



Office of
Mental Health

PSYCKES for County Local Government Units

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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
- LGU vs Provider Level Access
- Population Health Management with Recipient Search
- Quality Improvement with My QI Report & Statewide Reports
- Review Client-Level Details within the Clinical Summary
- Training & Technical Support

PSYCKES Overview

What is PSYCKES?

Psychiatric Clinical Knowledge Enhancement System (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 12 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, lab & pathology, and more!

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 & behavioral health outpatient & inpatient services, ER, crisis, care coordination, 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)

What Types of Reports are Available?

- Individual Client Level Reports
 - Clinical Summary: Medicaid and state database treatment history, up to 5 years' worth of data
- Provider Level Reports
 - My QI Report: Displays current performance on all quality indicators, review the names of clients who are flagged, *enable access (provider users)*
 - Recipient Search: run ad hoc reports to identify cohorts of interest, Advanced Views, *enable access (provider users)*
 - Usage Reports: monitor PHI access by staff
 - Utilization Reports: support provider VBP data needs
- Statewide Reports
 - Can select a quality indicator and review statewide proportions by provider location region/county, client residence region/county, plan, network, provider, etc.

LGU vs Provider Level Access

LGU PSYCKES Access Levels

- Security Manager assigns the appropriate access level, depending on role of county staff
- Leadership, Oversight at LGU
 - State level access (*allows access to all available data in PSYCKES*)
- Direct Service Providers & Supervisors
 - Agency level access for county-operated provider (*requires consent/ER to view client-level data*)
- Security documents available to explain how to utilize PSYCKES access appropriately as an LGU
 - *User Tip: If staff was granted PSYCKES access as a provider-level user and is now in an oversight role at the LGU, they will need to contact the PSYCKES Help Desk to change their access in the backend!*

Provider Access Levels to Client Data

- **Signed Consent** (PSYCKES, BHCC, DOH Health Home/CCO)
 - Allows access to all available data (including data with special protections such as substance use, HIV, family planning, genetic testing), for 3 years after the last billed service
- **Verbal PSYCKES Consent**
 - Allows access to limited data (excluding data with special protections) for 9 months
- **Clinical Emergency**
 - Allows access to all available data (including data with special protections) for 72 hours
- **Attestation of Service** (Client is currently served by or being transferred to my agency)
 - This will link client to your agency for Recipient Search reports but will not provide access to the Clinical Summary

Recipient Search

Recipient Search

- Use Recipient Search to search for an individual client or generate list of clients meeting specified criteria (examples below):
- **Characteristics:**
 - Race & Ethnicity
 - Region & County
- **Special Populations:**
 - Complex Needs
 - High Mental Health Need
 - OPWDD Services Eligible (RE95)
 - OPWDD NYSTART – Eligible
 - ACT, AOT, HH+ Eligible
 - Homelessness
- **Social Determinants of Health (SDOH)**
- **“Service Setting” Categories by Specific Provider or Any Provider:**
 - Outpatient (MH/SU/DD)
 - Care Coordination (ACT/HH/CCO)
 - Crisis Services
 - Living Support/Residential
 - Inpatient/ER (MH/SU/BH)
- **Medications & Diagnoses**

Recipient Search

Limit results to

50

50

100

500

1,000

10,000

50,000

100,000

250,000

500,000

Search

Reset

Recipient Identifiers

Individual Search

Medicaid ID **SSN**

First Name **Last Name**

Characteristics as of 10/28/2025

Group Search

Age Range To Gender

Race

Ethnicity

Region

County

Special Populations

Social Determinants of Health (SDOH)

Past 1 Year

Population

High Need Population

AOT Status

Alerts

Homelessness Alerts

Complex Needs

SDOH Conditions (reported in billing)

- Problems related to upbringing
- Problems related to social environment
- Problems related to physical environmen
- Problems related to other psychosocial c
- Problems related to medical facilities anc
- Problems related to life management diff

SDOH Conditions: Selected

Managed Care Plan & Medicaid

Managed Care

MC Product Line

Medicaid Enrollment Status

Medicaid Restrictions

Children's Waiver Status

HARP Status

HARP HCBS Assessment Status

HARP HCBS Assessment Results

Recipient Search

Limit results to

50

Search

Reset

Recipient Identifiers

Medicaid ID	SSN	First Name	Last Name	DOB
AB00000A				MM/DD/YYYY

Characteristics as of 10/28/2025

Age Range	To	Gender	Region
Race	Ethnicity		County
Asian or Black or White			



- Native American
- Asian
- Black
- Pacific Islander
- White
- Multiracial
- Unknown race

Special Populations

High Need	
AOT Status	
Alerts	
Homelessness Alerts	
Complex Needs	

Social Determinants of Health (SDOH)

Past 1 Year

<p>SDOH Conditions (reported in billing)</p> <ul style="list-style-type: none"> - Problems related to upbringing - Problems related to social environment - Problems related to physical environmen - Problems related to other psychosocial c - Problems related to medical facilities anc - Problems related to life management diff 	<p>SDOH Conditions: Selected</p> <div style="border: 1px solid gray; height: 100px;"></div>
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Recipient Search

Limit results to

50

Search

Reset

Recipient Identifiers

Medicaid ID

SSN

First Name

Last Name

DOB

AB00000A

MM/DD/YYYY

Characteristics as of 10/28/2025

Age Range

To

Gender

Region

Race

County

Ethnicity



Special Populations

Hispanic or Latinx

Not Hispanic or Latinx

Unknown ethnicity

High Need Population

AOT Status

Alerts

Homelessness Alerts

Complex Needs

Social Determinants of Health (SDOH)

Past 1 Year

SDOH Conditions (reported in billing)

- Problems related to upbringing
- Problems related to social environment
- Problems related to physical environmen
- Problems related to other psychosocial c
- Problems related to medical facilities anc
- Problems related to life management diff

SDOH Conditions: Selected

Empty box for selected SDOH conditions.

Recipient Search

Limit results to

Recipient Identifiers

Medicaid ID	SSN	First Name	Last Name	DOB
<input type="text" value="AB00000A"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text" value="MM/DD/YYYY"/>

Characteristics as of 10/28/2025

Age Range <input type="text"/>	To <input type="text"/>	Gender <input type="text"/>	Region <input type="text" value="Hudson River"/>
Race <input type="text"/>			County <input type="text"/>
Ethnicity <input type="text"/>			

Special Populations

Population <input type="text"/>
High Need Population <input type="text"/>
AOT Status <input type="text"/>
Alerts <input type="text"/>
Homelessness Alerts <input type="text"/>
Complex Needs <input type="text"/>

Social Determinants

SDOH Conditions (report)

- Problems related to up...
- Problems related to soc...
- Problems related to phy...
- Problems related to oth...
- Problems related to me...
- Problems related to life...

Managed Care Plan & Medicaid

Managed Care <input type="text"/>	Children <input type="text"/>
MC Product Line <input type="text"/>	



- Hudson River
- Albany
- Columbia
- Dutchess
- Greene
- Orange
- Putnam
- Rensselaer
- Rockland
- Saratoga
- Schenectady
- Schoharie
- Sullivan
- Ulster
- Warren
- Washington
- Westchester

Special Populations

Special Populations

Population

High Need Population

AOT Status

Alerts

Homelessness Alerts

- OPWDD Services Eligible (RE95)
- Any OMH Outpatient Specialty MH Services
- Behavioral Health High Need - Dual (Medicaid + Medicare)
- High Mental Health Need

Special Populations

Special Populations

Social D



Population	<input type="text"/>	SDOH Co
High Need Population	<input type="text"/>	+--Probl
AOT Status		+--Probl
Alerts		
Homelessness Alerts		
Complex Needs		
Managed Care Plan & Medicaid		
Managed Care	<input type="text"/>	
MC Product Line	<input type="text"/>	
Medicaid Enrollment Status	<input type="text"/>	
Medicaid Restrictions	<input type="text"/>	

- CORE Eligible (Community Oriented Recovery and Empowerment)
- Homeless in past 6 months with DOH SMI in past year
- High Medicaid Inpatient/ER Cost (Non-Duals) - Top 1%
- High Medicaid Inpatient/ER Cost (Non-Duals) - Top 5%
- OnTrackNY Early Psychosis Program : Enrolled
- OnTrackNY Early Psychosis Program : Discharged < 3 years
- OnTrackNY Early Psychosis Program : Enrolled or Discharged < 3 years
- OPWDD NYSTART - Eligible
- Intensive Mobile Treatment (IMT) Past Year
- High Fidelity Wraparound (HFW) - Likely Eligible
- Health Home Plus (HH+) - Eligible
- AOT - Active Court Order
- AOT - Expired < 6 months
- AOT - Expired < 12 months
- ACT - Enrolled
- ACT - Discharged < 12 months

Quality Flag as of 10/01/2025

Special Populations

Special Populations

Data sourced from
Medicaid and NYC-DHS

Population

High Need Population

AOT Status

Alerts

Homelessness Alerts

Complex Needs

Managed Care Plan & Medicaid

Managed Care

MC Product Line

Medicaid Enrollment Status

Medicaid Restrictions

Quality Flag as of 10/01/2025

HARP Enrolled - Not Health Home Enrolled

HARP-Enrolled - No Assessment for HCB

Eligible for Health Home Plus - Not Health Home

Eligible for Health Home Plus - No Health Home

Homelessness: All Sources

- Any (DHS/Medicaid)
- Any past 1 year (DHS/Medicaid)

Homelessness: NYC DHS

- Any (DHS)
- Any past 1 year (DHS)
- Shelter (DHS)
- Shelter past 1 year (DHS)
- Outreach (DHS)
- Outreach past 1 year (DHS)
- Behavioral Health Shelter past 1 year (DHS)
- Safe Haven or Stabilization Shelter past 1 year (DHS)

Homelessness: Medicaid

- Any (Medicaid)
- Any past 1 year (Medicaid)
- Unsheltered past 1 year (Medicaid)
- Sheltered past 1 year (Medicaid)

Special Populations

Special Populations

Social Determinants

Population

High Need Population

AOT Status

Alerts

Homelessness Alerts

Complex Needs

SDOH Conditions (re

- Problems related t
- Problems related t
- Problems related t
- Problems related t
- Problems related t
- Problems related t

Can select up to 4 Complex Needs criteria

Managed Care Plan & Medicaid

Managed Care

MC Product Line

Medicaid Enrollment Status

Medicaid Restrictions

Quality Flag as of 10/01/2025

- HARP Enrolled - Not Health Home Enroll
- HARP-Enrolled - No Assessment for HCB
- Eligible for Health Home Plus - Not Health
- Eligible for Health Home Plus - No Health
- Eligible for Health Home Plus - No Health
- HH Enrolled, Eligible for Health Home Pl
- High Mental Health Need
- Mental Health Placement Consideration
- Antipsychotic Polypharmacy (2+ >90day
- Antipsychotic Two Plus
- Antipsychotic Three Plus
- Antidepressant Two Plus - SC
- Antidepressant Three Plus
- Psychotropics Three Plus

Any Complex Need

Any Complex Need

General Eligibility Criteria (All Ages)

- Any General Eligibility Criteria
- AOT active or expired in past year
- ACT enrolled or discharged in past year
- Intensive Mobile Treatment (IMT) in past year with MH diagnosis
- HH+ service in the 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
- Ineffectively Engaged: No Outpt MH < 12 months with 2+ Inpt MH or 3+ ER MH
- State PC Inpatient Discharge < 12 months
- CNYPC Release < 12 months
- Homeless in past 6 months + SMI
- Suicide attempt: Any history
- Homicidal ideation in past year and 1+ MH ED/CPEP/IP in past year
- Opioid overdose in past year

Additional Eligibility Criteria for Children & Adolescents (0-20 years)

- Any Eligibility Criteria for Child & Adol (0-20)
- K3 Serious Emotional Disturbance in past year
- Psychiatric Inpatient in past year
- Residential Treatment Facility in past year
- Children's Community Residence in past year

Social Determinants of Health (SDOH)

Social Determinants of Health (SDOH) Past 1 Year

SDOH Conditions (reported in billing)

- Problems related to housing and economic circumstances
 - Discord with neighbors, lodgers and roommates
 - Extreme poverty
 - Financial insecurity
 - Food insecurity
 - Homelessness

SDOH Conditions: Selected

- Problems related to housing and economic circumstances
 - Extreme poverty
 - Food insecurity
 - Homelessness

Select a domain category or expand the domain category to select a specific SDOH condition within that domain (up to 4 different SDOH filters can be selected at one time)

Managed Care Plan & Medicaid, Quality Flags

Managed Care Plan & Medicaid

Managed Care

MC Product Line

Medicaid Enrollment Status

Medicaid Restrictions

Search for Medicaid Enrollment Status

Children's Waiver Status

HARP Status

HARP HCBS Assessment Status

HARP HCBS Assessment Results

HIV SNP Enrolled BH High-Risk (H4)

HIV SNP, Tier 1 BH HCBS Eligible (H4 with H5)

HIV SNP, Tier 2 BH HCBS Eligible (H4 with H6)

BH High-Risk/ HARP Eligible (H9)

Not HARP Eligible (Current Medicaid Enrollees excluding H1-H9)

Search for HARP Status (e.g., HARP Enrolled)

Quality Flag as of 10/01/2025

Definitions

Services:

- HARP Enrolled - Not Health Home Enrolled - (updated weekly)
- HARP-Enrolled - No Assessment for HCBS - (updated weekly)
- Eligible for Health Home Plus - Not Health Home Enrolled
- 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
- HH Enrolled, Eligible for Health Home Plus - Not Entered as Eligible in DOH MAPP Past 3 Months
- High Mental Health Need
- Mental Health Placement Consideration
- Antipsychotic Polypharmacy (2+ >90days) Children

Search for Quality Flags (can select up to 4 flags per search)

Medication & Diagnosis

Medication & Diagnosis

as of 10/01/2025

Past 1 Year

Prescriber Last Name

Drug Name

Active Drug

Active medication (past 3 months) requiring Prior Authorization

Psychotropic Drug Class*

- ADHD Med
- Antidepressant
- Antipsychotic
- Antipsychotic - Long Acting Injectable

Non-Psychotropic Drug Class*

- Analgesics and Anesthetics
- Anti-Infective Agents
- Anti-Obesity Agents
- Antidiabetic

BH Diagnoses

- Any BH Diagnosis
- Any MH Diagnosis
- Acute Stress Disorder
- Anxiety Disorders

Medical Diagnoses

- Certain conditions originating in the perinatal period
- Certain infectious and parasitic diseases
- Codes for special purposes
- Congenital malformations, deformations, and chromosomal anomalies

Individual Diagnosis

Given

1+

Primary Only

Search by selecting diagnostic categories or typing individual diagnosis

Medication & Diagnosis

Medication & Diagnosis as of 10/01/2025

Past 1 Year

Prescriber Last Name

Drug Name

Active Drug

Active medication (past 3 months) requiring Prior Authorization

Psychotropic Drug Class*

- ADHD Med
- Antidepressant
- Antipsychotic
- Antipsychotic - Long Acting Injectable

Non-Psychotropic Drug Class*

- Analgesics and Anesthetics
- Anti-Infective Agents
- Anti-Obesity Agents
- Antidiabetic

Click on the “+” sign to expand a category and view a list of specific diagnoses

BH Diagnoses

Medical Diagnoses

- + Neurodevelopmental Disorders
 - Attention Deficit Hyperactivity Disorder
 - + Communication Disorders
 - Intellectual Disabilities
 - Motor Disorders
 - Other Neurodevelopmental Disorders
 - Specific Learning Disorder
 - + Autism Spectrum Disorder

- Conditions originating in the perinatal period
- Infectious and parasitic diseases
- Conditions for special purposes
- Malformations, deformations, and chromosomal abnormalities

Services by Any Provider

Services by Any Provider as of 10/01/2025

Past 1 Year

Provider

Region

County

Service Utilization

Number of Visits

Service Setting: Telehealth coded

Service Detail: Selected

- Care Coordination
- Crisis Service
- Foster Care
- Inpatient - ER
- Living Support/Residential
- Other
- Outpatient - DD
- Outpatient - MH
- Outpatient - Medical
- Outpatient - Medical Specialty
- Outpatient - SU
- Outpatient - Unspecified
- Practitioner - BH
- State Beach Center Services (Source)

In the “Services by Any Provider” section you can search for populations who received different types of services, including services in specific regions/counties

Services by Any Provider

Services by Any Provider as of 10/01/2025

Past 1 Year

Provider

Region

County

Service Utilization

Number of Visits

1+

Service Setting: Tele

- Care Coordination
- Crisis Service
- Foster Care
- Inpatient - ER
- Living Support/Resid
- Other
- Outpatient - DD
- Outpatient - MH
- Outpatient - Medical
- Outpatient - Medical Specialty
- Outpatient - SU
- Outpatient - Unspecified
- Practitioner - BH
- State Psch Center Services (Source

- Clinic MH - ALL
- ER - ALL
- ER - BH Dx/Svc/CPEP
- ER - MH Dx/Svc/CPEP
- ER - Medical Dx/Svc
- ER - SU Dx/Svc
- Inpatient - ALL
- Inpatient - BH
- Inpatient - MH
- Inpatient - Medical
- Inpatient - SU

- 1+
- 2+
- 3+
- 5+
- 10+
- 20+
- 30+
- 40+
- 50+

499 Recipients Found

View: Standard



[Modify Search](#)

Population	OPWDD Services Eligible (RE95)
AND Complex Needs	Any Complex Need
AND [Any Provider] Provider Region	Hudson River
AND [Any Provider] Provider County	Albany

Review recipients in results carefully before accessing Clinical Summary.

Maximum Number of Rows Displayed: 10000

Name	Medicaid ID	DOB	Gender	Race & Ethnicity	Medicaid Quality Flags	Medicaid Managed Care Plan
QVNITEVZLA SazTRQ QQ	RVatMp2nO VQ	OCyoM8yo MDEo	TQ LQ MTM	Hispanic or Latinx	2+ ER-BH, 2+ ER-MH, 2+ ER-Medical, 3PP(Y), MH Plcmt Consid, No HbA1c-DM	Excellus BlueCross BlueShield
QVNITUVBREUI QqFSTA	QVYrNDUqN EE	NSyoLpEvN 9a	TQ LQ NTY	Black	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	
QVVTVEbOLA TUFLQVbMQQ R6	RV2rNDQvN a2	NSypLpImM TI	R6 LQ MTM	White	3PP(Y), No Gluc/HbA1c & LDL-C - AP (DOH), No Gluc/HbA1c - AP (DOH), No LDL-C - AP (DOH)	Fidelis Care New York
QVbBTEEi TqvFTEm	QqUqNT6qN Eu	MTAIM96IM TatNQ	TQ LQ NDa	Hispanic or Latinx	10+ ER, 2+ ER-BH, 2+ ER-MH, 2+ ER-Medical, 2+ Inpt-BH, 2+ Inpt-MH, 2+ Inpt-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, No Engage after MH IP, No Gluc/HbA1c & LDL-C - AP, No ICM after MH ED, No ICM after MH Inpt, No LDL-C - AP, No MH Inpt F/U 30d (DOH), No MH Inpt F/U 30d (DOH) - Adult, No MH Inpt F/U 7d (DOH), No MH Inpt F/U 7d (DOH) - Adult, Readmit 30d - Medical to All Cause, Readmit 30d - Medical to Medical	

About Search Results Views



All views display: Name, Medicaid ID, Date of Birth, Gender, Race & Ethnicity, Managed Care Plan, Current PHI Access

Results View	Columns Displayed
Standard	Quality Flags
Care Coordination	HARP Status (H Code), HARP HCBS Assessment Date (most recent), Children's Waiver Status (k Code), Health Home Name (Enrolled), Care Management Name (Enrolled), ACT Provider (Active), OnTrackNY Early Psychosis Program (Enrolled), AOT Status, AOT Provider (Active), MC Product Line, CORE Eligible.
High Need/High Risk	OMH Unsuccessful Discharge, Transition Age Youth (TAY-BH) OPWDD NYSTART-Eligible, High Fidelity Wraparound (Likely Eligible), Health Home Plus-Eligible, Homelessness, AOT Status, AOT Expiration Date, Suicide Risk, Overdose Risk and PSYCKES Registries
Hospital Utilization	Number of hospitalizations in past year broken out by ER and Inpatient and Behavioral Health and Medical
Outpatient Providers	Primary Care Physician Assignment (Assigned by MC Plan), Mental Health Outpatient Provider, Medical Outpatient Provider, Substance Use Outpatient Provider, and CORE or Adult HCBS Service Provider columns each include provider name, most recent service past year, and # visits/services past 1 year.

Close

[← Modify Search](#)**499 Recipients Found**

View: Hospital Utilization ▾



Population

OPWDD Services Eligible (RE95)

AND Complex Needs

Any Complex Need

AND [Any Provider] Provider Region

Hudson River

AND [Any Provider] Provider County

Albany

Review recipients in results carefully before accessing Clinical Summary.

Maximum Number of Rows Displayed: 10000

Name ▲	Medicaid ID ▾	DOB ▾	Gender ▾	Race & Ethnicity ▾	Medicaid Managed Care Plan ▾	# ER Services Past Yr			# Inpatient Services Past Yr		
						ALL ▾	Behavioral Health ▾	Medical ▾	ALL ▾	Behavioral Health ▾	Medical ▾
QUrBVFVMQVfJW8mTUFsvqE R6	RrYvM9InO FM	NoynN8ynO Tav	R6 LQ M9Y	Asian		14	6	8			
QUrVUqEi TUFMSUi VA	VU2pODQv NUU	OCyoMoyn OTau	TQ LQ M92	Black	Healthfirst PHSP, Inc.	17	17		2	2	
QUvUSEzOWSm SqVMTFM R6	RbUqMp2r OF2	NoynMCyo MDAr	R6 LQ M9A	Black		1	1				
QVJNUrRSTqvHLA QqzMRQ	RbarOTAtN q6	MTEIMT2IM 9AnNm	TQ LQ Nm	White	Fidelis Care New York	4		4			
QVJORVei SazTSFVBQUvU	Ub6rODaQO EE	MTAIMTQI M9AmMm	TQ LQ M9E	White	HealthPlus	4	2	2			

My QI Report

My QI Report

- Tool for managing quality improvement efforts
- Updated monthly
- Eligible Population (denominator): clients served plus other parameters depending on quality indicator specifications
- Number with QI Flag (numerator): clients who meet criteria for the flag
- Compare prevalence rates for provider agency, region, state
- Filter report by program type, client residence or provider location region/county
- Drill down into list of recipients who meet criteria for flag
- Race/Ethnicity view of My QI Report
- Reports can be exported to Excel and PDF

Understanding My QI Report

- **Attributing clients to agency QI reports:**
 - **Billing:** Clients linked to provider agency if billed by agency in the past 9 months
 - **MAPP HH/CMA Database:** Clients linked to provider agency if enrolled in HH or CMA according to MAPP
 - This rule is used to automatically link clients to providers so that current clients are included in the report each month
- **Period of observation for the quality indicator:**
 - Assessed by a measure, varies for each measure
 - For example, the period of observation for the High Utilization quality indicator is 13 months

MAIN STREET MENTAL HEALTH CLINIC

View: Standard



Quality Improvement As of 10/01/2025

Performance Tracking As of 12/01/2024

The Quality Improvement measures are considered more 'real time' and are run on a monthly basis.

No filters selected

Filters

Reset

Indicator Set

Quality Improvement Indicators as of 10/01/2025 Run monthly on all available data to help rapidly address quality improvement concerns.

Indicator Set	Population	Eligible Population/ Episode	# with QI Flag	%	Regional %	Statewide %	
BH QARR - Improvement Measure	All	253	114	45.1	36.4	36	
General Medical Health	All	788	286	36.3	14.6	12.4	
Health Home Care Management - Adult	Adult 18+	269	222	82.5	80	89.8	
High Utilization - Inpt/ER	All	787	274	34.8	25.4	20.1	
Polypharmacy	All	221	53	24	19.5	12.6	

MAIN STREET MENTAL HEALTH CLINIC

View: Standard



Quality Improvement As of 10/01/2025

Performance Tracking As of 12/01/2024

The Performance Tracking measures are run with an intentional lag of 6+ months

Filters Reset

No filters selected

Indicator Set

Performance Tracking Indicators as of 12/01/2024 Run with an intentional lag of 6+months to allow for complete data.

Indicator Set	Population	Eligible Population/ Episode	# with QI Flag	%	Regional %	Statewide %	
General Medical Performance Tracking Measure	All	50,125	17,874	35.7	41	38.9	
Hospital Outcome Measure Set	All	659	412	62.5	65.2	63.2	
MH Performance Tracking Measure	All	9,919	5,570	56.2	57	57.8	
SUD Performance Tracking Measure	Adol & Adult (13+)	10,698	8,507	79.5	76.4	79.5	
Vital Signs Dashboard - Adult	Adult	35,323	16,823	47.6	52	50.5	

QI Filters



Site

ALL

Program Type

ALL

Managed Care

ALL

MC Product Line

ALL

Age Group

ALL

Population

ALL

Complex Needs

Client Residence

Client Region

New York City

Client County

ALL

Provider Location

Provider Region

ALL

ALL

Bronx

Brooklyn

Manhattan

Queens

Staten Island

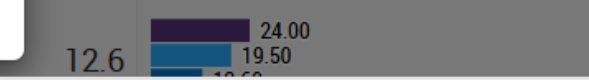
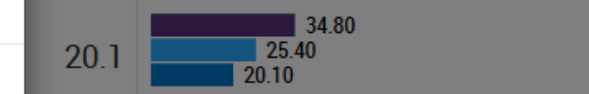
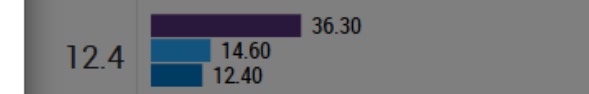
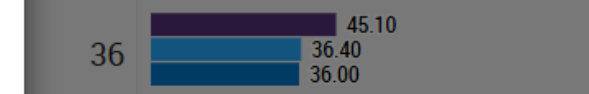
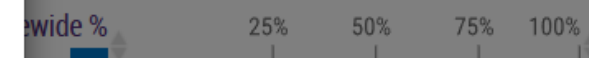
View: Standard



As of 12/01/2024

Filters

Reset



MAIN STREET MENTAL HEALTH CLINIC

View: Standard



Quality Improvement As of 10/01/2025

Performance Tracking As of 12/01/2024

CLIENT REGION: NEW YORK CITY CLIENT COUNTY: BRONX

Filters

Reset

Indicator Set

Performance Tracking Indicators as of 12/01/2024 Run with an intentional lag of 6+months to allow for complete data.

Indicator Set	Population	Eligible Population/ Episode	# with QI Flag	%	Regional %	Statewide %	25% 50% 75% 100%
General Medical Performance Tracking Measure	All	43,307	15,180	35.1	41	38.9	
Hospital Outcome Measure Set	All	555	360	64.9	65.2	63.2	
MH Performance Tracking Measure	All	7,941	4,351	54.8	57	57.8	
SUD Performance Tracking Measure	Adol & Adult (13+)	8,482	6,680	78.8	76.4	79.5	
Vital Signs Dashboard - Adult	Adult	29,480	13,682	46.4	52	50.5	

MAIN STREET MENTAL HEALTH CLINIC

View: Standard



Quality Improvement As of 10/01/2025

Performance Tracking As of 12/01/2024

CLIENT REGION: NEW YORK CITY CLIENT COUNTY: BRONX

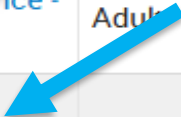
Filters

Reset

Indicator Set: MH Performance Tracking Measure

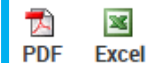
Indicator Set	Indicator	Population	Eligible Population/ Episode	# with QI Flag	%	Regional %	Statewide %	25%	50%	75%	100%
1. No Follow Up for Child on ADHD Med - Initiation	Child		372	95	25.5	29	35.9	25.50	29.00	35.90	
2. No Follow Up for Child on ADHD Med - Continuation	Child		115	15	13	24.4	31.7	13.00	24.40	31.70	
3. Antidepressant Medication Discontinued - Acute Phase	Adult		1,973	690	35	38.8	39.4	35.00	38.80	39.40	
4. Low Mood Stability - Medication Adherence - Bipolar	Adult		1,973	1,043	52.9	53.5	55.2	52.90	53.50	55.20	
5. Low Mood Stability - Medication Adherence - Bipolar	Adult		1,890	593	31.4	31.7	33.3	31.40	31.70	33.30	
6. Low Mood Stability - Medication Adherence - Bipolar	Adult		2,349	1,050	44.7	45.4	45.8	44.70	45.40	45.80	
7. No Follow Up after MH Inpatient - 7 Days	6+		1,204	620	51.5	41.9	47.3	51.50	41.90	47.30	

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.



MAIN STREET MENTAL HEALTH CLINIC ?

View: Standard ▾



Quality Improvement As of 10/01/2025

Performance Tracking As of 12/01/2024

CLIENT REGION: NEW YORK CITY CLIENT COUNTY: BRONX

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			
TUNDVUnMTrVHSA VFbSQVa Um	WauuNTQtOFM	MDaIM9IIMTauMm	Black	2+ ER-Medical, Adher-MS (DOH), HARP No Assessment for HCBS, MH Plcmt Consid, No DM Screen - AP (DOH), No Engage after MH IP, No ICM after MH Inpt, No MH Inpt F/U 30d (DOH), No MH Inpt F/U 30d (DOH) - Adult, No MH Inpt F/U 7d (DOH), No MH Inpt F/U 7d (DOH) - Adult, No Outpt Medical	No Access	Enable Access		
				Cervical Cancer Screen Overdue (DOH), HARP No Assessment for HCBS, MH Plcmt Consid, No DM Screen - AP (DOH), No Engage after MH IP, No	REMOVED			

MAIN STREET MENTAL HEALTH CLINIC View: Standard



Quality Improvement As of 10/01/2025

Performance Tracking As of 12/31/2024

CLIENT REGION: NEW YORK CITY CLIENT COUNTY: BRONX

[Filters](#) [Reset](#)

Indicator Set: MH Performance Tracking Measure

Indicator Set | Indicator | Site | Measure

Performance Tracking Indicators as of 12/31/2024

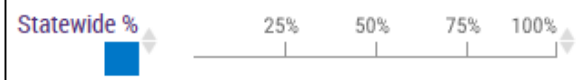
- Indicator Set
- General Medical Performance Tracking Measure
- Hospital Outcome Measure Set
- MH Performance Tracking Measure

About QI Report Views ×

All views display: Indicator Name, Population

View	Columns Displayed
<p>Standard</p> <p>Displays quality indicator prevalence rates for the organization compared to the region and statewide prevalence rates.</p>	<p>Eligible Population, # with QI Flag, %, Region %, Statewide %</p>
<p>Race & Ethnicity</p> <p>Displays quality indicator prevalence rates for clients in different race and ethnicity groups. Available in the "Indicator Set" and "Indicator" tabs.</p>	<p>Total % (for this organization), Native American, Asian, Black, Pacific Islander, White, Multiracial, and Hispanic or Latinx. Clients for which race is unknown are included in the "Total" number, but are not represented as a separate race/ethnicity group.</p>

[Close](#)



SUD Performance Tracking Measure	Adol & Adult (13+)	8,482	6,680	78.8	76.4	79.5	
Vital Signs Dashboard - Adult	Adult	29,480	13,682	46.4	52	50.5	
Vital Signs Dashboard - Child	Child & Adol	42,447	10,519	24.8	32.2	28.9	

MAIN STREET MENTAL HEALTH CLINIC

View: Race & Ethnicity



Quality Improvement As of 10/01/2025

Performance Tracking As of 12/01/2024

CLIENT REGION: NEW YORK CITY CLIENT COUNTY: BRONX

Filters

Reset

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

Indicator Set	Indicator	Site	MCO	Attending	Recipients	New QI Flag	Dropped QI Flag
---------------	-----------	------	-----	-----------	------------	-------------	-----------------

Performance Tracking Indicators as of 12/01/2024 Run with an intentional lag of 6+months to allow for complete data.

Indicator Set	Population	Clients with QI Flags by Percentage (%) and Number								Total
		Total	Native American	Asian	Black	Pacific Islander	White	Multiracial	Hispanic or Latinx	
General Medical Performance Tracking Measure	All	35.1%	51.9%	32.3%	38.1%	40%	41.3%	42.3%	33.3%	35.10
		15,180	28	708	3,853	24	624	234	8,153	
Hospital Outcome Measure Set	All	64.9%	100%	87.5%	71.7%	50%	85%	50%	59.1%	64.90
		360	1	14	124	1	17	5	163	
MH Performance Tracking Measure	All	54.8%	52.4%	59.9%	57.9%	53.8%	54.1%	58.3%	52.3%	54.80
		4,351	11	97	1,312	7	191	77	2,306	

MAIN STREET MENTAL HEALTH CLINIC View: Race & Ethnicity



Quality Improvement As of 10/01/2025

Performance Tracking As of 12/01/2024

CLIENT REGION: NEW YORK CITY CLIENT COUNTY: BRONX

[Filters](#) [Reset](#)

Indicator Set: MH Performance Tracking Measure

Indicator Set **Indicator**

Indicator	Population	Clients with QI Flags by Percentage (%) and Number								Total
		Total	Native American	Asian	Black	Pacific Islander	White	Multiracial	Hispanic or Latinx	
7. No Follow Up after MH Inpatient - 7 Days	6+	51.5%	100%	65.2%	56.7%	66.7%	54.2%	38.5%	47.5%	
		620	1	15	223	2	39	10	273	
8. No Follow Up After MH ED Visit - 7 Days	6+	54.7%	66.7%	73.3%	61.1%	66.7%	53.4%	59.4%	48.1%	
		926	4	33	347	2	31	19	393	
9. No Diabetes Screening - Schizophrenia/Bipolar on Antipsychotic	Adult	13.4%	0%	23.6%	14.5%	0%	14.9%	11.1%	12.1%	
		359	0	13	123	0	21	6	172	

Clipboard

- Paste
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Font

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Color selection tools

Alignment

Wrap Text

Merge & Center

Number

General

\$ %

Styles

Conditional Formatting

Format as Table

Cell Styles

Cells

Insert

Delete

Format

Editing

AutoSum

Fill

Clear

Sort & Filter

Find & Select

A35

Provider: MAIN STREET MENTAL HEALTH CLINIC; Filters: CLIENT REGION: NEW YORK CITY, CLIENT COUNTY: BRONX, Indicator Set: MH Performance Tracking Measure; Indicator: 7. No Follow Up after MH Inpatient - 7 Days

Quality Improvement Indicators as of 10/01/2025

Run monthly on all available data to help rapidly address quality improvement concerns.

Name	Population	EligiblePopulation	QIflagPopulation	Total %	Native American #	QI Flag	Native American Eligible Population	Native American %
BH QARR - Improvement Measure	All	5435	1763	32.4	6	14	42.9	
General Medical Health	All	164100	15203	9.3	32	349	9.2	
Health Home Care Management - Adult	Adult 18+	8293	7169	86.4	24	25	96	
High Utilization - Inpt/ER	All	163517	44594	27.3	116	349	33.2	
Polypharmacy	All	14386	1843	12.8	3	37	8.1	
Preventable Hospitalization	Adult	113266	1920	1.7	7	267	2.6	
Readmission Post-Discharge from any Hospital(Episode Based)	All	54782	10075	18.4	49	180	27.2	
Readmission Post-Discharge from this Hospital(Episode Based)	All	33965	4966	14.6	24	130	18.5	
Treatment Engagement	Adult 18-64	4518	1502	33.2	2	10	20	

Performance Tracking Indicators as of 12/01/2024

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

Name	Population	EligiblePopulation	QIflagPopulation	Total %	Native American #	QI Flag	Native American Eligible Population	Native American %
General Medical Performance Tracking Measure	All	43307	15180	35.1	28	54	51.9	
Hospital Outcome Measure Set	All	555	360	64.9	1	1	100	
MH Performance Tracking Measure	All	7941	4351	54.8	11	21	52.4	
SUD Performance Tracking Measure	Adol & Adult (8482	6680	78.8	19	23	82.6	
Vital Signs Dashboard - Adult	Adult	29480	13682	46.4	35	62	56.5	
Vital Signs Dashboard - Child	Child & Adol	42447	10519	24.8	13	56	23.2	

Statewide Reports

Statewide Report

As of 10/01/2025



Select an Indicator Set and any other filters:



Indicator Set	<input type="text" value=""/>
Indicator Type	<p>Quality Improvement (as of 10/01/2025)</p> <ul style="list-style-type: none"> BH QARR - Improvement Measure General Medical Health Health Home Care Management - Adult High Utilization - Inpt/ER Polypharmacy Preventable Hospitalization Readmission Post-Discharge from any Hospital(Episode Based) Readmission Post-Discharge from this Hospital(Episode Based) Treatment Engagement <p>Performance Tracking (as of 12/01/2024)</p> <ul style="list-style-type: none"> General Medical Performance Tracking Measure Hospital Outcome Measure Set MH Performance Tracking Measure SUD Performance Tracking Measure Vital Signs Dashboard - Adult Vital Signs Dashboard - Child
Program Type	
Managed Care	
MC Product Line	
Age Group	
Population	
Client Residence	
Provider Location	

[Indicator Definitions](#)

Submit

Reset

Statewide Report

As of 10/01/2025



Select an Indicator Set and any other filters:

Indicator Set

MH Performance Tracking Measure ▾

Indicator Type

MH Performance Tracking Measure Summary ▾

Program Type

Managed Care

MC Product Line

Age Group

Population

Client Residence

Provider Location

[Indicator Definitions](#)

- 3. Antidepressant Medication Discontinued - Acute Phase
- 4. Antidepressant Medication Discontinued - Recovery Phase
- 5. Low Antipsychotic Medication Adherence - Schizophrenia
- 6. Low Mood Stabilizer Medication Adherence - Bipolar
- 7. No Follow Up after MH Inpatient - 7 Days
- 8. No Follow Up After MH ED Visit - 7 Days
- 9. No Diabetes Screening - Schizophrenia/Bipolar on Antipsychotic
- 10. No Metabolic Monitoring (Gluc/HbA1c and LDL-C) Child & Adol on Antipsychotic
- 11. No Metabolic Monitoring (Gluc/HbA1c) Child & Adol on Antipsychotic
- 12. No Metabolic Monitoring (LDL-C) Child & Adol on Antipsychotic
- 13. No Diabetes Monitoring - DM & Schizophrenia
- 14. No Follow Up after MH Inpatient - 30 Days
- 15. No Follow Up After MH ED Visit - 30 Days
- 16. No Engagement after MH Inpatient
- 17. No Intensive Care Management after MH ED Visit
- 18. No Intensive Care Management after MH Inpatient
- 19. No CV Monitoring - CV & Schizophrenia
- 20. No Psychosocial Care - Child & Adol on Antipsychotic
- 21. Prevention Quality Indicator 92 (PQI 92)
- MH Performance Tracking Measure Summary



Statewide Report

As of 10/01/2025



Select an Indicator Set and any other filters:

Indicator Set: MH Performance Tracking Measure

Indicator Type: 15. No Follow Up After MH ED Visit - 30 Days

Program Type: ALL

Managed Care: ALL

MC Product Line: ALL

Age Group: ALL

Population: ALL Complex Needs

Client Residence

Provider Location

Client Region

New York City

ALL

Central NY

Hudson River

Long Island

New York City

Western NY



Client County: ALL

Provider County: ALL

[Indicator Definitions](#)

Submit

Reset

Statewide Report

As of 10/01/2025



Select an Indicator Set and any other filters:

Indicator Set	MH Performance Tracking Measure ▾	
Indicator Type	15. No Follow Up After MH ED Visit - 30 Days ▾	
Program Type	ALL ▾	
Managed Care	ALL ▾	
MC Product Line	ALL ▾	
Age Group	ALL ▾	
Population	<input checked="" type="radio"/> ALL <input type="radio"/> Complex Needs	
Client Residence	Client Region	Client County
	New York City ▾	ALL ▾
Provider Location	Provider Region	
	ALL ▾	



- ALL
- ALL
- Bronx
- Brooklyn
- Manhattan
- Queens
- Staten Island

[Indicator Definitions](#)

Statewide Report

As of 10/01/2025



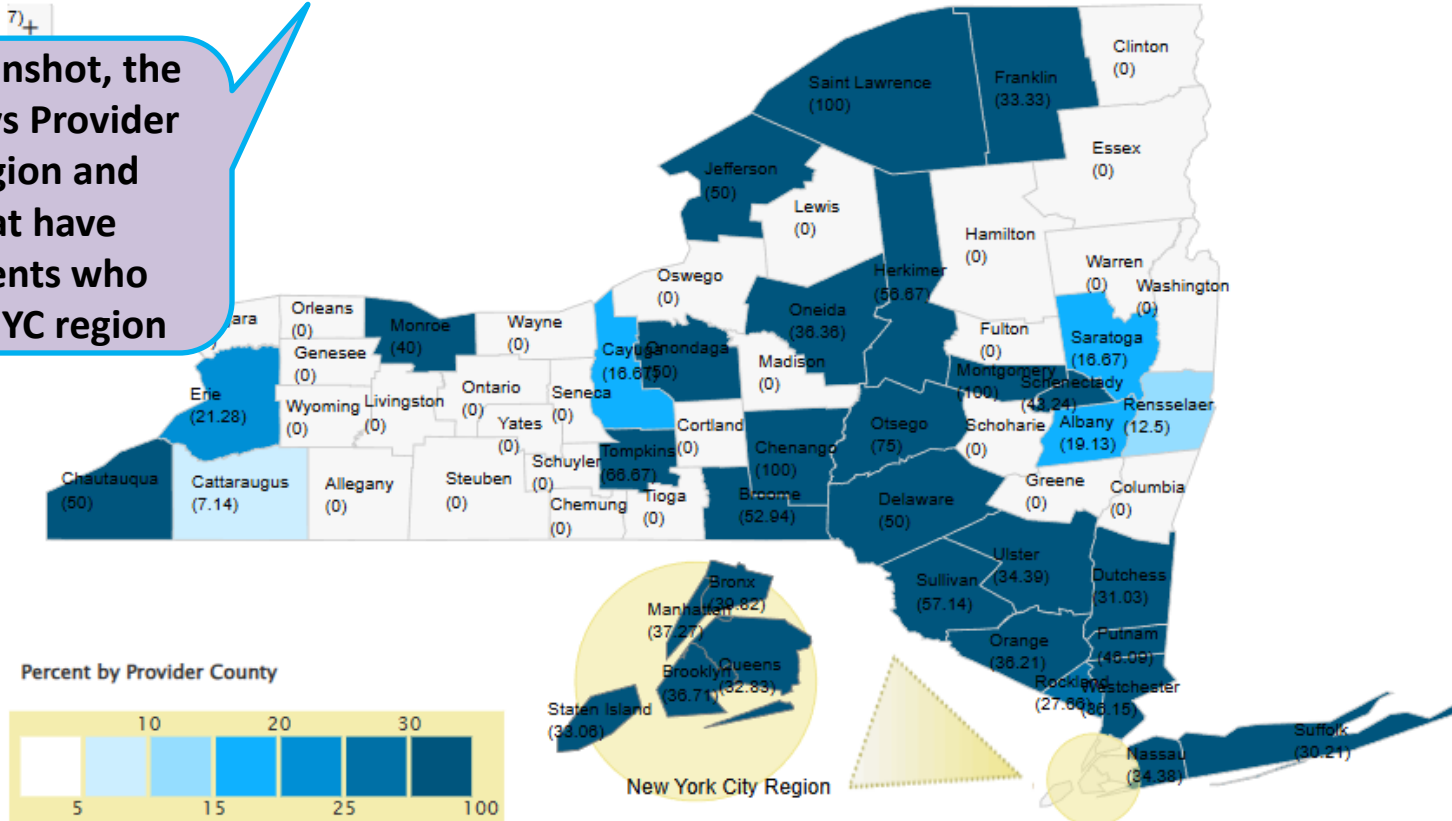
INDICATOR SET: MH PERFORMANCE TRACKING MEASURE INDICATOR: 15. NO FOLLOW UP AFTER MH ED VISIT - 30 DAYS CLIENT REGION: NEW YORK CITY

Filters

Map view

Client Residence Provider Location

In this screenshot, the map displays Provider Location region and counties that have serviced clients who live in the NYC region



Client Region	Client County	Provider Region	Provider County	Network	Provider	Plan
---------------	---------------	-----------------	-----------------	---------	----------	------

Region by Client Residence	Eligible Population	# with QI Flag	%
STATE	18,606	7,012	37.69
New York City	18,606	7,012	37.69

Statewide Report

As of 10/01/2025

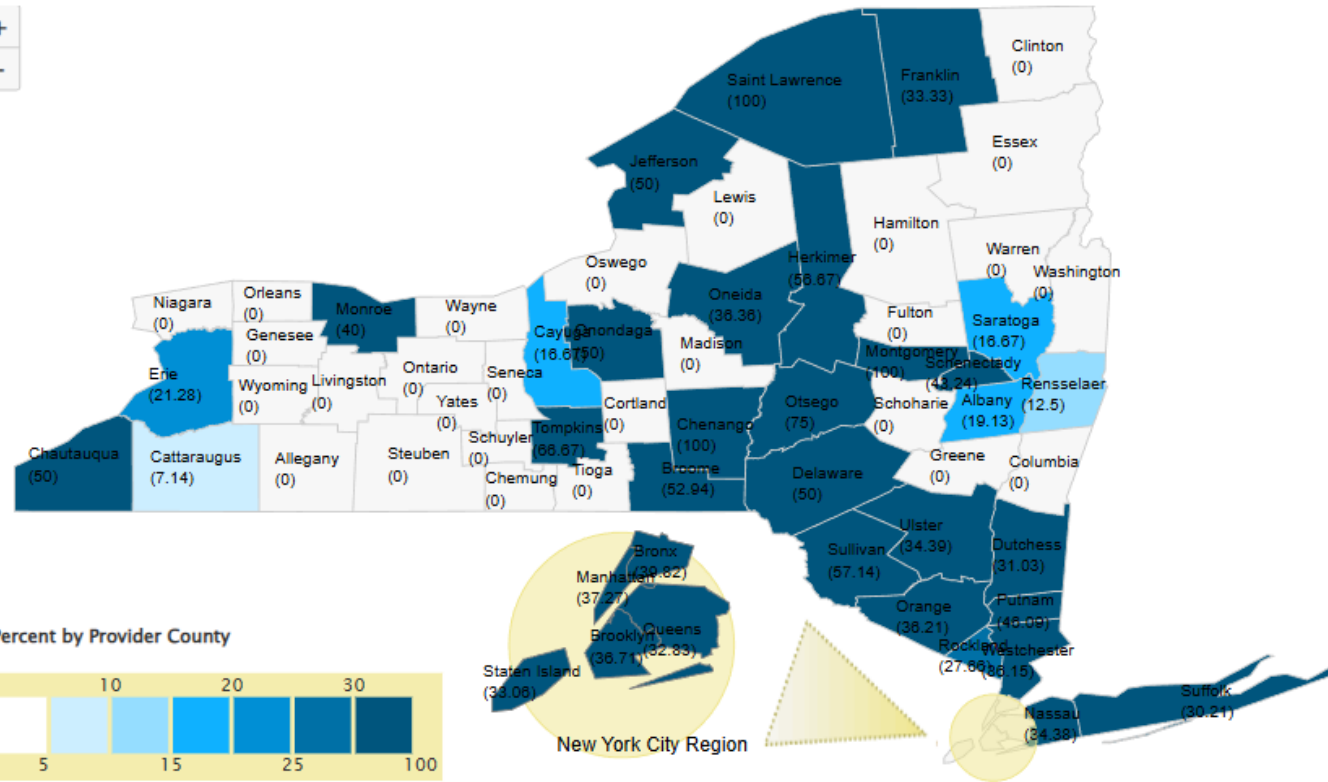


INDICATOR SET: MH PERFORMANCE TRACKING MEASURE INDICATOR: 15. NO FOLLOW UP AFTER MH ED VISIT - 30 DAYS CLIENT REGION: NEW YORK CITY

Filters

Map view

Client Residence Provider Location



Client Region	Client County	Provider Region	Provider County	Network	Provider	Plan
County by Client Residence	Eligible Population	# with QI Flag	%	Rate High		
STATE	18,606	7,012	37.69	NO		
Bronx	5,484	2,191	39.95	YES		
Brooklyn	4,597	1,739	37.83	NO		
Manhattan	3,558	1,420	39.91	NO		

Drill in to view a list of providers!

[← Statewide Report](#)

Client County : BRONX

View: Standard



Quality Improvement As of 10/01/2025

Performance Tracking As of 12/01/2024

CLIENT REGION: NEW YORK CITY CLIENT COUNTY: BRONX

Filters

Reset

Indicator Set: MH Performance Tracking Measure Indicator: 15. No Follow Up After MH ED Visit - 30 Days

Indicator Set

Indicator

Provider

Provider Facility Name	Eligible Population	# with QI Flag	%
MONTEFIORE MEDICAL CENTER	2,136	759	35.53
NYC-HHC JACOBI MEDICAL CENTER	1,370	557	40.66
NYC-HHC LINCOLN MEDICAL & MENTAL HEALTH CENTE	1,166	515	44.17
BRONXCARE HEALTH SYSTEM	1,337	478	35.75
ST. BARNABAS HOSPITAL	1,016	428	42.13
THE NEW YORK AND PRESBYTERIAN HOSPITAL	780	322	41.28
NYC-HHC BELLEVUE HOSPITAL CENTER	447	206	46.09
SRH CHN LEAD HEALTH HOME	456	199	43.64
NYC-HHC HARLEM HOSPITAL CENTER	372	177	47.58
NYU LANGONE HOSPITALS	269	140	52.04
COORDINATED BEHAVIORAL CARE, INC.	597	136	22.78
COMMUNITY CARE MANAGEMENT PARTNERS	361	125	34.63
SUN RIVER HEALTH INC	364	124	34.07

Clinical Summary

What is a PSYCKES Clinical Summary?

- Summarizes up to 5 years of treatment history for a client
- Creates an integrated view from all databases available through PSYCKES
 - E.g., Hospitalizations from Medicaid billing, State PC residential services from State PC EMR, health home information from MAPP, suicide risk from incident management, AOT court orders from OMH database, Homelessness information from DHS and Medicaid
- Summarizes treatment episodes to support rapid review
- Episodes of care linked to detailed dates of service if needed (including diagnosis and procedures)
- Clinical Summary organized by sections like an EMR

Clinical Summary Sections

- General
- Current Care Coordination
- Notifications
- Active Medicaid Restrictions
- Alerts
- Social Determinants of Health (SDOH)
- Quality Flags
- PSYCKES Registries
- Plans & Documents
- BH/Medical Diagnoses
- IVOS
- Care Coordination (historical)
- Medications (Controlled, BH, Medical)
- Outpatient Services (BH, Medical)
- Crisis Services/Hospital/ER
- Dental/Vision
- Living Support/Residential Treatment
- Laboratory & Pathology
- Radiology
- Medical Equipment
- Transportation

QqFNUCm QURSSUVOTaU

As of 11/3/2025 [Data sources](#)

PDF



EXCEL



CCD

[← Recipient Search](#)

Sections

Brief Overview

Full Summary

Data with Special Protection Show Hide

This report contains all available clinical data.

General

Name QqFNUCm QURSSUVOTaU	Medicaid ID QbUvN9EuOVA	Medicare No	HARP Status Not HARP Eligible (Current Medicaid Enrollees excluding H1-H9)
DOB XX/XX/XXXX (XX Yrs)	Medicaid Aid Category SSI	Managed Care Plan Fidelis Care New York (Mainstream)	HARP HCBS Assessment Status N/A
Address Mm Tq7BUaE RFI, TazSVqbDSA, Tba, MTMuMTU	Medicaid Eligibility Expires on	MC Plan Assigned PCP N/A	

Current Care Coordination

AOT	CATHOLIC CHARITIES OF CHENANGO COUNTY (Enrolled Date: 18-DEC-24, Expiration Date: 18-DEC-25) Main Contact : Megan McAvoy: (607) 334 - 8244
Health Home (Enrolled)	ONONDAGA CASE MGMT SVCS MH (Begin Date: 01-JUN-25) • Status : Active Member Referral Number: 1-855-613-7659; referrals@hhuny.org Care Management (Enrolled): CATHOLIC CHARITIES CHENANGO
Housing/Residential Program	Apartment Treatment Model, Catholic Charities of Chenango County Apartment Program. Catholic Charities of Chenango County (Admission Date: 03-JUN-25) Program Contact Information : Jeff Chesebro: (607)-334-8244

Notifications

Complex Needs due to	3+ Inpt MH < 13 months , AOT active or expired in past year , HH+ Eligibility , State PC Inpatient Discharge < 12 months
Prescription Prior Authorization	This client has been taking a prescription medication in the past 3 months that may require NYRx prior authorization: Clozapine. 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: 3+ Inpt MH < 13 months, AOT - Active Court Order, State PC Inpatient Discharge < 12 months
High Mental Health Need due to	3+ Inpt MH < 13 months ; AOT active or expired in the past year ; HH+ Eligibility ; State PC Inpatient Discharge < 12 months
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; AOT History: Active or Expired; Evidence of Supplemental Security Income (SSI) or SSD AND Any OMH Specialty MH Service in past 5 years; OMH Housing history in past 5 years.


Clinical Summary Sections

Plans & Documents

Date Document Created	Document Type	Provider Name	Document Created By	Role	Delete Document
6/9/2022	Other	MAIN STREET CLINIC	Smith, John	LMHC-P	

Screenings & Assessments [Definitions](#)

Table Graph

Assessment Name	Number of Assessments Entered	Last Assessment Date	Last Assessment Provider	Last Assessment Rated By(Role)	Last Assessment Results	
C-SSRS	2	3/28/2018	HEALTH CENTER	Smith, John	No Suicidal Ideation/Behavior	

Behavioral Health Diagnoses Primary, secondary, and quality flag-related diagnoses (most frequent first)

[Schizoaffective Disorder](#) • [Unspecified/Other Psychotic Disorders](#) • [Tobacco related disorder](#) • [Borderline Personality Disorder](#) • [Intellectual Disabilities](#) • [Schizophrenia](#) • [PTSD](#) • [Major Depressive Disorder](#) • [Other Mental Disorders](#) • [Specific Learning Disorder](#) • [Adjustment Disorder](#) • [Cannabis related disorders](#) • [Unspecified/Other Depressive Disorder](#) • [Alcohol related disorders](#) • [Unspecified/Other Anxiety Disorder](#) • [Unspecified/Other Bipolar](#)

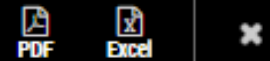
Medical Diagnoses Primary, secondary, and quality flag-related diagnoses (most frequent first)

Certain infectious and parasitic diseases	Trichomoniasis • Dermatophytosis • Other bacterial agents as the cause of diseases classified elsewhere
Diseases of the blood and blood-forming organs and certain disorders involving the immune mechanism	Iron deficiency anemia • Other anemias
Diseases of the circulatory system	Atherosclerosis • Disorders of arteries, arterioles and capillaries in diseases classified elsewhere

Clinical Summary Sections

Behavioral Health Diagnoses Primary, secondary, and quality flag-related diagnoses (most frequent first)

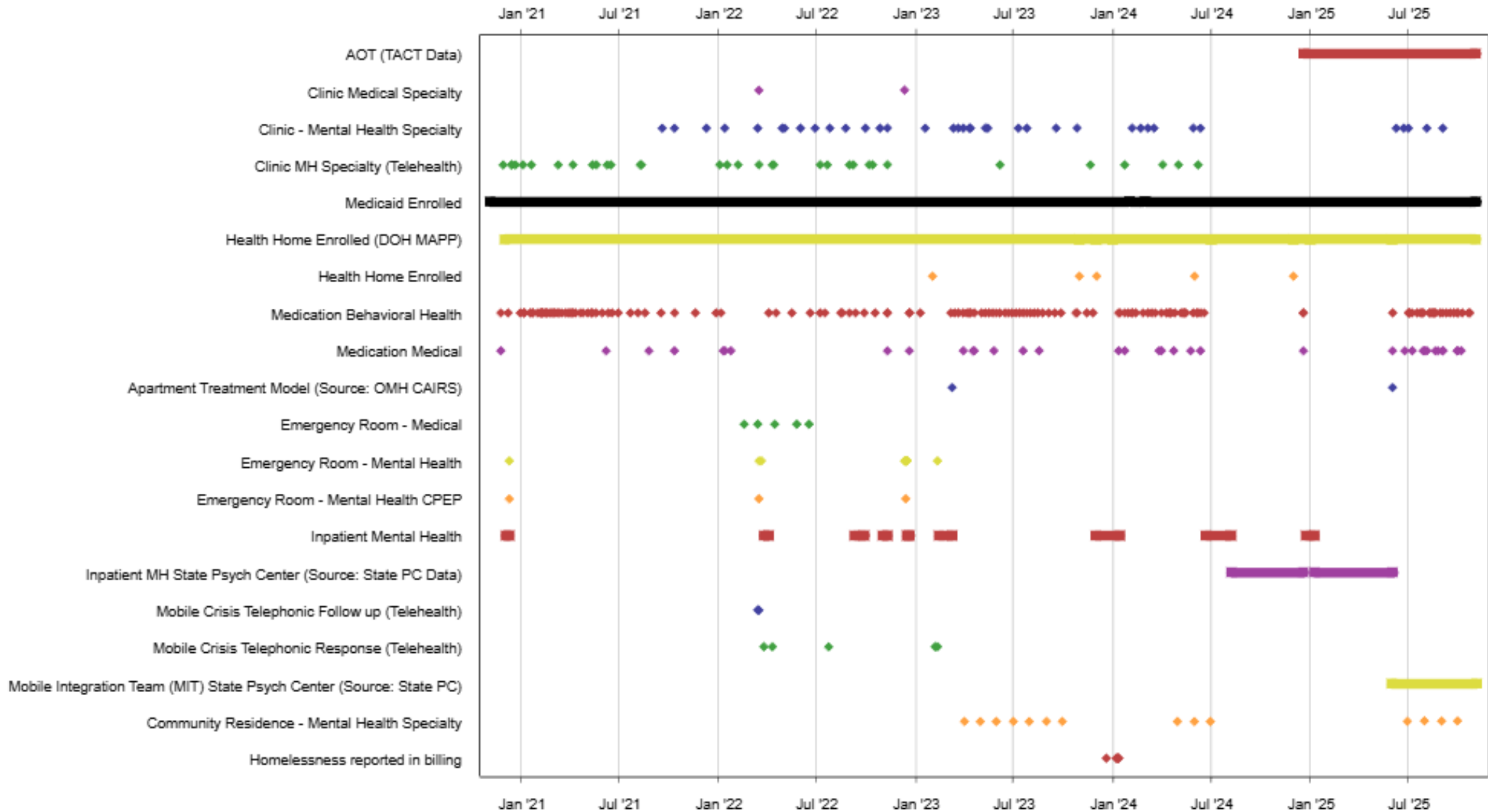
Services provided for the selected Diagnosis: Intellectual Disabilities



Previous **1** 2 3 4 5 6 7 8 Next

Date of Service	Service Type	Service Subtype	Provider Name	Primary, secondary, and quality flag-related diagnoses
1/7/2025	Inpatient-ER	Inpatient - MH State Psych Center (Source: State PC Data)	GREATER BINGHAMTON HEALTH CENTER	Constipation, unspecified, Folate deficiency anemia, unspecified, Mild intellectual disabilities, Other obesity due to excess calories, Personal history of nicotine dependence, Post-traumatic stress disorder, unspecified, Schizoaffective disorder, bipolar type, Vitamin D deficiency, unspecified
1/7/2025	Inpatient-ER	Inpatient - MH	UNITED HEALTH SERVICE HOSPITAL	Patient's other noncompliance with medication regimen for other reason, Person awaiting admission to adequate facility elsewhere, Schizoaffective disorder, bipolar type, Unspecified intellectual disabilities
1/3/2025	Inpatient-ER	Inpatient - MH	UNITED HEALTH SERVICE HOSPITAL	Person awaiting admission to adequate facility elsewhere, Schizoaffective disorder, bipolar type, Unspecified intellectual disabilities
1/2/2025	Inpatient-ER	Inpatient - MH	UNITED HEALTH SERVICE HOSPITAL	Person awaiting admission to adequate facility elsewhere, Schizoaffective disorder, bipolar type, Unspecified

Integrated View of Services Over Time



Clinical Summary Sections

Care Coordination [Details](#)

Table [Graph](#)

Service Type	Provider	First Date Billed	Last Date Billed	Number of bills	
Care Coordination Organization (DD Health Home)	CARE DESIGN NY LLC CCO	10/1/2019	8/1/2024	59	Copy
Case Management - OPWDD	ALVARADO HOSPITAL CA	8/19/2023	8/19/2023	1	Copy
Waiver Services - HCBS - OPWDD	CITIZEN ADVOCATES INC DAY	5/13/2021	4/1/2022	47	Copy

Medication: Controlled Substance [Details](#)

Table [Graph](#)

Schedule	Drug Class	Drug Name	Last Dose*	Estimated Duration	First Day Picked Up	Last Day Picked Up	
IV	Anxiolytic/Hypnotic	Lorazepam	1 MG , 3/day	2 Month(s) 3 Week(s) 2 Day(s)	7/2/2020	8/26/2020	Copy

Medication: Behavioral Health [Details](#)

Table [Graph](#)

Drug Class	Drug Name	Last Dose*	Estimated Duration	First Day Picked Up	Last Day Picked Up	
Mood Stabilizer	Divalproex Sodium (Divalproex Sodium Er)	500 MG , 1/day	4 Month(s) 1 Week(s) 3 Day(s)	5/30/2024	9/10/2024	Copy
Antipsychotic	Paliperidone Palmitate (Invega Sustenna)	156 MG/ML	3 Year(s) 2 Month(s) 4 Day(s)	5/12/2021	6/16/2024	Copy
Withdrawal Management	Nicotine	21 MG/24HR	2 Month(s) 1 Week(s) 6 Day(s)	1/12/2024	2/26/2024	Copy

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)
Clinic - MH Specialty	CHENANGO CTY COMMUNITY SV BRD	9/20/2021	9/2/2025	37	Schizophrenia, unspecified	- Office O/P Est Low 20 Min - Office O/P Est Low 20 Min, Psytx W Pt W E/M 45 Min - Psytx W Pt 30 Minutes - Psych Diagnostic Evaluation
Mobile Integration Team (MIT) - State Psych Center (Source: State PC)	GREATER BINGHAMTON HEALTH CENTER	11/16/2017	5/30/2025	2	Illness, unspecified	-
Clinic - MH Specialty (Telehealth)	CHENANGO CTY COMMUNITY SV BRD	12/14/2020	6/6/2024	31	Unspecified psychosis not due to a substance or known physiological condition	- Office O/P Est Low 20 Min

Medical Outpatient 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)
Clinic - Medical Specialty	MARY IMOGENE BASSETT HOSPITAL	1/15/2021	8/12/2025	7	Abnormal levels of other serum enzymes	- Complete Cbc W/Auto Diff Wbc, Comprehen Metabolic Panel, Hemoglobin Glycosylated A1c, Office O/P Est Hi 40 Min, Vitamin D 25 Hydroxy - Office O/P Est Mod 30 Min

Crisis Services

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)
CSIDD - Crisis Service - DD	YOUNG ADULT INSTITUTE INC	11/1/2023	2/1/2024	3	Mild intellectual disabilities	-

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)
ER - MH - CPEP	QUEENS HOSPITAL	4/19/2024	4/19/2024	1	Bipolar disorder, unspecified	- Psych Diagnostic Evaluation
ER - Medical	GARNET HEALTH MEDICAL CENTER	4/16/2024	4/16/2024	1	Shortness of breath	- Metabolic Panel Total Ca
Inpatient - SU - Detox	LONG ISLAND JEWISH MED CTR	8/6/2023	8/10/2023	4	Major depressive disorder, recurrent, severe with psychotic symptoms	- Detoxification Services For Substance Ab

Training & Technical Support

Training & 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, option 2; healthhelp@its.ny.gov