area is titled "Using PSYCKES" and contains several paragraphs of text, a link to the SMS/Security Management System Reference Manual, and links to the PSYCKES User's Guide and Brief Instructions for Using PSYCKES in Clinical/Emergency Settings. A sidebar on the left contains various site navigation links.

PSYCKES MEDICAID

Log Into PSYCKES

Project Tools Clinical Tools **Using PSYCKES** Project Impact

Using PSYCKES

The Psychiatric Services and Clinical Knowledge Enhancement System (PSYCKES) is a web-based portfolio of tools designed to support quality improvement and clinical decision-making in the New York State (NYS) Medicaid population. PSYCKES uses administrative data from the Medicaid claims database to generate information about quality indicators and to summarize treatment histories. This administrative data is collected when providers bill Medicaid for services, and no data entry by providers is required.

PSYCKES can be used to track performance on quality indicators, manage quality improvement projects, and obtain client-level information for use in clinical decision-making. PSYCKES is compliant with the Health Insurance Portability and Accountability Act of 1996 (HIPAA). Quality reports in PSYCKES are updated monthly, and clinical information is updated weekly.

[Access to PSYCKES](#) is managed internally in the agency or hospital through the Office of Mental Health (OMH) on-line Security Management System (SMS). The [SMS/Security Management System Reference Manual](#) provides information about accessing and using SMS.

The [PSYCKES User's Guide](#) (5.7mb) is a training and reference resource for all users. Users can also learn about using PSYCKES by viewing a live Using PSYCKES Webinar which is offered monthly (see [calendar](#)) or by watching a recorded version of the [Using PSYCKES Webinar](#) which is available to view anytime.

[Brief Instructions for Using PSYCKES in Clinical/Emergency Settings](#) (90kb) is a concise and user-friendly guide developed to meet the needs of clinicians using PSYCKES. It provides step-by-step instructions for documenting client consent or emergency status and accessing the Clinical Summary.

Technical support for users of the PSYCKES application is provided by [PSYCKES-Help](#).

About PSYCKES

Calendar

News

Quality Concerns

Initiatives

- Assertive Community Treatment (ACT)
- Care Management
- Freestanding Clinics
- Hospital Collaborative
- Emergency Rooms
- Other Initiatives

Resources

- QI Teams
- Clinicians
- Inpatient Providers
- Consumers/Families

FAQ's

A to Z Site Map

For Further Information

- PSYCKES website
 - www.psyckes.org
- PSYCKES Help (PSYCKES support)
 - 9:00AM – 5:00PM, Monday – Friday
 - PSYCKES-help@omh.ny.gov
- OMH Help Desk (PSYCKES login, SMS support)
 - 7:00AM – 8:00PM, 7 days
 - 800-HELP-NYS (800-435-7697)
 - Helpdesk@omh.ny.gov

Questions and Answers

