

Using PSYCKES to Support Clinical Review and Care Coordination

We will begin shortly

Please keep your phone line muted during the webinar



Agenda

- Introduction to PSYCKES
- USING PSYCKES
 - QI Reports
 - Accessing Data through “Recipient Search”
 - Clinical Summary
- PSYCKES Consent Module
 - Consent Process in Hospital Workflow
- Resources
- Your Questions

What is PSYCKES?

- A secure, HIPAA-compliant web-based application that makes Medicaid claims data available to behavioral health providers to support clinical decision-making and quality improvement.
- PSYCKES implementation:
 - State hospitals (2003): 27 hospitals
 - Free-standing mental health clinics (2008): 340 clinics
 - NYC hospital affiliated clinics (2010): 25 clinics/CDTs
 - ACT Transitions project (2010): 27 teams
 - MyPSYCKES pilot (2010) 2 clinics
 - LGU pilot (2010): NYC, Erie
 - ER pilot (2011): 4 ERs
 - Access for inpatient units at state psychiatric centers (2011)
 - Access for OMH and OASAS licensed hospitals and detox programs (2011)

Client Records Accessible in PSYCKES

- NYS Medicaid enrollees
 - Fee-for-service claims
 - Managed care encounter data
 - Dual-eligible (Medicare/Medicaid): includes Medicaid data only
- Behavioral health population, i.e., at least one of the following:
 - Behavioral health or SUD service
 - Behavioral health or SUD diagnosis
 - Psychotropic medication
- Currently over 3.7 million individuals

Data Available in PSYCKES

- All Medicaid-reimbursable services for which a claim was submitted, across treatment settings
 - Mental health (outpatient and inpatient)
 - Pharmacy (psychotropic and medical)
 - Medical (services, lab tests, and procedures)
 - Living Supports (if Medicaid-billable)
- Up to 5 years of data
- Currently does not include data from Medicare or private insurance
 - For dual-eligible clients (Medicare and Medicaid), includes services but not pharmacy

Quality Indicators

- Hospital/ ER related measures
 - High utilization (4+/yr): BH, Medical, any cause
 - Readmission: 7 days, 30 days
 - Preventable admissions: Diabetes, Dehydration, Asthma
- Medication related indicator sets
 - Psychotropic polypharmacy (by class and over all)
 - Dose (by class of psychotropic)
 - Cardiometabolic (high/moderate risk AP + cardiometabolic condition)
 - Youth (“too many, too much, too young”)
- High need ineffectively engaged

Which Clients Can Be Accessed Through PSYCKES?

- Two ways clients are “assigned” to institution:
 - Automatically: Clients billed by an institution in the past 9 months
 - Manually: through the Consent Module
 - Clients you consent
 - Clients you attest you are serving in a clinical emergency

Client Information in PSYCKES: Without Consent


- Access is provided without consent for clients...
 - Positive for a quality concern tracked in PSYCKES, **AND**
 - At least one billed service anywhere in your hospital in past 9 months
- Rationale: Federal mandate to monitor the safety and effectiveness of Drug Utilization in Medicaid
- Does not include Protected Health Information (PHI) with special protections
 - Substance abuse
 - HIV
 - Genetic information
 - Reproductive / family planning

Client Information in PSYCKES: With Consent

- Expanded access
 - Entire Medicaid behavioral health population, including:
 - Those not positive for a quality concern
 - Those not yet linked to hospital through claims data
 - Includes PHI with special protections
- Access to client-level data
 - With consent from the consumer (duration: 3 years after last service or clients withdraws consent)
 - In clinical emergencies (limited duration: 72 hours)

Best Practices for Implementing PSYCKES

■ Plan

- Complete/Return Documents for PSYCKES Access.
- Establish PSYCKES Workgroup
- Determine PSYCKES Use Cases 

■ Prepare

- Complete Protocol for Granting Users Access to PSYCKES
- Develop Policies and Procedures
- Prepare Computers
- Train Designated Staff

■ Put into Use

- Put PSYCKES and Established Procedures into Practice

■ Sustain

- Develop a Plan to Sustain Practices

USING PSYCKES

Logging in to PSYCKES

- Go to PSYCKES Home Page: www.psyckes.org
- Click “Log Into PSYCKES”

The screenshot shows the PSYCKES Medicaid Home page. At the top, there is a navigation bar with "New York State" and "State Agencies" on the left, and a search bar on the right. Below this is the "Office of Mental Health" header with the names of the Commissioner and Governor. A secondary navigation bar includes "Home", "News", "Publications", "Resources", "Employment", and "A-Z Site Map".

The main content area is titled "PSYCKES Medicaid Home" and features three large, dark blue arrow-shaped buttons pointing right: "PSYCKES", "Initiatives", and "Resources".

On the left side, there is a vertical menu with the following items: "Log Into PSYCKES", "About PSYCKES", "Calendar", "News", "Quality Concerns", "Initiatives" (with sub-items: "Freestanding Clinics", "Hospital Clinics", "Other Initiatives"), "Resources" (with sub-items: "QI Teams", "Clinicians", "Consumers/Families"), "FAQ's", "A to Z Site Map", and "Contact Us".

On the right side, there are three light gray arrow-shaped boxes pointing right, each containing a list of links:

- PSYCKES Medicaid Home**
 - ▶ PSYCKES Medicaid
 - ▶ Log into PSYCKES
 - ▶ MyPSYCKES
- Initiatives**
 - ▶ Freestanding Mental Health Clinics
 - ▶ Hospital-Affiliated Mental Health Clinics
 - ▶ Other Initiatives
- Resources**
 - ▶ Quality Improvement Teams
 - ▶ Clinicians
 - ▶ Consumers and Families

Red arrows point from the "Log Into PSYCKES" link in the left menu to the "PSYCKES" button, and from the "PSYCKES" button to the "Log into PSYCKES" link in the right-hand box.

Logging in to PSYCKES, cont.

- At Login Page, enter:
 - User ID (first box)
 - Password + token code (2nd box)



Statement of Access and Confidentiality

WARNING: This computer system is solely for the use of authorized users for official purposes. Users of this system have no expectation of privacy in its use. To ensure that the system is functioning properly, individuals using this computer system are subject to having all of their activities monitored and recorded by system personnel. Use of this system evidences an express consent to such monitoring.

Unauthorized or improper use of this system may result in administrative disciplinary action and civil and criminal penalties. By continuing to use this system you indicate your awareness of, and consent to, these terms and conditions of use. If you do not agree to the conditions stated in this warning, LOG OFF IMMEDIATELY.



Userid:

Password or Passcode:



Note: To log-on with a new token, enter just the six digits displayed on the token device.

Login

Logging in to PSYCKES, cont.

Confidentiality Agreement

Please Note: Medicaid recipient level data is confidential and is protected by State and Federal laws and regulations. It can be used only for purposes directly connected to the administration of the Medicaid program. You are required to read, understand and comply with these regulations. There are significant State, Civil and Federal criminal penalties for violations.

FEDERAL MEDICAID CONFIDENTIALITY STANDARDS:

The Federal Medicaid confidential data standard is established by §1902(a)(7) of the Social Security Act (42 USC §1396a(a)(7)). The law requires that a "State plan for medical assistance must: (7) provide safeguards which restrict the use or disclosure of information concerning applicants and recipients to purposes directly connected with the administration of the plan." This statutory requirement is implemented in regulations at 42 CFR §431.300 et seq.. 42 CFR §431.302 defines Medicaid program administration to include:

- (A) Establishing Eligibility;
- (B) Determining the amount of Medical Assistance;
- (C) Providing services for recipients; and
- (D) Conducting or assisting an investigation, prosecution, or civil or criminal proceeding related to the administration of the plan.


42 C.F.R. §431.306 requires the single state agency to have criteria specifying the conditions for release and use of information about applicants and recipients. The information for which the agency must have criteria to safeguard must include: (1) names and addresses; (2) medical services provided; (3) social and economic conditions; (4) agency evaluation of personal information; (5) medical data, including diagnosis and past history of disease or disability; and (6) any information received for verifying income, eligibility and amount of medical

Disagree

Agree

Logging in to PSYCKES

User characteristics survey



Please complete this form, you will only need to do this once. Thank you.

Role Details

Primary Role in Agency

License Details

Yes No Do you have a state License

License Number :

Profession:

Responsibilities Details

Yes No Are you Local Security Manager

Yes No Are you on project QI Team

Yes No Do you provide any direct patient care

Yes No Do you write prescriptions for clients at this agency

Yes No Do you have clinical supervisory responsibilities

Yes No Do you have administrative supervisory responsibilities

Release: 4.5.1

Your PSYCKES Homepage

QI Overview Screen:

Performance on measures with regional & state comparators

Agency Reports
Mapping
Regional Reports
Recipient Search
MyPSYCKES
Trending Reports
Registrar Menu

[Log Off](#)
 De-Identify Data

Quality Indicator Overview As Of 7/1/2011 Agency Details Find Agency Trending Export PDF Excel

Agency: **Main Street Community Services**

Sites: All Prescriber: All

Age: All Program Type: All Show new/dropped for last: 1 Month 3 Months Reset

Selected Indicator: [Select Indicator Type for Details](#) Indicator Type: All Report View Type: Report Only Graph Only Both

Indicator Type

Indicator Type	Population	On Any	N	%	Regional %	Statewide %
Cardiometabolic	All	506	125	24.70	43.96	43.56
Polypharmacy	All	704	153	21.73	16.08	16.84
Youth Indicator	Child	0	0	0.00	21.93	27.05
Dose	All	969	68	7.02	7.83	8.15
Care Monitoring	All	0	42	0.00	0.00	0.00
Preventable Hospitalization	Adult	1,730	25	1.45	1.81	1.39
High Utilization - Inpt/ER	All	1,730	72	4.16	10.29	10.20
Readmission	All	151	19	12.58	19.20	17.15

Indicator Type	Agency (%)	Regional (%)	Statewide (%)
Cardiometabolic	24.70	43.96	43.56
Polypharmacy	21.73	16.08	16.84
Youth Indicator	0.00	21.93	27.05
Dose	7.02	7.83	8.15
Preventable Hospitalization	1.45	1.81	1.39
High Utilization - Inpt/ER	4.16	10.29	10.20
Readmission	12.58	19.20	17.15

Release: 4.3.4

Drill Down on Indicator Set (e.g. 4+ Inpt/ER) to Individual Measures (e.g. BH, Medical, All)

Log Off De-Identify Data

Agency Reports Mapping Regional Reports Recipient Search MyPSYCKES Trending Reports Registrar Menu

Quality Indicator Overview As Of 7/1/2011 Agency Details Find Agency Trending Export PDF Excel

Agency: **Main Street Community Services**

Sites: All Prescriber: All

Age: All Program Type: All Show new/dropped for last: 1 Month 3 Months Reset

Selected Indicator: High Utilization - Inpt/ER Indicator Type: High Utilization - Inpt/ER Report View Type: Report Only Graph Only Both

Indicator	Population	On Any	N	%	Regional %	Statewide %
4+ Inpatient/ER - Med	All	1,730	43	2.49	7.14	7.20
4+ Inpatient/ER - Psych	All	1,730	14	0.81	3.34	2.79
4+ Inpatient/ER - All	All	1,730	72	4.16	10.29	10.20

Indicator	Agency (%)	Regional (%)	Statewide (%)
4+ Inpatient/ER - Med	2.49	7.14	7.20
4+ Inpatient/ER - Psych	0.81	3.34	2.79
4+ Inpatient/ER - All	4.16	10.29	10.20

Release: 4.3.4

Quality Indicators Link to List of Flagged Clients

PSYCKES MEDICAID New York State **om** Office of Mental Health

Log Off De-Identify Data

Agency Reports Mapping Regional Reports Recipient Search MyPSYCKES Trending Reports Registrar Menu

Quality Indicator Overview As Of 7/1/2011 Agency Details Find Agency Trending Export PDF Excel

Agency: **Main Street Community Services**

Sites: All Prescriber: All

Age: All Program Type: All Show new/dropped for last: 1 Month 3 Months Reset

Selected Indicator: 4+ Inpatient/ER - All Indicator Type: High Utilization - Inpt/ER

Indicator Type	Indicator	Site	Unduplicated Prescriber	Unduplicated Recipients	New QI Flag	Dropped QI Flag
	Recipient ^	Medicaid ID	DOB	Quality Flags	Medications	
	Aaeqefa Icfacbc	Dgicfb Afafbbh	10/24/1947	2AP,CMN-ER/InPt,Readmit-Psy 30d,4+ Inpt/ER-Psych,4+ Inpt/ER-All	CLONAZEPAM, ZOLPIDEM TARTRATE, RISPERIDONE, HALOPERIDOL	
	Abefiqi Cagfaf	Cicqhc Bbaigdd	1/24/1955	4+ Inpt/ER-All,HL,HTN,DM,CVD	CLONAZEPAM, NICOTINE POLACRILEX, QUETIAPINE FUMARATE, NICOTINE, ZOLPIDEM TARTRATE, NICOTINE POLACRILEX	
	Abhdbae Ficfefd	Ccfidcb Gdbibca	8/21/1974	2AP,4+ Inpt/ER-Med,4PP(A),PrevHosp-Asthma,4+ Inpt/ER-All	FLUPHENAZINE HCL, CLONAZEPAM, BUPROPION HCL, ARIPIPRAZOLE, TOPIRAMATE	
	Adhfhae Efidqcb	Eaeiaac Ijiadai	12/21/1946	4+ Inpt/ER-All,4PP(A),4+ Inpt/ER-Psych	PAROXETINE HCL, METOPROLOL TARTRATE, CLONAZEPAM, TRAZODONE HCL, ARIPIPRAZOLE, MIRTAZAPINE	
	Aeacaea Fdcccde	Cccfafh Ieafca	2/22/1959	4+ Inpt/ER-All		
	Afbebec Fhdbebh	Ffacehd Iereine	8/2/1959	4+ Inpt/ER-All,4+ Inpt/ER-Med	ATENOLOL, DIPHENHYDRAMINE HCL	

Recipient Search:

Find an individual (search by name, ID)

Find a cohort (search by demographics, diagnoses, physician, medication or services received, MCO, or QI flag)

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Log Off De-Identify Data

Agency Reports Mapping Regional Reports **Recipient Search** MyPSYCKES Trending Reports Registrar Menu

Export PDF Excel

Recipient Search

Search for Consented Recipients:

Recipient Last Name: Age Range: Region:

Medicaid Id: Indicator:
Antipsychotic Three Plus
Antipsychotic Two Plus
Antidepressant Three Plus
Antidepressant Two Plus - SC
Psychotropics Four Plus
Psychotropics Three Plus
Cardiometabolic Risk Summary

Prescriber Last Name: County:

Drug Name: Provider:

Active Drug: OMH Lic. Programs:

Service:

Service Details:

Managed Care Program:

Psychotropic Drug Class:
Antipsychotic
Anxiolytic
Mood Stabilizer
Side-Effect Management
Stimulant
Withdrawal Management

Non-Psychotropic Drug Class:
Anti-Infective Agents
Anti-Obesity Agents
Antidiabetic
Antihyperlipidemic
Antihypertensive
Antineoplastic Agents
Biologicals

Mental Health Diagnosis:
Anxiety Disorder
Attention Deficit Disorder
Autism & Pervasive Developmental Disorder
Bipolar Disorder
Conduct Disorder
Delusional Disorder
Dissociative Disorder

Medical Diagnosis:
Alcohol Related Organic Mental Disorder
Certain Conditions Originating in the Perinatal Period
Complications of Pregnancy, Childbirth, and the Puerperium
Congenital Anomalies
Diabetes
Diseases of Skin and Subcutaneous Tissue
Diseases of the Blood and Blood-Forming Organs

Maximum No. Of Rows to be displayed:

Release: 4.5.1

Search Results

Click on Recipient Name >> Clinical Summary

PSY KES MEDICAID New York State **om** Office of Mental Health

[Log Off](#) De-Identify Data

Agency Reports Mapping Regional Reports **Recipient Search** MyPSYCKES Trending Reports Registrar Menu

Recipient Search Export PDF Excel

Selection Criteria: Total No. Of Recipients = **15096** Maximum Number of rows Displayed = 50

Agency: [Modify Search](#)

Name ▲	Medicaid ID	DOB	Gender - Age	Quality Flags
Aaaaaij Ciidbcj	Chjadhj Jffdbdf	1/26/1957	F - 55	
Aaaaaij Ciidbcj	Aiabjaf Hhieej	4/7/1957	M - 54	
Aabbfda Ibhqqce	Dafbacd Cfceffb	3/21/1979	M - 32	
Aabdiqi Jebcbaa	Efeccac Ebjcbij	7/18/2005	M - 6	
Aabdicc Dfbehb	Eijagib Fbcfffe	6/14/1947	F - 64	
Aabebaq Adedicd	Eeigdbj Jcffiea	10/4/1950	M - 61	
Aabebaq Adedicd	Gcdbeff Affhbgd	8/7/1966	M - 45	
Aabebaq Adedicd	Hhagfcg Gcaeece	10/6/1981	M - 30	4+ Inpt/ER-Med,4+ Inpt/ER-All
Aabeebc Gcqqiff	Fiadbbf Ecbggac	5/27/1949	M - 62	

Release: 4.5

Clinical Summary Unavailable

No access without consent or quality flag

The screenshot shows the PSYCKES MEDICAID web application interface. At the top left is the logo for PSYCKES MEDICAID. At the top right is the New York State Office of Mental Health (omh) logo with a 'Log Off' button. Below the header is a navigation bar with links for Agency Reports, Regional Reports, Recipient Search, Common Ground, and MyPSYCKES Info. On the right side of the navigation bar is a 'De-Identify Data' checkbox which is checked. The main content area is titled 'Summary' and includes a 'Return to Search Results' button. Below the title is a red text prompt: 'Please choose summary period'. Underneath this prompt are five buttons: 'Last 3 months', 'Last 6 months', 'Last Year', 'Last 2 Years', and 'All Available (up to 5 years)'. A red arrow points from the bottom left towards the red text prompt. Below the buttons is a message: 'Client level data is available only for individuals with a quality flag or those who have provided written consent. Your Agency has not yet enrolled for PSYCKES Consent module training and access.' At the bottom center of the page is the text 'Release: 4.2.7'.

PSYCKES MEDICAID

New York State
omh
Office of Mental Health

Log Off

Agency Reports Regional Reports Recipient Search Common Ground MyPSYCKES Info

De-Identify Data

Summary

Return to Search Results

Please choose summary period

Last 3 months Last 6 months Last Year Last 2 Years All Available (up to 5 years)

Client level data is available only for individuals with a quality flag or those who have provided written consent. Your Agency has not yet enrolled for PSYCKES Consent module training and access.

Release: 4.2.7

Clinical Summary

- Header
- Integrated view of all services (graph and table)
- Service Summary Tables by category
 - Medications: BH, medical
 - Outpatient services: BH, medical
 - Inpatient/ER services
 - Dental and Vision
 - Living Support
 - Lab/ Xray
 - Transportation
- Summary Table links to individual claims/encounters (“See All Data”)
- Can print or save as PDF or excel

Clinical Summary Header:

Report date, level of access, select time frame, Name, DOB, Age, MCO, Quality Flags, Diagnoses

PSYCKES MEDICAID New York State **omh** Office of Mental Health

[Log Off](#) De-Identify Data

Agency Reports Mapping Regional Reports Recipient Search MyPSYCKES Trending Reports Registrar Menu

Summary

[Common Ground](#) [Return to Search Results](#) Export to [PDF](#) [Excel](#)

Please choose summary period

[Last 3 months](#) [Last 6 months](#) [Last Year](#) [Last 2 Years](#) [All Available \(up to 5 years\)](#)

Clinical Report Date: 10/12/2011 (This report contains all available clinical data, including Substance Abuse, HIV and Family Planning Information.)

Name: Acahcij Beadeaj Medicaid ID: FFBHHD IADFHC DOB: 11/13/1961 Age: 49 Years

Quality Flag	Quality Flag Evidence
Hospital ER utilization	Psychiatric ER/Inpt, Medical ER/Inpt, [11 ER/Hosp Visits in last Year]

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

Mental Disorders, Substance Abuse, Schizoaffective Disorder, Other Psychotic Disorder, Bipolar Disorder, Major Depressive Disorder, Schizophrenia, Personality, Impulse Control Disorders

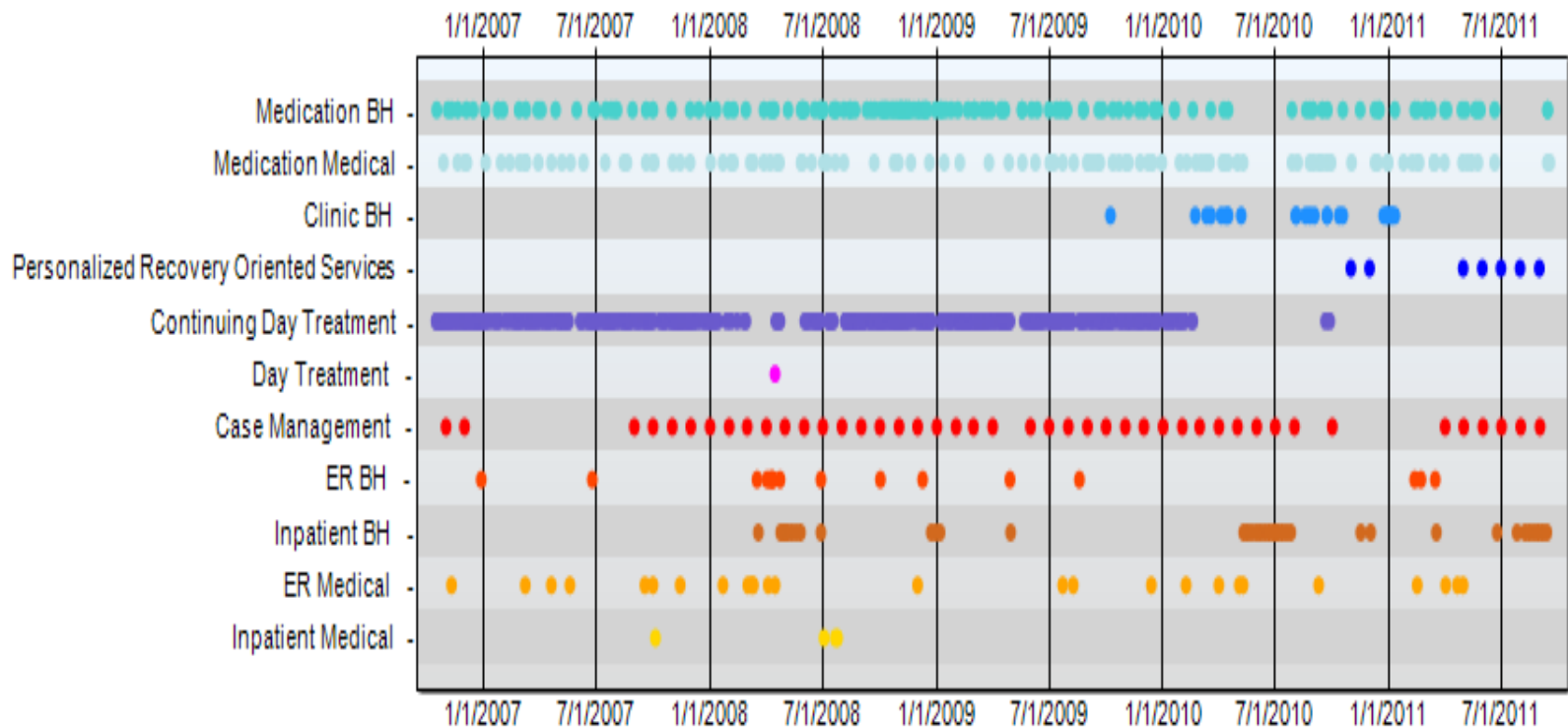
Medical Diagnoses - Primary and Secondary Dx (Most Recent Shows First)

Endocrine, Nutritional, And Metabolic Diseases And Immunity Disorders	Thyroid disorders
Infectious And Parasitic Diseases	Mycoses
Injury And Poisoning	Open wounds of head; neck; and trunk Open wounds of extremities
Neoplasms	Benign neoplasm of uterus
Symptoms, Signs, And Ill-Defined Conditions	Residual codes; unclassified Other gastrointestinal disorders Other lower respiratory disease Abdominal pain Other upper respiratory disease

Clinical Summary: Integrated View of All Services

Integrated View of Services Over Time

View: Graph Data

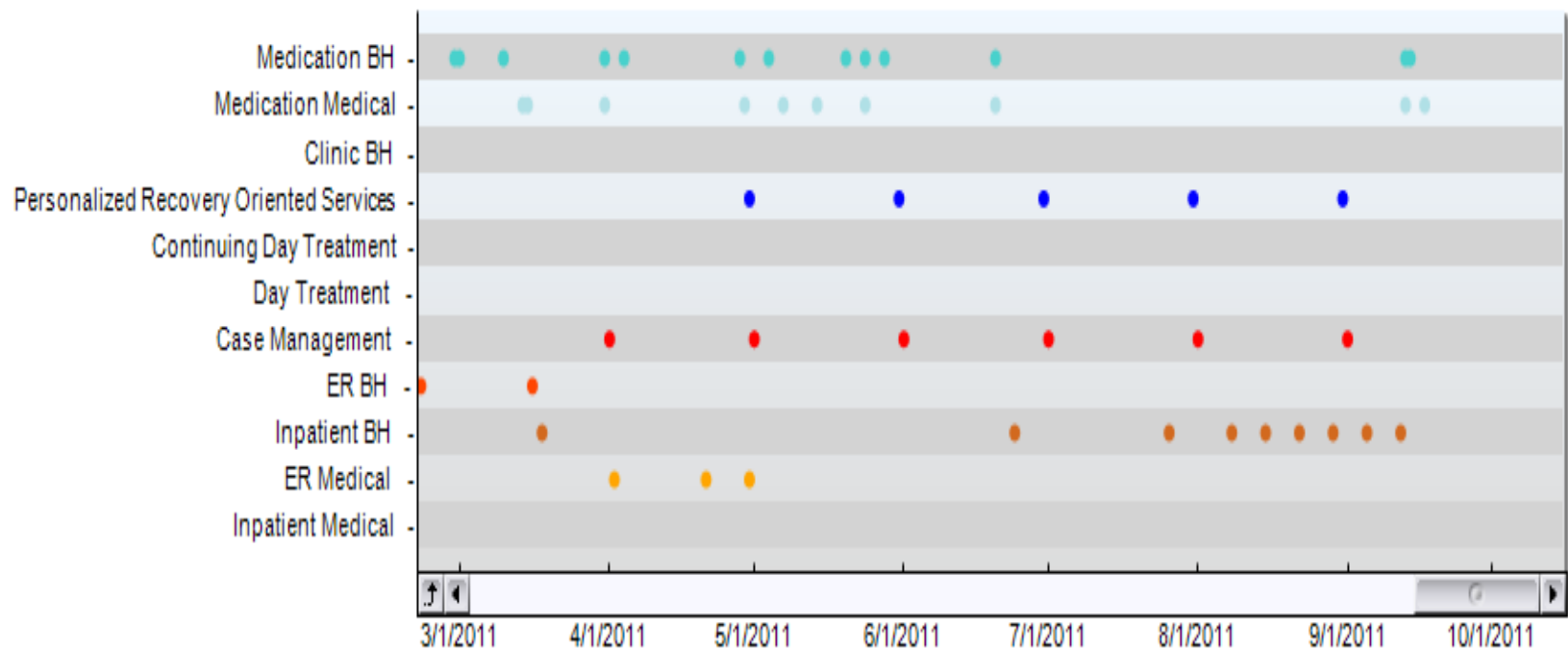


Graph allows for rapid identification of utilization patterns, including medication adherence, outpatient and inpatient services.

Zoom on Period of Interest

Integrated View of Services Over Time

View: Graph Data



Hovering the cursor over an individual record will show date and place of service.

Integrated View as Table


Integrated View of Services Over Time

View: Graph Data











Date of Service	Service Type	Service Subtype	Provider Name	Procedure/Medication	Diagnosis
9/13/2011	Medication	Medication - BH	<u>Ajayi Bamidele Anuoluwa</u>	Divalproex Sodium [1000MG]	
9/13/2011	Medication	Medication - Medical	<u>Ajayi Bamidele Anuoluwa</u>	Levothyroxine Sodium [125MCG]	
9/12/2011	ER & Inpatient	Inpatient BH	<u>Bronx Lebanon Hospital Center</u>		Schizo-Affective Type Schizophrenia, Chronic State [295.72]
9/5/2011	ER & Inpatient	Inpatient BH	<u>Bronx Lebanon Hospital Center</u>		Unspecified Psychosis [298.9]
	Community Support/Care		Bronx Lebanon		Bipolar Affective Disorder, Mixed.

Medications: Psychotropics

Drug, dose, duration, start date, last pick up, prescriber













Psychotropic Medication 

[See All Data](#)

Brand Name	Generic Name	Last Dose	Estimated Duration	First Day Picked Up	Last day Picked Up	Active in Past Month	Most Recent Prescriber	See Detail
Clonazepam	Clonazepam	1 MG	1 Month(s)	9/14/2011	9/14/2011	Yes	Ajayi Bamidele Anuoluwa	
Divalproex Sodium	Divalproex Sodium	1000 MG	1 Month(s)	9/13/2011	9/13/2011	Yes	Ajayi Bamidele Anuoluwa	
Geodon	Ziprasidone Hcl	160 MG	1 Month(s)	9/13/2011	9/13/2011	Yes	Ajayi Bamidele Anuoluwa	
Mirtazapine	Mirtazapine	45 MG	1 Month(s)	9/13/2011	9/13/2011	Yes	Ajayi Bamidele Anuoluwa	
Trazodone Hcl	Trazodone Hcl	100 MG	1 Month(s)	9/13/2011	9/13/2011	Yes	Ajayi Bamidele Anuoluwa	
Divalproex Sodium	Divalproex Sodium	1000 MG	7 Month(s)	12/9/2010	6/20/2011	No	Eder Paul Thomas	
Seroquel Xr	Quetiapine Fumarate	900 MG	11 Month(s)	7/28/2010	5/28/2011	No	Eder Paul Thomas	
Clonazepam	Clonazepam	1 MG	11 Month(s)	7/28/2010	5/24/2011	No	Cozort Marina	
Fluphenazine Hcl	Fluphenazine Hcl	10 MG	1 Month(s)	3/31/2011	3/31/2011	No	Stroupe Samuel Timothy	
Mirtazapine	Mirtazapine	15 MG	4 Month(s)	12/9/2010	3/10/2011	No	Eder Paul Thomas	
Nicotine	Nicotine	21 MG/24HR	1 Month(s)	2/16/2011	2/16/2011	No	Wassermann Jonathan S	
Benzotropine Mesylate	Benzotropine Mesylate	4 MG	6 Month(s)	7/28/2010	12/15/2010	No	Shah Ketki Sharadkumar	

Pharmacy Data: Medical

Drug, dose, duration, start date, last pick up, prescriber

Non-Psychotropic Medication 								
Brand Name	Generic Name	Last Dose	Estimated Duration	First Day Picked Up	Last day Picked Up	Active in Past Month	Most Recent Prescriber	See Detail
Miconazole Nitrate	Miconazole Nitrate	12.86 %	1 Month(s)	9/17/2011	9/17/2011	Yes	Clark Mark Andrew	
Levothyroxine Sodium	Levothyroxine Sodium	125 MCG	1 Month(s)	9/13/2011	9/13/2011	Yes	Ajayi Bamidele Anuoluwa	
Levothyroxine Sodium	Levothyroxine Sodium	125 MCG	1 Yr	7/28/2010	6/20/2011	No		
Nabumetone	Nabumetone	1000 MG	1 Month(s)	6/20/2011	6/20/2011	No		
Ventolin Hfa	Albuterol Sulfate	MCG/ACT	2 Month(s)	5/24/2011	6/20/2011	No	Beach Paul Walter Jr	
Fluocinonide	Fluocinonide	.3 %	1 Month(s)	5/24/2011	5/24/2011	No	London Karyn J	
Permethrin	Permethrin	300 %	1 Month(s)	5/24/2011	5/24/2011	No	London Karyn J	
Qvar	Beclomethasone Dipropionate	11.6 MCG/ACT	1 Month(s)	5/24/2011	5/24/2011	No	London Karyn J	
Clotrimazole	Clotrimazole	3 %	1 Month(s)	5/14/2011	5/14/2011	No	Gharib Shahin A	
Famotidine	Famotidine	40 MG	1 Month(s)	5/7/2011	5/7/2011	No	Mason Chilembwe M	

Drill Down from Medication Trials to Individual Prescriptions: Dose, Quantity, Tabs/day, Days supply, Route, Prescriber, Pharmacy

Rx detail for ALL Psychotropic Medication

View: Trials Orders Both

Page Orientation: Portrait Landscape

Export to PDF Excel

Trials :

Brand Name	Generic Name	Drug Class	First Day Picked Up	Last Day Picked Up	Estimated Duration
Clonazepam	Clonazepam	Anxiolytic	9/14/2011	9/14/2011	1 Month(s)
Divalproex Sodium	Divalproex Sodium	Mood Stabilizer	9/13/2011	9/13/2011	1 Month(s)
Trazodone Hcl	Trazodone Hcl	Antidepressant	9/13/2011	9/13/2011	1 Month(s)
Geodon	Ziprasidone Hcl	Antipsychotic	9/13/2011	9/13/2011	1 Month(s)
Mirtazapine	Mirtazapine	Antidepressant	9/13/2011	9/13/2011	1 Month(s)

Orders :

Pick-Up Date	Brand Name	Generic Name	Drug Class	Strength	Total Quantity	Tabs Per Day	Days Supply	Route
9/13/2011	Divalproex Sodium	Divalproex Sodium	Mood Stabilizer	500 MG	30	2	15	OR
9/13/2011	Geodon	Ziprasidone Hcl	Antipsychotic	80 MG	30	2	15	OR
9/13/2011	Mirtazapine	Mirtazapine	Antidepressant	45 MG	15	1	15	OR










Outpatient BH Services Summary:

Type of service, Provider, Date of First and Last, # of visits, Diagnosis, Procedures, Practitioner, “See all Data” > Links to each invoice/claim

Behavioral Health Services		See All Data						
Service Type	Provider	First Date Billed	Last Date Billed	# of Visits	Diagnosis Most Recent	Procedure(s)	Practitioner	See Provider Detail
Case Management	BRONX LEBANON HOSPITAL SCM	9/1/2007	9/1/2011	42	Bipolar Disorder			
PROS	POST GRAD CNTR FOR MENTAL HIT	10/31/2010	8/31/2011	10	Major Depressive Disorder	- Medication Management		
Physician - Psychiatrist	ELDEFRAWI MOHAMED HASSIB	8/15/2011	8/16/2011	2	Schizophrenia	- Subsequent Hospital Care		
Physician - Psychiatrist	NWOKEJI KINGSLEY OKECHUKWU MD	8/9/2011	8/14/2011	2	Schizoaffective Disorder	- Subsequent Hospital Care		
Physician - Psychiatrist	FRISCHER KATYA MD	8/12/2011	8/12/2011	1	Schizoaffective Disorder	- Subsequent Hospital Care		
Physician - Psychiatrist	SENOSIAN JAVIER MD	3/27/2011	3/27/2011	1	Schizoaffective Disorder	- Psytx Hosp 20-30 Min		
Physician - Psychiatrist	HESS RICHARD LAWRENCE MD	3/19/2011	3/19/2011	1	Schizoaffective Disorder	- Psytx Hosp 45-50 Min W/E&M		
Physician-NO S	MANTILLA FANNY JANETH DO	2/21/2011	2/21/2011	1	Schizophrenia	- Emergency Dept Visit	Szabo Edith Gyongyi	
OASAS Outpatient	MARTIN LUTHER	12/23/2010	1/10/2011	6	Mental Disorders	- Group Psychotherapy - Psytx Office 20-30 Min	Villar Ofelia	










Outpatient Medical Services

Type of service, Provider, Date of First and Last, # of visits, Diagnosis, Procedures, Practitioner, "See all Data" > Links to each invoice/claim

Medical Services 		See All Data					
Service Type	Provider	First Date Billed	Last Date Billed	# of Visits	Most Recent Diagnosis	Procedure(s)	See Provider Detail
Medical Clinic - DTC	BRONX LEBANON HOSPITAL CENTER	9/22/2008	6/20/2011	25	Schizophrenia	<ul style="list-style-type: none"> - Routine Venipuncture - Tb Intradermal Test - Office/Outpatient Visit Est - X-Ray Exam Of Knee 3 - Assay Thyroid Stim Hormone - Tissue Exam By Pathologist - Assay Dipropylacetic Acid - Assay Of Serum Albumin - Office/Outpatient Visit New 	
Physician-NO S	STILLER, LUIS F MD	4/30/2011	4/30/2011	1	Injury And Poisoning	<ul style="list-style-type: none"> - Emergency Dept Visit 	
Medical Clinic - DTC	NEW YORK NEURO AND REHAB CTR	12/14/2007	4/29/2011	19	Neoplasms	<ul style="list-style-type: none"> - Office Consultation - Office/Outpatient Visit Est 	
Medical Clinic - DTC	PRESBYTERIAN HSP CITY OF NY	9/30/2008	4/12/2011	12	Schizophrenia	<ul style="list-style-type: none"> - Office/Outpatient Visit Est - Hepatic Function Panel - Office/Outpatient Visit New 	
Medical Clinic - DTC	ST LUKES ROOSEVELT HSP CTR	7/27/2006	4/4/2011	25	Symptoms, Signs, And Ill-Defined Conditions	<ul style="list-style-type: none"> - Office/Outpatient Visit New - Office/Outpatient Visit Est - Therapeutic Activities 	
Physician-NO S	WILSON GABRIEL ROLAND MD	5/20/2007	4/2/2011	2	Symptoms, Signs, And Ill-Defined Conditions	<ul style="list-style-type: none"> - Emergency Dept Visit 	
Physician - Psychiatrist	JACKSON ARTHUR CRAWFORD MD	2/21/2011	2/21/2011	1	Substance Abuse	<ul style="list-style-type: none"> - Office Consultation 	
Physician-NO	WASSERMANN JONATHAN	2/15/2011	2/15/2011	1	Diseases Of The	<ul style="list-style-type: none"> - Emergency Dept Visit 	

Inpatient and ER Services


Service Type (ER or Inpt, BH or Medical), Hospital Name, Date of First and Last ER/Inpatient Admission, # of Admits, Last Diagnosis, Procedures, "See all Data" > Links to each invoice/claim

Hospital/ER Services		See All Data					
Service Type	Provider	First Date Billed	Last Date Billed	# of Visits	Most Recent Diagnosis	Procedure(s)	See Provider Detail
Inpatient BH	BRONX LEBANON HOSPITAL CENTER	7/13/2006	9/12/2011	5	Schizophrenia		
Inpatient BH	BELLEVUE HOSPITAL CENTER	6/24/2011	7/26/2011	1	Schizoaffective Disorder		
ER Medical	BRONX LEBANON HOSPITAL CENTER	4/30/2011	4/30/2011	1	Injury And Poisoning	- Ther/Proph/Diag Inj Sc/Im	
ER Medical	ST LUKES ROOSEVELT HSP_CTR	7/10/2006	4/21/2011	22	Symptoms, Signs, And Ill-Defined Conditions	- Emergency Dept Visit	
Inpatient BH	LUTHERAN MEDICAL CENTER PSYCH UNIT	3/18/2011	3/18/2011	1	Schizophrenia		
ER BH	LINCOLN MEDICAL/MENTAL HLTH	4/4/2006	3/16/2011	8	Schizophrenia	- Emergency Dept Visit - Psy Dx Interview - Ther/Proph/Diag Inj, Sc/Im	
ER BH	ST BARNABAS HOSPITAL	10/2/2008	2/21/2011	3	Schizophrenia	- Assay Carbamazepine Total - Emergency Dept Visit	
CPEP	BRONX LEBANON HOSPITAL CENTER	4/11/2008	2/11/2011	3	Schizophrenia	- Emergency Dept Visit - Assay Of Calcium - Drug Screen Qualitate/Multi	
Inpatient BH	LONG ISLAND JEWISH MED_CTR	11/16/2010	12/2/2010	1	Schizoaffective Disorder		

Labs, Dental & Vision, Living Support


Dental and Vision

[See All Data](#)

 No Medicaid claims for this data type in the past 1 year








Living Support (Medicaid-billable)

[See All Data](#)

 No Medicaid claims for this data type in the past 1 year

Lab & X-Ray

[See All Data](#)

Program/Type	Test Name	Date Billed	Provider	See Test Detail
X-RAY	COMPUTED TOMOGRAPHY, ABDOMEN; WITH CONTRAST MATERIAL(S)	4/2/2011	BASHIST BENJAMIN MD	
X-RAY	COMPUTED TOMOGRAPHY, PELVIS; WITH CONTRAST MATERIAL(S)	4/2/2011	BASHIST BENJAMIN MD	
X-RAY	ULTRASOUND, PELVIC (NONOBSTETRIC), REAL TIME WITH IMAGE DOCUMENTATION; COMPLETE	3/19/2011	NGUYEN WILLIAM MD	
X-RAY	ULTRASOUND, TRANSVAGINAL	3/19/2011	NGUYEN WILLIAM MD	
X-RAY	RADIOLOGIC EXAMINATION, CHEST, TWO VIEWS, FRONTAL AND LATERAL;	2/15/2011	SELIGER GUSTAV MD	
X-RAY	RADIOLOGIC EXAMINATION, CHEST, TWO VIEWS, FRONTAL AND LATERAL; WITH OBLIQUE	11/24/2010	RAHMANI NAVID MD	
X-RAY	MAGNETIC RESONANCE (EG, PROTON) IMAGING, ANY JOINT OF LOWER EXTREMITY; WITHOUT	10/22/2010	MALDJIAN TAOUKIE CATHERINE MD	

Transportation

[See All Data](#)

First Date of Service

Number of

Export Data to PDF or Excel

All reports, all screens can be exported to PDF or excel

The screenshot shows the PSYCKES MEDICAID website interface. At the top left is the logo for PSYCKES MEDICAID. At the top right is the New York State Office of Mental Health (omh) logo with a "Log Off" button. Below the logos is a navigation menu with tabs for Overview, News, Quality Indicators, Demo, Education and Training, Forms, Advisory Committees, FAQ, and Contact Us. A secondary navigation bar includes Agency Reports, Mapping, Regional Reports, Recipient Search, Common Ground, Trending Reports, Registrar Menu, and MyPSYCKES Info. A "De-Identify Data" checkbox is checked. The main content area is titled "Summary" and includes a "Common Ground" button and a "Return to Search Results" button. There are "Export to PDF" and "Export to Excel" buttons. A red arrow points to the "Export to PDF" button. Below the summary is a section for "Please choose summary period" with buttons for "Last 3 months", "Last 6 months", "Last Year", and "Last 2 Years". A "Latest" link is also visible. Patient information is displayed: Patient Name: Iaaecie Fffbijd, Medicaid ID: BHFBDHF DFEADAI, and DOB: 11/29/1954. A table shows quality flags and evidence:

Quality Flag	Quality Flag Evidence
Cardiometabolic	Drug (Olanzapine) and Cardiometabolic Condition (Hyperlipidemia, Hypertension, Obesity)
Polypharmacy	Antipsychotic Two Plus, Psychotropics Four Plus (Clonazepam + Divalproex Sodium + Haloperidol + Olanza

Below the table is a section for "Mental Health Diagnoses (Most Recent Shows First)" with a "Diagnosis" sub-section containing "Schizoaffective Disorder". Another section for "Medical Diagnoses (Most Recent Shows First)" is partially visible. An "Export Options" dialog box is open, showing "Sections" with radio buttons for "All" (selected) and "Selected". Under "Selected", there are checkboxes for "Quality Flag", "Mental Health Diagnoses (Most Recent Shows First)", "Medical Diagnoses (Most Recent Shows First)", "Psychotropic Medication", and "Non-Psychotropic Medication". The dialog box has "Export" and "Cancel" buttons. A red arrow points to the "Export" button.

Value of PSYCKES Data

- Evaluation and treatment planning
- Medication reconciliation
- Coordination of care across clinical settings
- Assess medication compliance
- Identify utilization patterns (high use, readmission)
- Discharge planning
- Timely – weekly updates

Limitations of PSYCKES Data

- Accuracy dependent on coding and billing
- Data elements limited to what is shown on claims
 - e.g. See labs/ x-rays but without results
- Time lag between services and billing is variable
 - Service data may lag by weeks or months
- Client data affected by changes in eligibility, moves, hospitalizations (bundled services).

PSYCKES CONSENT MODULE

Accessing Client Data

Client Level Data Access

Context	Data includes SUD, HIV, Family Planning?	Duration
Quality Flag	No	As long as flag is active; up to 9 months after last service
Clinical Emergency	Yes	72 hours
Consent	Yes	3 years after last service

What is an Emergency?

New York State Public 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.

Consent Process in Hospital Workflow

- Hospital staff obtain written consent from clients OR determine that it is a clinical emergency.
 - Use PSYCKES consent form (English and Spanish)
 - Clinical emergency
- Designated registrar uses Consent Module in PSYCKES to attest to rationale for access to client data (consent or emergency).
- Any PSYCKES user at the hospital can then access client data.

Registrar Menu

PSYCKES MEDICAID

Log Off Office of Mental Health

Agency Reports Mapping Regional Reports Recipient Search Common Ground Trending Reports Registrar Menu MyPSYCKES Info

De-Identify Data

Quality Indicator Overview As Of 10/1/2010

Agency Details Find Agency Trending Export PDF Excel

- Consent Module is accessed through the Registrar Menu
- Registrar Menu tab only appears if the user has been granted PSYCKES-Registrar access.
- Clicking “Registrar Menu” tab opens a new row of tabs.

Consent Module

Consent Forms Menu

PSYCKES MEDICAID

New York State
omh
Office of Mental Health

Log Off

Medicaid Consent Manage MyPsyckes Users Recipient Census **Consent Forms** Administration

Return to Home

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

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

Release: 4.3.4

- PSYCKES Consent Forms
 - Consent and Withdrawal of Consent
 - Available in English and Spanish

Consent Module Administration Tab

The screenshot shows the Psyckes Medicaid web application interface. At the top left is the logo for PSYCKES MEDICAID. At the top right is the New York State Office of Mental Health logo with a "Log Off" button. Below the header is a navigation menu with five tabs: "Medicaid Consent", "Manage MyPsyckes Users", "Recipient Census", "Consent Forms", and "Administration". The "Administration" tab is selected and highlighted with a red arrow. Below the navigation menu is a "Return to Home" button. The main content area is titled "Psyckes Administration Menu" and contains a link "Add/Edit Agency Details for consent form" with a sub-description: "You will use this function to add/edit agency name and phone number displayed in consent form". At the bottom of the page, it says "Release: 4.3.4".

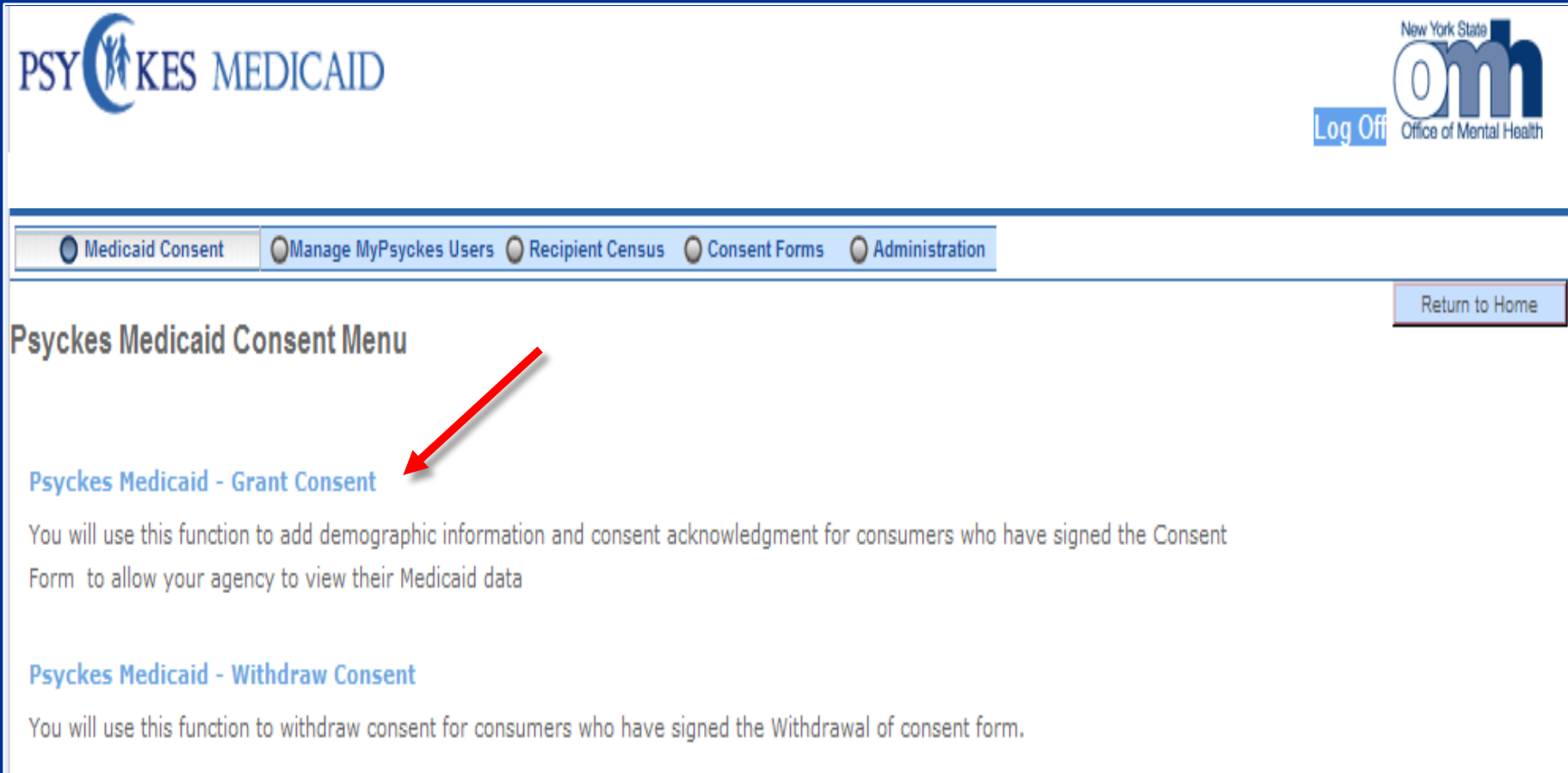
- Add your Hospital name and phone number into the blanks on the consent form
- Revise your Hospital information

Obtaining Consent

- Print out consent form from PSYCKES Consent Forms Menu.
 - This is the only consent form that can be used.
- Discuss consent with client and obtain signature.
- Give one copy of consent form to client, and the original to PSYCKES Registrar.

Using the Consent Module

From Registrar menu, go to Medicaid Consent Menu and click on “Grant Consent”



The screenshot shows the Psyckes Medicaid Consent Menu interface. At the top left is the logo for PSYCKES MEDICAID. At the top right is the New York State Office of Mental Health logo with a "Log Off" button. Below the logos is a navigation bar with five tabs: Medicaid Consent (selected), Manage MyPsyckes Users, Recipient Census, Consent Forms, and Administration. In the top right corner of the main content area, there is a "Return to Home" button. The main content area is titled "Psyckes Medicaid Consent Menu" and contains two menu items: "Psyckes Medicaid - Grant Consent" and "Psyckes Medicaid - Withdraw Consent". A red arrow points to the "Grant Consent" link. Below each link is a brief description of the function.

PSYCKES MEDICAID

New York State
omh
Office of Mental Health

Log Off

Medicaid Consent Manage MyPsyckes Users Recipient Census Consent Forms Administration

Return to Home

Psyckes Medicaid Consent Menu

[Psyckes Medicaid - Grant Consent](#)

You will use this function to add demographic information and consent acknowledgment for consumers who have signed the Consent Form to allow your agency to view their Medicaid data

[Psyckes Medicaid - Withdraw Consent](#)

You will use this function to withdraw consent for consumers who have signed the Withdrawal of consent form.

Step 1: Find the Client

Enter client's Medicaid ID number; click "search."

PSYCHES MEDICAID

Medicaid Consent Menu MyPsyches Consent Menu Recipient Census Consent Forms Administration

[Return to Home](#)

Medicaid Consent - Step 1

Search on Medicaid ID of person to be consented to assure appropriate person is selected

Medicaid ID:

Search Results:

Medicaid ID:

Name

Address

City State Zip

DOB (MM/DD/YYYY) Age Sex

Is this the correct person for which you want to consent:

Confirm Search Results

Correct name, age, gender, address?

PSYCKES MEDICAID

Medicaid Consent Menu MyPsyckes Consent Menu Recipient Census Consent Forms Administration

[Return to Home](#)

Medicaid Consent - Step 1

Search on Medicaid ID of person to be consented to assure appropriate person is selected

Medicaid ID:

Search Results:


Medicaid ID:

Name

Address

City State Zip

DOB (MM/DD/YYYY) Age Sex

Is this the correct person for which you want to consent: 

PSYCKES will ask Registrar to verify that client's information is correct. If not, click no to start over; if correct, click yes to continue

Step 2: Attest to Right to Access Data consent or clinical emergency

[Return to Home](#)

Medicaid Consent - Step 2

Attestation for right to access client's Medicaid data:

ER setting or clinical emergency

--OR--

Consumer signed the consent Form

Medicaid Consent - Step 3

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

Identification 2 :
Select from drop-down list

Submit and go to client Clinical Report Submit and Quit Quit and do not submit


Two red arrows originate from the right side of the form. One arrow points to the checkbox for 'ER setting or clinical emergency' in Step 2. The other arrow points to the checkbox for 'Service Provider attests to client identity' in Step 3.

Step 3: Confirm Client Identification

Select forms of ID from drop-down list, or if known to setting can attest to identity without ID

Medicaid Consent - Step 3


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;
- Student ID that is verified to be current and valid.

Submit and Quit OR Submit and Go to Clinical Summary

[Return to Home](#)

Medicaid Consent - Step 2

Attestation for right to access client's Medicaid data:

ER setting or clinical emergency

--OR--

Consumer signed the consent Form

Medicaid Consent - Step 3

Client has been identified via the following actions:

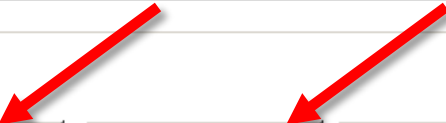
Service Provider attests to client identity

--OR--

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

Identification 1 :

Identification 2 :




Search for Consented Recipients

Once a client is consented, anyone with PSYCKES access can view the client's clinical information.

Agency Reports Mapping Regional Reports **Recipient Search** MyPSYCKES Trending Reports Registrar Menu De-Identify Data

Recipient Search Export PDF Excel

Search for Consented Recipients: 

Recipient Last Name: Age Range: Region:

Medicaid Id: Indicator: County:

Prescriber Last Name: Antidepressant Three Plus
Antipsychotic Two Plus
Antipsychotic Three Plus
Antidepressant Two Plus - SC
Psychotropics Four Plus
Psychotropics Three Plus
Cardiometabolic Risk Summary

Drug Name: OMH Lic. Programs:

Active Drug: Service:

Service Details:

Managed Care Program:

Psychotropic Drug Class:
Antipsychotic
Anxiolytic
Mood Stabilizer
Side-Effect Management
Stimulant
Withdrawal Management

Non-Psychotropic Drug Class:
Anti-Infective Agents
Anti-Obesity Agents
Antidiabetic
Antihyperlipidemic
Antihypertensive
Antineoplastic Agents
Biologicals

Mental Health Diagnosis:
Anxiety Disorder
Attention Deficit Disorder
Autism & Pervasive Developmental Disorder
Bipolar Disorder
Conduct Disorder
Delusional Disorder
Dissociative Disorder

Medical Diagnosis:
Alcohol Related Organic Mental Disorder
Certain Conditions Originating in the Perinatal Period
Complications of Pregnancy, Childbirth, and the Puerper
Congenital Anomalies
Diabetes
Diseases of Skin and Subcutaneous Tissue
Diseases of the Blood and Blood-Forming Organs

Maximum No. of Rows to be displayed:

Search Results

Recipient Search

Export displayed rows to PDF/Excel  Excel 

Selection Criteria: Total No. Of Recipients = 10

Maximum Number of rows Displayed = 50

Agency: Agency 1

Modify Search

Name	Medicaid Id	DOB	Gender	Quality Flags
Fcadedq Afbedbe	Fdhafij Cefbfbc	05/18/1963	M	
Efiachc Beebeqq	Ijeefdd Eagfjec	01/27/1956	F	
Faeceeb Efediab	Ebdafeg Fdbgdbd	05/20/1969	M	
Eaheacd Cdafbdb	Fdefjab Dccjffj	01/17/1992	M	
Gbhbaqf Bdacifc	Bhhdabd Ffeagcb	12/18/2001	F	
Iabfchb Fqjefih	Ddddehc Jcdhbje	11/23/1965	F	
Gfeeaca Becboda	Fbfejbi Fehcjee	03/13/1947	F	
Eijcfbi Cqcbhqd	Haedebe Fbgdgjd	08/30/1966	M	
Cbqeicb Caihaib	Afdajed Behhjdc	07/04/1991	M	

Withdrawal of Consent

- Clients have right to withdraw consent at any time.
- Withdrawal of consent (WOC) form is included on PSYCKES website. This is the form that must be used for withdrawal of consent.
- After client signs WOC form, Registrar uses Withdrawal function in PSYCKES to revoke consent.

Registrar Menu: Withdraw Consent

Psyckes Medicaid Consent Menu

[Psyckes Medicaid - Grant Consent](#)

You will use this function to add demographic information and consent acknowledgment for consumers who have signed the Consent Form to allow your agency to view their Medicaid data

[Psyckes Medicaid - Withdraw Consent](#)

You will use this function to withdraw consent for consumers who have signed the Withdrawal of consent form.

Withdraw Consent: Search by Medicaid ID

PSYCKES MEDICAID

Medicaid Consent Menu MyPsyckes Consent Menu Recipient Census Consent Forms Administration

Return to Home

Withdraw Consent

Medicaid ID:

[Medicaid Consent Menu](#)

Release: 4.2.6

Withdraw Consent: Verify Client ID and Revoke

PSYCKES MEDICAID

Medicaid Consent Menu MyPsyckes Consent Menu Recipient Census Consent Forms Administration

[Return to Home](#)

Withdraw Consent

Medicaid ID:

[Medicaid Consent Menu](#)

Results:

Name	DOB	Address	Medicaid ID	Revoke
Mouse Minnie	05/15/19	7 Goofy Lane, Warnerville NY 13456	AA19 386G	<input type="button" value="Revoke"/>

Withdraw Consent: Confirm

PSYCHOKES MEDICAID New York State **omh** Office of Mental Health

Log Off

Medicaid Consent Manage MyPsyches Users Recipient Census Consent Forms Administration

Return to Home

Withdraw Consent

Medicaid ID:

[Medicaid Consent Menu](#)

Results:

Name	DOB	Address	Medicaid ID	Revoke
DOE JANE	10/31/1980	456 St. Marks Place, Brooklyn, 11217	AB123456XY	<input type="button" value="Revoke"/>

Windows Internet Explorer

Do you wish to revoke the Consent?

Withdraw Consent: Consent Revoked

PSYCKES MEDICAID

Medicaid Consent Menu MyPsyckes Consent Menu Recipient Census Consent Forms Administration

[Return to Home](#)

Consent Revoked for recipient: AB12345XY ←

Withdraw Consent

Medicaid ID:

[Medicaid Consent Menu](#)

Release: 4.2.6

RESOURCES

Resources

- PSYCKES WEBSITE - www.psyckes.org
 - PSYCKES Users' Guide
 - Frequently Asked Questions
 - Recorded Webinars
 - Behavioral Health Inpatient Provider Page
 - Clinical Resources

PSYCKES Website



Behavioral Health Inpatient Providers

[Log Into PSYCKES](#)

[Introduction](#) [Implementation](#) [Using PSYCKES](#) ←

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[Inpatient Providers](#) ←

[Consumers/Families](#)

[FAQ's](#)

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Behavioral Health Inpatient Providers

Overview of Project

The New York State Office of Mental Health is pleased to offer behavioral health inpatient providers access to Psychiatric Services and Clinical Knowledge Enhancement System (PSYCKES). PSYCKES is a web-based portfolio of tools designed to support quality improvement and clinical decision-making in the New York State Medicaid population. Providers can use PSYCKES data for clinical evaluation, treatment planning, coordination of care, and quality improvement. Providers with PSYCKES access have a common platform for viewing the information that is available to Behavioral Health Organizations (BHOs).

News

- The PSYCKES team has developed a series of [webinars](#) to support PSYCKES implementation in hospitals. Please see the [Calendar](#) to register.

Calendar

Date	Time	Title
Thursday, Nov. 17, 2011	11:00 am to 12:00 pm	Introduction to PSYCKES for Behavioral Health Inpatient Providers

PSYCKES Website



Behavioral Health Inpatient Providers

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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](#) (📎 5,717KB) 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](#).

PSYCKES Website



Clinicians

Log Into PSYCKES

About PSYCKES

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Quality Concerns

Initiatives

- Freestanding Clinics
- Hospital Clinics
- Other Initiatives

Resources

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

FAQ's

A to Z Site Map

Quality Concerns Educational Resources Clinical Tools Using PSYCKES

Resources for Clinicians

Overview

The PSYCKES team has developed an array of resources to support clinicians in providing their clients with the most effective treatment services while minimizing the risk of adverse effects. Available resources include information about the PSYCKES quality concerns, tools for clinical practice, and help with using the PSYCKES application.

Calendar

News

- [Scientific Summary #15](#). (📎 62KB) A 2011 randomized controlled trial published in the American Journal of Psychiatry evaluated the benefits and risks of staying on antipsychotic polypharmacy ("stay") vs. switching to monotherapy ("switch"). The majority of the "switch" group was able to successfully transition to monotherapy without significant differences in symptom control compared to the "stay" group. The "switch" group also showed improved body mass index (BMI).

Contact Information

- PSYCKES-Help - PSYCKES-help@omh.ny.gov
 - PSYCKES Application
- OMH Help Desk
800-HELP-NYS (800-435-7697)
 - SMS support
- Contact Us Page – PSYCKES Website

Your Questions?