NEW YORK STATE | Office of Mental Health

New PSYCKES Features Release 8.1.0

We will begin shortly…

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

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

Michelle Rahm
Medical Informatics | PSYCKES
Office of Population Health & Evaluation
August 8, 2024

Q&A via WebEx

- All phone lines are muted
- Access “Q&A” box in WebEx menu at the bottom right of your screen; click on the three horizontal dots and select Q&A option
- Type questions using the “Q&A” feature
  - Submit to “all panelists” (default)
  - Please do not use Chat function for Q&A
- Slides and recording link will be emailed to attendees after the webinar and posted to public website shortly

Agenda

- PSYCKES Overview
- Demonstration of New Features in Release 8.1.0
  - High Fidelity Wraparound – Likely Eligible Flag
  - High Mental Health Need Flag Updates
  - Race & Ethnicity Column in Recipient Search Results
  - Crisis Services Section in Clinical Summary
  - E-Sign Consent Added to Usage Reports
  - Update to Health Home Consent Logic to Include CCOs
  - NYC Region Broken into 5 Counties in Statewide Reports
  - Events/Episode-Based Quality Flags
- Training & Technical Support

PSYCKES Overview

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What is PSYCKES?

- A secure, HIPAA-compliant online application for sharing Medicaid claims and encounter data and other state administrative data
- Designed to support data-driven clinical decision-making, care coordination and quality improvement
- Ongoing data updates
  - Clinical Summary updated weekly
  - Quality Indicator reports updated monthly

Who is Viewable in PSYCKES?

- Over 11 million NYS Medicaid enrollees (currently or past)
  - Fee for service claims
  - Managed care enrollees, all product lines
  - Dual-eligible (Medicare/Medicaid) and Medicaid/Commercial
- Behavioral Health Population (any history of):
  - Psychiatric or substance use service,
  - Psychiatric or substance use diagnosis, OR
  - Psychotropic medication
- Provides all data – general medical, behavioral health, residential

What Data is Available in PSYCKES?

- Clinical Summary provides up to 5 years of data, updated weekly
- All Medicaid FFS claims and Managed Care encounter data, across treatment settings
  - Medications, medical and behavioral health outpatient and inpatient services, ER, care coordination, residential, lab, and more!
- Multiple other state administrative databases (0-7 day lag):
  - New York City Correctional Health Services (CHS)
  - New York City Department of Homeless Services (NYC DHS)
  - Health Home enrollment & CMA provider (DOH MAPP)
  - Managed Care Plan & HARP status (MC Enrollment Table)
  - MC Plan assigned Primary Care Physician (Quarterly, DOH)
  - State Psychiatric Center EMR
  - Assisted Outpatient Treatment provider contact (OMH TACT)
  - Assertive Community Treatment provider contact (OMH CAIRS)
  - Adult Housing/Residential program Information (OMH CAIRS)
  - Suicide attempt (OMH NIMRS)
  - Safety plans/screenings and assessments entered by providers in PSYCKES MyCHOIS
  - IMT and AOT Referral Under Investigation (DOHMH)

Quality Indicators “Flags”

- PSYCKES identifies clients flagged for quality concerns in order to inform the treating provider or care coordinator, and to support clinical review and quality improvement.
- Examples of current quality flags include:
  - Health Home-Related, e.g., Eligible for Health Home Plus, No Health Home Plus Service Past 12 Months, Past 3 Months
  - Medication-Related, e.g., Polypharmacy, Medication Adherence
  - Acute Care Utilization, e.g., High utilization, Readmission
  - General Medical, e.g., No Diabetes Screening Schiz or Bipolar on Antipsychotic, No Outpatient Medical Visit Past Year
  - Performance Tracking, e.g. No Follow-Up After MH Inpatient - 7/30 Days, No Follow-Up After MH ED Visit - 7/30 Days

8.1.0 New Features!

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High Fidelity Wraparound – Likely Eligible Flag

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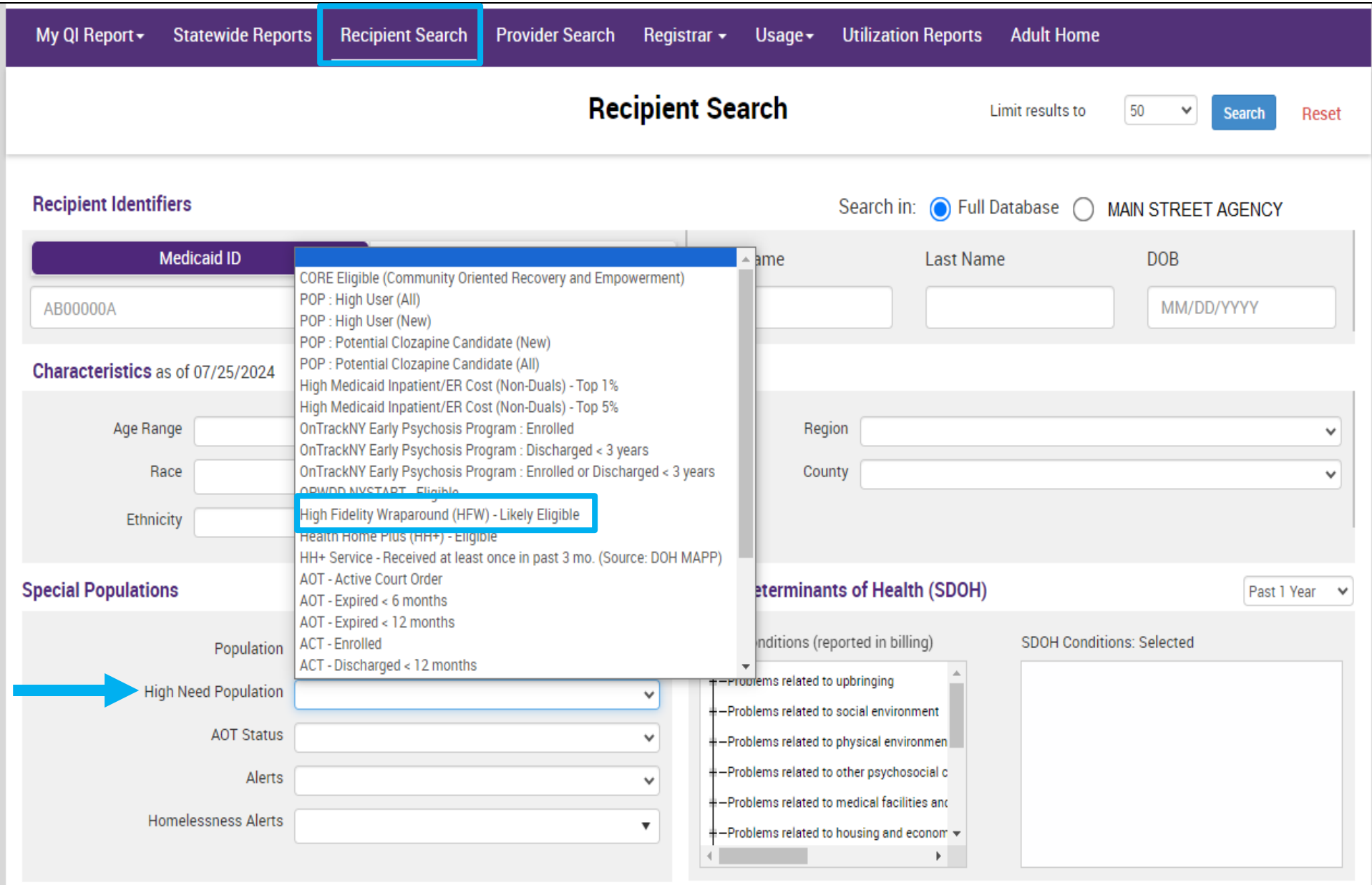
High Fidelity Wraparound – Likely Eligible

- High Fidelity Wraparound (HFW) is a research oriented, evidence-based care management approach that has been proven successful with children with Serious Emotional Disturbance (SED) who have significant cross-system needs
- To identify individuals likely eligible for High Fidelity Wraparound services a new flag has been added to the Recipient Search High Need Population filter dropdown, the High Need/High Risk Advanced View, and the Clinical Summary Notifications section:
  - High Fidelity Wraparound – Likely Eligible
- Updated on a weekly basis

High Fidelity Wraparound – Likely Eligible Criteria

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

High Fidelity Wraparound – Likely Eligible Flag



Modify Search

726 Recipients Found

View: Standard

- Standard
- Care Coordination
- High Need/High Risk
- Hospital Utilization
- Outpatient Providers

PDF Excel

High Need Population: High Fidelity Wraparound (HFW) - Likely Eligible

AND [Provider Specific] Provider: MAIN STREET AGENCY

Maximum Number of Rows Displayed: 500

Name	Medicaid ID	DOB	Gender	Race & Ethnicity	Medicaid Quality Flags	Medicaid Managed Care Plan	Current PHI Access	
QUJJTaFERVIi SqVOWay	SrAsODYnMFe	MSyoN8yoMDEs	TQ LQ OA	Hispanic or Latinx		Fidelis Care New York	No Access	Enable Access
QUJSRVUi QUnMSVNPT6	SrYqNpUqMai	MTAlMTMlM9AnMm	R6 LQ MTA	Hispanic or Latinx	2+ ER-Medical, MH Plcmt Consid	Fidelis Care New York	PSYCKES Consent	
QU3SQUbULA QVNJQQ TQ	RVYnOTInOEl	MTIlM9ElM9AnMQ	R6 LQ MTI	Unknown		Fidelis Care New York	No Access	Enable Access
QUjJTbMi SaFZTEVO	RaqsN9MvMVU	MTIlMT6lM9AnNA	TQ LQ OQ	Unknown		Healthfirst PHSP, Inc.	PSYCKES Consent	
QUnCSUvPSbIi QqFSTEy S6	TberOT6mMra	MTIlM92lM9AnMA	TQ LQ MTM	Hispanic or Latinx	MH Plcmt Consid	Fidelis Care New York	No Access	Enable Access
QUnDQUnBLA QqVEUabDSm QQ	Uq2mOTUpMV2	MTElN8yoMDAp	TQ LQ M9A	Hispanic or Latinx	2+ ER-BH, 2+ ER-MH, 4+ Inpt/ER-BH, 4+ Inpt/ER-MH, Cloz Candidate, HHPlus No HHPlus Service > 12 mos, HHPlus No HHPlus Service > 3 mos, HHPlus Not Entered in MAPP > 3 mos, High MH Need, MH Plcmt Consid, No Engage after MH IP, No MH ED F/U 7d (DOH), No MH ED F/U 7d (DOH) - Adult , No MH ED F/U 7d (DOH) - Child & Adol	HealthPlus	PSYCKES Consent	
QUnJQqVBLA SqFZTEVF RA	RaenMpQuMqE	OSynMSyoMDEq	R6 LQ OQ	Unknown		Fidelis Care New York	No Access	Enable Access
QUnMRUui QUrBTaaS6	UV2oNpEuMEE	MTAlOCyoMDAo	R6 LQ M9E	Black	Adher-AD - Acute (DOH), Adher-AD - Recovery (DOH), HARP No Assessment for HCBS, MH Plcmt Consid	Fidelis Care New York	No Access	Enable Access
QUnMRUui QUvBUrRBUqbB T6	RbEuN9EoMaq	MTIlNCyoMDEr	R6 LQ OA	Black	3PP(Y)		PSYCKES Consent	

Modify Search

726 Recipients Found

View: High Need/High Risk

Excel

	High Need Population	High Fidelity Wraparound (HFW) - Likely Eligible
AND	[Provider Specific] Provider	MAIN STREET AGENCY

Maximum Number of Rows Displayed: 500

Applicable data is displayed only for recipients with consent or ER access.

Name	Current PHI Access	OMH Unsuccessful Discharge	Transition Age Youth (TAY-BH)	OPWDD NYSTART-Eligible	High Fidelity Wraparound – Likely Eligible	Health Home Plus-Eligible
QUJJTaFERVIi SqVOWay	No Access					
QUJSRVUi QUnMSVNPT6	PSYCKES Consent				Yes	
QU3SQUbULA QVNJQQ TQ	No Access					
QUjJTbMi SaFZTEVO	PSYCKES Consent				Yes	
QUnCSUvPSbIi QqFSTEy S6	No Access					
QUnDQUnBLA QqVEUabDSm QQ	PSYCKES Consent		Yes		Yes	Yes
QUnJQqVBLA SqFZTEVF RA	No Access					
QUnMRUui QUrBTaa S6	No Access					
QUnMRUui QUvBUrRBUqbB T6	PSYCKES Consent				Yes	
QUnMRVbORSm WFbMSUE SA	No Access					

QUnDQUnBLA QqVEUabDSm QQ

As of 7/25/2024 Data sources

PDF

Brief Overview | Full Summary

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

DOB: XX/XX/XXXX (XX Yrs)
Address: OTUm QVZFTbVF UqFJTbQ SazIT6 Mq2, QbJPTb6, Tba, MTAqNTU

Medicaid ID: Uq2mOTUpMV2 **Medicare:** No
Managed Care Plan: HealthPlus (LTC Partial Cap)
MC Plan Assigned PCP : N/A

Children's Waiver Status: N/A
HARP HCBS Assessment Status: N/A
Medicaid Eligibility Expires on:

Current Care Coordination

Health Home (Enrolled)	COORDINATED BEHAVIORAL CARE INC (Begin Date: 01-JUL-23) • Status : Active Member Referral Number: 866-899-0152; cbchealthhome@cbcare.org **Care Management (Enrolled)**: GRAHAM-WINDHAM

Notifications

Health Home Plus Eligibility	This client is eligible for Health Home Plus due to: 4+ ER MH < 13 months
High Mental Health Need due to	4+ ER MH < 13 months ; HH+ Eligibility
High Fidelity Wraparound - Likely Eligible	This client is likely eligible for High Fidelity Wraparound due to either currently or in the past year receiving the following services/status : Two or more crisis services
Mental Health Placement Consideration due to	1 or more inpatient MH stays in past 5 years; Evidence of Supplemental Security Income (SSI) or SSD AND Any OMH Specialty MH Service in past 5 years; Four or more emergency MH visits in past 13 months

Social Determinants of Health (SDOH) Past Year - reported in billing

Problems related to employment and unemployment	Unemployment, unspecified
Problems related to housing and economic circumstances	Food insecurity • Problem related to housing and economic circumstances, unspecified

High Mental Health Need Flag Updates

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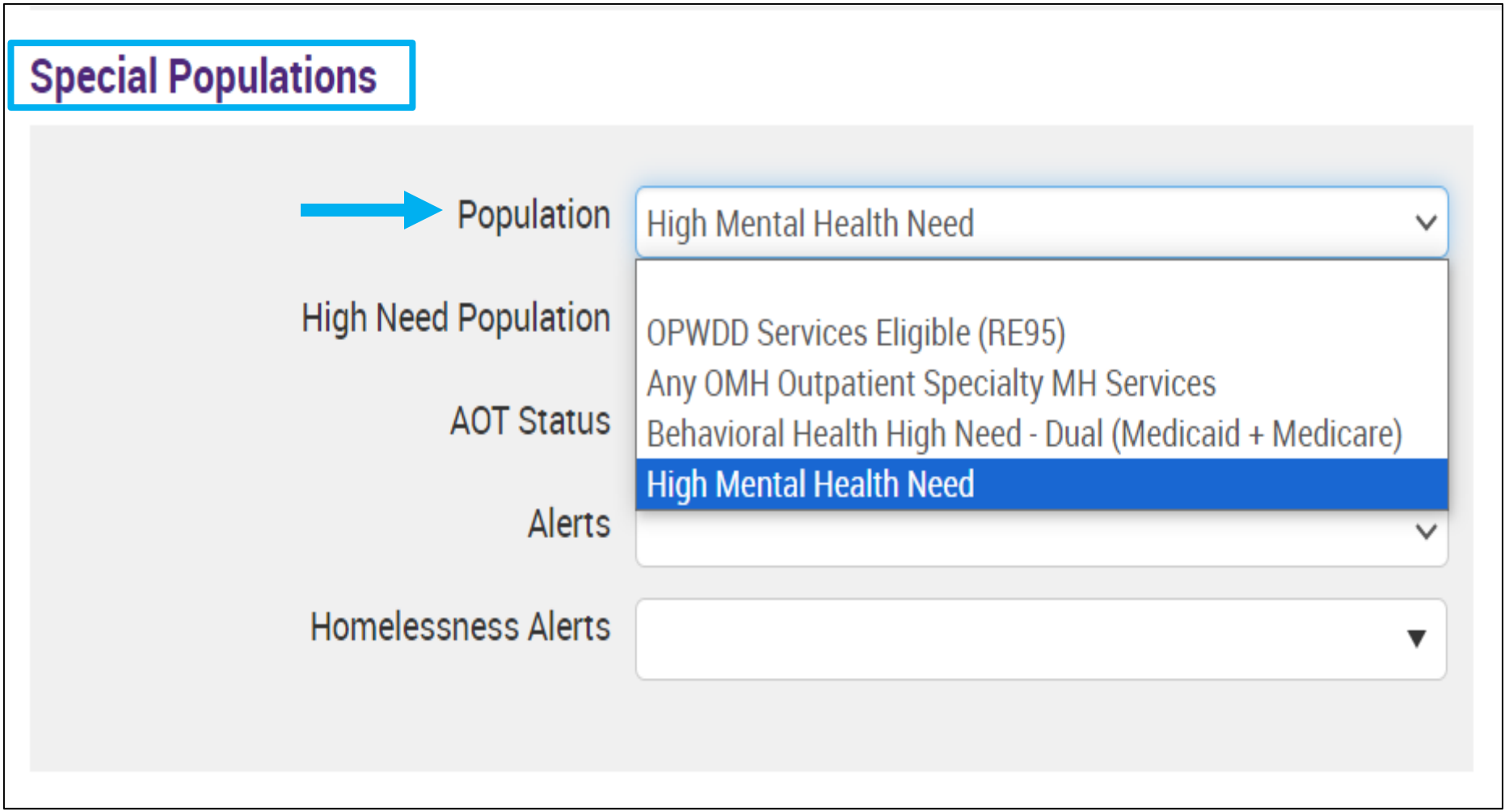
High Mental Health Need Flag Updates

- The High Mental Health Need flag has been updated to more closely align with Health Home Plus (HH+) eligibility criteria to help identify the highest need individuals
- Differences between High MH Need and HH+ eligibility, is that High MH Need:
  - Captures HH+ Service or Intensive Mobile Treatment (IMT) services within past year with MH diagnosis
  - Does **not** exclude clients under 18 nor does it exclude clients who reside on a state-operated Psychiatric Center campus
- Updated on a weekly basis

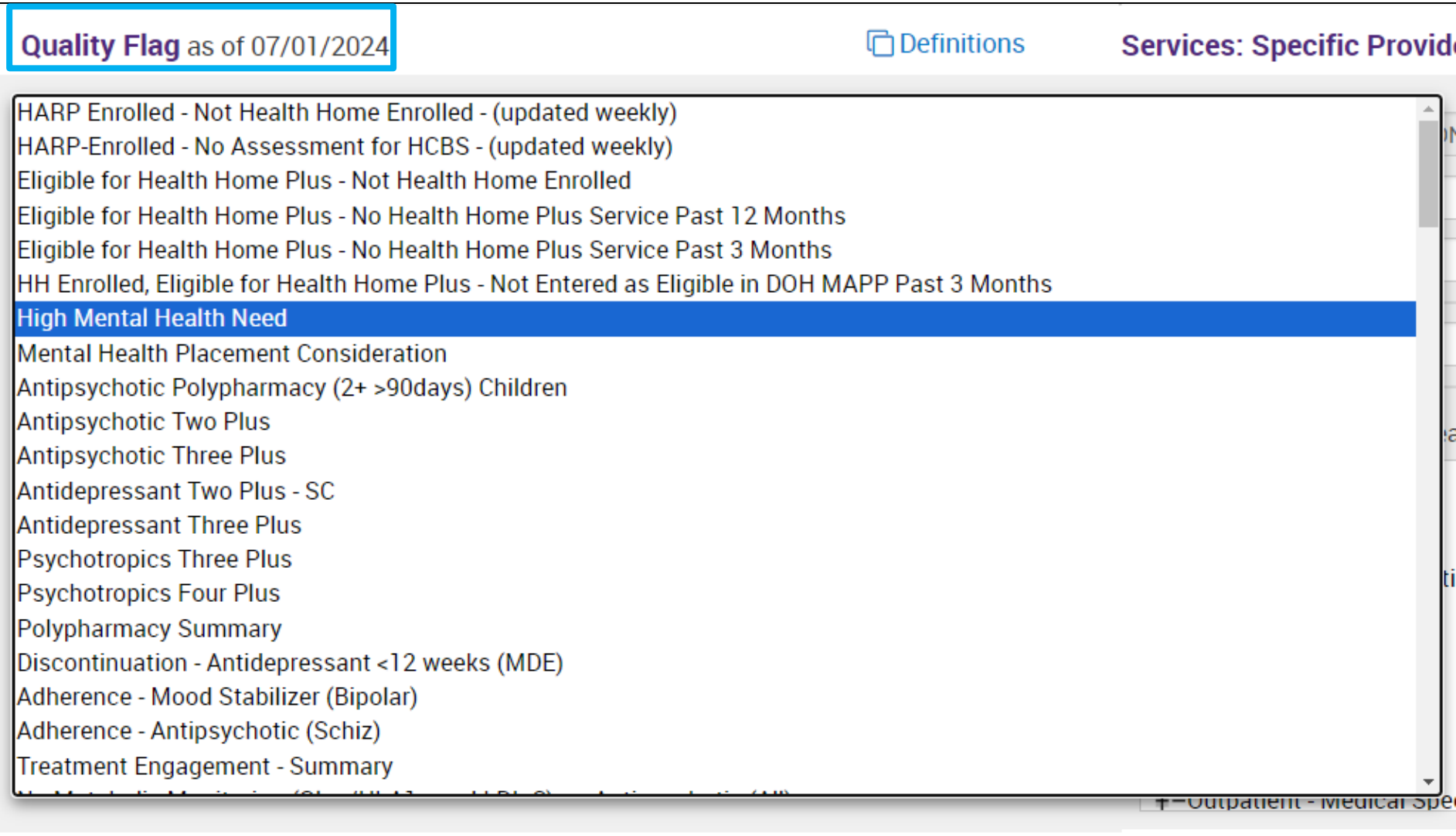
High Mental Health Need Flag Criteria

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

High Mental Health Need Flag – Recipient Search



High Mental Health Need Flag – Recipient Search



Modify Search

2,332 Recipients Found

View: Standard | PDF | Excel

	Quality Flag	High Mental Health Need
AND	[Provider Specific] Provider	MAIN STREET AGENCY

Maximum Number of Rows Displayed: 50

Name	Medicaid ID	DOB	Gender	Race & Ethnicity	Medicaid Quality Flags	Medicaid Managed Care Plan	Current PHI Access	
QUFDSCm Qq7SSVNUTrBIRUe	WV6vODAv Nr2	NCyoOCynO TUn	TQ LQ NpM	White	10+ ER, 2+ ER-BH, 2+ ER-MH, 2+ ER-Medical, 4+ Inpt/ER-BH, 4+ Inpt/ER-MH, 4+ Inpt/ER-Med, HHPlus No HHPlus Service > 12 mos, HHPlus No HHPlus Service > 3 mos, HHPlus Not HH Enrolled, High MH Need, MH Plcmt Consid	VNSNY Choice Select Health	PSYCKES Consent	
QUFSTqui SaFTTqu	WVetMpEtO Ue	MSynLpEvO DQ	TQ LQ NDA	Black	10+ ER, 2+ ER-BH, 2+ ER-MH, 2+ ER-Medical, 4+ Inpt/ER-BH, 4+ Inpt/ER-MH, Adher-AP (DOH), Cloz Candidate, HARP No Assessment for HCBS, HARP No Health Home, HHPlus No HHPlus Service > 12 mos, HHPlus No HHPlus Service > 3 mos, HHPlus Not HH Enrolled, High MH Need, MH Plcmt Consid, No ICM after MH ED, No MAT Utilization - OUD (DOH), No Utilization of Pharmacotherapy (DOH), POP Cloz Candidate, POP High User	Fidelis Care New York	PSYCKES Consent	
QUJBUaNBLA RrVTVEFWTm	RE2mM9M mMVQ	N8yoOCynO Tam	TQ LQ MpQ	Hispanic or Latinx	2+ Inpt-BH, 2+ Inpt-MH, 4+ Inpt/ER-BH, Adher-AP (DOH), HARP No Assessment for HCBS, HARP No Health Home, HHPlus No HHPlus Service > 12 mos, HHPlus No HHPlus Service > 3 mos, HHPlus Not HH Enrolled, High MH Need, MH Plcmt Consid, No ICM after MH Inpt, No Outpt Medical, No Utilization of Pharmacotherapy (DOH), POP Cloz Candidate, POP High User	Fidelis Care New York	PSYCKES Consent	
QUJEVVJSQU7JTS m SUnZQVM W6	TVUrMpEq Mai	NSynMoyo MDAr	TQ LQ MTa	Black	2+ ER-BH, 2+ Inpt-BH, 2+ Inpt-MH, 4+ Inpt/ER-BH, 4+ Inpt/ER-MH, Cloz Candidate, HHPlus No HHPlus Service > 12 mos, HHPlus No HHPlus Service > 3 mos, HHPlus Not HH Enrolled, High MH Need, MH Plcmt Consid, No Engage after MH IP, No Gluc/HbA1c & LDL-C - AP, No HbA1c & LDL-C (DM & Schiz), No HbA1c-DM, No LDL-C - AP, POP Cloz Candidate, POP High User, Readmit 30d - BH to BH, Readmit 30d - MH to MH,	Healthfirst PHSP, Inc.	No Access	Enable Access

QUFSTqui SaFTTqu

As of 7/25/2024 Data sources

PDF

Brief Overview | Full Summary

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

DOB: XX/XX/XXXX (XX Yrs)
Address: ODAm RQ MTJUSA UrQ, QbJPTqjMWUu, Tba, MTEoMpA
Phone (Source: NYC DHS): KDAnM8a MpQrLTYtODa

Medicaid ID: WVetMpEtOUe Medicare: No
Managed Care Plan: Fidelis Care New York (HARP)
MC Plan Assigned PCP : N/A

HARP Status: HARP Enrolled (H1)
HARP HCBS Assessment Status: Never Assessed
Medicaid Eligibility Expires on:

Current Care Coordination

NYC Dept of Homeless Services Outreach:	BOWERY RESIDENTS COMMITTEE, INC. (Single Adult, Outreach) Case Load Start Date: 19-JUL-24. Main Contact : Jose Del Toro Alonso: 9174120384, jtoro@brc.org
ACT	FEDERATION OF ORG. F/T NYS MENT.DISABLED, INC (Admission Date: 13-MAY-22, Discharge Date: 28-JUL-23) Main Contact : Craig Plummer: --
NYC Dept of Homeless Services Shelter:	MIDWOOD SAFE HAVEN (Single Adult, Special Population) • BROOKLYN Most Recent Placement Date: 02-JUN-24 Shelter Director Contact : Leah Miller : 3474911109, lmiller@breakingground.org

Notifications

Prescription Prior Authorization	This client has been taking a prescription medication in the past 3 months that may require NYRx prior authorization: Risperidone. To obtain a prior authorization call (877) 309- 9493 or fax the appropriate Prior Authorization Form to (800) 268-2990. Standard PA Form : https://newyork.fhsc.com/downloads/providers/NYRx_PDP_PA_Fax_Standardized.pdf Other Specialized PA Forms: https://newyork.fhsc.com/providers/pa_forms.asp
Health Home Plus Eligibility	This client is eligible for Health Home Plus due to: 4+ ER MH < 13 months, ACT - Discharged < 12 months
High Mental Health Need due to	4+ ER MH < 13 months ; ACT active or expired in the past year ; Intensive Mobile Treatment (IMT) active or within past year
Mental Health Placement Consideration due to	1 or more ER visits or inpatient stays in the past year with a suicide attempt/ suicide ideation/ self-harm code; 1 or more inpatient MH stays in past 5 years; ACT enrolled or discharged in the past 5 years; AOT History: Active or Expired; Any history of forensic psych inpatient setting or forensic status in any OMH inpatient setting; Any history of prison MH outpatient services; Evidence of Supplemental Security Income (SSI) or SSD AND Any OMH Specialty MH Service in past 5 years; Four or more emergency MH visits in past 13 months; OMH Housing history in past 5 years

High Mental Health Need Flag

Quality Flags as of monthly QI report 7/1/2024 Definitions

Recent | All (Graph) | All (Table)

Indicator Set	
Health Home Care Management - Adult	Eligible for Health Home Plus - No Health Home Plus Service Past 12 Months • Eligible for Health Home Plus - No Health Home Plus Service Past 3 Months • Eligible for Health Home Plus - Not Health Home Enrolled • HARP Enrolled - Not Health Home Enrolled • HARP-Enrolled - No Assessment for HCBS
High Mental Health Need	4+ ER MH < 13 months • ACT active or expired in the past year • Intensive Mobile Treatment (IMT) active or within past year
High Utilization - Inpt/ER	10+ ER - All Cause • 2+ ER - BH • 2+ ER - MH • 2+ ER - Medical • 4+ Inpatient/ER - BH • 4+ Inpatient/ER - MH • Clozapine Candidate with 4+ Inpatient/ER - MH • POP : High User • POP : Potential Clozapine Candidate
MH Performance Tracking Measure (as of 01/01/2024)	Low Antipsychotic Medication Adherence - Schizophrenia • No Intensive Care Management after MH ED Visit
Mental Health Placement Consideration	1 or more ER visits or inpatient stays in the past year with a suicide attempt/ suicide ideation/ self-harm code • 1 or more inpatient MH stays in past 5 years • ACT enrolled or discharged in the past 5 years • AOT History: Active or Expired • Any history of forensic psych inpatient setting or forensic status in any OMH inpatient setting • Any history of prison MH outpatient services • Evidence of Supplemental Security Income (SSI) or SSD AND Any OMH Specialty MH Service in past 5 years • Four or more emergency MH visits in past 13 months • OMH Housing history in past 5 years
SUD Performance Tracking Measure (as of 01/01/2024)	No Utilization of Medication Assisted Treatment (MAT) for Opioid Use Disorder (OUD) • No Utilization of Pharmacotherapy for Alcohol Abuse or Dependence
Vital Signs Dashboard - Adult (as of 01/01/2024)	Clozapine Candidate with 4+ Inpatient/ER - MH (adult) • Eligible for Health Home Plus - No Health Home Plus Service Past 12 Months (adult) • Low Antipsychotic Medication Adherence - Schizophrenia

Race & Ethnicity Column in Recipient Search Results

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Race & Ethnicity Column Added

- A new Race & Ethnicity column has been added to the following areas of the application:
  - Recipient Search results page (for both individual and group cohort searches)
  - Advanced Views:
    - Care Coordination
    - High Need/High Risk
    - High Utilization
    - Outpatient Providers
- The Race & Ethnicity data source is Medicaid billing

Modify Search

1,550 Recipients Found

View: Standard

- Standard
- Care Coordination
- High Need/High Risk
- Hospital Utilization
- Outpatient Providers

PDF Excel

	High Need Population	Health Home Plus (HH+) - Eligible
AND	[Provider Specific] Provider	MAIN STREET AGENCY

Maximum Number of Rows Displayed: 50

Name	Medicaid ID	DOB	Gender	Race & Ethnicity	Medicaid Quality Flags	Medicaid Managed Care Plan	Current PHI Access	
QUFDSCm Qq7SSVNUTrBIRUe	WV6vODAv Nr2	NCyoOCynO TUn	TQ LQ NpM	White	10+ ER, 2+ ER-BH, 2+ ER-MH, 2+ ER-Medical, 4+ Inpt/ER-BH, 4+ Inpt/ER-MH, 4+ Inpt/ER-Med, HHPlus No HHPlus Service > 12 mos, HHPlus No HHPlus Service > 3 mos, HHPlus Not HH Enrolled, High MH Need, MH Plcmt Consid	VNSNY Choice Select Health	PSYCKES Consent	
QUFSTqui SaFTTqu	WVetMpEtO Ue	MSynLpEvO DQ	TQ LQ NDA	Black	10+ ER, 2+ ER-BH, 2+ ER-MH, 2+ ER-Medical, 4+ Inpt/ER-BH, 4+ Inpt/ER-MH, Adher-AP (DOH), Cloz Candidate, HARP No Assessment for HCBS, HARP No Health Home, HHPlus No HHPlus Service > 12 mos, HHPlus No HHPlus Service > 3 mos, HHPlus Not HH Enrolled, High MH Need, MH Plcmt Consid, No ICM after MH ED, No MAT Utilization - OUD (DOH), No Utilization of Pharmacotherapy (DOH), POP Cloz Candidate, POP High User	Fidelis Care New York	PSYCKES Consent	
QUJBUaNBLA RrVTVEFWTm	RE2mM9M mMVQ	N8yoOCynO Tam	TQ LQ MpQ	Hispanic or Latinx	2+ Inpt-BH, 2+ Inpt-MH, 4+ Inpt/ER-BH, Adher-AP (DOH), HARP No Assessment for HCBS, HARP No Health Home, HHPlus No HHPlus Service > 12 mos, HHPlus No HHPlus Service > 3 mos, HHPlus Not HH Enrolled, High MH Need, MH Plcmt Consid, No ICM after MH Inpt, No Outpt Medical, No Utilization of Pharmacotherapy (DOH), POP Cloz Candidate, POP High User	Fidelis Care New York	PSYCKES Consent	
QUJEVVJSQU7JTS m SUnZQVM W6	TVUrMpEq Mai	NSynMoyo MDAr	TQ LQ MTa	Black	2+ ER-BH, 2+ Inpt-BH, 2+ Inpt-MH, 4+ Inpt/ER-BH, 4+ Inpt/ER-MH, Cloz Candidate, HHPlus No HHPlus Service > 12 mos, HHPlus No HHPlus Service > 3 mos, HHPlus Not HH Enrolled, High MH Need, MH Plcmt Consid, No Engage after MH IP, No Gluc/HbA1c & LDL-C - AP, No HbA1c & LDL-C (DM & Schiz), No HbA1c-DM, No LDL-C - AP, POP Cloz Candidate, POP High User, Readmit 30d - BH to BH, Readmit 30d - MH to MH,	Healthfirst PHSP, Inc.	No Access	Enable Access

Modify Search

1,550 Recipients Found

View: Care Coordination

Excel

	High Need Population	Health Home Plus (HH+) - Eligible
AND	[Provider Specific] Provider	MAIN STREET AGENCY

Maximum Number of Rows Displayed: 50

Applicable data is displayed only for recipients with consent or ER access.

Name	Medicaid ID	DOB	Gender	Race & Ethnicity	Medicaid Managed Care Plan	MC Product Line	Current PHI Acces
QUFDSCm Qq7SSVNUTrBIRUe	WV6vODAv Nr2	NCyoOCynO TUn	TQ LQ NpM	White	VNSNY Choice Select Health	Partial MLTC Plan	PSYCKES Consent
QUFSTqui SaFTTqu	WVetMpEtO Ue	MSynLpEvO DQ	TQ LQ NDA	Black	Fidelis Care New York	Health and Recovery Plan (HARP)	PSYCKES Consent
QUJBUaNBLA RrVTVEFWTm	RE2mM9M mMVQ	N8yoOCynO Tam	TQ LQ MpQ	Hispanic or Latinx	Fidelis Care New York	Health and Recovery Plan (HARP)	PSYCKES Consent
QUJEVVJSQU7JTSm SUnZQVM W6	TVUrMpEq Mai	NSynMoyo MDAr	TQ LQ MTa	Black	Healthfirst PHSP, Inc.		No Access
QUJFUa3FTCm SVNBQUM TQ	VFYrNT2oN V2	MSyoNSyn OTaq	TQ LQ MpA	White	UnitedHealthcare Community Plan		No Access
QUJJRCm QUrJU6 S6	VFAsMpEsN EE	N8yoNSynO Tar	TQ LQ M9a	Hispanic or Latinx			No Access
QUJSRVUi REzMTrJFUm	WaYmM9Uo MrA	NCynNSynO TYn	R6 LQ N9M	Hispanic or Latinx	Molina Healthcare of New York		No Access
QUNFVaVETom REFWSUQ	WbQsN9Qt OF2	NSyrLpEvN 9a	TQ LQ NTU	Hispanic or Latinx	Amida Care		No Access
QUNFVaVETom TUbMQU3STrM	Wb2oN9Am MU2	NSyoN8ynO TUr	R6 LQ N9a	Hispanic or Latinx	Village Senior Services Corporation		No Access
QUNFVaVETom UabDSEbF S6	VqQnNpYvN qE	M8ynN8ynO Tap	TQ LQ MpE	Hispanic or Latinx			No Access
QUNPUrRBLA QVJJRUm	WautMp6s MV2	MTElM8ynO T2r	TQ LQ ND6	Hispanic or Latinx			No Access
QUNPUrRBLA	VbYtNTImO VM	NoyuLpEvO TM	TQ LQ MpA	Hispanic or Latinx	Fidelis Care New York	Health and Recovery Plan (HARP)	PSYCKES Consent

Crisis Services Section in the Clinical Summary

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Crisis Services Section – Clinical Summary

- A new Crisis Services section has been added to the Clinical Summary (located between the Medical Outpatient Services and Hospital/ER sections)
- Crisis services were previously rolled up under the Hospital/ER section
- The new Crisis Services section includes information on:
  - Service Type
  - Provider
  - Admission/First Billed
  - Discharge/Last Billed
  - # Visits/Length of Stay
  - Most Recent Primary Diagnosis
  - Most Recent Procedures (Last 3 months)

Crisis Services Section – Clinical Summary

Crisis Services

Details

Table | Graph

Service Type	Provider	Admission/ First Billed	Discharge Date/ Last Date Billed	#Visits/ Length of Stay	Most Recent Primary Diagnosis	Most Recent Procedures (Last 3 Months)
Crisis Residential Services - Residential Crisis Support	WELLLIFE NETWORK INC	6/23/2024	6/23/2024	1	Post-traumatic stress disorder, unspecified	- Crisis Interven Waiver/Diem
Crisis Residential Services - Residential Crisis Support	HOUSING OPTIONS MADE EASY INC	5/17/2023	5/17/2023	1	Illness, unspecified	- Crisis Interven Waiver/Diem
Crisis Residential Services - Residential Crisis Support	HOUSING OPTIONS MADE EASY INC	5/16/2023	5/16/2023	1	Illness, unspecified	- Crisis Interven Waiver/Diem
Crisis Intervention Service - Mobile Crisis Follow-up	LIBERTY RESOURCES INC	2/13/2023	4/18/2023	6	Illness, unspecified	- Crisis Interven Svc, 15 Min
CPEP Mobile Crisis	ERIE COUNTY MEDICAL CTR	1/3/2023	2/1/2023	5	Schizophrenia, unspecified	- Crisis Intervention Mental H
CPEP Mobile Crisis (Telehealth)	ERIE COUNTY MEDICAL CTR	10/6/2022	10/6/2022	1	Other specified anxiety disorders	- Crisis Intervention Mental H

E-Sign Consent Added to Usage Reports

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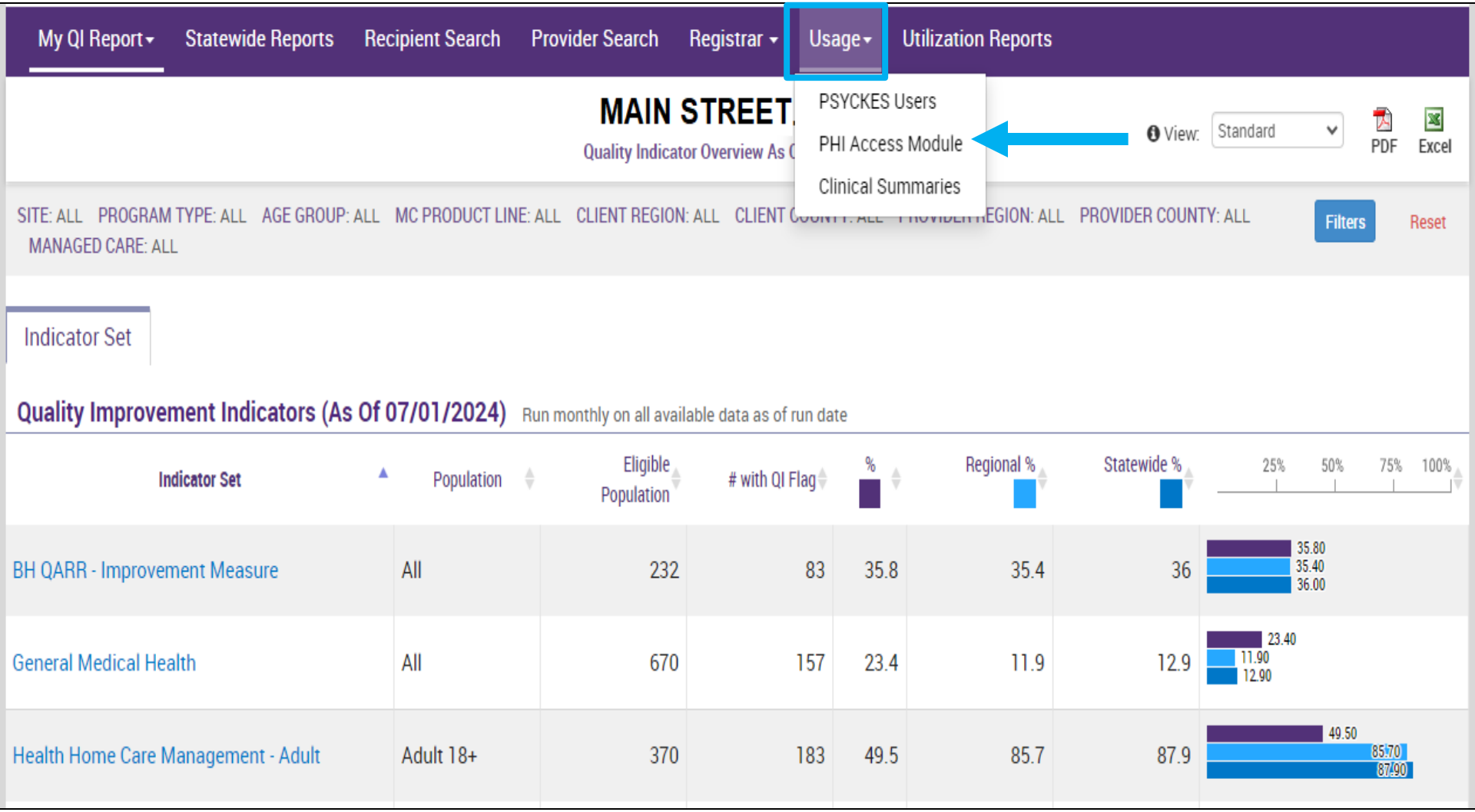
E-Sign Consent Added to Usage Reports

- When a client e-signs the PSYCKES consent within the iOS mobile app, this consent will now be reflected in our Usage Reports
  - With this release, the DOH Health Home Patient Information Sharing consent will also be reflected in these reports
  - This update allows for more accurate consent counts and access-level descriptions when running these reports
- The PHI Access Module Usage Report now includes both the e-signed PSYCKES consent and the DOH Health Home consent within the "Signed Consents" bucket
- The Clinical Summaries Usage Report will now display the appropriate "Access Level in Effect" (e.g., All Data – Consent, Health Home Consent) in the application access level columns

Usage Reports



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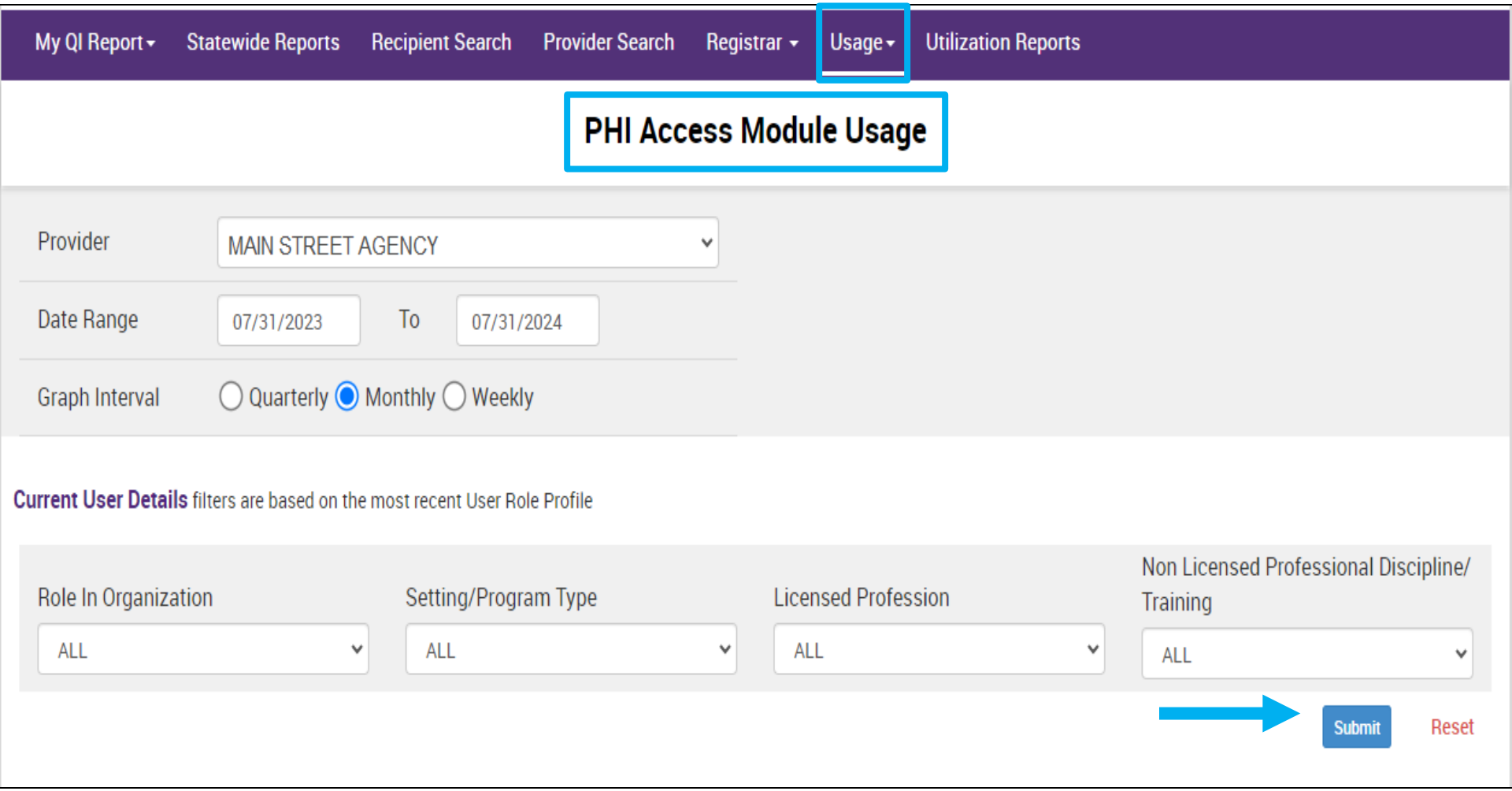
PHI Access Module Usage Report



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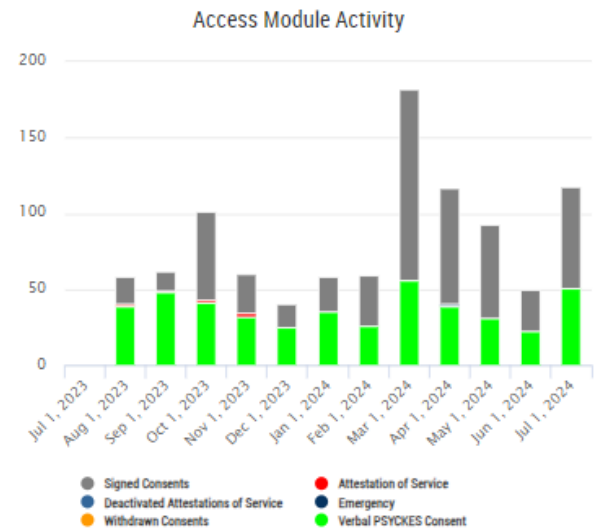
Modify Search

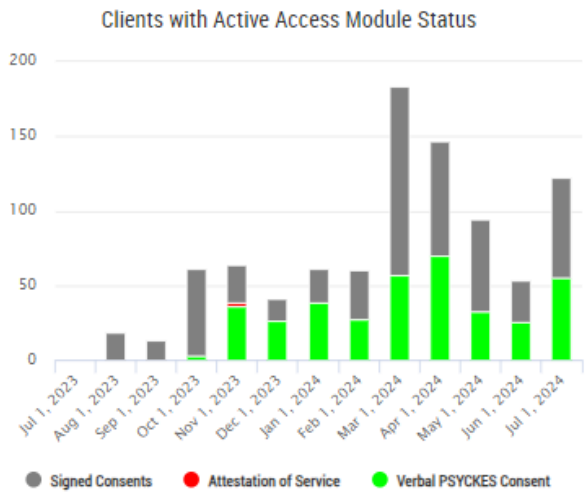
PHI Access Module Usage

PDF Excel

PROVIDER : MAIN STREET AGENCY DATE RANGE : 07/31/2023 END DATE: 07/31/2024 GRAPH INTERVAL: MONTHLY ROLE IN ORGANIZATION: ALL SETTING/PROGRAM TYPE: ALL LICENSED PROFESSION: ALL NON LICENSED PROFESSIONAL DISCIPLINE/TRAINING: ALL

Summary of PHI Access Module usage during the selected date range





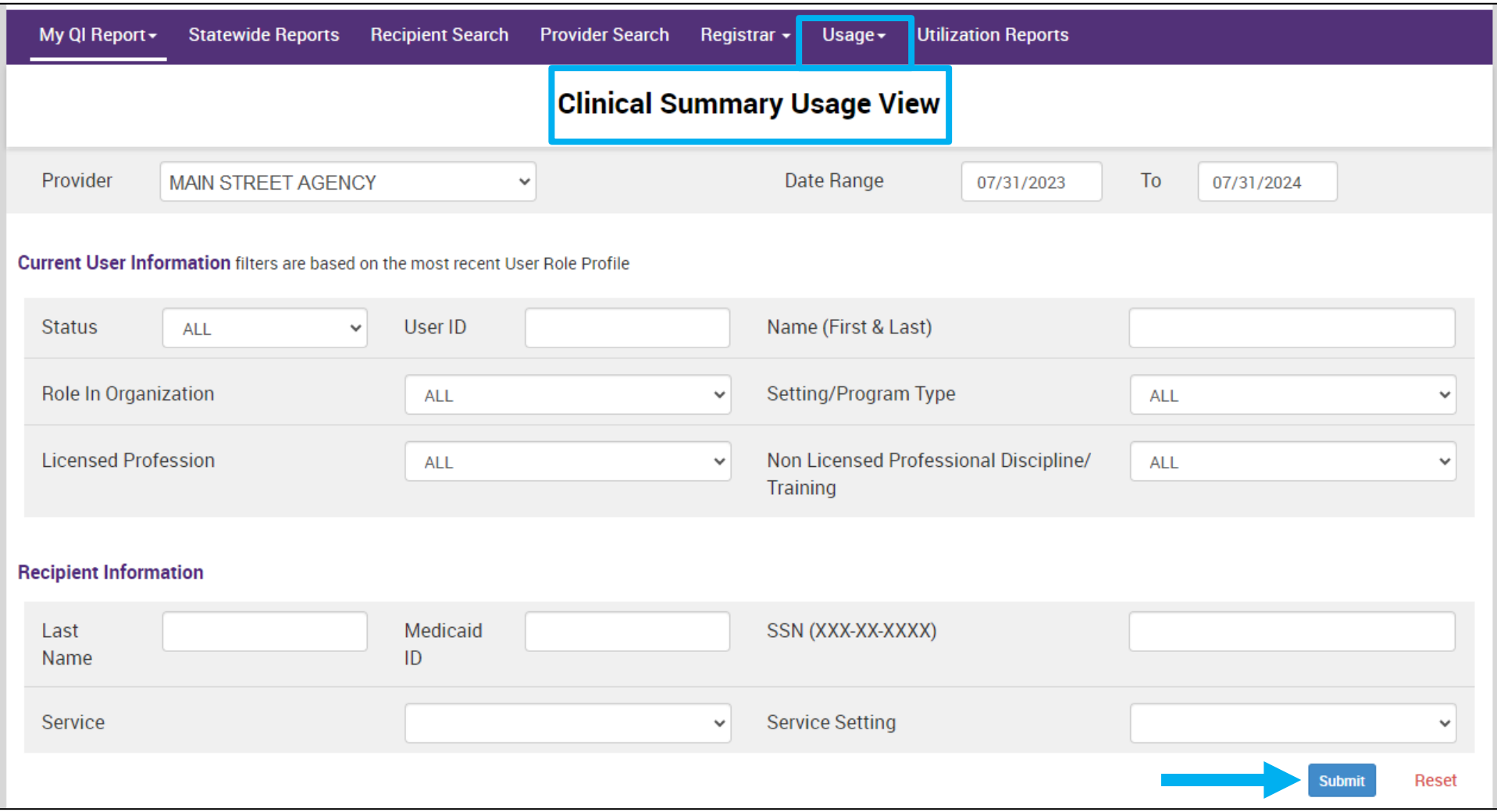
Total number of clients entered during the selected date range

	PHI Access Module during Selected Date Range					
Signed Consents	Verbal PSYCKES Consent	Emergency	Attestation of Service	Total Clients Entered	Withdrawn Consents	Deactivated Attestation of Service
546 (54.7%)	445 (45%)	1 (.1%)	6 (1%)	998	0	0

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

User Name	Role In Organization	Setting/Program	Profession	Total Clients Entered	Attestation of Service	Total Signed + Emergency	Verbal PSYCKES Consent	Signed Consents (%)	Emergency (%)	2 Forms of ID (%)
Smith, John	Direct Service Provider/Clinician/Care Manager	Agency/Facility-Wide, Care Management	Care Management/Case Management/Case Work	6	0	6	0	6 (100%)	0	0

Clinical Summaries Usage Report



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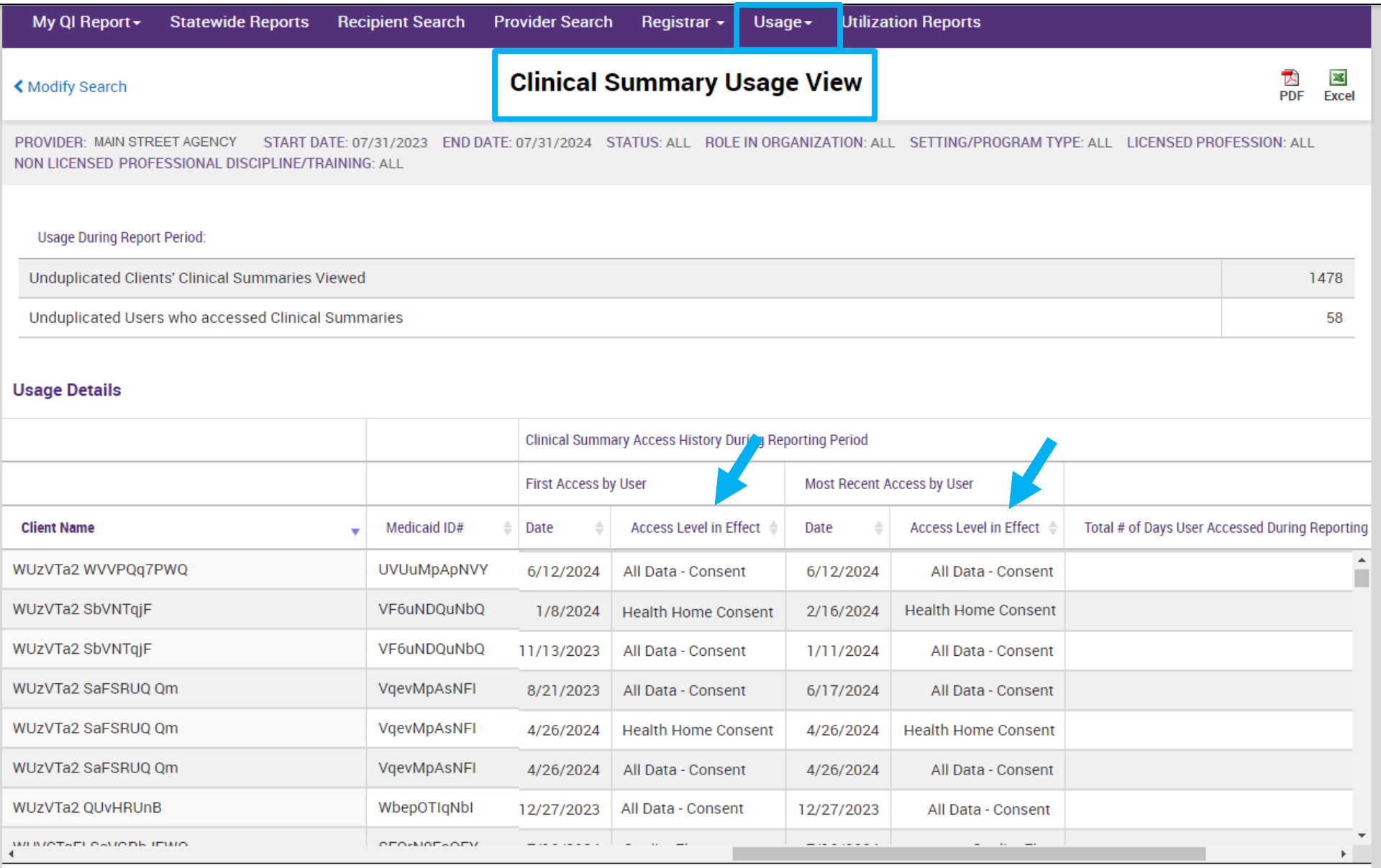
Clinical Summaries Usage Report



Update to Health Home Consent Logic to Include CCOs

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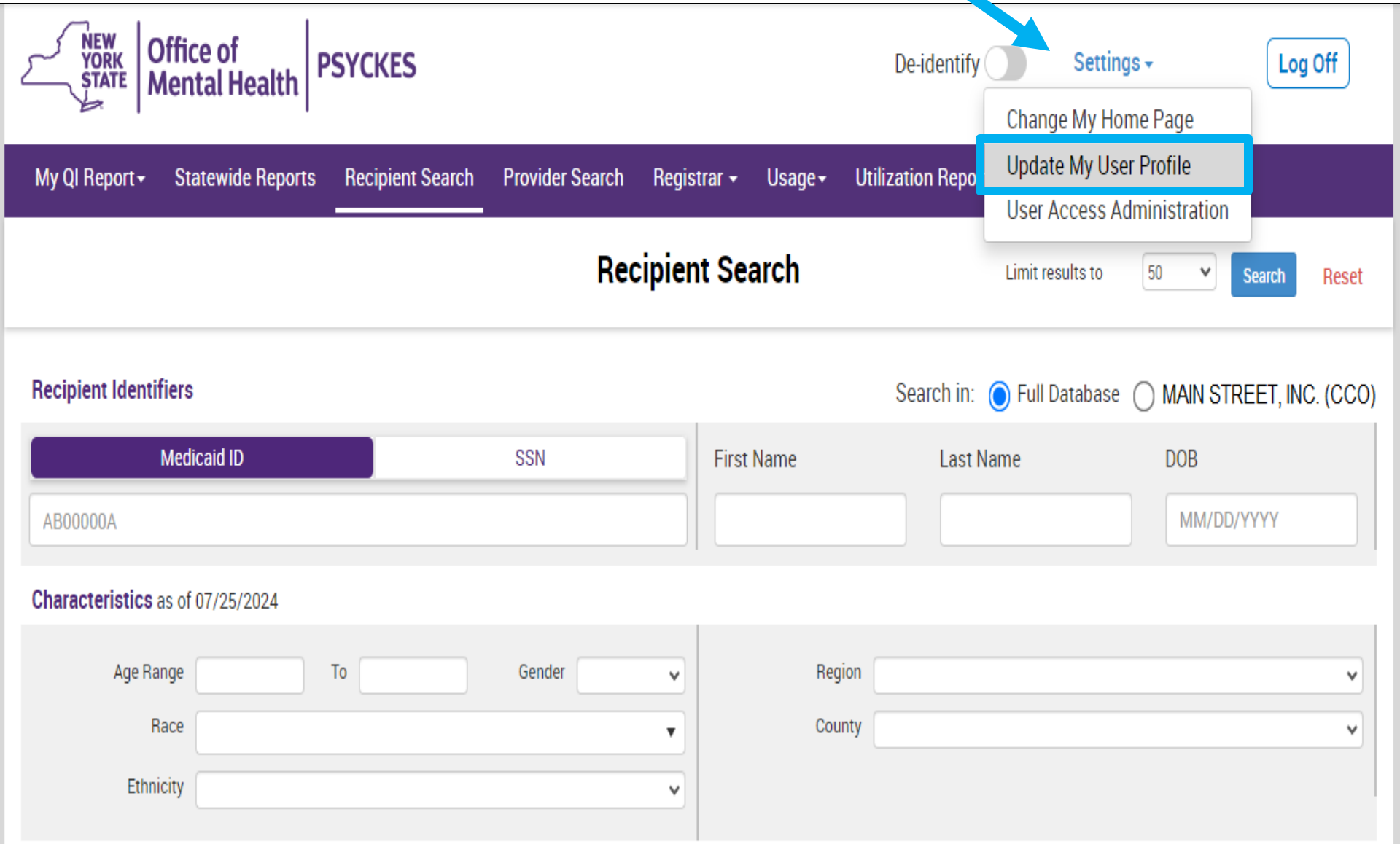
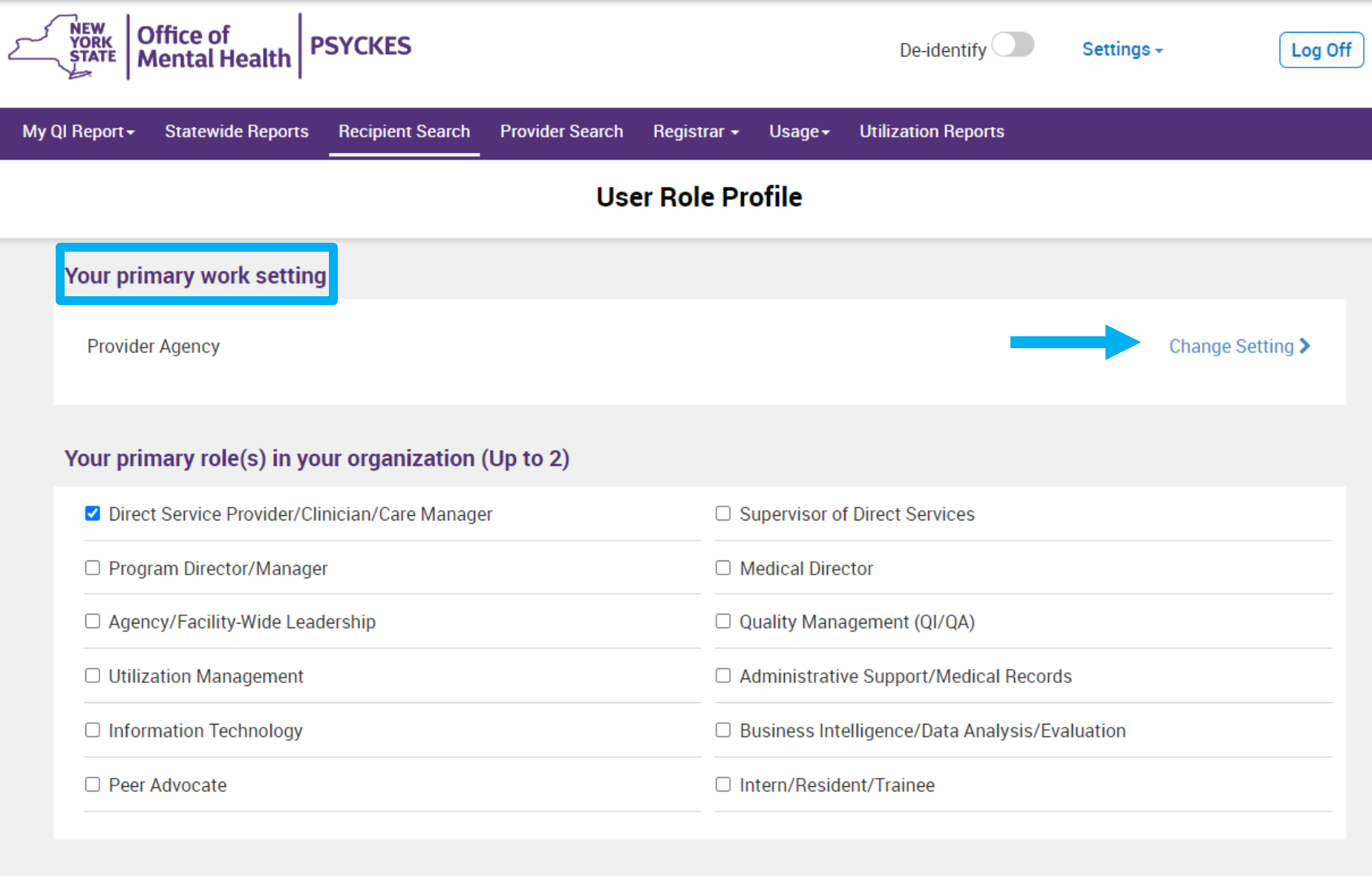
Update to HH Consent Logic

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

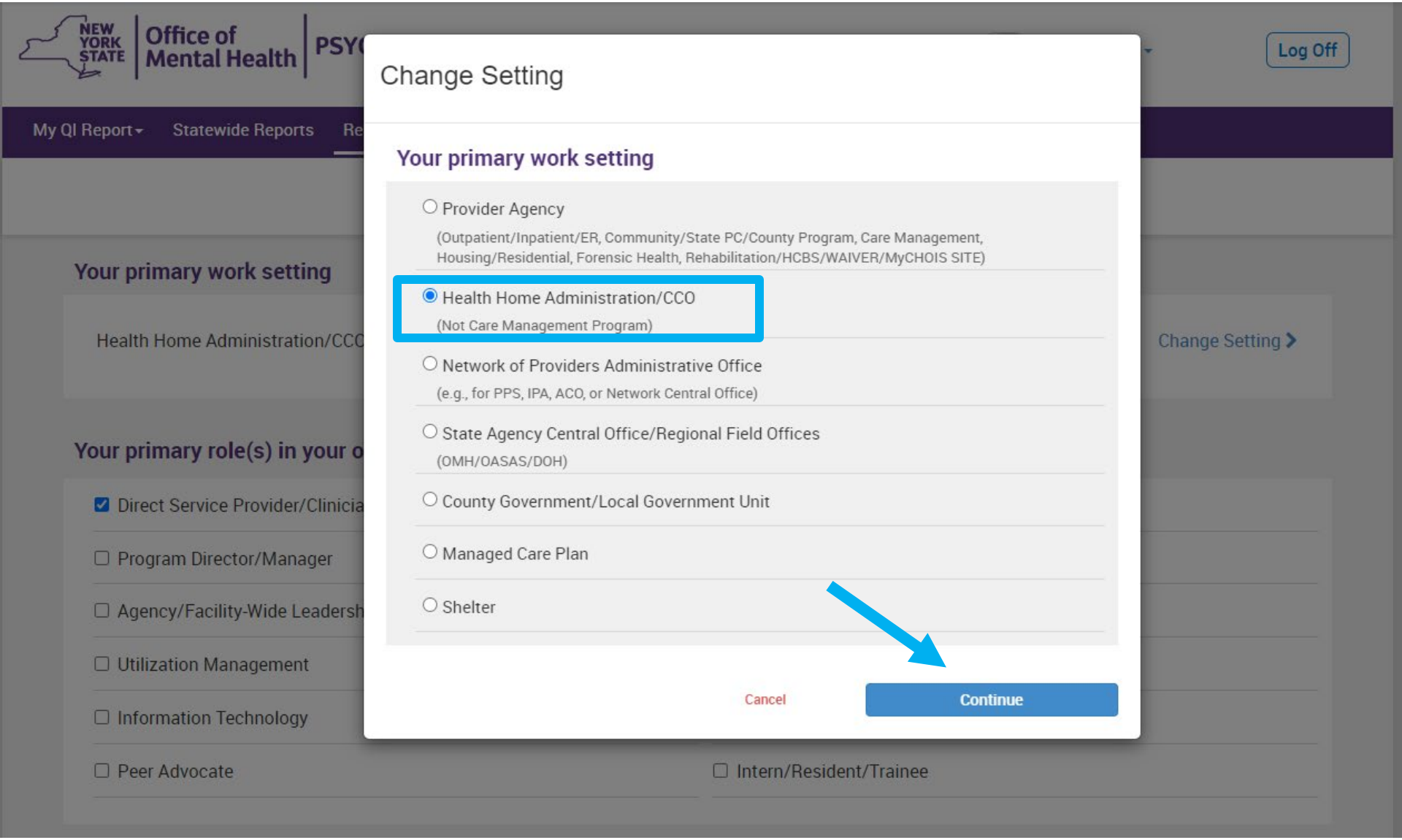
Update User Role Profile



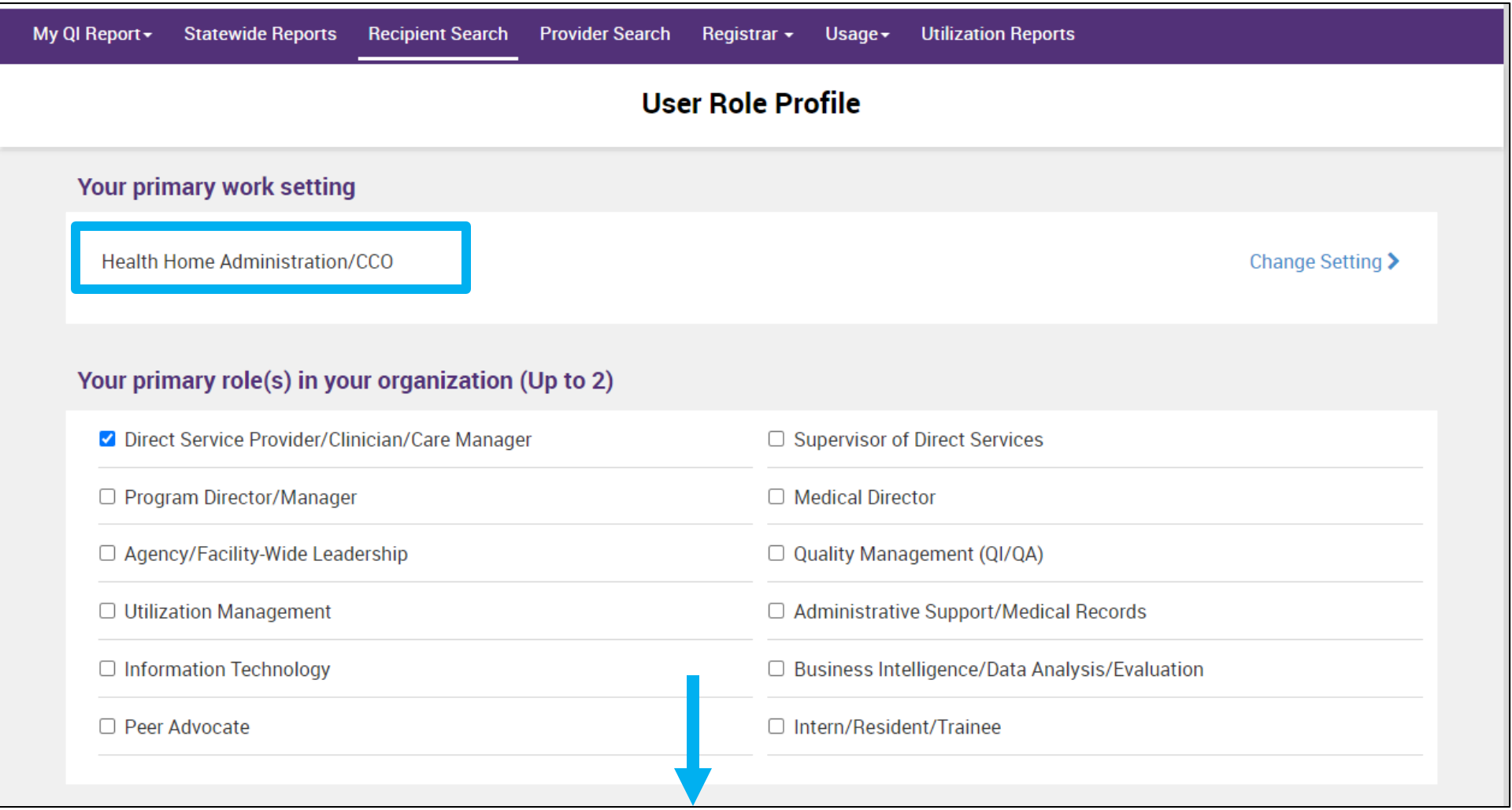
Update User Role Profile



Update User Role Profile



Update User Role Profile



Update User Role Profile

NPI & License Details

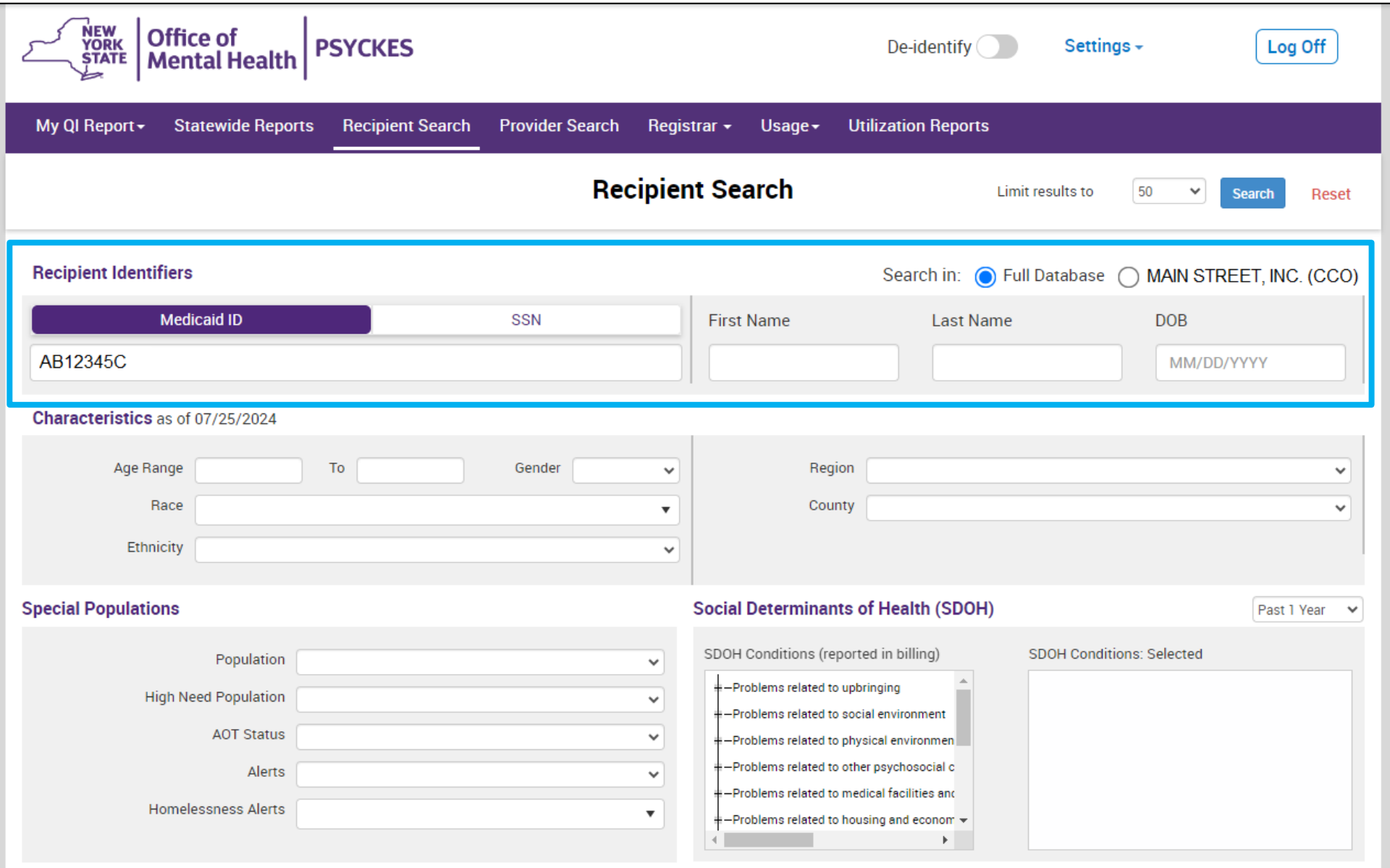
Do you have an individual NPI number?	○ Yes	◉ No
Do you have a NYS Professional License?	○ Yes	◉ No

Your primary professional discipline/Training (up to 2)

☐ Medicine	☐ Medicine - Psychiatry
☐ Pharmacy	☐ Psychology
☑ Social Work	☐ Nursing
☐ Physician Assistant	☐ CASAC / Substance Abuse Credential
☑ Care Management/Case Management/Case Work	☐ Residential/Housing Worker
☐ Vocational/Educational Worker	☐ Peer Advocacy
☐ Mental Health Therapy Aid	☐ Clerical/Administration
☐ Public Health or other Health/Science-Related Field	☐ Other

Continue to PSYCKES

Lookup a Client & Enter Consent



Lookup a Client & Enter Consent

My QI Report | Statewide Reports | Recipient Search | Provider Search | Registrar | Usage | Utilization Reports

Modify Search

1 Recipients Found

PDF Excel

Medicaid ID AB12345C

Review recipients in results carefully before accessing Clinical Summary.

Maximum Number of Rows Displayed: 50

Name (Gender - Age)	Unique Identifiers	DOB	Race & Ethnicity	Address	Medicaid Quality Flags	Medicaid Managed Care Plan	Current PHI Access	
SMITH JOHN M - 64	Medicaid ID: AB12345C	01/01/1960	Hispanic or Latinx	123 MAIN STREET MAIN CITY, NEW YORK 12345	2+ ER-BH, 2+ ER-MH, 2+ ER-Medical, 2AP, 4+ Inpt/ER-BH, 4+ Inpt/ER-MH, 4+ Inpt/ER-Med, 4PP(A), HHPlus No HHPlus Service > 12 mos, HHPlus No HHPlus Service > 3 mos, HHPlus Not HH Enrolled, High MH Need, MH Plcmt Consid, No ICM after MH ED	Molina Healthcare of New York	No Access	Enable Access

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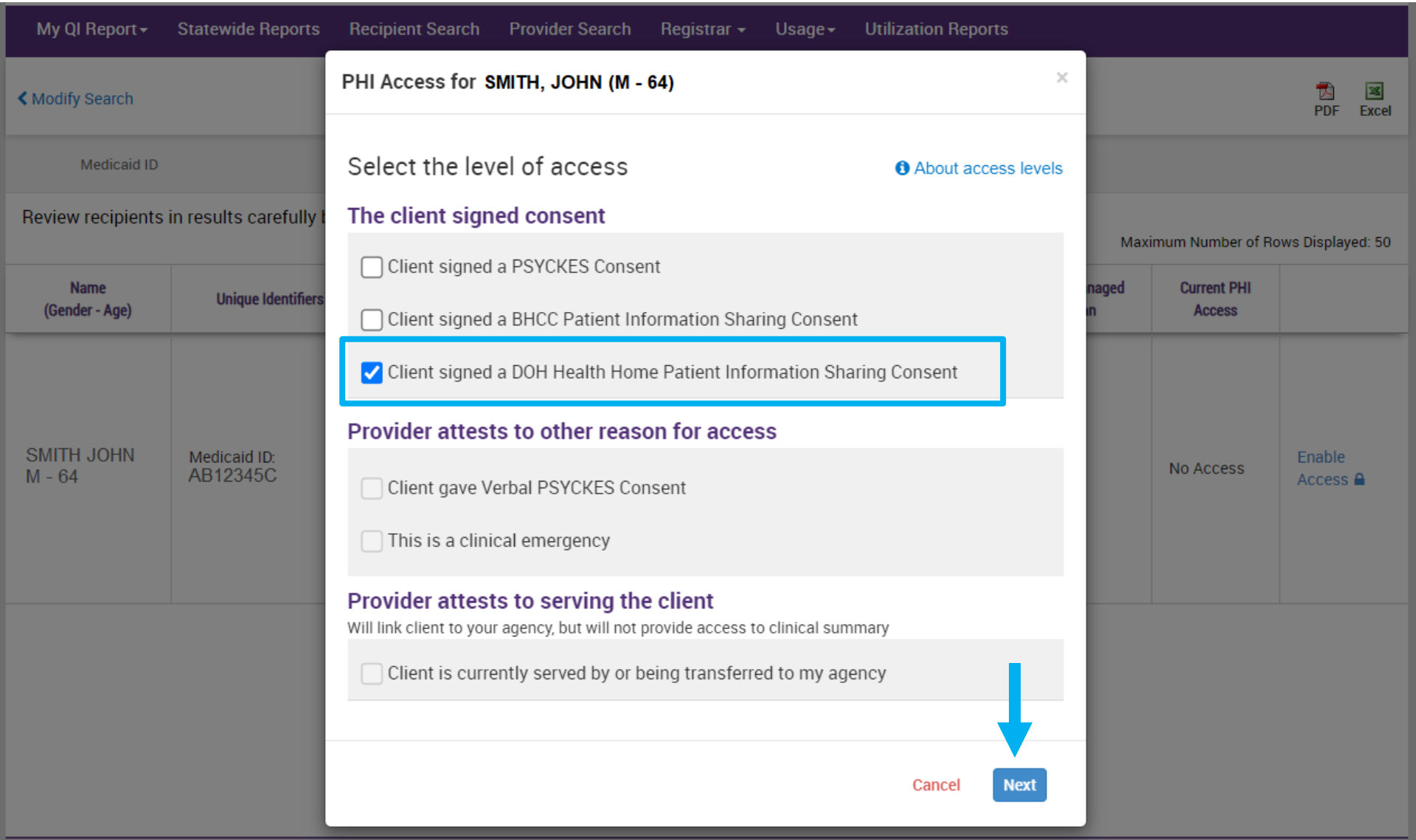
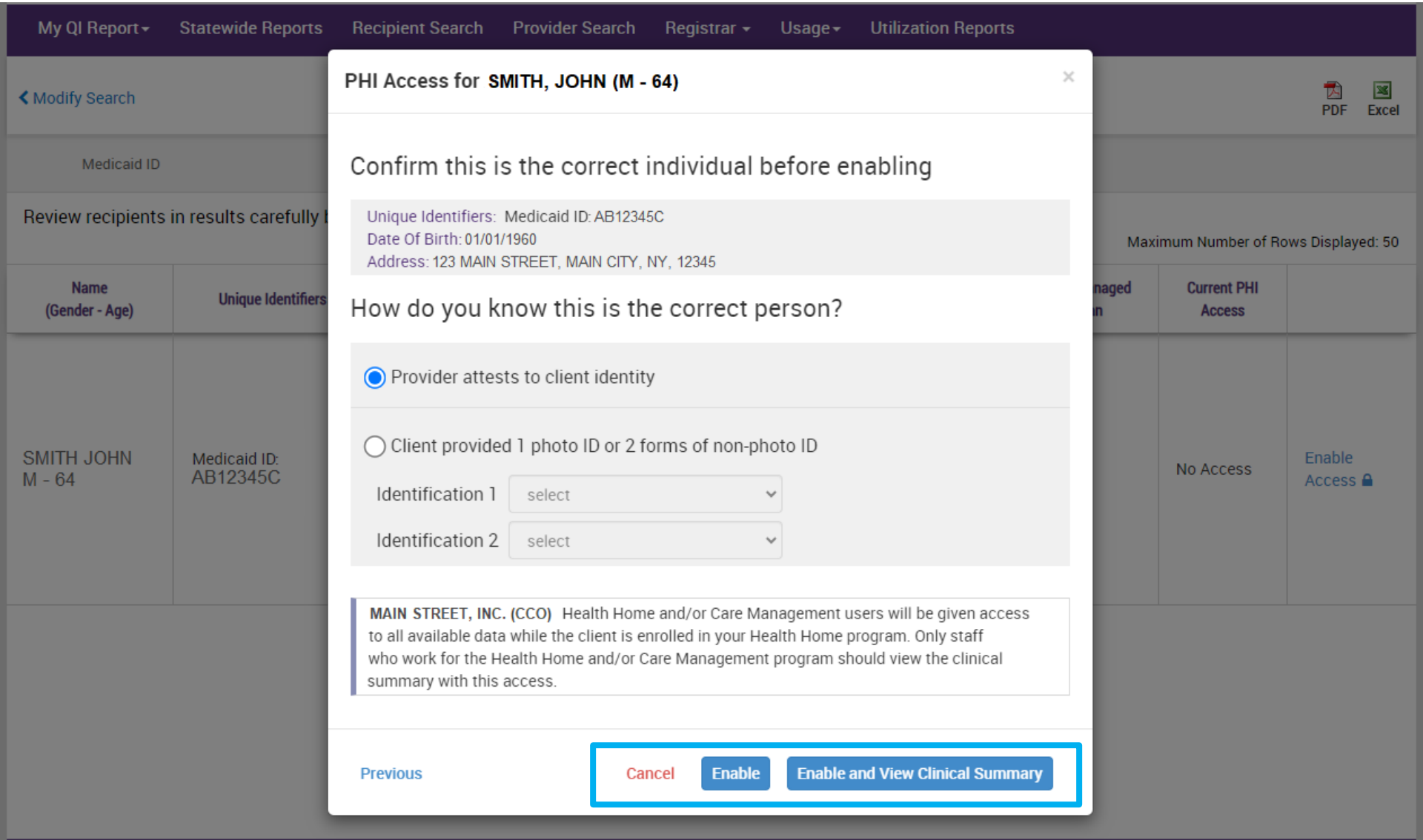
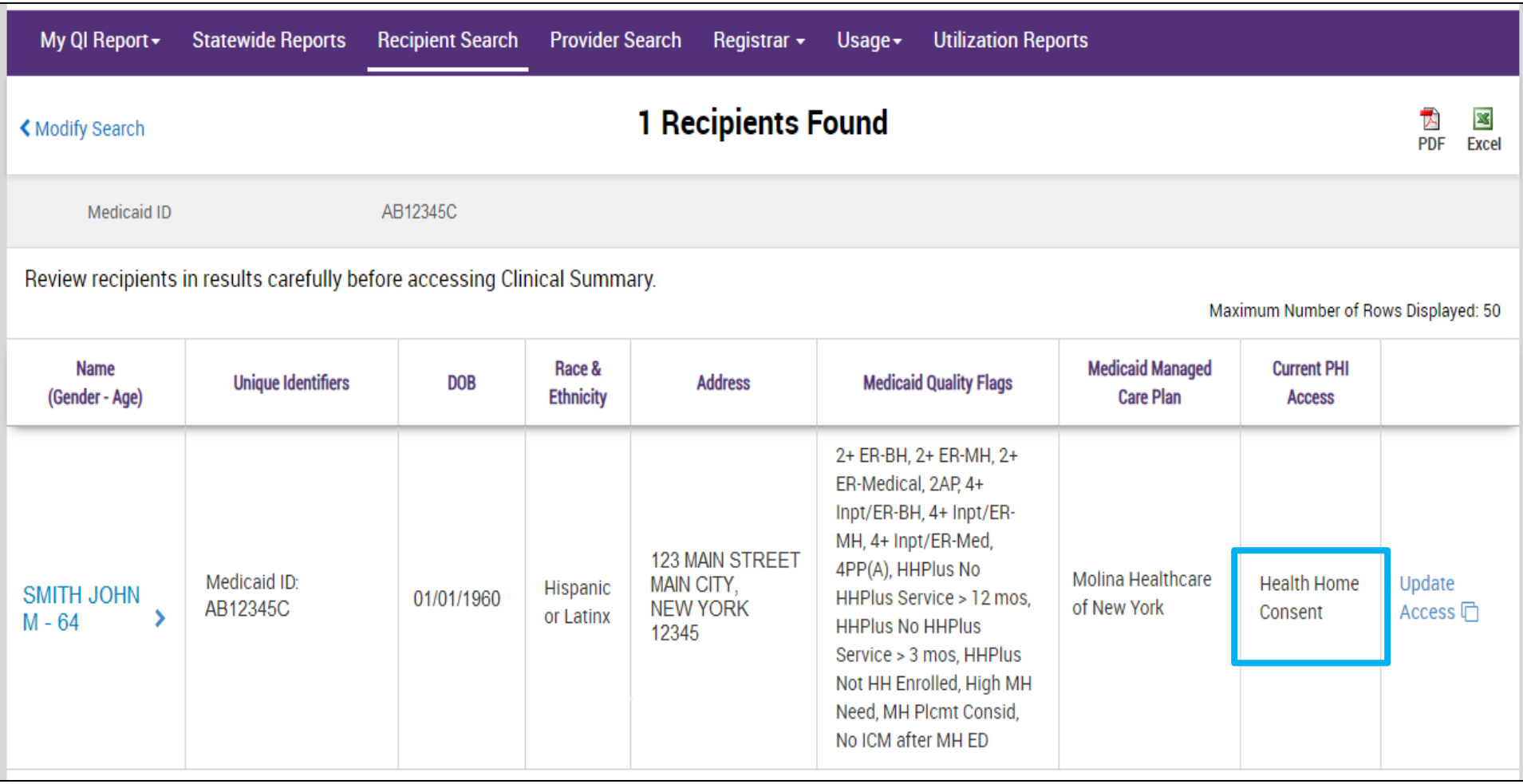
Lookup a Client & Enter Consent



Lookup a Client & Enter Consent



Lookup a Client & Enter Consent



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NYC Region Broken into 5 Counties in Statewide Reports

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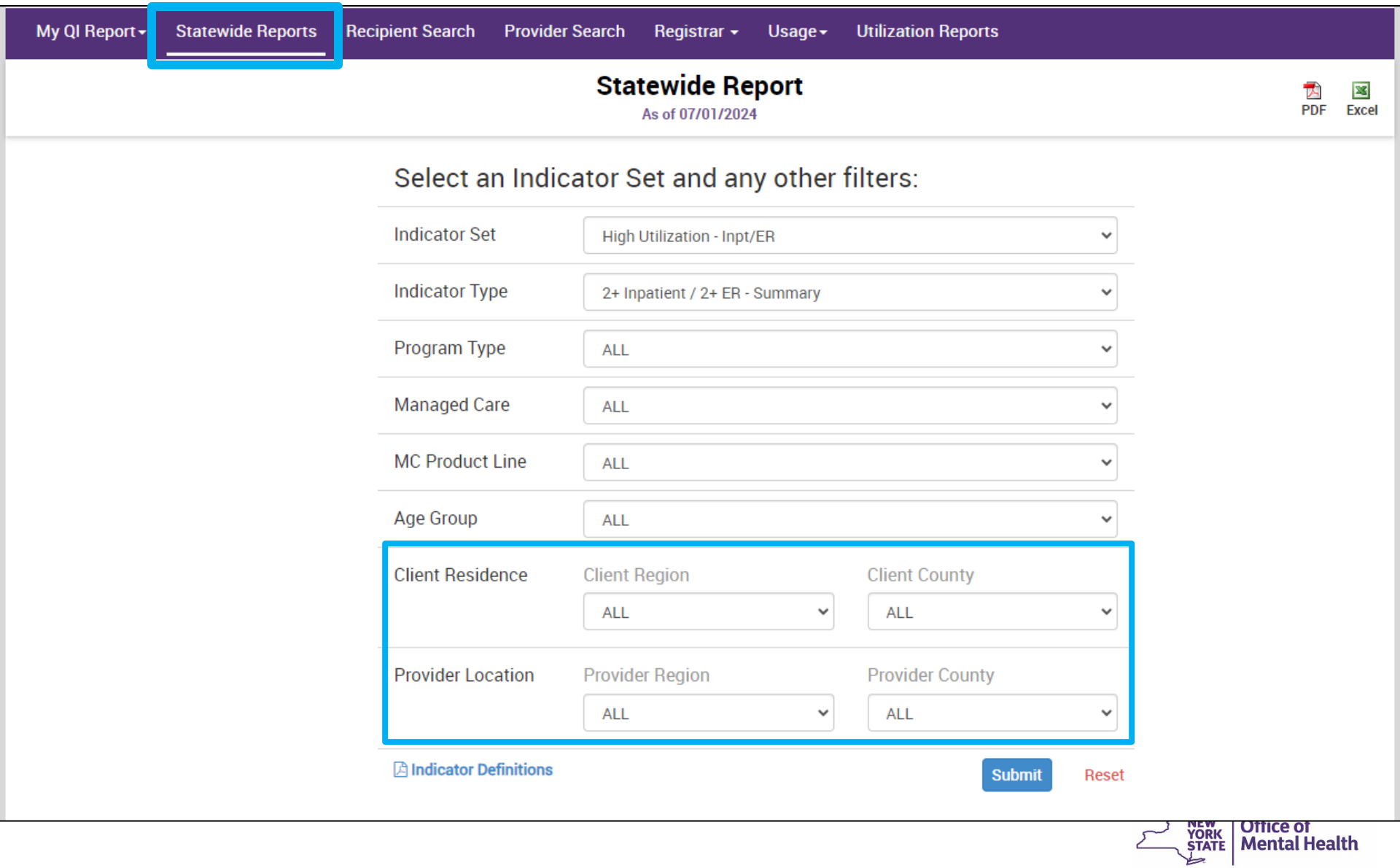
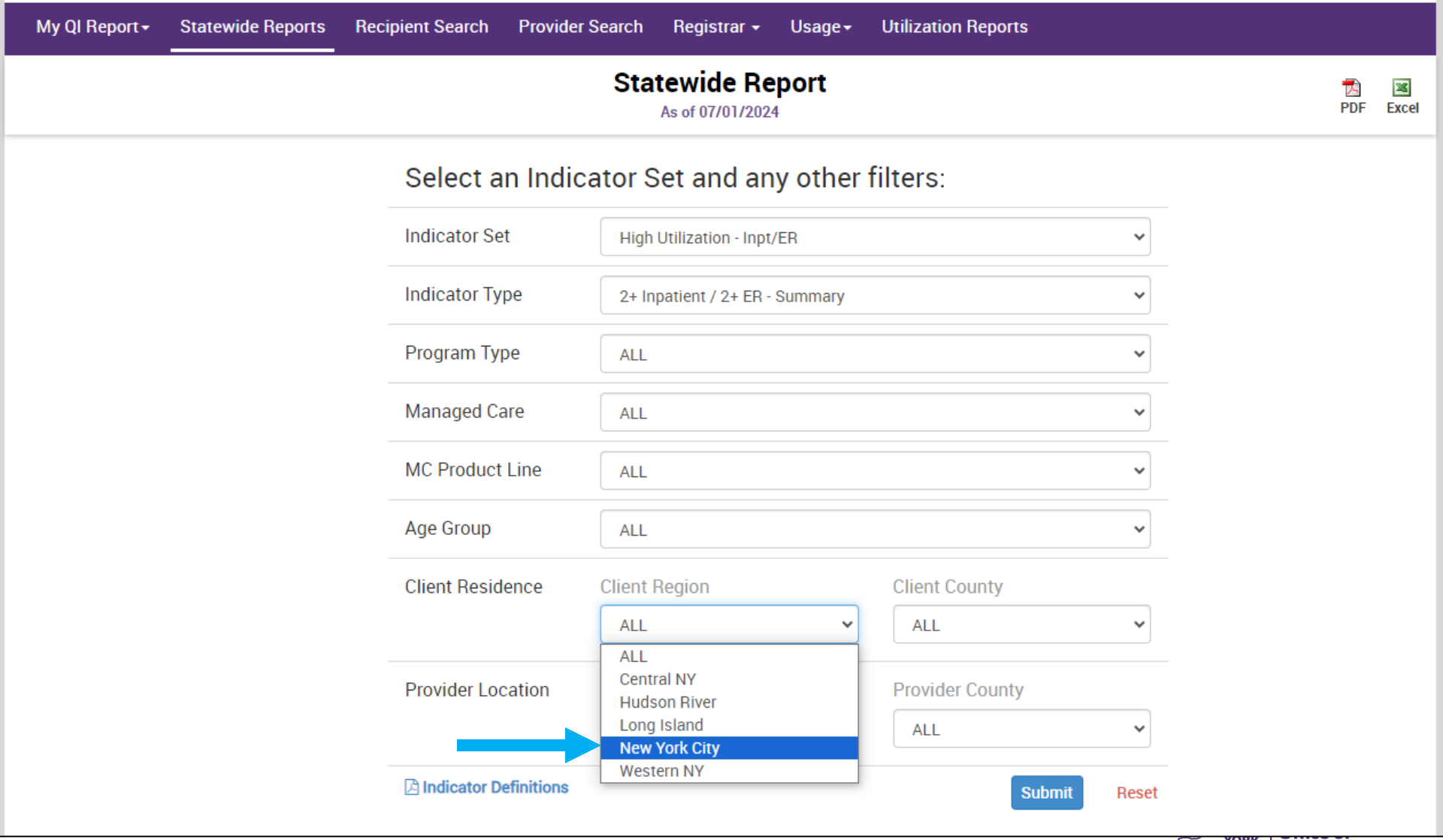
NYC Region Broken Out into 5 Counties

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

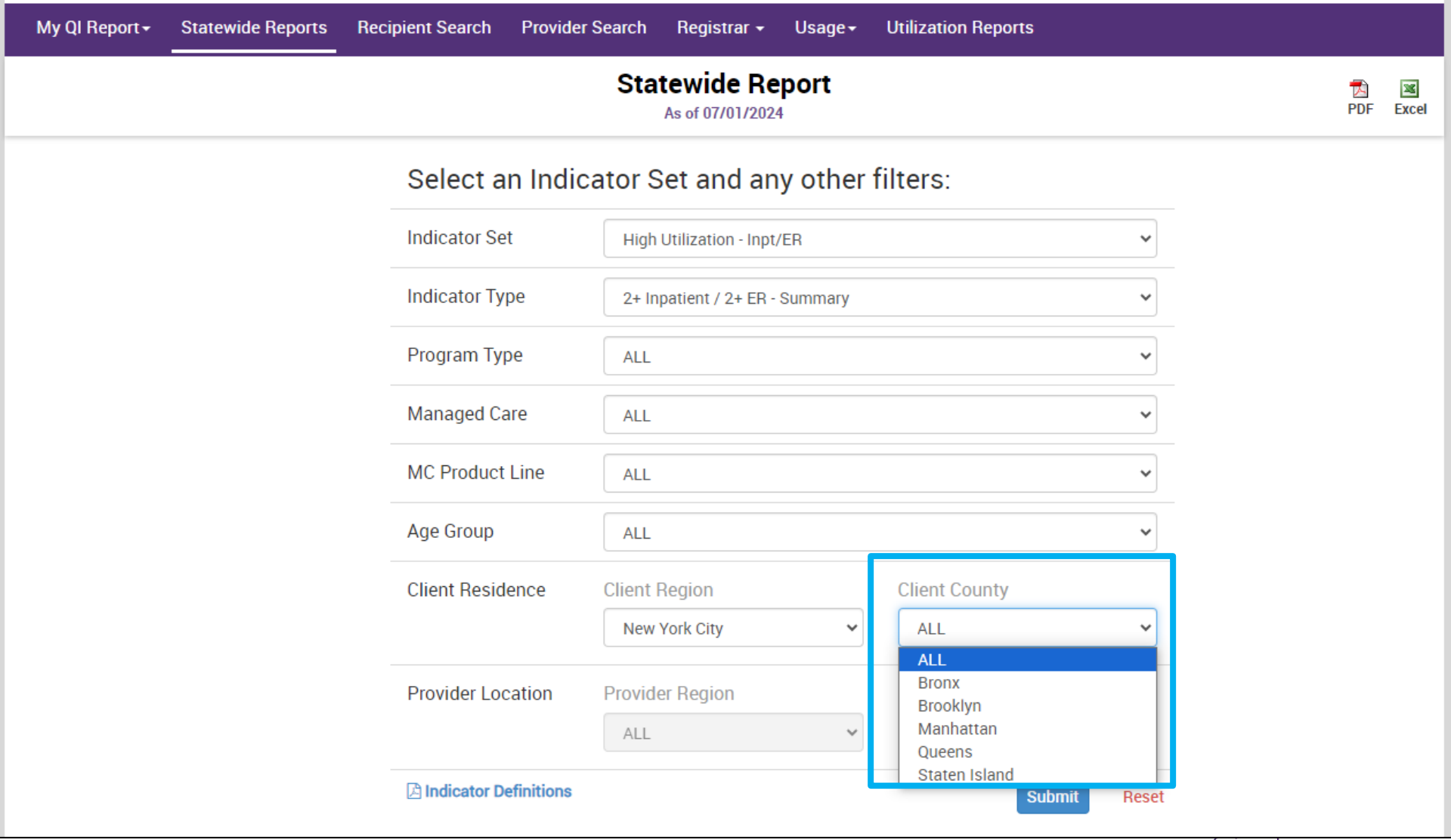
Statewide Reports



Statewide Reports



Statewide Reports



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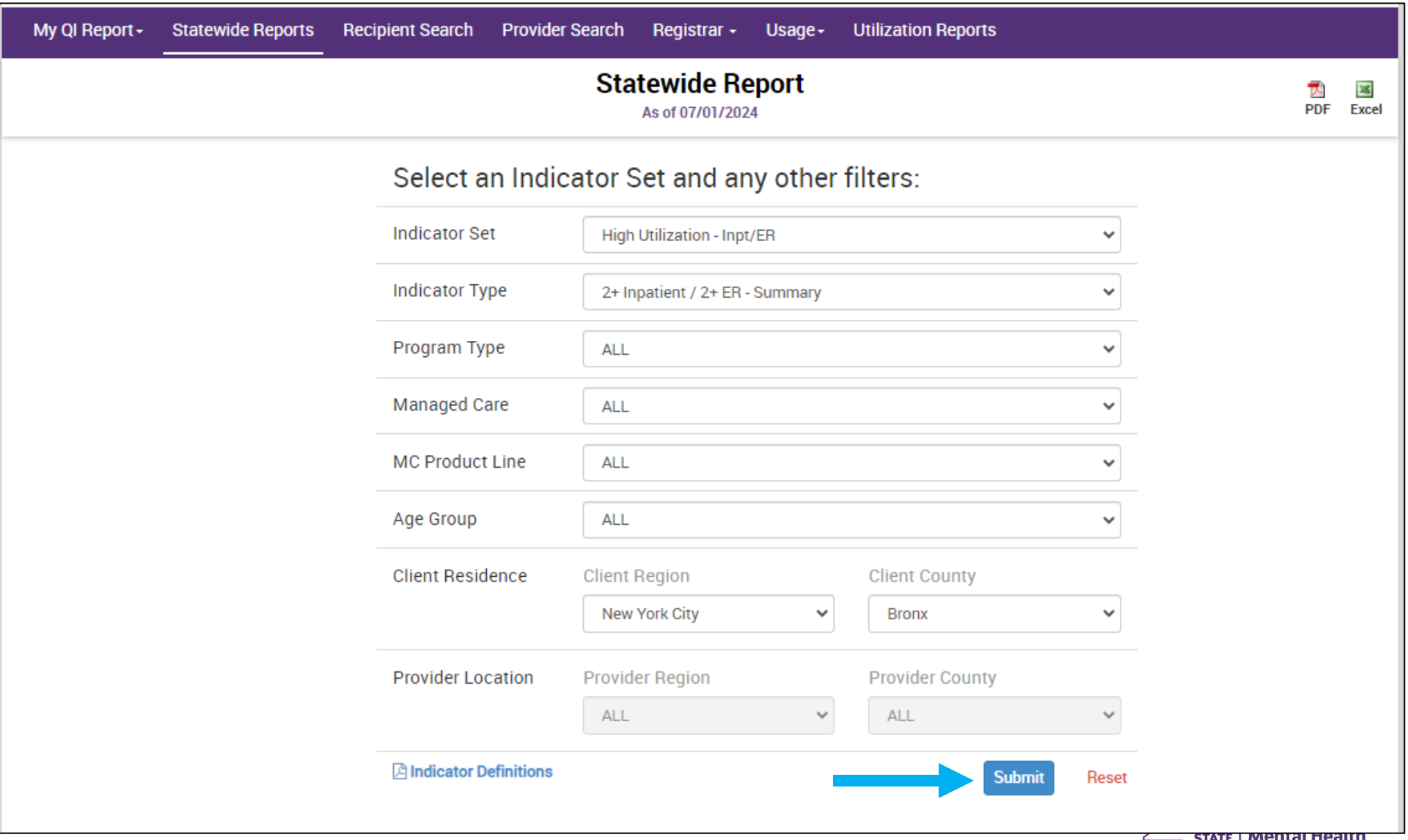
Statewide Reports



Statewide Report

As of 07/01/2024

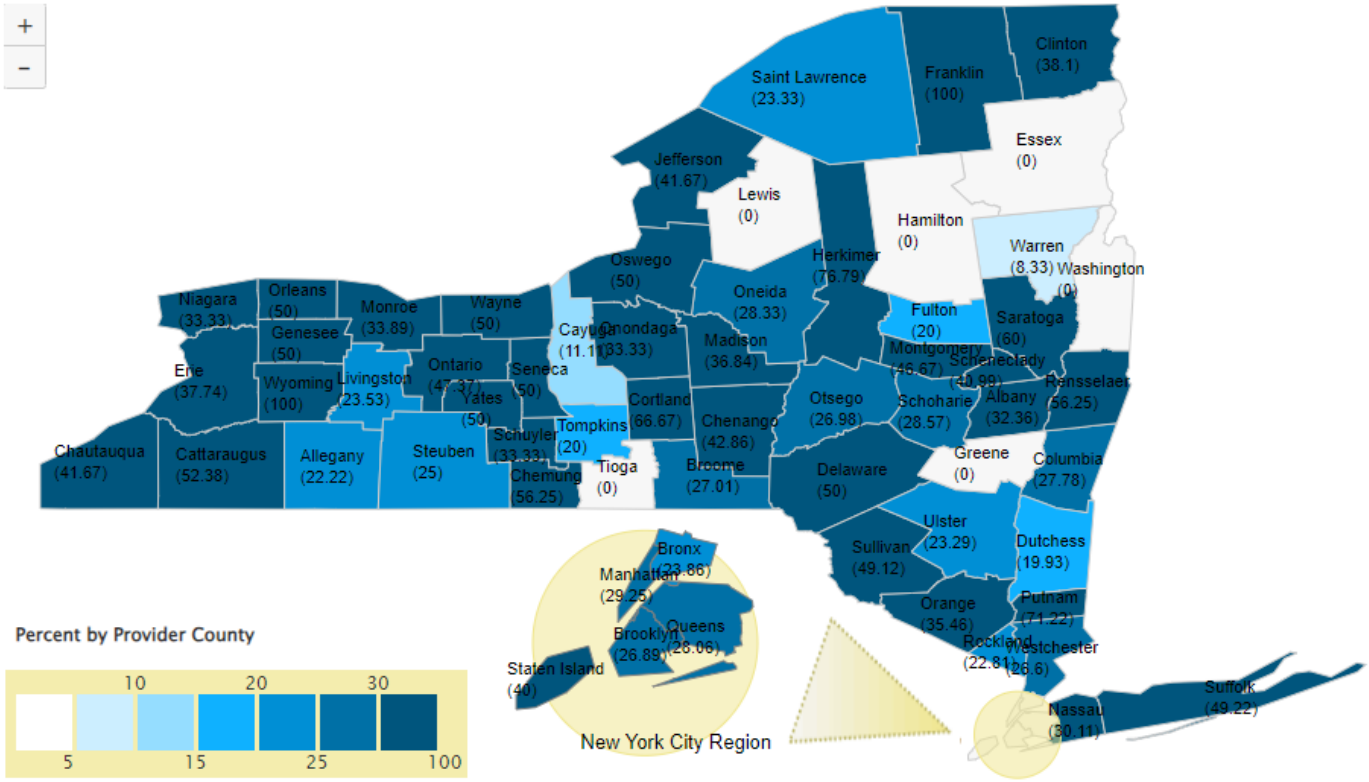
PDF Excel

INDICATOR SET: HIGH UTILIZATION - INPT/ER **INDICATOR**: 2+ INPATIENT / 2+ ER - SUMMARY **CLIENT REGION**: NEW YORK CITY **CLIENT COUNTY**: BRONX

Filters

Map view

Client Residence Provider Location



Client Region | Client County | Provider Region | Provider County | Network | Provider | Plan

Region by Client Residence	Eligible Population	# with QI Flag	%
STATE	484,583	108,176	22.32
New York City	484,583	108,176	22.32

Events/Episode-Based Quality Flags

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Events/Episode-Based Quality Flags

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

Events/Episode-Based Quality Flags

- **MH Performance Tracking Measure**:
  - No Follow Up after MH Inpatient - 7 Days
  - No Follow Up After MH ED Visit - 7 Days
  - No Follow Up after MH Inpatient - 30 Days
  - No Follow Up After MH ED Visit - 30 Days
  - No Engagement after MH Inpatient
  - No Intensive Care Management after MH ED Visit
  - No Intensive Care Management after MH Inpatient

Events/Episode-Based Quality Flags

- **SUD Performance Tracking Measure**
  - No Continuity of Care after Detox to Lower Level of Care
  - No Continuity of Care after Rehab to Lower Level of Care
  - No Follow Up After High-Intensity Care for SUD (7 days)
  - No Follow Up After High-Intensity Care for SUD (30 days)
  - No Initiation of SUD Treatment
  - No Engagement in SUD Treatment
  - No Initiation of Opioid Use Disorder (OUD) Treatment
  - No Engagement in Opioid Use Disorder (OUD) Treatment
  - No Follow Up after SUD ER Visit (7 days)
  - No Follow Up after SUD ER Visit (30 days)

Events/Episode-Based Quality Flags

- **Vital Signs Dashboard - Adult**
  - No Follow Up After MH ED Visit - 7 days
  - No Follow Up After MH ED Visit - 30 days
  - No Follow Up after MH Inpatient - 7 days
  - No Follow Up after MH Inpatient - 30 days
- **Vital Signs Dashboard - Child**
  - No Follow Up After MH ED Visit - 7 days
  - No Follow Up After MH ED Visit - 30 days
  - No Follow Up after MH Inpatient - 7 days
  - No Follow Up after MH Inpatient - 30 days

MAIN STREET AGENCY

Quality Indicator Overview As Of 07/01/2024

View: Standard PDF Excel

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

Filters Reset

Indicator Set

Quality Improvement Indicators (As Of 07/01/2024)

Run monthly on all available data as of run date

Indicator Set	Population	Eligible Population	# with QI Flag	%	Regional %	Statewide %
BH QARR - Improvement Measure	All	6,991	2,303	32.9	36.6	36
General Medical Health	All	193,544	17,803	9.2	13.5	12.9
Health Home Care Management - Adult	Adult 18+	10,475	8,689	82.9	81.5	87.9
High Utilization - Inpt/ER	All	193,641	52,047	26.9	23.8	20.7
Polypharmacy	All	18,336	2,553	13.9	17.8	12.8
Preventable Hospitalization	Adult	135,165	2,045	1.5	1	0.8
Readmission Post-Discharge from any Hospital	All	37,552	5,627	15	14.9	11.4
Readmission Post-Discharge from this Hospital	All	26,438	3,297	12.5	18.7	11.4
Treatment Engagement	Adult 18-64	5,625	1,813	32.2	31	32.7

Performance Tracking Indicators (As Of 121/01/2023)

Run with intentional lag of 6+ months to allow for complete data

Indicator Set	Population	Eligible Population	# with QI Flag	%	Regional %	Statewide %
General Medical Performance Tracking Measure	All	58,462	20,414	34.9	40	37.9
MH Performance Tracking Measure	All	10,472	5,644	53.9	55.5	55
SUD Performance Tracking Measure	Adol & Adult (13+)	12,317	9,722	78.9	78.5	80.4

My QI Report | Statewide Reports | Recipient Search | Provider Search | Registrar | Usage | Utilization Reports | Adult Home

MAIN STREET AGENCY

Quality Indicator Overview As Of 07/01/2024

View: Standard PDF Excel

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

Filters Reset

Indicator Set: MH Performance Tracking Measure

Indicator Set | Indicator

Indicator	Population	Eligible Population/ Episode	# with QI Flag	%	Regional %	Statewide %	25% 50% 75% 100%
1. No Follow Up for Child on ADHD Med - Initiation	Child	442	130	29.4	30.5	36.4	29.40 30.50 36.40
2. No Follow Up for Child on ADHD Med - Continuation	Child	87	16	18.4	27	30.7	18.40 27.00 30.70
3. Antidepressant Medication Discontinued - Acute Phase	Adult	2,538	1,100	43.3	42.7	43.3	43.30 42.70 43.30
[illegible]	Adult	2,538	1,482	58.4	57	57.9	58.40 57.00 57.90
[illegible]	Adult	2,546	950	37.3	32.1	34.5	37.30 32.10 34.50
[illegible] Bipolar	Adult	3,294	1,599	48.5	47.7	48.8	48.50 47.70 48.80
7. No Follow Up after MH Inpatient - 7 Days	6+	1,671	828	49.6	41.5	45.8	49.60 41.50 45.80
8. No Follow Up After MH ED Visit - 7 Days	6+	2,870	1,215	42.3	39.1	35	42.30 39.10 35.00
9. No Diabetes Screening - Schizophrenia/Bipolar on Antipsychotic	Adult	3,602	491	13.6	19.6	21.7	13.60 19.60 21.70
10. No Metabolic Monitoring (Gluc/HbA1c and LDL-C) Child & Adol on Antipsychotic	Child & Adol (1 to 17)	773	465	60.2	64.8	64.5	60.20 64.80 64.50
11. No Metabolic Monitoring (Gluc/HbA1c) Child & Adol on Antipsychotic	Child & Adol (1 to 17)	773	233	30.1	39.1	43.1	30.10 39.10 43.10
12. No Metabolic Monitoring (LDL-C) Child & Adol on Antipsychotic	Child & Adol (1 to 17)	773	448	58	63.3	62.8	58.00 63.30 62.80

The percentage of Mental Health Inpatient discharges among individuals ages 6 years and older that are not followed up by a Mental Health Outpatient visit within 7 days after the discharge.

ealth

Indicator Set: MH Performance Tracking Measure

Indicator Set | Indicator

Indicator	Population	Eligible Population/ Episode	# with QI Flag	%	Regional %	Statewide %	25% 50% 75% 100%
3. Antidepressant Medication Discontinued - Acute Phase	Adult	2,538	1,100	43.3	42.7	43.3	43.30 42.70 43.30
[illegible]	Adult	2,538	1,482	58.4	57	57.9	58.40 57.00 57.90
[illegible]	Adult	2,546	950	37.3	32.1	34.5	37.30 32.10 34.50
[illegible] Bipolar	Adult	3,294	1,599	48.5	47.7	48.8	48.50 47.70 48.80
7. No Follow Up after MH Inpatient - 7 Days	6+	1,671	828	49.6	41.5	45.8	49.60 41.50 45.80
8. No Follow Up After MH ED Visit - 7 Days	6+	2,870	1,215	42.3	39.1	35	42.30 39.10 35.00

The percentage of Mental Health Inpatient discharges among individuals ages 6 years and older that are not followed up by a Mental Health Outpatient visit within 7 days after the discharge.

My QI Report | Statewide Reports | Recipient Search | Provider Search | Registrar | Usage | Utilization Reports | Adult Home

MAIN STREET AGENCY

Quality Indicator Overview As Of 07/01/2024

View: Standard PDF Excel

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

Filters Reset

Indicator Set: MH Performance Tracking Measure **Indicator**: 7. No Follow Up after MH Inpatient - 7 Days

Indicator Set | Indicator | Site | HH/CM Site(s) | MCO | Attending | Recipients | New QI Flag | Dropped QI Flag

Recipient	Medicaid ID	DOB	Race & Ethnicity	Quality Flags	Current PHI Access	
SEFMTA SEzSQUNF SA	VrepMTMoNb6	MDElMTMlMTavMQ	Black	2+ Inpt-BH, 2+ Inpt-MH, 4+ Inpt/ER-MH, Adher-AP, Adher-AP (DOH), Cloz Candidate, HARP No Assessment for HCBS, HHPlus No HHPlus Service > 12 mos, HHPlus No HHPlus Service > 3 mos, HHPlus Not Entered in MAPP > 3 mos, High MH Need, MH Plcmt Consid, No Engage after MH IP, No ICM after MH Inpt, No MH Inpt F/U 7d (DOH), No MH Inpt F/U 7d (DOH) - Adult, POP Cloz Candidate, POP High User	No Access	Enable Access
				2+ Inpt-BH, 2+ Inpt-MH, Adher-AP (DOH), Adher-MS (DOH), Cervical Cancer Screen		

First Previous 1 2 Next Last

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Training & Technical Support

NEW YORK STATE | Office of Mental Health

Technical Support

- For more PSYCKES resources, please go to our website at: www.psyckes.org
- If you have any questions regarding the PSYCKES application, please reach out to our helpdesk:
  - 9:00AM – 5:00PM, Monday – Friday
  - PSYCKES-help@omh.ny.gov
- If you're having issues with your token or logging in, contact the ITS or OMH helpdesk:
  - ITS (OMH/State PC Employee) Helpdesk:
    - Please contact the NYS Helpdesk at https://chat.its.ny.gov or call 844-891-1786
  - OMH (Non-OMH/Non-State PC Employee) Helpdesk:
    - 518-474-5554, opt 2; healthhelp@its.ny.gov

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