



**Office of
Mental Health**

Using PSYCKES for Clinicians

We will begin shortly...

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PSYCKES Medical Informatics Team
April 14, 2020

Q&A via WebEx

- All phone lines are muted
- Access “Q&A” box in WebEx menu at the right of your screen; if you expanded the view of the webinar to full screen, hover cursor over green bar at top of screen to see menu
- Type questions using the “Q&A” feature
 - Submit to “all panelists” (default)
 - Please do not use Chat function for Q&A
- Note: slides will be emailed to attendees after the webinar

Overview

1. What is PSYCKES?
2. Access to PSYCKES Data
3. Searching for Clients in PSYCKES
4. Client-level data: the PSYCKES Clinical Summary
5. Consenting Clients for access to PSYCKES data
6. Uploading safety, discharge and care plans
7. Guidance and Technical Assistance

What is PSYCKES?



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What is PSYCKES?

- A web-based platform for sharing...
 - ✓ Medicaid claims and encounter data
 - ✓ Other state administrative data
 - ✓ Safety/Care/Discharge plan information entered by providers
- Comprehensive, user-friendly client information
- Secure, HIPAA-compliant
- Supports:
 - ✓ Quality improvement: provider/population trends
 - ✓ Clinical decision-making: individual client information

Who is in PSYCKES?

- Medicaid enrollees
 - Fee-for-service
 - Managed care
 - Medicaid & Medicare: Medicaid data only

Medications Past Year	Last Pick Up
Ibuprofen (Goodsense Ibuprofen) • Nonsteroidal Anti-inflammatory Agents (NSAIDs)	1/23/2019 Dose: 200 MG, 8
Note: This recipient is on Medicare. The majority of their medications will be paid for by Medicare and therefore not visible here	

- Previously enrolled (5-year look back)
- Behavioral health population
 - Mental health
 - Substance abuse
- Currently over 8 million individuals

What Client Information is in PSYCKES?

- 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, etc.
 - Time lag varies from weeks to months, depending on how quickly providers bill and Managed Care plans submit to DOH
- “Real time” (0-7 day lag) data sources
 - MHARS: State Psychiatric Center EMR data
 - CAIRS: ACT provider and contact information
 - TACT: AOT provider and contact information
 - MAPP: Health Home enrollment and CM provider information
 - NIMRS: Suicide attempt (not restricted to 5-year lookback)
 - Managed Care Enrollment Table: MC Plan & HARP status
- Safety plans and other provider-entered data.

Quality Indicators (“Flags”)

1. General Medical Health
2. Treatment Engagement
3. Readmission Post-Discharge from any Hospital
4. Readmission Post-Discharge from this Hospital
5. High Utilization
6. Preventable Hospitalization
7. Polypharmacy
8. Health and Recovery Plan (HARP)
9. BH QARR Improvement Measures
10. BH QARR DOH Performance Tracking Measure
11. Substance Use Disorders



Access to PSYCKES Data



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Access to Client Data: Providers

You will see clients assigned to your hospital/agency/facility:

- Automatically: Billed service within the past 9 months
- Manually: Provider attests one of the following...
 - Client is being served at agency
 - Emergency*
 - Client has signed PSYCKES consent

Levels of access

- Client has signed PSYCKES consent: Access to all data, including data with special protection** (DSP), for three years after last service.
- Emergency: Access to all data, including DSP, for 72 hours.
- No consent, no emergency, but has a Quality Flag: Access to data except data with special protection, while flag is active (up to 9 months after last service).
- No consent, no emergency, no Quality Flag: No access to client-level data.

*A medical or behavioral condition for which there is an immediate need for treatment, and symptoms are of sufficient severity that the absence of immediate treatment would result in serious consequences, (ex., harm to self or others).

**Substance abuse, HIV, genetic information, reproductive/family planning.

Access to Client Data for Providers: Comparison

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

Access to Client Data: State/Local Government, Managed Care

- See all data, including data with special protection
 - Managed care plans: for individuals currently enrolled or recently dis-enrolled
 - State/local government oversight: for all clients

More information about access to PSYCKES data:

[New PSYCKES Features Recorded Webinar](#)

- Access to data for BHCC's
- Access to data for Adult Health Homes



Searching for Clients in PSYCKES



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Recipient Search: Individual or Cohort

My QI Report -

Statewide Reports

Recipient Search

Provider Search

Registrar -

Usage Reports -

Utilization Reports

MyCHOIS

Recipient Search

Limit results to 50

Search

Reset

Recipient Identifiers

Medicaid ID

AB00000A

SSN

000-00-0000

First Name

Last Name

DOB

MM/DD/YYYY

Characteristics as of 02/03/2020

Age Range

To

Gender

Population

High Need Population

AOT Status

Alerts & Incidents

Managed Care

MC Product Line

Medicaid Restrictions

DSRIP PPS

Children's Waiver Status

HARP Status

HARP HCBS Assessment Status

HARP HCBS Assessment Results

Quality Flag as of 02/01/2020

Definitions

HARP Enrolled - Not Health Home Enrolled - (updated weekly)

HARP-Enrolled - No Assessment for HCBS - (updated weekly)

Antipsychotic Polypharmacy (2+ >90days) Children

Antipsychotic Two Plus

Antipsychotic Three Plus

Antidepressant Two Plus - SC

Antidepressant Three Plus

Psychotropics Three Plus

Psychotropics Four Plus

Polypharmacy Summary

Discontinuation - Antidepressant <12 weeks (MDE)

Adherence - Mood Stabilizer (Bipolar)

Adherence - Antipsychotic (Schiz)

Treatment Engagement - Summary

No Metabolic Monitoring (Gluc/HbA1c and LDL-C) on Antipsychotic (All)

No Metabolic Monitoring (Gluc/HbA1c and LDL-C) on Antipsychotic (Child)

No Diabetes Monitoring (HbA1C and LDL-C) Diabetes and Schiz

No Diabetes Screening (Gluc/HbA1c) Schz or Bipolar on Antipsychotic Adults

No Diabetes Monitoring (HbA1c) Diabetes

PH QAPP - 2019 Quality Improvement Subject Summary

Services: Specific Provider as of 02/01/2020

Past 1 Year

Provider

Region

County

Current Access

Service Utilization

Number of Visits

Service Setting:

Care Coordination

Foster Care

Inpatient - ER

Living Support/Residential

Other

Outpatient - DD

Outpatient - MH

Service Detail: Selected

Medication & Diagnosis as of 02/01/2020

Past 1 Year

Prescriber Last Name

Drug Name

Active Drug

Psychotropic Drug Class*

ADHD Med

Antidepressant

Antipsychotic

Antipsychotic - Long Acting Injectab

Non-Psychotropic Drug Class*

Analgesics and Anesthetics

Anti-Infective Agents

Anti-Obesity Agents

Antidiabetic

Services by Any Provider as of 02/01/2020

Past 1 Year

Provider

Region

County

Service Utilization

Number of Visits

Service Setting:

Care Coordination

Service Detail: Selected

Search for a Cohort

Characteristics as of 02/03/2020

Age Range To Gender

Population

High Need Population

AOT Status

Alerts & Incidents

Managed Care

MC Product Line

Medicaid Restrictions

DSRIP PPS

Children's Waiver Status

HARP Status

HARP HCBS Assessment Status

HARP HCBS Assessment Results

Quality Flag as of 02/01/2020

Definitions

Health Home Enrolled - (updated weekly)

HARP-Enrolled - No Assessment for HCBS - (updated weekly)

Antipsychotic Polypharmacy (2+ >90days) Children

Antipsychotic Two Plus

Antipsychotic Three Plus

Antidepressant Two Plus - SC

Antidepressant Three Plus

Psychotropics Three Plus

Psychotropics Four Plus

Polypharmacy Summary

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No Diabetes Monitoring (HbA1c and LDL-C) Diabetes and Schz

No Diabetes Screening (Gluc/HbA1c) Schz or Bipolar on Antipsychotic Adults

No Diabetes Monitoring (HbA1c) Diabetes

PH QAPP - 2019 Quality Improvement Summary

Services: Specific Provider as of 02/01/2020

Post 1 Year

Provider

Region County

Current Access

Service Utilization Number of Visits

Service Setting:

Care Coordination

Foster Care

Inpatient - ER

Living Support/Residential

Other

Outpatient - DD

Outpatient - MH

Service Detail: Selected

Medication & Diagnosis as of 02/01/2020

Post 1 Year

Prescriber Last Name

Drug Name ☐ Active Drug

Psychotropic Drug Class*

ADHD Med

Antidepressant

Antipsychotic

Antipsychotic - Long Acting Injectab

Non-Psychotropic Drug Class*

Analgesics and Anesthetics

Anti-Infective Agents

Anti-Obesity Agents

Antidiabetic

Diagnosis

Diagnosis given ☒ Primary Only ☐ Primary/Secondary

BH Diagnosis

Any BH Diagnosis

Any MH Diagnosis

Anxiety Disorders

Bipolar and Related Disorders

Medical Diagnosis

Certain conditions originating in the peri

Certain infectious and parasitic diseases

Congenital malformations, deformations

Diseases of the blood and blood-forming

Services by Any Provider as of 02/01/2020

Post 1 Year

Provider

Region County

Service Utilization Number of Visits

Service Setting:

Care Coordination

Foster Care

Inpatient - ER

Living Support/Residential

Other

Outpatient - DD

Outpatient - MH

Outpatient - Medical

Outpatient - Medical Speciality

Outpatient - SU

Outpatient - Unspecified

Service Detail: Selected

Filters for Cohort Searches

High Need Population:

- OPWDD NYSTART: potentially eligible
- AOT Court Order: Active; Expired < 12m
- ACT: Enrolled; Discharged < 12m
- State PC Discharge < 12m
- OnTrackNY: Enrolled; Discharged

Population:

- OPWDD Services Eligible (RE95)
- Any OMH Outpt Specialty MH Past Year (HCBS, ACT, PROS, CDT, etc)
- Dual Eligible (Medicaid + Medicare)
- Transition from WMS to NYSoH: Medicaid Recertification Due < 3 months; Expired

Alerts & Incidents:

- Opioid Overdose, past 1 & 3 years, according to Medicaid billing diagnosis
- Overdose Risk: Concurrent Opioid & Benzo past year
- Suicide Attempt (NIMRS/Medicaid) past 1 year

Non-Psychotropic Drug Class:

- Controlled substances and Opioid medication

Psychotropic Drug Class:

- MAT for OUD

Characteristics:

- HARP HCBS Assessment Status
- HARP HCBS Results Status

Search Results

	Age Range	12 To 18
AND	BH Diagnosis	Disruptive, Impulse-Control, and Conduct Disorders
AND	[Provider Specific] Provider	Sample Agency
AND	[Provider Specific] Service Setting:	Outpatient - MH
AND	[Any Provider] Service Setting:	Inpatient - ER

Maximum Number of Rows Displayed: 50

Name ▲	Medicaid ID ▲	DOB ▲	Gender ▲	Quality Flags ▲	Managed Care Plan ▲	Current PHI Access ▲
Qq7JUFA Sbl SaFISUnFQUm	RF6sMpYo MaY	MTIIOCyOM DAr	TQ LQ MTQ		Fidelis Care New York	No Access
SEVOTEVZ RqFCUabFTA	RUErMTQsN V2	NSyvLplmM D2	TQ LQ MTI	3PP(Y), BH QARR - DOH, No Gluc/HbA1c & LDL-C - AP, No Gluc/HbA1c - AP, No LDL-C - AP	MVP	Quality Flag
Vab0SENP Qq7VTaNISQ SbVOSUzS R6	RFMoN9Ap OVa	OCyuLplmM DQ	TQ LQ MTU		MVP	No Access
SEbEQUnHTm QUvEUaVT RQ	RFYqOTMq ME2	NoysLplmM DU	TQ LQ MTQ	No Gluc/HbA1c & LDL-C - AP, No Gluc/HbA1c - AP, No LDL-C - AP	MVP	Quality Flag
QVVDQVBJTaE SazOQVRIQUu	RFMuODaq OV6	MTIIMTIIM9 AmNA	TQ LQ MTU		MVP	No Access

Search for Individual Recipient

Recipient Search

Limit results to 50

Search

Reset

Recipient Identifiers

Search in: ☒ Full Database ☐ HUTCHINGS PSYCHIATRIC CENTER

Medicaid ID	SSN	First Name	Last Name	DOB
<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text" value="MM/DD/YYYY"/>

Searching Your Agency by Name

Recipient Search

Limit results to 50

Search

Reset

Recipient Identifiers

Search in: ☐ Full Database ☒ MAIN STREET CLINIC

Medicaid ID

SSN

First Name

Last Name

DOB

SMITH

MM/DD/YYYY

May yield multiple results:

Name	Medicaid ID	DOB	Gender	Quality Flags	Managed Care Plan	Current PHI Access
Adecbbc Ffejgd	Ebebece Djiebj	01/01/9999	Accgbff Fdiadba			All Data - Consent
Afccjec Hiifjei	Ehccdhd Fggeeab	01/01/9999	Feegccc Fabbdad		Fidelis Care New York	No Access
Agjcfib Ihhhiab	Idhjccc Aebhebb	01/01/9999	Bgecbdc Adficfd			No Access
Agjcfib Ihhhiab	Jdbbgdd Ifcjebc	01/01/9999	Bgecbdc Adficfd	2+ Inpt-Medical, Readmit 30d - Medical to Medical		Quality Flag

Searching Full PSYCKES Database by Name

Recipient Search

Limit results to 50 [Search](#) [Reset](#)

Recipient Identifiers

Search in ☒ Full Database ☐ MAIN STREET CLINIC

Medicaid ID

SSN

First Name

Last Name

DOB

SMITH

MM/DD/YYYY

- Searches all 8 million clients currently in PSYCKES application.
- If over 10 results, will be directed to narrow search criteria:

[← Modify Search](#)

No Recipients Found

Last Name	smith
-----------	-------

There are too many recipients matching your search criteria. You can narrow a search using one of the following strategies:

- Search with a unique identifier (Medicaid ID or Social Security Number)
- When searching by name, use First Name, Last Name, and DOB
- If your provider agency has served this client within the past year, you can limit search to clients served by your provider agency

Recommendation: Search by Unique Identifier

Recipient Search

Limit results to 50

Search

Reset

Recipient Identifiers

Search in: ☒ Full Database ☐ MAIN STREET CLINIC

Medicaid ID

AB12345C

SSN

First Name

Last Name

DOB

MM/DD/YYYY

- Medicaid ID or Social Security Number or
- First Name + Last Name + DOB

Modify Search

1 Recipients Found

PDF

Excel

Medicaid ID

XXXXXXXX

AND

[Provider Specific] Provider Name

Main Street Clinic

Maximum Number of Rows Displayed: 50

Name	Medicaid ID	DOB	Gender	Quality Flags	Managed Care Plan	Current PHI Access
Jedigah Cjdeahd	Daacabc Egcdhfb	01/01/9999	Ddcfcfc Cdfiegc		Fidelis Care New York	All Data - Consent

The PSYCKES Clinical Summary



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Click Client Name to Access Summary

Name	Medicaid ID	DOB	Gender	Quality Flags	Managed Care Plan	Current PHI Access
Deabehb Dbdibeb	Abjdgja Ddffbce	01/01/9999	Bbcfaej Geedfef			No Access
Deabehb Dbdibeb	Ceighdi Bceeede	01/01/9999	Dcicfbb Fceedfc	BH QARR - DOH, HARP No Health Home, No DM Screen - AP, No Gluc/HbA1c & LDL-C - AP, No Gluc/HbA1c - AP, No LDL-C - AP, No Outpt Medical	HIP (EmblemHealth)	All Data - Consent
Gegfhcg Jhdibed	Bcgbahj Chjejea	01/01/9999	Ebaefdj Bdaecac	No Outpt Medical		Quality Flag

Reminder: You must have some type of access to a client’s data in order to view their summary.

If “No Access,” name will not be clickable.

Clinical Summary Header

[Recipient Search](#)

QUnMRUui RVJJQqE
Clinical Summary as of 12/2/2019



Brief Overview

1 Year Summary

5 Year Summary

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

DOB: M8ynOSynOTav (M9A Yrs)
Address: MpYvOQ UrRBVEU UazVVEU Mp2mLA QqFUTom
Tbai MTMmMpM

Medicaid ID: REInMDYqMbY
Managed Care Plan: Fidelis Care New York (Mainstream)

Medicare: No

Children's Waiver Status: N/A
DSRIP PPS: Central New York Care Collaborative, Inc. PPS

Alerts & Incidents • all available

Most Recent

1	Overdose - Opioid (1 ER)	6/5/2019	CROUSE HOSPITAL (ER - SU)
1	Self inflicted Poisoning (1 Inpatient)	5/20/2016	UNIVERSITY HSP SUNY HLTH SC (Inpatient - Medical)

Note: Higher # count totals for Inpatient, ER, and Other settings may represent multiple services in same day

Active Quality Flags • as of monthly QI report 9/1/2019

BH QARR - DOH Performance Tracking Measure - as of 04/01/2019
No Engagement of Alcohol/Drug Treatment • No Initiation of Alcohol/ Drug Treatment

High Utilization - Inpt/ER
2+ ER - BH • 2+ ER - Medical • 2+ Inpatient - BH • 2+ Inpatient - Medical

Readmission Post-Discharge from any Hospital
BH to All Cause • Medical to Medical

Substance Use Disorders - as of 04/01/2019
No Engagement in Opioid Use Disorder (OUD) Treatment • No Engagement in SUD Treatment • No Follow Up after SUD ER Visit (30 days) • No Follow Up after SUD ER Visit (7 days) • No Initiation of Medication Assisted Treatment (MAT) for New Episode of Opioid Use Disorder (OUD) • No Initiation of Opioid Use Disorder (OUD) Treatment • No Initiation of SUD Treatment

Diagnoses Past Year

Behavioral Health (2)
Most Recent: Opioid related disorders • Cocaine related disorders
Most Frequent (# of services): Opioid related disorders (73) • Cocaine related disorders (22)

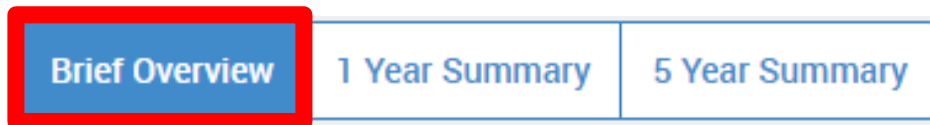
Medical (20)
5 Most Recent: Other inflammation of vagina and vulva • Trichomoniasis • Abdominal and pelvic pain • Other diseases of biliary tract • Cholelithiasis ...
5 Most Frequent (# of services): Cholelithiasis (4) • Other diseases of biliary tract (5) • Superficial injury of head (1) • Abdominal and pelvic pain (3) • Abnormalities of heart beat (2) ...

Medications Past Year

Last Pick Up

Fluconazole • Imidazole-Related Antifungals
11/8/2019 Dose: 150 MG, 1/day • Quantity: 1

The Brief Clinical Summary



Critical information in a client's Clinical Summary:

- Current Care Coordination
- Alerts & Incidents
- Active Quality Flags
- Diagnoses Past Year
- Medications Past Year
- Outpatient Providers Past Year
- Hospital Utilization Past 5 Years
- Safety Plans

Brief Clinical Summary Recorded Webinar:

- [Click here for Brief CS Intro Recording](#)

A large, dark blue arrow pointing downwards, outlined in red. Inside the arrow, the following text is written in white:

**Note: the
following
slides
pertain to
1 & 5 Year
Views**

One- and Five-Year View

[← Recipient Search](#)

QUJEQUnMQU6i SqFNQUm
Clinical Summary as of 11/9/2019

PDF Excel

Sections

[Brief Overview](#) [1 Year Summary](#) [5 Year Summary](#)

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

General

Name	Medicaid ID	Medicare	DSRIP PPS
QUJEQUnMQU6i SqFNQUm	UrArOTQtMFa	No	New York City Health and Hospitals Corp PPS
DOB	Medicaid Aid Category	Managed Care Plan	
MTIIMT2IMTarN6 KDYo WVJTKQ	SAFETY NET W/O DEPRIV	No Managed Care(FFS Only)	
Address	Medicaid Eligibility Expires on	HARP Status	
MTQpN6 Np7USA UrQ Mbli QbJPTqjMWUui Tbai MTEoM96		Not Eligible	

POP Intensive Care Transition Services

No intensive care transition services have been entered

Alerts & Incidents

Incidents from NIMRS, Service invoices from Medicaid

[Details](#)

[Table](#) [Graph](#)

Alert/Incident Type	Number of Events/Meds/Positive Screens	First Date	Most Recent Date	Provider Name(s)	Program Name	Severity/Diagnosis/Meds/Results	
Overdose Risk - Concurrent Opioid and Benzodiazepine	79 cumulative days	8/13/2018	11/26/2018	Reyfman Leonid	N/A	Tapentadol Hcl	

Quality Flags

as of monthly QI report 7/1/2019

[Definitions](#)


[Recent](#) [All \(Graph\)](#) [All \(Table\)](#)

Indicator Set

BH QARR - Improvement Measure	No Metabolic Monitoring (Gluc/HbA1c) on Antipsychotic • No Metabolic Monitoring (LDL-C) on Antipsychotic
General Medical Health	Diabetes Monitoring-No HbA1c >1 Yr • No Metabolic Monitoring (Gluc/HbA1c and LDL-C) on Antipsychotic


Levels of Access: Show DSP

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



Quality Flags as of monthly QI report 9/1/2019 [Definitions](#)

Recent All (Graph) All (Table)

Indicator Set 	
BH QARR - DOH	BH QARR - DOH Performance Tracking Measure - as of 04/01/2019: Antidepressant Medication Discontinued (Acute Phase) • Antidepressant Medication Discontinued (Recovery Phase) • No Diabetes Monitoring (DM & Schizophrenia)
Health and Recovery Plan (HARP)	HARP Enrolled - Not Health Home Enrolled
High Utilization - Inpt/ER	2+ ER - BH • 2+ ER - MH • 2+ ER - Medical • 2+ Inpatient - BH • 4+ Inpatient/ER - MH
Readmission Post-Discharge from any Hospital	BH to BH • MH to All Cause
Substance Use Disorders	Substance Use Disorders - as of 04/01/2019: No Continuity of Care after Rehab to Lower Level of Care • No Initiation of Medication Assisted Treatment (MAT) for New Episode of Opioid Use Disorder (OUD) • No Utilization of Medication Assisted Treatment (MAT) for Opioid Use Disorder (OUD)

Plans & Documents

There are no Plans or Documents

Behavioral Health Diagnoses Primary and Secondary Dx (most frequent first)

[Alcohol related disorders](#) • [Cocaine related disorders](#) • [Other psychoactive substance related disorders](#) • [Tobacco related disorder](#) • [Major Depressive Disorder](#) • [Schizoaffective Disorder](#) • [Schizophrenia](#) • [Adjustment Disorder](#) • [Substance-Induced Depressive Disorder](#) • [Opioid related disorders](#) • [Substance-Induced Psychotic Disorder](#) • [Unspecified/Other Bipolar](#) • [Unspecified/Other Depressive Disorder](#)

Medical Diagnoses Primary and Secondary Dx (most frequent first)

Certain Infectious And Parasitic Diseases	Human immunodeficiency virus [HIV] disease • Unspecified viral hepatitis
Diseases Of The Circulatory System	Essential (primary) hypertension

Levels of Access: Hide DSP

This report does not contain clinical data with special protection

- Data with Special Protection ☐ Show ☒ Hide

Quality Flags

as of monthly QI report 9/1/2019

Definitions

Recent

All (Graph)

All (Table)

Indicator Set

BH QARR - DOH	BH QARR - DOH Performance Tracking Measure - as of 04/01/2019: Antidepressant Medication Discontinued (Acute Phase) • Antidepressant Medication Discontinued (Recovery Phase) • No Diabetes Monitoring (DM & Schizophrenia)
Health and Recovery Plan (HARP)	HARP Enrolled - Not Health Home Enrolled
High Utilization - Inpt/ER	2+ ER - BH • 2+ ER - MH • 2+ ER - Medical • 2+ Inpatient - BH • 4+ Inpatient/ER - MH
Readmission Post-Discharge from any Hospital	BH to BH • MH to All Cause

No SU-related QI flags

No SU-related QI flags

Plans & Documents

There are no Plans or Documents

Behavioral Health Diagnoses Primary and Secondary Dx (most frequent first)

[Major Depressive Disorder](#) • [Schizoaffective Disorder](#) • [Schizophrenia](#) • [Adjustment Disorder](#) • [Unspecified/Other Bipolar](#)

No SU diagnosis

Medical Diagnoses Primary and Secondary Dx (most frequent first)

Diseases Of The Circulatory System

[Essential \(primary\) hypertension](#)

No HIV diagnosis

Levels of Access: No Access to DSP

This report does not contain clinical data with special protection - consent required.



Quality Flags

as of monthly QI report 5/1/2019 [Definitions](#)

Recent

All (Graph)

All (Table)

Indicator Set

BH QARR - DOH

BH QARR - DOH Performance Tracking Measure - as of 11/01/2018: [No Follow Up after MH Inpatient \(30 Days\)](#) • [No Follow Up after MH Inpatient \(7 Days\)](#)

High Utilization - Inpt/ER

[2+ ER - Medical](#) • [2+ Inpatient - BH](#) • [2+ Inpatient - Medical](#) • [4+ Inpatient/ER - Med](#)

No SU-related QI flags

Plans & Documents

There are no Plans or Documents

Behavioral Health Diagnoses

Primary and Secondary Dx (most frequent first)

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

No SU diagnosis

Medical Diagnoses

Primary and Secondary Dx (most frequent first)

Diseases Of The Blood And Blood-Forming Organs And Certain Disorders Involving The Immune Mechanism

[Acute posthemorrhagic anemia](#)

No HIV diagnosis

Critical Information: HCBS & Care Coordination

General

Name SUnMSU2i QqFSQQ U6	Medicaid ID QrUqMpQtMFa	Medicare No	HARP Status HARP Enrolled (H1)
DOB NCyoMSynOT2q KDQr WVJTKQ	Medicaid Aid Category SAFETY NET W/O DEPRIV	Managed Care Plan Fidelis Care New York (HARP)	HARP HCBS Assessment Status Tier 2 HCBS Eligibility (Reassess overdue)
Address MTUoM6 TUFJT6 UrRSRUVULA TabBRqFSQQ RaFMTFMI Tbai MTQpMDU	Medicaid Eligibility Expires on 03/31/2020	MC Plan Assigned PCP Clarke, Ronald	DSRIP PPS Millennium Collaborative Care PPS

Current Care Coordination

Medicaid Eligibility Alert: This client must use the New York State of Health (NYSoH) enrollment system for Medicaid recertification **expiration: 03/31/2020**. For More information contact NYSoH at 1-855-355-5777.


POP High User: In the event of emergency department/inpatient hospitalizations, client **is eligible for intensive care transition services**. To coordinate, please contact the client's managed care plan Fidelis Care New York Behavioral Health High Risk Alert Team, 718-896-6500 ext. 16077 for HARP members, ext. 16072 for Non-HARP members (see HARP status above), BHHHighRisk@fideliscare.org.

Care Coordination Alert - This client **is eligible for Health Home Plus** due to: 3+ Inpt MH < 12 months

Critical Information: Alerts, Incidents, QI Flags

Alerts & Incidents Incidents from NIMRS, Service invoices from Medicaid [Details](#)

Table Graph

Alert/Incident Type	Number of Events/Meds/Positive Screens	First Date	Most Recent Date	Provider Name(s)	Program Name	Severity/Diagnosis/Meds/Results	
Treatment for Suicidal Ideation	27	5/30/2013	12/13/2019	NIAGARA FALLS MEMORIAL MEDICAL CENT	Inpatient - MH	Suicidal ideations	

Quality Flags as of monthly QI report 2/1/2020 [Definitions](#)

Recent All (Graph) All (Table)

Indicator Set	
BH QARR - DOH	BH QARR - DOH Performance Tracking Measure - as of 08/01/2019: No Engagement of Alcohol/Drug Treatment
BH QARR - Improvement Measure	No Metabolic Monitoring (LDL-C) on Antipsychotic
General Medical Health	No Metabolic Monitoring (Gluc/HbA1c and LDL-C) on Antipsychotic
Health and Recovery Plan (HARP)	HARP Enrolled - Not Health Home Enrolled
High Utilization - Inpt/ER	2+ ER - Medical • 2+ Inpatient - BH • 2+ Inpatient - MH • 4+ Inpatient/ER - MH • POP : High User
Polypharmacy	Psychotropics Four Plus (Buspirone Hcl + Gabapentin + Hydroxyzine Hcl + Hydroxyzine Pamoate + Oxcarbazepine + Prochlorperazine Maleate + Sertraline Hcl + Topiramate + Trazodone Hcl)



Office of
Mental Health

Diagnoses

Behavioral Health Diagnoses Primary and Secondary Dx (most frequent first)

Schizoaffective Disorder • Schizophrenia • Cannabis related disorders • Major Depressive Disorder • Tobacco related disorder • Unspecified/Other Psychotic Disorders • Delusional Disorder • Adjustment Disorder • Antisocial Personality Disorder • Intellectual Disabilities • Other psychoactive substance related disorders • Alcohol related disorders • Conduct Disorder • Delirium • Unspecified/Other Anxiety Disorder • Unspecified/Other Bipolar • Unspecified/Other Depressive Disorder

Medical Diagnoses Primary and Secondary Dx (most frequent first)

Diseases Of The Circulatory System	Essential (primary) hypertension • Other cardiac arrhythmias
Diseases Of The Musculoskeletal System And Connective Tissue	Other and unspecified soft tissue disorders, not elsewhere classified
Diseases Of The Skin And Subcutaneous Tissue	Seborrheic dermatitis
Endocrine, Nutritional And Metabolic Diseases	Overweight and obesity • Volume depletion
Factors Influencing Health Status And Contact With Health Services	Persons encountering health services in other circumstances • Problems related to housing and economic circumstances • Problems related to employment and unemployment • Problems related to lifestyle • Encounter for general examination without complaint, suspected or reported diagnosis • Encounter for screening for other diseases and disorders
Symptoms, Signs And Abnormal Clinical And Laboratory Findings, Not Elsewhere Classified	Symptoms and signs involving emotional state • Abnormalities of heart beat • Malaise and fatigue • Pain, unspecified • Abnormal results of function studies • Dizziness and giddiness • Nausea and vomiting • Other symptoms and signs involving general sensations and perceptions • Symptoms and signs involving appearance and behavior

Sources of Diagnoses

Click any diagnosis to see associated claims

Behavioral Health Diagnoses Primary and Secondary Dx (most frequent first)

Schizoaffective Disorder • Schizophrenia • Cannabis related disorders • Major Depressive Disorder • Tobacco related disorder • Unspecified/Other Psychotic Disorders • Delusional Disorder • Adjustment Disorder • Antisocial Personality Disorder • Intellectual Disabilities • Other psychoactive substance related disorders • Alcohol related disorders • Conduct Disorder • Delirium • Unspecified/Other Anxiety Disorder • Unspecified/Other Bipolar • Unspecified/Other Depressive Disorder

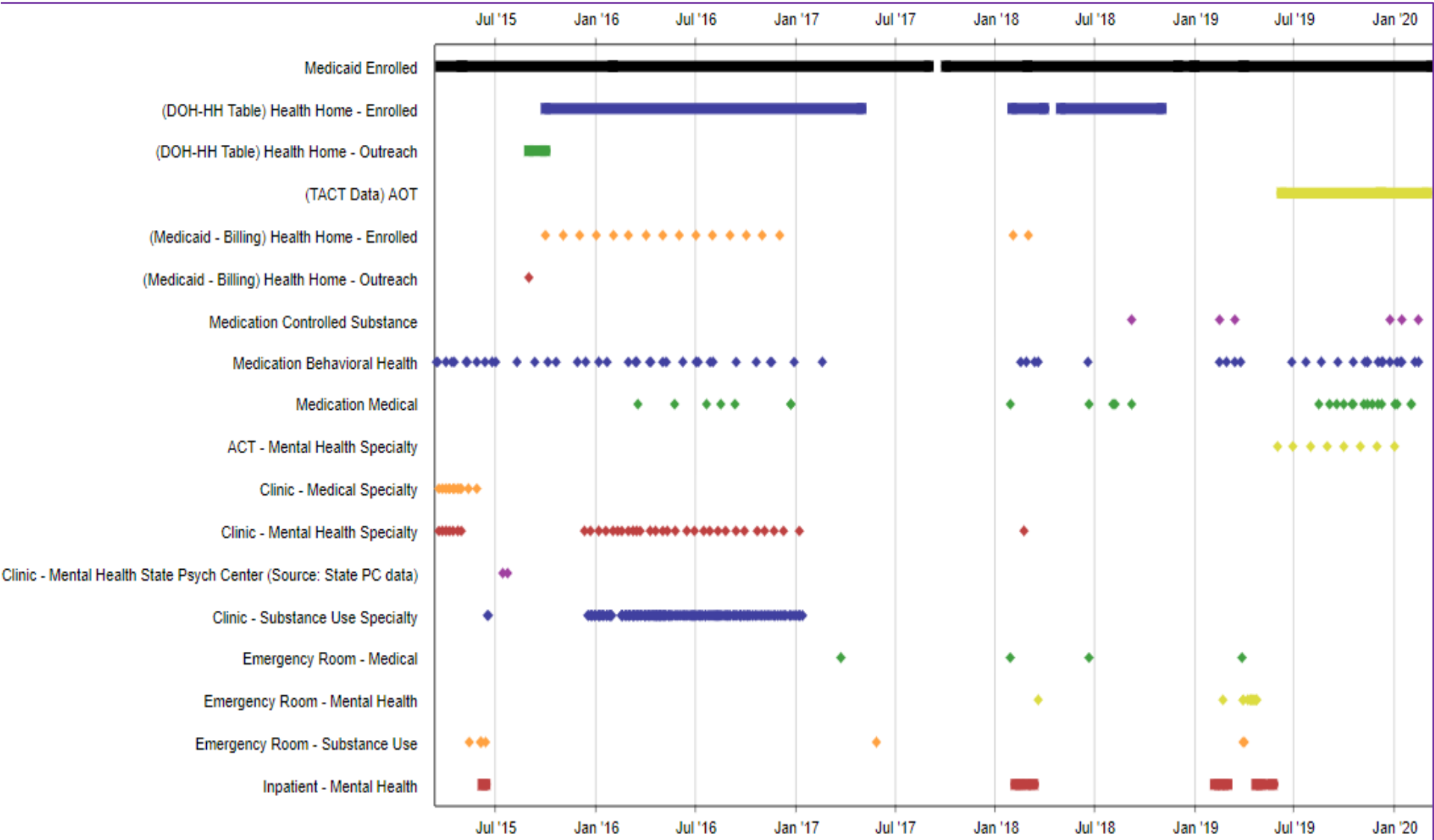
Services provided for the selected Diagnosis:
Schizoaffective Disorder

PDF Excel X

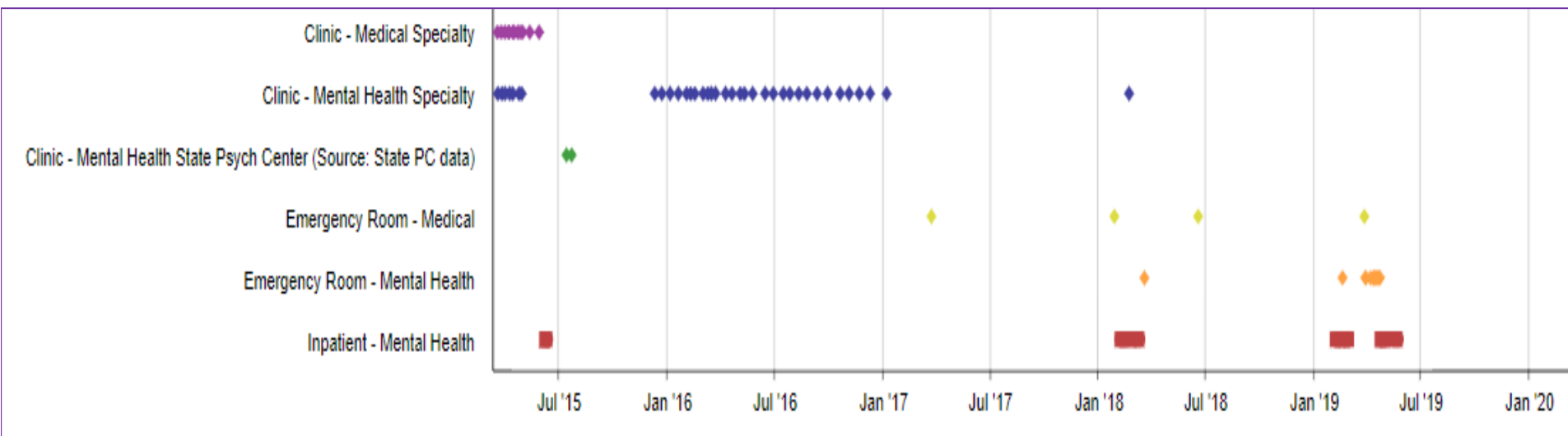
Previous 1 2 3 4 5 6 7 8 9 10 ... 15 Next

Date of Service	Service Type	Service Subtype	Provider Name	Diagnosis
11/7/2019	Outpatient - BH	Physician Group	MONTEFIORE MEDICAL CENTER	Schizoaffective disorder, unspecified
8/7/2019	Inpatient-ER	Inpatient - MH	NEW YORK GRACIE SQUARE HOSPITAL	Schizoaffective disorder, unspecified
8/6/2019	Inpatient-ER	ER - MH	NEW YORK PRESBYTERIAN HOSPITAL INC	Schizoaffective disorder, unspecified, Cannabis dependence with intoxication, unspecified
7/21/2019	Inpatient-ER	ER - Medical	BELLEVUE HOSPITAL CENTER	Dehydration, Schizoaffective disorder, unspecified
7/20/2019	Inpatient-ER	ER - MH	BELLEVUE HOSPITAL CENTER	Encounter for other general examination, Schizoaffective disorder, unspecified

Integrated View as Graph (With DSP)



Integrated View as Graph (**No DSP**)






- Without access to DSP:
 - No clinic substance use, no ER substance abuse services are shown.
- Two takeaways:
 - ✓ Important to get client consent to access PSYCKES data
 - ✓ Without consent, can't assume DSP isn't part of the client's summary

Pharmacy Data: Behavioral Health and Medical

Medication: Behavioral Health [Details](#)

Table [Graph](#)

Drug Class	Drug Name	Last Dose*	Estimated Duration	First Day Picked Up	Last day Picked Up	
Antipsychotic	Aripiprazole	5 MG, 1/day	1 Month(s)	11/20/2019	11/20/2019	
Anxiolytic/ Hypnotic	Alprazolam	0.25 MG, 2/day	2 Month(s) 1 Week(s) 3 Day(s)	9/4/2019	10/15/2019	
Antipsychotic	Aripiprazole	5 MG, 1/day	1 Month(s) 1 Week(s) 6 Day(s)	9/4/2019	9/24/2019	
Antidepressant	Trazodone Hcl	50 MG, 1/day	1 Month(s) 6 Day(s)	9/4/2019	9/10/2019	
Anxiolytic/ Hypnotic	Alprazolam	0.25 MG, 2/day	6 Month(s) 4 Day(s)	1/22/2019	6/26/2019	
Antipsychotic	Aripiprazole	5 MG, 1/day	2 Month(s) 2 Week(s) 5 Day(s)	4/29/2019	6/18/2019	
Antidepressant	Trazodone Hcl	50 MG, 1/day	1 Month(s) 3 Week(s) 6 Day(s)	5/20/2019	6/17/2019	
Antipsychotic	Quetiapine Fumarate	50 MG, 3/day	2 Month(s) 3 Week(s) 1 Day(s)	1/14/2019	3/6/2019	



Office of
Mental Health

Pharmacy Data: Behavioral Health and Medical

Medication: Behavioral Health [Details](#)

Drug Class	Brand Name	Generic Name	Last Dose*
Antidepressant	Fluvoxamine Maleate	Fluvoxamine Maleate	200 MG
Mood Stabilizer	Gabapentin	Gabapentin	400 MG
Side-Effect Management	Metoprolol Tartrate	Metoprolol Tartrate	50 MG
Antidepressant	Venlafaxine Hcl ER	Venlafaxine Hcl	37.5 MG
Antidepressant	Venlafaxine Hcl ER	Venlafaxine Hcl	75 MG
Antidepressant	Fluoxetine Hcl	Fluoxetine Hcl	40 MG
Anxiolytic/Hypnotic	Hydroxyzine Pamoate	Hydroxyzine Pamoate	200 MG
Side-Effect Management	Metoprolol Tartrate	Metoprolol Tartrate	50 MG

InfoButton Access: DrugPoints Document - Google Chrome

www.micromedexsolutions.com/infobutton/librarian/access?mainSearchConcept=^ ^ ^ ^ ^ ...

TRUVEN HEALTH ANALYTICS
MICROMEDEX® SOLUTIONS

MICROMEDEX GATEWAY

Fluvoxamine Maleate

Jump To:

- Dosing & Indications**
 - Dosing Information
 - Adult Dosing
 - Pediatric Dosing
 - Dose Adjustments
 - Indications
 - FDA-Labeled Indications
 - Non-FDA Labeled Indications
- Black Box Warning**
- Contraindications/Warnings**
 - Do Not Confuse
 - Contraindications
 - Precautions
 - Pregnancy Category
 - Breast Feeding
- Drug Interactions (single)**
 - Drug-Drug
 - Contraindicated
 - Major
 - Moderate

Adverse Effects

- Common
- Serious

Name Info

- Drug Images
- US Trade Names
- Class
- Regulatory Status
- Generic Availability

Mechanism of Action/Pharmacokinetics

- Mechanism of Action
- Pharmacokinetics
 - Absorption
 - Distribution
 - Metabolism
 - Excretion
 - Elimination Half Life

Administration/Monitoring

- Administration
- Monitoring

How Supplied**Toxicology**

- Clinical Effects
- Treatment
- Range of Toxicity

Clinical Teaching**References**

TableGraph

MPRMost Recent Prescriber

.22	Christie Linda J	
.12	Christie Linda J	
.89	Binkley Dale Lamar	
	Christie Linda J	
	Binkley Dale Lamar	
.07	Johri Surendra Kumar	
.94	Kozminski George Andrew	
.85	Kodsy Raouf Abdallah	



Drill into individual medication orders

Medication: Behavioral Health

Details

Table

Graph

Drug Class	Brand Name	Generic Name	Last Dose*	Estimated Duration	First Day Picked Up	Last day Picked Up	Active in Past Month	MPR	Most Recent Prescriber	
Antidepressant	Fluvoxamine Maleate	Fluvoxamine Maleate	200 MG	5 Month(s) 3 Week(s) 1 Day(s)	2/9/2017	7/1/2017	Yes	1.22	Christie Linda J	
Mood Stabilizer	Gabapentin	Gabapentin	400	11 Month(s) 2	8/15/2016	6/29/2017	Yes	1.12	Christie Linda J	

RX detail for Fluvoxamine Maleate Medication

PDF

Excel

Orders

Trials

Previous

1

2

Next

Pick Up Date	Brand Name	Generic	Drug Class	Strength	Quantity Dispensed	Days Supply	Tabs per day*	Total Daily Dose*	Route	Prescriber	Pharmacy
7/1/2017	Fluvoxamine Maleate	Fluvoxamine Maleate	Antidepressant	100 MG	60	30	2	200 MG	Oral	Christie Linda J	ECKERD CORPORATION # 10678
6/6/2017	Fluvoxamine Maleate	Fluvoxamine Maleate	Antidepressant	100 MG	60	30	2	200 MG	Oral	Christie Linda J	ECKERD CORPORATION # 10678
4/29/2017	Fluvoxamine Maleate	Fluvoxamine Maleate	Antidepressant	100 MG	60	30	2	200 MG	Oral	Christie Linda J	ECKERD CORPORATION # 10678
4/6/2017	Fluvoxamine Maleate	Fluvoxamine Maleate	Antidepressant	100 MG	60	30	2	200 MG	Oral	Christie Linda J	ECKERD CORPORATION # 10678

Drill into all med orders chronologically

Medication: Behavioral Health

Details

Table

Graph

Drug Class

Brand Name

Generic Name

Last Dose*

Estimated Duration

First Day Picked Up

Last day Picked Up

Active in Past Month

MPR

Most Recent Prescriber

Rx detail for All Medication Behavioral Health

PDF

Excel

Orders

Trials

Previous

1

2

3

4

5










...

10

Next

Pick Up Date	Brand Name	Generic Name	Drug Class	Strength	Quantity Dispensed	Days Supply	Tabs per day*	Total Daily Dose*	Route	Prescriber	Pharmacy
10/20/2017	Clonazepam	Clonazepam	Anxiolytic/Hypnotic	0.5 MG	30	30	1	.5 MG	Oral	Kelley Deirdre M	ECKERD CORPORATION #10805
10/8/2017	Fluoxetine Hcl	Fluoxetine Hcl	Antidepressant	40 MG	30	30	1	40 MG	Oral	Willis Daniel James	ECKERD CORPORATION #10805
10/3/2017	Trifluoperazine Hcl	Trifluoperazine Hcl	Antipsychotic	10 MG	90	30	3	30 MG	Oral	Willis Daniel James	ECKERD CORPORATION #10805
10/3/2017	Trihexyphenidyl Hcl	Trihexyphenidyl Hcl	Side-Effect Management	2 MG	60	30	2	4 MG	Oral	Willis Daniel James	ECKERD CORPORATION #10805
9/11/2017	Clonazepam	Clonazepam	Anxiolytic/Hypnotic	0.25 MG	60	30	2	.5 MG	Oral	Reyes Loida Dela Cruz	ECKERD CORPORATION #10805


Outpatient Services: BH & Medical

Behavioral Health Services Details							Table	Graph
Service Type	Provider	First Date Billed	Last Date Billed	Number of Visits	Most Recent Primary Diagnosis	Most Recent Procedures (Last 3 Months)		
Physician Group	MONTEFIORE MEDICAL CENTER	11/7/2019	11/7/2019	1	Schizoaffective disorder, unspecified	- Psych Diag Eval W/Med Srvcs		
Physician Group	SBH PHYSICIANS PC	7/22/2019	10/16/2019	2	Schizophrenia, unspecified	- Psych Diag Eval W/Med Srvcs		
Physician Group	BRONXCARE HEALTH SYSTEM	1/11/2018	7/19/2019	17	Schizoaffective disorder, unspecified	- Initial Observation Care - Subsequent Observation Care - Observation Care Discharge		
Clinic - Unspecified Specialty	BELLEVUE HOSPITAL CENTER	4/3/2019	4/4/2019	2	Schizoaffective disorder, bipolar type	- Psych Diagnostic Evaluation		
Clinic - MH Specialty	BELLEVUE HOSPITAL CENTER	4/3/2019	4/4/2019	2	Schizoaffective disorder, bipolar type	- Psych Diagnostic Evaluation		
Clinic - Medical Specialty	NYU LANGONE HOSPITALS	3/29/2019	3/29/2019	1	Schizoaffective disorder, unspecified	- Drugs Unclassified Injection		
Physicians Group - Psychiatry	SBH PHYSICIANS PC	3/7/2019	3/7/2019	1	Schizoaffective disorder, unspecified	- Observation Care Discharge		
Physicians Group - Psychiatry and Pediatrics	SBH PHYSICIANS PC	3/6/2019	3/6/2019	1	Schizoaffective disorder, unspecified	- Subsequent Observation Care		
ACT - MH Specialty	THE BRIDGE, INC	5/31/2016	10/31/2018	28	Schizophrenia, unspecified	- Assert Comm Tx Pgm Per Diem		

See Service Details for a Specific Provider

Behavioral Health Services [Details](#)

Table [Graph](#)

Service Type	Provider	First Date Billed	Last Date Billed	Number of Visits	Most Recent Primary Diagnosis	Most Recent Procedures (Last 3 Months)	
Physician - Psychiatry	SCHILD LINDEN JEFFREY	10/5/2018	10/25/2019	11	Bipolar disorder, current episode depressed, mild or moderate severity, unspecified	- Psytch W Pt W E/M 30 Min - Office/Outpatient Visit Est	

All Behavioral Health Services for SCHILD LINDEN JEFFREY Provider

[PDF](#) [Excel](#) [X](#)

Previous [1](#) [2](#) [3](#) [4](#) [5](#) [Next](#)

Date of Service/First Visit	Service Type	Provider	Primary Diagnosis	Secondary Diagnosis	Practitioner	Procedure
10/25/2019	Physician - Psychiatry	SCHILD LINDEN JEFFREY	Bipolar disorder, current episode depressed, mild or moderate severity, unspecified			Office/Outpatient Visit Est
10/25/2019	Physician - Psychiatry	SCHILD LINDEN JEFFREY	Bipolar disorder, current episode depressed, mild or moderate severity, unspecified			Psytch W Pt W E/M 30 Min
9/25/2019	Physician - Psychiatry	SCHILD LINDEN JEFFREY	Bipolar disorder, current episode depressed, mild or moderate severity, unspecified			Office/Outpatient Visit Est
9/25/2019	Physician - Psychiatry	SCHILD LINDEN JEFFREY	Bipolar disorder, current episode depressed, mild or moderate severity, unspecified			Psytch W Pt W E/M 30 Min
9/5/2019	Physician - Psychiatry	SCHILD LINDEN JEFFREY	Bipolar disorder, current episode depressed, mild or moderate severity, unspecified			Psytch W Pt W E/M 30 Min

See All Service Details Chronologically


Behavioral Health Services

 Details



Table

Graph

Service Type	Provider	First Date Billed	Last Date Billed	Number of Visits	Most Recent Primary Diagnosis	Most Recent Procedures (Last 3 Months)	
Physician Group	MONTEFIORE MEDICAL CENTER	11/7/2019	11/7/2019	1	Schizoaffective disorder, unspecified	- Psych Diag Eval W/Med Srvcs	

All Behavioral Health Services







Previous 1 2 3 4 5 6 7 8 9 10 ... 55 Next

Date Of Service/First Visit	Service Type	Provider	Primary Diagnosis	Secondary Diagnosis	Procedure	Practitioner		
11/7/2019	Physician Group	MONTEFIORE MEDICAL CENTER	Schizoaffective disorder, unspecified		Psych Diag Eval W/Med Srvcs			
10/16/2019	Physician Group	SBH PHYSICIANS PC	Schizophrenia, unspecified	Unspecified problems related to employment	Psych Diag Eval W/Med Srvcs			
7/22/2019	Physician Group	SBH PHYSICIANS PC	Paranoid schizophrenia		Psych Diag Eval W/Med Srvcs			
7/19/2019	Physician Group	BRONXCARE HEALTH SYSTEM	Schizoaffective disorder, unspecified	Homelessness	Observation Care Discharge			
7/18/2019	Physician Group	BRONXCARE HEALTH SYSTEM	Schizoaffective disorder, unspecified		Subsequent Observation Care			
Physician - Psychiatry		ONUOGU EJIKE	4/30/2018	8/21/2018	2	bipolar type	- Psych Diagnostic Evaluation	

Hospital/ER Services: Integrated Behavioral/Medical

Hospital/ER Services [Details](#)

Table [Graph](#)

Service Type	Provider	Admission	Discharge Date/Last Date Billed	Length of Stay	Most Recent Primary Diagnosis	Procedure(s) (Per Visit)	
		8/26/2019	8/28/2019	2			
		8/21/2019	8/26/2019	5			
ER - Medical	ALBANY MEMORIAL HOSPITAL	7/21/2019	7/21/2019	1	Cellulitis Of Right Lower Limb	<ul style="list-style-type: none">- Assay Of Lactic Acid- Blood Culture For Bacteria- Cefazolin Sodium Injection- Complete Cbc W/Auto Diff Wbc- Comprehen Metabolic Panel- Emergency Dept Visit- Ketorolac Tromethamine Inj- Measure Blood Oxygen Level- Routine Venipuncture- Ther/Proph/Diag Iv Inf Init- Tx/Pro/Dx Inj New Drug Addon- X-Ray Exam Of Ankle	
ER - Medical	ALBANY MEMORIAL HOSPITAL	7/9/2019	7/10/2019	1	Contusion Of Other Part Of Head, Initial Encounter	<ul style="list-style-type: none">- Assay Glucose Blood Quant- Bl Smear W/Diff Wbc Count- Capillary Blood Draw- Complete Cbc W/Auto Diff Wbc- Comprehen Metabolic Panel- Ct Abd & Pelv W/Contrast- Ct Head/Brain W/O Dye- Ct Maxillofacial W/O Dye- Ct Neck Spine W/O Dye- Ct Thorax W/Dye- Drug Test Prsmv Chem Anlyzr- Emergency Dept Visit- Locm 300-399mg/MI Iodine,1ml- Measure Blood Oxygen Level- Routine Venipuncture	

Labs, X-Ray and Other Data

Dental, Vision, Living Support/Residential, Laboratory & Pathology, Radiology, Medical Equipment, Transportation

Laboratory & Pathology [Details](#)

Table Graph

Program/Type	Test Name	Date Billed	Provider	
Emergency	X-Ray Exam Chest 1 View	7/22/2019	SBH PHYSICIANS PC	
Emergency	X-Ray Exam Chest 1 View	3/26/2018	SBH PHYSICIANS PC	
Emergency	X-Ray Exam Chest 1 View	3/5/2018	SBH PHYSICIANS PC	
Inpatient	X-Ray Exam Chest 2 Views	2/15/2018	WOODHULL MED & MNTL HLTH CTR	
Inpatient	Electrocardiogram Report	2/14/2018	WOODHULL MED & MNTL HLTH CTR	
Office/ Outpatient/ Laboratory	Urinalysis Auto W/Scope	9/20/2016	MEDS OOS LAB	
Office/ Outpatient/ Laboratory	Microscopic Exam Of Urine	9/20/2016	MEDS OOS LAB	

Emergency	X-Ray Exam Chest 1 View	7/22/2019	SBH PHYSICIANS PC	
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All Laboratory & Pathology Services for X-Ray Exam Chest 1 View

PDF Excel

Date of Service	Program/Type	Provider Name	Test for	Procedure
7/22/2019	Emergency	SBH PHYSICIANS PC	Catatonic schizophrenia	X-Ray Exam Chest 1 View
3/26/2018	Emergency	SBH PHYSICIANS PC	Schizophrenia, unspecified	X-Ray Exam Chest 1 View
3/5/2018	Emergency	SBH PHYSICIANS PC	Schizophrenia, unspecified	X-Ray Exam Chest 1 View

Export Data to PDF, Excel

The screenshot shows the top navigation bar with links: My QI Report, Statewide Reports, Recipient Search (underlined), Provider Search, Registrar, Usage Reports, Utilization Reports, and MyCHOIS. Below the navigation bar, the page title is "SMITH, JOHN" with the subtitle "Clinical Summary as of 12/11/2019". On the right side, there are three icons: PDF, Excel, and CCD. A red arrow points to the PDF and Excel icons.

All available data = sections will be “unrolled,” ie., each scrip or visit will be listed in a separate row.

To select multiple sections, “Shift ”+ click or “Ctrl”+ click.

The screenshot shows the "Export" dialog box. It has the following sections:

- Include Brief Overview as "cover page"**: ☒
- Export Options**:
 - ☒ All sections - Summary data
 - ☐ Selected section(s) - Summary data
 - ☐ Selected section(s) - All available data
- Page Orientation**:
 - ☒ Portrait
 - ☐ Landscape
- Sections**:
 - Select All ☒
 - Current Care Coordination
 - POP Intensive Care Transition Service
 - Plans & Documents
 - Behavioral Health Diagnoses

* Use ctrl key to select/unselect multiple items.

Buttons: Export, Cancel

Protected Health Information: Save only to secure server!

Export Data to Electronic Medical Record

My QI Report Statewide Reports Recipient Search Provider Search Registrar ▾ Usage Reports ▾ Utilization Reports MyCHOIS

◀ Recipient Search

SMITH, JOHN
Clinical Summary as of 12/11/2019

PDF Excel **CCD**

- A new “CCD” export option in the Clinical Summary is available in the 1 and 5 Year Summary, in addition to the PDF and Excel export options.
- The Continuous Care Document (CCD) export will allow PSYCKES information to be integrated into an EMR record.
- Implementing CCD export will most likely require assistance from your IT department.

Consenting Clients for Access to PSYCKES Data



**Office of
Mental Health**

Three Possible Consent Forms

1. PSYCKES Consent Form

- Now available in 10 languages on the PSYCKES website!
- Simplified language and format for ease of understanding!


2. Behavioral Health Care Collaborative (BHCC) Patient Information Sharing Consent:

The BHCC may get your health information, including your health records, from providers listed on the BHCC website: _____ and/or from others through a computer system run by the _____, a Regional Health Information Organization (RHIO) and/or a computer system called PSYCKES run by the New York State Office of Mental Health. A RHIO uses a _____

3. Department of Health Adult Health Home Patient Information Sharing Consent (DOH-5055)

The Health Home may get your health information, including your health records, from partners listed at the end of this form and/or from others through a computer system run by the _____, a Regional Health Information Organization (RHIO) and/or a computer system called PSYCKES run by the New York State Office of Mental Health, _____

New PSYCKES Consent



Office of Mental Health | PSYCKES

Consent Form

Provider/Facility Name

About PSYCKES

The New York State (NYS) Office of Mental Health maintains the Psychiatric Services and Clinical Enhancement System (PSYCKES). This online database stores some of your medical history and other information about your health. It can help your health providers deliver the right care when you need it.

The information in PSYCKES comes from your medical records, the NYS Medicaid database and other sources. Go to www.psyckes.org, and click on **About PSYCKES**, to learn more about the program and where your data comes from.

This data includes:

- Your name, date of birth, address and other information that identifies you;
- Your health services paid for by Medicaid;
- Your health care history, such as illnesses or injuries treated, test results and medicines;
- Other information you or your health providers enter into the system, such as a health Safety Plan.

What You Need to Do

Your information is confidential, meaning others need permission to see it. Complete this form now or at any time if you want to give or deny your providers access to your records. What you choose will not affect your right to medical care or health insurance coverage.

Please read the back of this page carefully before checking one of the boxes below. Choose:

- "I GIVE CONSENT" if you want this provider, and their staff involved in your care, to see your PSYCKES information.
- "I DON'T GIVE CONSENT" if you don't want them to see it.

If you don't give consent, there are some times when this provider may be able to see your health information in PSYCKES – or get it from another provider – when state and federal laws and regulations allow it.¹ For example, if Medicaid is concerned about the quality of your health care, your provider may get access to PSYCKES to help them determine if you are getting the right care at the right time.

Your Choice. Please check 1 box only.

☐ I GIVE CONSENT for the provider, and their staff involved in my care, to access my health information in connection with my health care services.

☐ I DON'T GIVE CONSENT for this provider to access my health information, but I understand they may be able to see it when state and federal laws and regulations allow it.

Print Name of Patient

Patient's Date of Birth

Patient's Medicaid ID Number

Signature of Patient or Patient's Legal Representative


Date

Print Name of Legal Representative (if applicable)

Relationship of Legal Representative Patient (if applicable)

¹ Laws and regulations include NY Mental Hygiene Law Section 33.13, NY Public Health Law Article 27-F, and federal confidentiality rules, including 42 CFR Part 2 and 45 CFR Parts 160 and 164 (also referred to as "HIPAA").

Page 1/2



Office of Mental Health | PSYCKES

Information and Consent

1 How providers can use your health information. They can use it only to:

- Provide medical treatment, care coordination, and related services.
- Evaluate and improve the quality of medical care.
- Notify your treatment providers in an emergency (e.g., you go to an emergency room).

2 What information they can access. If you give consent, _____ can see ALL your health information in PSYCKES. This can include information from your health records, such as illnesses or injuries (for example, diabetes or a broken bone), test results (X-rays, blood tests, or screenings), assessment results, and medications. It may include care plans, safety plans, and psychiatric advanced directives you and your treatment provider develop. This information also may relate to sensitive health conditions, including but not limited to:

- Mental health conditions
- Alcohol or drug use
- Birth control and abortion (family planning)
- Genetic (inherited) diseases or tests
- HIV/AIDS
- Sexually transmitted diseases

3 Where the information comes from. Any of your health services paid for by Medicaid will be part of your record. So are services you received from a state-operated psychiatric center. Some, but not all information from your medical records is stored in PSYCKES, as is data you and your doctor enter. Your online record includes your health information from other NYS databases, and new databases may be added. For the current list of data sources and more information about PSYCKES, go to: www.psyckes.org and see "About PSYCKES", or ask your provider to print the list for you.

4 Who can access your information, with your consent. _____'s doctors and other staff involved in your care, as well as health care providers who are covering or on call for _____, Staff members who perform the duties listed in #1 above also can access your information.

5 Improper access or use of your information. There are penalties for improper access to or use of your PSYCKES health information. If you ever suspect that someone has seen or accessed your information – and they shouldn't have – call:

- _____ at _____, or
- the NYS Office of Mental Health Customer Relations at 800-597-8481.

6 Sharing of your information. _____ may share your health information with others only when state or federal law and regulations allow it. This is true for health information in electronic or paper form. Some state and federal laws also provide special protections and additional requirements for disclosing sensitive health information, such as HIV/AIDS, and drug and alcohol treatment.¹

7 Effective period. This Consent Form is in effect for 3 years after the last date you received services from _____, or until the day you withdraw your consent, whichever comes first.

8 Withdrawing your consent. You can withdraw your consent at any time by signing and submitting a Withdrawal of Consent Form to _____. You also can change your consent choices by signing a new Consent Form at any time. You can get these forms at www.psyckes.org or from your provider by calling _____ at _____. Please note, providers who get your health information through _____ while this Consent Form is in effect may copy or include your information in their medical records. If you withdraw your consent, they don't have to return the information or remove it from their records.

9 Copy of form. You can receive a copy of this Consent Form after you sign it.

¹ Laws and regulations include NY Mental Hygiene Law Section 33.13, NY Public Health Law Article 27-F, and federal confidentiality rules, including 42 CFR Part 2 and 45 CFR Parts 160 and 164 (also referred to as "HIPAA").

Page 2/2

Old version of consent is still valid.

Prepopulated Consents in Registrar Tab

The screenshot shows the Registrar tab selected in the top navigation bar. A red box highlights the 'Registrar' dropdown menu, which contains 'Manage PHI Access' and 'Manage MyCHOIS Users'. A red arrow points from 'Manage PHI Access' to the 'Manage PHI Access' section below. In this section, a red box highlights the language selection area, which includes 'English', 'Spanish', and 'Other languages' links. Below this, there is a list of conditions for enabling PHI access and a 'Search & Enable Access' button.

Registrar ▾

- Manage PHI Access
- Manage MyCHOIS Users

Manage PHI Access

Enable PHI Access Print PSYCKES Consent form [English](#) [Spanish](#) [Other languages](#)

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

- Client signed the PSYCKES Consent Form
- Client signed the Health Home Patient Information Sharing Consent (DOH 5055, adult)
- Client signed the BHCC Patient Information Sharing Consent for specific BHCC(s)
- Client data is needed due to clinical emergency
- Client is served by/ being transferred to your provider agency

[Search & Enable Access >](#)


Agency information will be prepopulated in English and Spanish forms.

Consenting Clients

Name ▲	Medicaid ID ▼	DOB ▼	Gender ▼	Quality Flags ▼	Managed Care Plan	Current PHI Access
Aeaagef leeacbc	Bcbafhj Dejjebf	01/01/9999	Gbgdeia Badhbba			No Access
Afccjec Hiifjei	Fdaeife Eaddedb	01/01/9999	Jecibda Eajbeaj	2+ ER-Medical, HARP No Assessment for HCBS, HARP No Health Home	Fidelis Care New York	All Data - Consent
Agjcfib Ihhiab	Ddjhhfg Iceeega	01/01/9999	Edfdjcd laccich			No Access
Agjcfib Ihhiab	leacecc Dhcgai	01/01/9999	Bbcfaej Geedfef	No Outpt Medical		Quality Flag

Must Find Client via Unique Identifier

- Medicaid ID or Social Security Number
or
- First Name + Last Name + DOB



Office of
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PSYCKES

De-identify ☐

Settings ▾

Log Off

My QI Report

Statewide Reports

Recipient Search

Provider Search

Registrar ▾

Usage Reports ▾

Utilization Reports

Recipient Search

Limit results to 50 ▾

Search

Reset

Recipient Identifiers

Search in: ☒ Full Database ☐ ST. LUKE'S-ROOSEVELT HOSPITAL CENTER

Medicaid ID	SSN	First Name	Last Name	DOB
<input type="text" value="AB12345C"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text" value="MM/DD/YYYY"/>

Option to Enable Access to Client's Data

[← Modify Search](#)

1 Recipients Found

PDF Excel

Medicaid IDABCD1234

Review recipients in results carefully before accessing Clinical Summary.

Maximum Number of Rows Displayed: 50

Name (Gender - Age) Medicaid ID	DOB	Address	Quality Flags	Managed Care Plan	Current PHI Access	
DOE JANE F - 49 ABCD1234	10/10/1970	12 MAIN ST #5 BROOKLYN, NY 12345		Fidelis Care New York	No Access	<div>Enable Access</div>

Select Type of Access

My QI ReportStatewide ReportsRecipient SearchProvider SearchRegistrarUsage ReportsUtilization Reports

Modify Search

1 Recipients Found

PDFExcel

Medicaid ID	
Review recipients in results carefully	
Name (Gender - Age) Medicaid ID	DOB
DOE JANE F - 49 ABCD1234	10/10/1970

PHI Access for DOE JANE (F - 49)

Why are you allowed to view this data?

The client signed consent

☒ Client signed a PSYCKES Consent

☐ Client signed a BHCC Patient Information Sharing Consent

☐ Client signed a DOH-5055 Health Home Patient Information Sharing Consent

The client did not sign consent

☐ This is a clinical emergency

☐ Client is currently served by or being transferred to my facility

Cancel

Next

Maximum Number of Rows Displayed: 50

PHI Access

Enable Access

Verify Client Identity and Enable

Medicaid ID

Review recipients in results carefully

Name (Gender - Age) Medicaid ID	DOB
DOE JANE F - 49 ABCD1234	10/10/1970

Maximum Number of Rows Displayed: 50

PHI Access

Enable Access

PHI Access for DOE JANE (F - 49)

How do you know this is the correct person?

☒ Provider attests to client identity

☐ Client provided 1 photo ID or 2 forms of non-photo ID

Identification 1

Identification 2

BROOKLYN CENTER FOR PSYCHOTHERAPY, INC. will be given access to all available data for 3 years (renews automatically with billed service).

Previous Cancel Enable Enable and View Clinical Summary

For more information about consenting view [New PSYCKES Features Recorded Webinar](#)

- Consenting for BHCC's and Adult Health Homes
- Withdrawing consent

Entering plans into PSYCKES



**Office of
Mental Health**

Uploading a Safety/Care/Discharge Plan

[Recipient Search](#)

VEFGVCm REFWSUQ UA
Clinical Summary as of 12/17/2019

PDF Excel

Sections

[Brief Overview](#) [1 Year Summary](#) [5 Year Summary](#)

This report does not contain clinical data with special protection
- Data with Special Protection ☐ Show ☒ Hide

General

Name	Medicaid ID	Medicare	DSRIP PPS
VEFGVCm REFWSUQ UA	RUYqNp6oNae	No	Alliance for Better Health Care, LLC PPS
DOB	Medicaid Aid Category	Managed Care Plan	
NCyoMSynOT6n KDMu WVJTKQ	MA-TANF W/DEPRIV	Fidelis Care New York (HARP)	
Address	Medicaid Eligibility Expires on	HARP Status	
OTYm QaVTVA UaQi RUFTVA RrJFRUvCVVNILA Tbai MTImN9E		Enrolled No Assessment for HCBS (H1)	

Quality Flags as of monthly QI report 9/1/2019 [Definitions](#)

[Recent](#) [All \(Graph\)](#) [All \(Table\)](#)

Indicator Set	
Health and Recovery Plan (HARP)	HARP Enrolled - Not Health Home Enrolled • HARP-Enrolled - No Assessment for HCBS
High Utilization - Inpt/ER	2+ ER - BH • 2+ ER - Medical • 2+ Inpatient - BH
Readmission Post-Discharge from any Hospital	BH to BH

Plans & Documents [Upload](#) [Create New](#)

There are no Plans or Documents



Uploading an Existing Plan

Upload an Existing Plan or Health Document

Safety Plan
Relapse Prevention Plan
Psychiatric Advance Directive
Care Plans
Discharge Plan
Other

Type of Document * Safety Plan ▼

Date Document Created * 12/18/2019

Document Created By * Prabu Vasan

Role * Therapist

Document Source * Safety Plan.pdf

Choose File



Upload

Maximum File Size: 10 mb

Supported File Types: pdf, doc, jpg, gif

1. Complete fields.
2. Browse & choose plan.
3. Upload



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Creating a New Safety Plan

Patient Safety Plan Template			
Step 1: Warning signs (thoughts, images, feelings, behaviors) that a crisis may be developing:			
1.	*	<input type="text"/>	
2.	*	<input type="text"/>	
3.		<input type="text"/>	
Step 2: Internal coping strategies - Things I can do to take my mind off my problems without contacting another person (distracting and calming activities):			
1.	*	<input type="text"/>	
2.	*	<input type="text"/>	
3.		<input type="text"/>	
Step 3: People and social settings that provide distraction:			
1. Name	*	<input type="text"/>	Phone <input type="text"/>
2. Name		<input type="text"/>	Phone <input type="text"/>
3. Place	*	<input type="text"/>	4. Place <input type="text"/>
Step 4: People I can ask for help with the crisis:			
1. Name	*	<input type="text"/>	Phone <input type="text"/>
2. Name	*	<input type="text"/>	Phone <input type="text"/>
3. Name		<input type="text"/>	Phone <input type="text"/>

Type plan into template.

Complete Plan and Submit

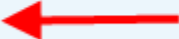
Step 1: Warning Signs that a crisis may be developing
Step 2: Internal Coping Strategies
Step 3: People and social setting that provide distraction
Step 4: People I can ask for help with the crisis
Step 5: Professionals or agencies I can contact during a crisis
Step 6: Making the environment safe
The one thing that is most important to me and worth living for is:

without their express, written permission. You can contact the au

The one thing that is most important to me and worth

My Family|

Submit



Click Plan to Download as PDF

Plans & Documents [Upload](#) [Create New](#)

Date Document Created	Document Type	Provider Name	Document Created By	Role
7/11/2017	Safety Plan	HUTCHINGS PSYCHIATRIC CENTER	Prabu Vasan	Therapist



To access another agency's/facility's plans you will need:

- ✓ Consent
- ✓ Attestation of Clinical Emergency

Guidance and Resources



**Office of
Mental Health**

Value of PSYCKES Data

- Comprehensive information across providers over time
- Supports assessment and treatment planning
 - Clarify diagnoses, identify co-morbid conditions, review treatment and medication history
- Easy identification of risk
- Facilitates care coordination and discharge planning


Limitations of PSYCKES Data

- Accuracy and timeliness dependent on coding and billing
 - Service data may lag by weeks or months
- Data elements limited to what is shown on claims
 - Ex., no lab results
- Client data affected by loss of Medicaid coverage

Using the Clinical Summary in Clinical Practice

- Get access to the clinical summary = consent!
 - ✓ Embed PSYCKES consent into intake/treatment planning paperwork
 - ✓ Attest consent as part of post-intake/treatment planning tasks
- Review clinical summary at important treatment points:
 - ✓ Intake → assessment → treatment planning
 - ✓ Change in care plan (ex., starting/changing medication, re-diagnosis)
 - ✓ Change in clinical status (ex., uptick in symptomology, hospitalization)
 - ✓ Incidents (ex., suicide attempt, self-injury)
 - ✓ Discharge planning
- Use clinical summary to enhance/enrich clinical training:
 - ✓ Supervision
 - ✓ Case presentations
 - ✓ High risk reviews

PSYCKES Release Notes: Updates on New Features

 Tue 1/15/2019 2:56 PM
omh.sm.its.psyckes-help <psyckes-help@OMH.NY.GOV>
PSYCKES Outage, SUD Indicator & Data Refresh: Tuesday & Thursday
To ○ PSYCKES-USERS@LISTSERV.OMH.NY.GOV



PSYCKES-Medicaid_Release_Notes_SUD_Jan_2019.pdf
159 KB



PSYCKES-Medicaid Release Notes – Release 6.8.0

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PSYCKES Users Guides and Webinars

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Recorded Webinars

Recorded Webinars by Initiative

Using PSYCKES Recorded Webinars

The following recorded webinars are relevant to Using the PSYCKES application:

Title	Description	Materials	Date Recorded
New Features Training: BHCC & 5055 Consent, Bulk Population Views, & More	Provides a demonstration of new features added to PSYCKES in release 6.7.0 in October 2019, such as: Consent for BHCC and for adult Health Home (DOH 5055), Recipient Search population management "Views," Opioid Overdose Risk Alert – Opioid & Benzodiazepine Co-prescribing, Children's Waiver Status (K Codes), and new population filters.	New Features Training: BHCC & 5055 Consent, Bulk Population Views, & More Slides	October 29, 2019
PSYCKES: Train the Trainer	Highlights strategies and tips for how individuals can train other staff on the use of PSYCKES. Reviews core features of PSYCKES, identifies core competencies, and models training approaches.	PSYCKES Train the Trainer Slides	February 20, 2019
PSYCKES Access and Implementation	Provides a review of best practices for implementing PSYCKES, procedures for granting staff access to PSYCKES using the Security Management System (SMS), procedures for attesting to ability to view client level data (e.g., client consent), and how to obtain agency/hospital-level access to PSYCKES. Recommended for: users responsible for managing implementation of PSYCKES in clinical or care coordination settings.	PSYCKES Access and Implementation Slides	February 7, 2019
Using PSYCKES Recipient Search	Provides review and demonstration of the Recipient Search functionalities. Recipient Search is used to search for individual recipients and to conduct flexible searches for cohorts of interest. Example group searches include recipients by age group, AOT status, HARP status, Health Home enrollment, behavioral health or medical diagnosis, medication, service setting, etc.	Using PSYCKES Recipient Search Slides	February 6, 2019
Using PSYCKES Quality Indicator Reports	Provides a review and demonstration of how to use the "My QI Report" in PSYCKES, using the quality measure and flag in PSYCKES called "High Utilization" as an example. Learn how to use My QI Reports and Recipient Search to identify individuals who meet criteria for this flag, how to review the prevalence rates for the measure, and how to export the reports to PDF and Excel.	Using PSYCKES Quality Indicator Reports Slides	January 29, 2019
Enable Access to Client-Level Data in PSYCKES	Provides overview for enabling access to client-level data in PSYCKES. Focuses on features relevant to provider agencies/hospitals. Recipient Search and the PHI Access menu are used to enable access to client data with special protections (substance use, HIV, family planning, and genetic information). The webinar will review the procedures for obtaining client consent and various levels of access to client information in PSYCKES.	Enable Access to Client-Level Data in PSYCKES Slides	January 22, 2019
Using PSYCKES for Clinicians	Provides in-depth review of the client information available in the Clinical Summary. Includes an introduction to PSYCKES functions used by clinicians: logging in, searching for clients, and enabling access to client data.	Using PSYCKES for Clinicians Slides	January 15, 2019

For Further Information

- PSYCKES website: www.psyckes.org
- PSYCKES Help (PSYCKES support)
 - 9:00AM – 5:00PM EST, Monday – Friday
 - PSYCKES-help@omh.ny.gov
- ITS Help Desk (Login, Token & SMS support)
 - OMH Employee ITS Helpdesk:
 - 1-844-891-1786; fixit@its.ny.gov
 - Provider Partner ITS Helpdesk:
 - 1-800-435-7697; healthhelp@its.ny.gov
- Register for webinars in the [PSYCKES Calendar](#)