

New PSYCKES Features Release 6.8.0

We will begin shortly

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Erica Van De Wal-Ward Medical Informatics Project Director, PSYCKES Team February 26, 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 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
- Slides will be emailed to attendees after the webinar

Agenda

- Demonstration of New Features in Release 6.8.0
 - Transition from WMS to NYSoH: Filters & Clinical Summary Message
 - Quality Indicator Trends Past Year
 - New Bulk Population Management View in Recipient Search Results
 Page: Outpatient Providers
 - Primary Care Physician Assignment (MC Plan-Assigned)
 - HARP HCBS Assessment Status & Results from UAS
 - Electronic Medical-Record Compatible Clinical Summary Export
 - MyCHOIS High Risk List and Consent Enhancements
- Training & Technical Support

Transition from WMS to NYSoH: Report Filters & Message

Transition from WMS to NYSoH: Report Filters

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

Recipient Search

Characteristics as of 02/11/2020

Age Range 🛛 🗌 To	Gender V Managed Care	✓	Chil
Population		\checkmark	
High Need Population	OPWDD Services Eligible (RE95) Any OMH Outpatient Specialty MH Services Medicaid Managed Care - Any		HARI
AOT Status	Medicaid Managed Care +SSI	\checkmark	
Alerts & Incidents	Medicaid No Managed Care(FFS Only) Dual Eligible (Medicaid + Medicare) Medicaid (No Medicare) Transition from WMS to NYSoH: Medicaid Recertification Due < 3 mo.		HARI
Quality Flag as of 11/01/20	Transition from WMS to NYSoH: Medicaid Eligibility Expired	Services: Specific Prov	/ider as c

Tra	ansiti	on	fror	n WMS	to NY	SoH:	Result	s Page			
My (QI Report -	Statewide	e Reports	Recipient Search	Provider Search	Registrar 🗸	Usage Reports 🗸	Utilization Reports	N	/IyCHO	IS
≮ Modify	Search				94 Recipient	s Found		O View: Standard	T	DF	🕱 Excel
	Population		Trans	ition from WMS to NYSoH:	Medicaid Recertification	Due < 3 mo.					
AND	[Provider Specific	c] Provider	Mair	n Street Mental Healtl	n Center						

Review recipients in results carefully before accessing Clinical Summary.

Name 🔺	Medicaid ID 🔶	DOB 🍦	Gender 🔶	Quality Flags	Managed Care Plan 🛛 🍦	
QU7NQUQ TaFGSVNB	RFepNTasN FA	OCyvLpEvO DA	R6 LQ Mpa	Adher-MS, HARP No Assessment for HCBS, HARP No Health Home	Independent Health's MediSource	•
QVVHRUnMTm VE7PTUFT RQ	QVEtNpQm Ma2	OCynNCynO T2q	TQ LQ NDU	HARP No Assessment for HCBS, HARP No Health Home, No Rehab f/u 14d	Fidelis Care New York	
QaFDSqVSVA QUrZ	QVEtNTMv Mqe	N8ynN8ynO T2t	R6 LQ NDI	No MAT Utilization - OUD, No Outpt Medical	Fidelis Care New York	
QaFLRVI SqFSQQ Q6	RFIvN9MtM rU	MoynMCyn OT2p	R6 LQ NDY	2AD, 4PP(A), HARP No Assessment for HCBS, HARP No Health Home	Fidelis Care New York	
QaFMQUJJUm SaFDSqnZT6 RA	REUtOT2m MEe	OSyoMSynO Tav	R6 LQ M9A	2+ ER-Medical, 2+ Inpt-Medical, 4+ Inpt/ER-Med, Readmit 30d - Medical to Medical	Fidelis Care New York	

Transition from WMS to NYSoH: Clinical Summary Message

My QI Report 🗸 Statewide Re	ports Recipient S	earch Provider Searc	ch Registrar -	Usage Reports 👻	Utilization Reports	MyCHOIS
Recipient Search		SMITH, Clinical Summary a				DF
	Brief Overview	1 Year Summary	5 Year Summa	rv Hide	n Special Protection ort contains all availa	
DOB: 2/1/1983 (37 yrs) Address: 123 Main Street, Albany, NY 12208		Medicaid ID: AB12345C Managed Care Plan: In MediSource (HARP) MC Plan Assigned PCP		HARP HC	tus: HARP Enrolled (BS Assessment Statu	
Current Care Coordination	1					

Medicaid EligibilityThis client must use the New York State of Health (NYSoH) enrollment system for Medicaid recertificationAlert(Expiration: 02/29/2020) • For More information contact NYSoH at 1-855-355-5777.

Quality Indictor Trends Past Year

QI Trends Past Year: Graph

ALL

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ALL

My QI Report -	Statewide Reports	Recipient Search	Provider Search	Registrar -	Usage Reports 🗸	Utilization Reports	MyCHOIS
My QI Report QI Trends Past Year			QI Trends Pa	ist Year			
Select organizati	on, indicator set,	and indicator					
Organization: Provid	er, Network, Plan	Indicator S	et		Indicator		
Main Street Mental Health	Center	BH QARR - II	nprovement Measure		▼ 6. No Diabet	es Monitoring (HbA1C and L	<mark>PI-C)</mark> Diabete… ▼
Modify filters (op	otional) 1			2			3
Program Type	Age Gro	pup	Managed Care	M	C Product Line	DSRIP PPS	

6. No Diabetes Monitoring (HbA1C and LDL-C) Diabetes and Schiz: The percentage of adults 18-64 years diagnosed with both schizophrenia and diabetes wh not have both an HbA1c and an LDL-C test in the past 12 months.

ALL

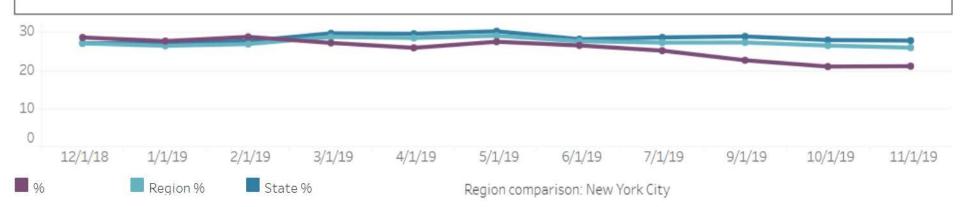
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QI Trends Past Year: Table

	Eligible Population	# with QI flag	96	Region %	State %
12/1/18	189	54	28.6	27.0	27.1
1/1/19	181	50	27.6	26.4	27.0
2/1/19	181	52	28.7	26.8	27.6
3/1/19	199	54	27.1	28.7	29.7
4/1/19	205	53	25.9	28.5	29.6
5/1/19	204	56	27.5	29.0	30.2
6/1/19	170	45	26.5	27.6	28.1
7/1/19	219	55	25.1	27.2	28.6
9/1/19	217	49	22.6	27.3	28.8
10/1/19	215	45	20.9	26.4	27.9
11/1/19	214	45	21.0	25.9	27.8

Bulk Population Management View: Outpatient Providers

My QI Report -	Statewide Reports	Recipie	nt Search	Provider Se	arch Registrar -	Usage Reports 👻	Utilization Reports	s MyCHOIS
		1 24		Recipi	ent Search	Limit res	50	Search Reset
Recipient Identifiers	5						100 500 1,000	T
Medicaid ID		SSN			First Name	Last Name	10,000	
AB00000A		000-00-000	00				100,000	DD/YYYY
Characteristics as of	02/24/2020							
Age Range	To Gende	er 💽 🔻	Manage	ed Care	v	Children's Waiver Statu	s	×
Pop	ulation	Ŧ	MC Produ	ict Line	•	HARP Statu	S	•
High Need Pop	ulation	×	Medicaid Restr	rictions	T	HARP HCBS Assessmen	it	T
AOT	Status	•	DSR	IP PPS	•	Statu		
Alerts & Inc	cidents	¥.				HARP HCBS Assessmen Result		Ŧ
Quality Flag as of 11	/01/2019		C Def	finitions	Services: Specific Pro	ovider as of 11/01/2019		Past 1 Year 🔻
	alth Home Enrolled - (update essment for HCBS - (update				Provider	Main Street Mental Health	n Center]
Antipsychotic Polypharn	macy (2+ >90days) Children	-			Region		 County 	•
Antipsychotic Two Plus Antipsychotic Three Plus					Current Access			
Antidepressant Two Plu	s - SC							
Antidepressant Three Pl Psychotropics Three Plu					Service Utilization		Numb	ber of Visits 🔹 🔻
Psychotropics Four Plus								
Polypharmacy Summary					Service Setting:	Servi	ce Detail: Selected	
	pressant <12 weeks (MDE)				1			
Adherence - Mood Stabi					+-Care Coordination			
Adherence - Antipsychol Treatment Engagement					+-Foster Care			
	g (Gluc/HbA1c and LDL-C) o	n Antipsychotic	c (Child)		+-Inpatient - ER			
	g (Gluc/HbA1c and LDL-C) o				+-Living Support/Resid	dential		
	g (Gluc/HbA1c) on Antipsyc				+-Other			
	g (LDL-C) on Antipsychotic				+-Outpatient - DD			
No Diabetes Screening (Gluc/HbA1c) Schiz or Bipol	ar on Antipsych	hotic Adults		I Outcotions MII			

			en.		
✓ Modify Search				1,115 Recipients Found	d 🔹 🕅 🕅 PDF Excel
[Provider Specific]	Provider Mair	n Street Mental	Health Cer	nter	T
Review recipients in res	ults carefully	before accessi	ing Clinica		umber of Rows Displayed: 50000
				1 2 3 4 5 6 7 8	9 10 « »
Name 🔺	Medicaid ID	DOB 🌩	Gender	Quality Flags	Managed Care Plan
QUFSTqu REVCUaE	WF2vNTYo MrU	NSynMoyn0 TYs	R6 LQ NTM	HARP No Assessment for HCBS	Healthfirst PHSP, Inc.
QUJBRA REbBTaE V6	SqUrND2tO E6	OCyqLpEvN T6	R6 LQ N9E		Fidelis Care New York
QUJBREa SVNBQUM S6	WE2sNTIm OEi	MoynMoyn OT2u	TQ LQ NDE	No Outpt Medical	Healthfirst PHSP, Inc.
QUJBRFa RbJJRURB	TaYmM9lp0 UM	MTIIMT6IM TavN6	R6 LQ M9M	No Outpt Medical	
QUJBTEzT QVJJUqzMRVQ	VqInM9QuM FA	NSynOCynO Tan	R6 LQ M96	BH QARR - DOH, No DM Screen - AP, No Gluc/HbA1c & LDL-C - AP, No Gluc/HbA1c - AP, No LDL-C - AP	Healthfirst PHSP, Inc.
QUJBTEzW SqFSSUvB Qm	UqioM9UqM Ui	OSyoNoynO T6p	R6 LQ MpY	2+ ER-BH, 2+ ER-Medical, HARP No Health Home, No MAT Utilization - OUD, No OUD MAT Initiation - 30d	UnitedHealthcare Community Plan
QUJBTay QUNFWEE QQ	UUeoMT6s NU2	MTIIM9AIM 9AmNm	R6 LQ MTI		Amerigroup New York
QUJBWUVW RUnJRVfFU6	UbAtM9QsN qQ	N8yoMSyo MDAr	TQ LQ MTQ		Amerigroup New York
QUJBWUVW WUVIVURB	VFEtNTEsN qU	M8ynNoyo MDAn	TQ LQ MTa	No Gluc/HbA1c & LDL-C - AP, No LDL-C - AP	Healthfirst PHSP, Inc.
QUJBWUVW WUDTUaFFTA	UqMpN9Ym NrA	MSyvLpIm MDQ	TQ LQ MTY		Amerigroup New York
OUJBWUVW WUZTBUY	Ur2vM9QnN	NCyoMoyo	TQ LQ		Fidelis Care New York

Provider Search

Registrar -

Usage Reports -

My QI Report -

Statewide Reports

Recipient Search

MyCHOIS

Utilization Reports

My QI Report+	Statewide Rep	oorts Rec	ipient Searc	ch Provider Search	Registrar -	Us	age Re	ports	• 1	Utiliza	ation F	Reports		MyC	HOIS	5
✓ Modify Search				1,115 Recipier	nts Found				O Vi	s	tandar tandar		n.	P	DF	Excel
[Provider Specific]	Provider Main	n Street Mental	Health Cent	ter						H	lospital Ianage	l Utilizati d Care P	on OP			
Review recipients in res	sults carefully	before accessi	ing Clinical	Summary.								ent Provi		Display	/e <mark>d:</mark> 5	0000
					1	2	3	4	5 6	7	8	9	10	«	»	
Name 🔺	Medicaid ID 🔶	DOB 🔶	Gender 🍦		Quality F	Flags					ŧ	M	anage	d Care F	Plan	¢
QUFSTqu REVCUaE	WF2vNTYo MrU	NSynMoynO TYs	R6 LQ NTM	HARP No Assessment for HC	BS							Health	ıfirst I	PHSP, I	Inc.	Î
QUJBRA REbBTaE V6	SqUrND2tO E6	OCyqLpEvN T6	R6 LQ N9E									Fidelis	Care	New Y	<u>York</u>	
QUJBREa SVNBQUM S6	WE2sNTIm OEi	MoynMoyn OT2u	TQ LQ NDE	No Outpt Medical								Healt	ıfirst I	PHSP, I	Inc.	
QUJBRFa RbJJRURB	TaYmM9lpO UM	MTIIMT6IM TavN6	R6 LQ M9M	No Outpt Medical												
QUJBTEzT QVJJUqzMRVQ	VqInM9QuM FA	NSynOCynO Tan	R6 LQ M96	BH QARR - DOH, No DM Scree LDL-C - AP	en - AP, No Gluc/Hl	bAlc&L	.DL-C - A	P, <mark>N</mark> o G	luc/HbA	lc-AF	No	Health	nfirst (PHSP, I	Inc.	
QUJBTEZW SqFSSUvB Qm	UqioM9UqM Ui	OSyoNoynO T6p	R6 LQ MpY	2+ ER-BH, 2+ ER-Medical, HA Initiation - 30d	RP No Health Hon	ne, No M	A <mark>T</mark> Utiliz	ation -	OUD, No	OUD	ИАТ	United Comm				
QUJBTay QUnFWEE QQ	UUeoMT6s NU2	MTIIM9AIM 9AmNm	R6 LQ MTI									Ameri	group	New Y	York	
QUJBWUVW RUnJRVfFU6	UbAtM9QsN qQ	N8yoMSyo MDAr	TQ LQ MTQ									Ameri	group	New Y	/ork	
QUJBWUVW WUVIVURB	VFEtNTEsN qU	M8ynNoyo MDAn	TQ LQ MTa	No Gluc/HbA1c & LDL-C - AP,	No LDL-C - AP							Health	ıfirst I	PHSP, I	Inc.	
QUJBWUVW WUbTUaFFTA	UqMpN9Ym NrA	MSyvLpim MDQ	TQ LQ MTY									Ameri	group	New Y	York	

Ur2vM9QnN

OU IBWUVW WU7TBUV

NCyoMoyo

TQLQ

Fidelis Care New York

Outpatient Providers: PCP Assignment

My QI Report +	Statewide Reports	Recipient Search	Provider Search	Registrar -	Usage Reports 🗸	Utilization Reports	MyCHOIS
K Modify Search		19	1,115 Recipien	nts Found		• View: Outpatient Pro	roviders V Excel

PROVIDER: MAIN STREET CLINIC

Review recipients in results carefully before accessing Clinical Summary.

Name	A OP	Conder	Managed Care Plan 🔶 –	Primary	Primary Care Physician Assignment(Assigned by MC Plan)				
Name	▲ OB	Gender 🔶	Managed Care Plan 🤤	Name 🔶	Most Recent Service Past 1 yr 🛛 🏺	# Visits with Assigned PCP past 1 yr 🗧			
SMITH JOHN	/1964	M - 55	UnitedHealthcare Community Plan	KUMARI, JAISHREE	10/14/2019	14			
DOE JANE	/1975	F - 44		SMALL, ALLEN	8/9/2019	21			
JONES SUE	/1983	F - 37	Fidelis Car CLICK HERE TO SCROLL						
BROWN BOB	2/1990) M - 30	Healthfirst PHSP, inc.	DOMINGUEZ-RAFER, CARMEN		,			
<						>			

Outpatient Providers: Mental Health Outpatient

My QI Report 🗸	Statewide Reports	Recipient Search	Provider Search	Registrar 🗸	Usage Reports 🗸	Utilization Reports	MyCHOIS
K Modify Search		1	I,115 Recipien	ts Found		Outpatient Pro	oviders V Excel

PROVIDER: MAIN STREET CLINIC

Review recipients in results carefully before accessing Clinical Summary.

Name		Mental Health Outpatient Provider		Medical Outpatient F			
Name	Most Recent Provider Facility Name 🔷	Most Recent Service Past 1 yr 🛛 🍦	# Services this Provider Past 1 yr	Most Recent Provider Facility Name 崇	Most Recent Service I		
SMITH JOHN	MANHATTAN PSYCHIATRIC CENTER	11/12/2019	12	INSTITUTE FOR FAMILY HLTH	10/24/2019		
DOE JANE	MONTEFIORE MEDICAL CENTER	12/9/2019	2	MEMORIAL HSP CANCER ALLIED	3/1/2019		
JONES SUE	LONG ISLAND CONSULTATION CENTER, INC.	12/16/2019	23	CLICK HERE TO SCROLL			
BROWN BOB	NYC-HHC METROPOLITAN HOSPITAL CENTER	12/17/2019	9	LENOX HILL HOSPITAL	10/9/2019		
					>		

Outpatient Providers: Medical Outpatient

My QI Report -	Statewide Reports	Recipient Search	Provider Search	Registrar 🗸	Usage Reports 🗸	Utilization Reports	MyCHOIS
K Modify Search		1	,115 Recipien	ts Found		Outpatient Pro	oviders V Excel

PROVIDER: MAIN STREET CLINIC

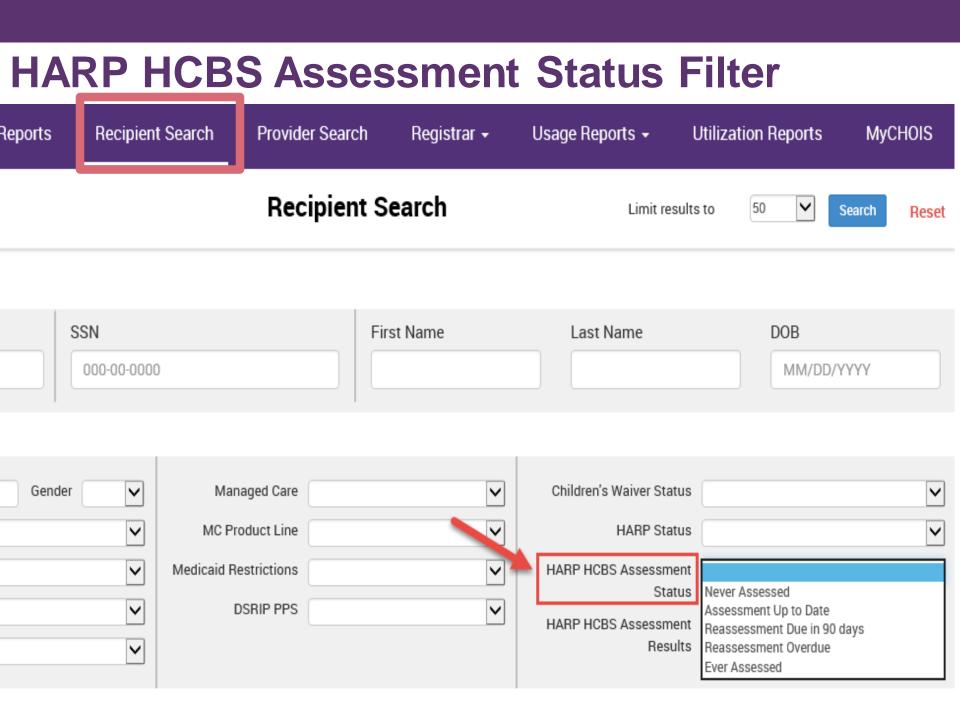
Review recipients in results carefully before accessing Clinical Summary.

Name	Outpatient Provider		Medical Outpatient Provider				
	It Service Past 1 yr 🔶 🛛 # Services this Provider Past 1 yr 🔶		Most Recent Provider Facility Name 🔷	Most Recent Service Past 1 yr 🛛 🍦	# Services this Provider Past 1 yr 🔶		
SMITH JOHN			HERITAGE HEALTH AND HOUSING, INC	1/17/2020	11		
DOE JANE			COMMUNITY HEALTHCARE NETWORK	1/3/2020	2		
JONES SUE		10	MORRIS HEIGHTS HEALTH CENTER	12/18/2019	1 CLICK HERE		
BROWN BOB			NY HOSPITAL	12/17/2019	7 TO SCROLL		
					>		

PCP Assignment in Clinical Summary

My QI Report 🗸 Statewide Rep	oorts Recipient Sea	rch Provider Search	n Registrar 🕶 l	Usage Reports 👻	Utilization Reports	MyCHOIS
Recipient Search		SMITH, Clinical Summary a				<mark>™</mark> PDF
	Brief Overview	1 Year Summary	ry 5 Year Summary This report contains all available of data.			
DOB: 2/1/1983 (37 yrs) Address: 123 Main Street, Albany, NY 12208	AE Ma Ma	Medicaid ID: Medicare: No AB12345C Managed Care Plan: Independent Health's MediSource (HARP)			HARP Status: HARP Enrolled (H1) HARP HCBS Assessment Status: Never Assessed	
	M	C Plan Assigned PCP:	Sharma, Nisha			

HARP HCBS Assessment Status & Results



)I Report -	Statewide Reports	Recipient Search P	rovider Search	Registrar -	Usage Reports 🗸	Utilization Reports	Μ	Iychoi	S
Search		16	3 Recipients	Found		O View: Standard	Y	DF	M Excel
HARP Status	HAF	RP Enrolled (H1)]						
HARP HCBS Ass	essment Status Rea	ssessment Overdue							
[Provider Specifi	c] Provider Mai	n Street Mental Health Cente	r						
	Search HARP Status HARP HCBS Ass	Search HARP Status HAR HARP HCBS Assessment Status Rea	Search 16 HARP Status HARP Enrolled (H1) HARP HCBS Assessment Status Reassessment Overdue	Search 163 Recipients HARP Status HARP Enrolled (H1) HARP HCBS Assessment Status Reassessment Overdue	Search 163 Recipients Found HARP Status HARP Enrolled (H1) HARP HCBS Assessment Status Reassessment Overdue	Search 163 Recipients Found HARP Status HARP Enrolled (H1) HARP HCBS Assessment Status Reassessment Overdue	Search 163 Recipients Found View: Standard	Search 163 Recipients Found View: Standard View: Standard View: MARP Status HARP Enrolled (H1) HARP HCBS Assessment Status Reassessment Overdue	Search 163 Recipients Found View: Standard Dep PDF

Review recipients in results carefully before accessing Clinical Summary.

Name 🔺	Medicaid ID 🌲	DOB 🍦	Gender 🔶	Quality Flags	Managed Care Plan 🌲
QUJPRaY QqzSRVa QQ	TaEvM9YqN qM	NoypLpEvN pA	TQ LQ NDa	2+ Inpt-BH, 2+ Inpt-MH, 4PP(A), BH QARR - DOH, HARP No Health Home	UnitedHealthcare Community Plan
QUNFVaVETm TqnHQQ SQ	WbMmMpa mNri	N8yoM8ynO TYr	R6 LQ NTQ	2+ ER-BH, 2+ ER-MH, 2+ ER-Medical, 2+ Inpt-BH, 2+ Inpt-MH, 4+ Inpt/ER-BH, 4+ Inpt/ER- MH, BH QARR - DOH, Cloz Candidate, HARP No Health Home, No Detox f/u 14d, No Gluc/HbA1c & LDL-C - AP, No HbA1c & LDL-C (DM & Schiz), No HbA1c-DM, No LDL-C - AP, No Outpt Medical, POP Cloz Candidate, POP High User, Readmit 30d - BH to BH, Readmit 30d - MH to MH	Healthfirst PHSP, Inc.
QUfBTEE VEFJWUU R6	VUeuM9loO Eu	MSynN8ynO TUv	R6 LQ N9E	BH QARR - DOH	Fidelis Care New York
QUnBTQ TUbSWaE	VVIoM9Ao Mq2	M8ynM8yn OT6s	R6 LQ MpQ	2+ ER-BH, 2+ ER-MH, 2+ ER-Medical, BH QARR - DOH, HARP No Health Home	Healthfirst PHSP, Inc.
QUnMRUu TEFUTrbB	Vr6uNTarOV 2	MSyoMCyn OT6p	R6 LQ Mp2		Amerigroup New York
QVJKVUvF TUbDSEVBTA	SrapODUoN rM	MTIIMTalM TavNQ	TQ LQ M9Q	2AP, Adher-MS, BH QARR - DOH	Healthfirst PHSP, Inc.
QVVCQUbO RVfSQQ QQ	Uq2rMTAvN bQ	MTAIMpAIM TauMQ	R6 LQ Mp6	HARP No Health Home	Fidelis Care New York

HAF	RP H	ICBS	S Asse	essment	Results	Filter
Reports	Recipient	t Search	Provider Search	n Registrar -	Usage Reports 🗸	Utilization Reports MyCHOIS
			Recipient	t Search	Limit res	sults to 50 Y Search Rese
S	SN 000-00-0000)		First Name	Last Name	DOB MM/DD/YYYY
Gender	 		ged Care	✓	Children's Waiver State HARP State	
	~	Medicaid Res		✓	HARP HCBS Assessme State	
	✓	DS	SRIP PPS		HARP HCBS Assessme Resul	

Му	QI Report -	Statewide Reports	Recipient Search	Provider Search	Registrar 🗸	Usage Reports 🗸	Utilization Reports	MyCH	ois
≺ Modif	y Search			754 Recipient	ts Found		O View: Standard	• 🔂 PDF	Excel
	HARP HCBS Ass	sessment Results N	Nost Recent Result: Tier 2 HCB	S Eligibility					
AND	Provider Specifi	ic] Provider N	/lain Street Mental Health (Center					

Review recipients in results carefully before accessing Clinical Summary.

Name	Medicaid ID 💠	DOB 🔶	Gender 🔶	Quality Flags	Managed Care Plan 🛛 🔶
QUNFVaVETm UaFGQUVM RQ	WaMqMTa mMEY	OSyoMCynO TYs	TQ LQ NTM	4PP(A)	Healthfirst PHSP, Inc.
QUNPURB VqFOREE	Wa6pN9Mv NqQ	N8ynOSynO T2m	R6 LQ NDa	2+ ER-Medical	Amerigroup New York
QURFTUa TaVYSEFU	VFUuNDAp MbM	MTIIMTYIM TatM6	TQ LQ ND2	BH QARR - DOH, No HbA1c & LDL-C (DM & Schiz), No HbA1c-DM	Amerigroup New York
QUÍBTEE VEFJWUU R6	VUeuM9IoO Eu	MSynN8ynO TUv	R6 LQ N9E	BH QARR - DOH	Fidelis Care New York
QUjJTarPTEFZQUu VFVOREU V6	TbMsMpYr MaM	MTIIM9UIM TasMA	TQ LQ NTa	2+ ER-Medical, 2+ Inpt-Medical, 4+ Inpt/ER-Med, Readmit 30d - Medical to Medical	
QUJMSVBJ QaVUVFa RQ	WaqnNp2rN qU	NoyoMSynO T2p	R6 LQ NDY	2+ ER-Medical, 4PP(A)	Fidelis Care New York
QUNBTQ TUbSWaE	VVIoM9Ao Mq2	M8ynM8yn OT6s	R6 LQ MpQ	2+ ER-BH, 2+ ER-MH, 2+ ER-Medical, BH QARR - DOH, HARP No Health Home	Healthfirst PHSP, Inc.
QUnDQUvUQVJB SazIT6 Qm	WUirMDIqN Va	NCyoOCynO T6s	TQ LQ MpM	3AP	Amerigroup New York
QUnDQUvUQVJBWazHV UbFU6 QUnFWEFOREVS	VUMmOTIv MV2	MTIIMTUIM TavNA	TQ LQ M9U	2+ ER-BH, 2+ ER-MH, 2AP	Amerigroup New York
QUnFWEbT UaVHSUvBTEQ	VFQnM92m MF2	MSyoNoynO T2s	TQ LQ NDQ	BH QARR - DOH, HARP No Health Home, No Outpt Medical, No SUD Tx Engage	HIP (EmblemHealth)

HARP HCBS Assessment Status & Results in Clinical Summary – Example 1

Statewide Reports	Recipient Search	Provider Search	Regis	strar - Us	sage Reports 🗕	Utilization Reports	MyCHOI
		1998 N 5191 N		0			
	Brief C	Overview 1 Year Sur	immary 5 '	Year Summary			
rrs) Street, / 12208	Managed C	Care Plan: Fidelis Care N	New York (HA			and the second	essed
• as of monthly QI report 11/1/	/2019		Diagnoses	Past Year			
Iealth and Recovery Plan (HARP) IARP Enrolled - Not Health Home Enrolled • HARP-Enrolled - No Assessment for HCBS				Behavioral Health (2) Most Recent: Generalized Anxiety Disorder • Attention Def			
						승규는 가슴을 가지 않는 것을 걸었다. 아무렇게 말했다.	ler (3) • Attent
			Medical (9)	immunizatio	on • Dorsalgia • Pair	김 사실은 것 같아요즘 것 좋아? 이 집 같은 것 같아요. 같이 많이 있는 것은 것 같아요. 같아요. 것 같아요. 같아요. 것 같아요. ????????????????????????????????????	
				(1) • Open w	ound of wrist, hand	d and fingers (2) • Dorsalgia	a (2) • Benign
F	rrs) Street, 12208 • as of monthly QI report 11/1/ Plan (HARP)	Brief O rrs) Medicaid II Street, Managed O Y 12208 MC Plan As • as of monthly QI report 11/1/2019 Plan (HARP)	SMITH, Clinical Summary a Brief Overview 1 Year Su TS) Medicaid ID: AB12345C Managed Care Plan: Fidelis Care 12208 MC Plan Assigned PCP: Hathawa • as of monthly QI report 11/1/2019 Plan (HARP) Health Home Enrolled • HARP-Enrolled - No Assessment for HCBS	SMITH, JANE Clinical Summary as of 2/24/202 Brief Overview 1 Year Summary 5 rrs) Medicaid ID: AB12345C Medical Street, Managed Care Plan: Fidelis Care New York (H/ 12208 MC Plan Assigned PCP: Hathaway, Andrew e as of monthly QI report 11/1/2019 Diagnoses Plan (HARP) Health Home Enrolled • HARP-Enrolled - No Assessment for HCBS Behavioral Health (2)	SMITH, JANE Clinical Summary as of 2/24/2020 Brief Overview 1 Year Summary 5 Year Summary rs) Medicaid ID: AB12345C Medicare: No Street, 12208 Managed Care Plan: Fidelis Care New York (HARP) was of monthly QI report 11/1/2019 MC Plan Assigned PCP: Hathaway, Andrew Plan (HARP) Realth Home Enrolled • HARP-Enrolled • No Assessment for HCBS Diagnoses Past Year Medicaid (9) 5 Most Recenn Health (2) Medical (9) 5 Most Recenn Hordical (9) Medical (9) 5 Most Recenn Medical (9) Medical (9) 5 Most Recenn Hordical (9) Most Freque (1) • Open w 5 Most Freque (1) • Open w	SMITH, JANE Clinical Summary as of 2/24/2020 Brief Overview 1 Year Summary 5 Year Summary Data with Spe This report of Trs) Medicaid ID: AB12345C Medicare: No Managed Care Plan: Fidelis Care New York (HARP) MC Plan Assigned PCP: Hathaway, Andrew Diagnoses Past Year Behavioral Most Recent: Generalized Anxi Health (2) Hyperactivity Disorder Most Frequent (# of services): Deficit Hyperactivity Disorder (Medical (9) 5 Most Recent: Open wound of immunization - Dorsalgia - Pail mononeuropathies 5 Most Frequent (# of services (1) - Open wound of wrist, hand	SMITH, JANE Clinical Summary as of 2/24/2020 Brief Overview 1 Year Summary 5 Year Summary Data with Special Protection IP Show IP This report contains all available clinical

Medications Past Year

Last Pick Up

HARP HCBS Assessment Status & Results in **Clinical Summary – Example 2**

My QI Report - S	Statewide Reports	Recipient Search	Provider Search	Registrar -	- Usage Reports -	Utilization Reports	MyCHOIS
Recipient Search			DOE, JO Clinical Summary as				
		Brief	Overview 1 Year Sun	mmary 5 Year Su		Special Protection Show Contains all available clinical	
OB: 12/1/1983 (37 yrs)		Medicaid	ID:AB12345C	Medicare: No	s: HARP Enrolled Tier 2 HCBS	s (H1 with H3)	
ddress: 71 River Road, Queens, NY 555			l Care Plan: Fidelis Care N Assigned PCP: Nagrare, N			Assessment Status: Tier 2 HCI by 04/30/2020)	BS Eligibility
urrent Care Coordinatio	on						
ealth Home (Enrolled)	Main Contact Ref christina.lounsbu Member Referral	egin Date: 01-MAR-18) • St eferral: Jillian Gross: 315-6 bury@cnyhealthhome.net I Number: 315-797-7249 ent (Enrolled): NORTH COU	624-9670 Ext. 2862, jillia		lthhome.net • Christina Lo	ounsbury: 315-624-9670 Ext.	. 286),
ctive Quality Flags • as o	of monthly QI report 11/*	1/2019		Diagnoses Past Y	Year		
gh Utilization - Inpt/ER • ER - Medical	The production		Behavioral Health (1) Most Recent: Major Depressive Disorder Most Frequent (# of services): Major Depressive Disorder (4)				

5 Most Recent: Other and unspecified osteoarthritis • Other joint disorde Medical (35) not elsewhere classified · Diseases of salivary glands · Persons

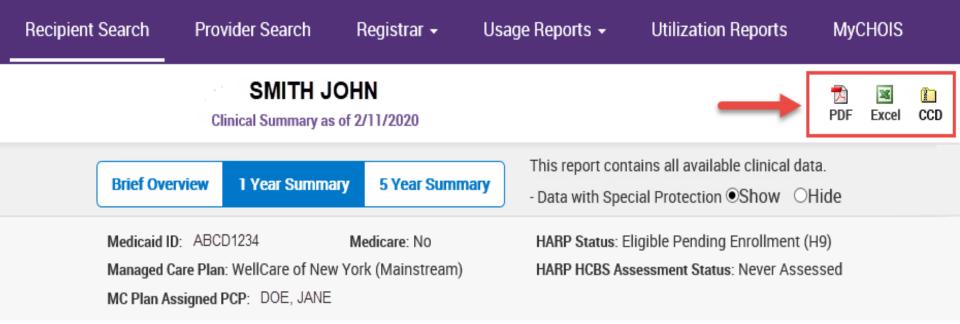
HARP HCBS Assessment Status & Results in Clinical Summary – Example 3

My QI Report -	Statewide Reports	Recipient Search	Provider Search	Regist	rar -	Usage Reports 🗸	Utilization Reports	MyCHOIS
KRecipient Search			THOMPSON Clinical Summary a					
		Brief O	verview 1 Year Su	immary 5 Y	'ear Summa		cial Protection Show Final Action Control A	
DOB: 1/1/1980 (40 y Address: 99 Main S Buffalo, N	treet,	Managed C): AB12345C are Plan: MetroPlus H signed PCP: Smith, J	DPlus Health Plan (HARP) HARP HCBS Assessment Status: Tier 2 HCBS				
Alerts & Incidents • a	all available		Most Recent					
53 Suicidal Ideat	tion (16 Inpatient, 36 ER, 5	Other)	9/18/2015	NORTH CEN	TRAL BRON	IX HOSPITAL (Clinic - I	Medical Specialty)	
Active Quality Flags	• as of monthly QI report 11/1/	/2019		Diagnoses I	Past Year			
No Engagement of Alo	rmance Tracking Measure cohol/Drug Treatment • No			Behavioral Health (10)				
High Utilization - Inpt/ L+ ER - Medical			5 Most Fi Schizoafi): Unspecified/Other Bipola Obsessive-compulsive disc eficit Hyperactivity Disorde	order (7) •			
				Medical (18)		C	anemia • Dorsalgia • Overw ry infections of multiple an	NOT 1000 12

Electronic Medical Record-Compatible CCD Export

Electronic Medical Record-Compatible Clinical Summary Export

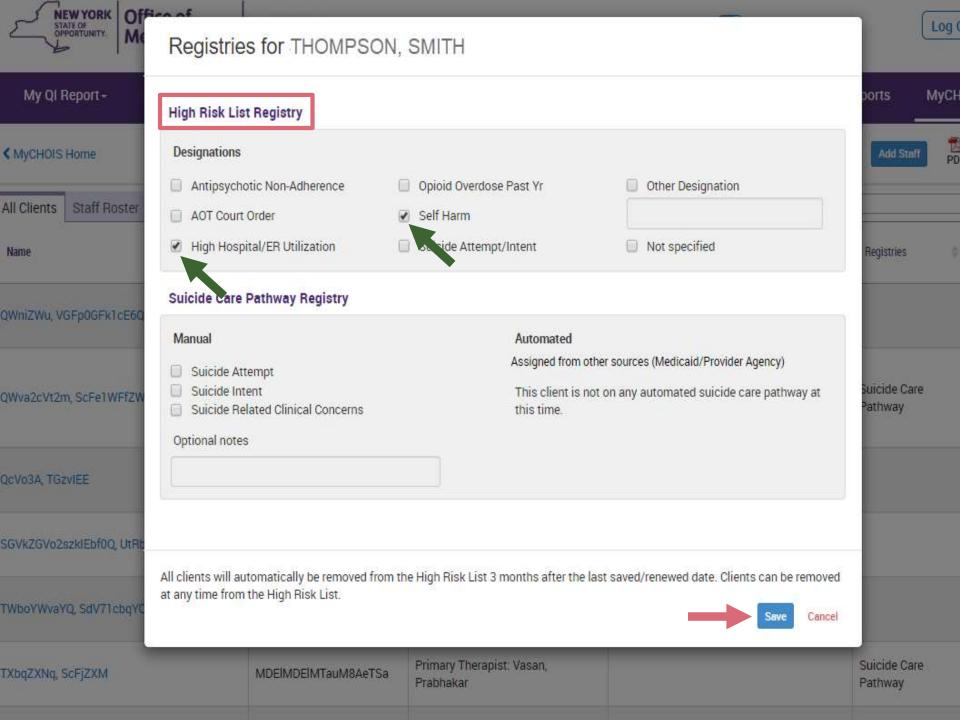
A new "CCD" export option in the Clinical Summary is available for **provider agency** and **statewide users** in the 1 Year Summary and 5 Year Summary, in addition to the PDF and Excel export options.



MyCHOIS Enhancements: High Risk List Registry

My QI Report - Statewide Report	s Recipient Search	Provider Search Registrar	 Usage Reports - Utilization I 	Reports MyCH	ois
✓ MyCHOIS Home	Main S	Street Mental Health	n Center Add Clier	nt Add Staff PD	F Excel
All Clients Staff Roster Suicide Care Pat	hway High Risk List		Search:		
Name	D0B(Gender)	Assigned Staff	Medicaid QI Flag	Registries	Edit Client
QWniZWu, VGFp0GFk1cE6QQ	MDEIMT2IM9AmNSAeR8a	Primary Therapist: Vasan, Prabhakar			G
QWva2cVt2m, ScFe1WFfZWm	MD2IMpEIMTauNCAeTSa	Primary Therapist: Vasan, Prabhakar	2+ ER-BH, 2+ ER-MH, 2+ ER-Medical, 2AP, 4+ Inpt/ER-BH, 4+ Inpt/ER-Med, BH QARR - DOH, No SUD ER f/u 30d, No SUD ER f/u 7d, No SUD Tx Engage, No SUD Tx Initiation	Suicide Care Pathway	G
QcVo3A, TGzvIEE	MDYIMT2IMTasMCAeTSa	Primary Therapist: Vasan, Prabhakar	2AP, BH QARR - DOH, HARP No Health Home, No Outpt Medical		Ō
SGVkZGVo2szklEbf0Q, UtRb2G7b16	MD6IMDalMTavOSAeTSa	Primary Therapist: Vasan, Prabhakar	2+ ER-Medical, Adher-MS		Ē
TWboYWvaYQ, SdV71cbqYQ	MDalMD6lMTasMoAeR8a	Primary Therapist: Vasan, Prabhakar			Ō
TXbqZXNq, ScFjZXM	MDEIMDEIMTauM8AeTSa	Primary Therapist: Vasan, Prabhakar		Suicide Care Pathway	G
Ucza2cbd3WVw, SXN7YcVi	MD6IMDEIMTatMSAeR8a	Primary Therapist: Vasan, Prabhakar			G
VGVo2dbqZXNq, TWb90m	MDEIMDEIMTatMCAeTSa	Primary Therapist: Vasan, Prabhakar			G
				Previous 1 2	Next

My QI Report - Statewide Reports	s Recipient Search	Provider Search Registra	r - Usage Reports -	Utilization R	eports My	CHOIS
KMyCHOIS Home	Main	Street Mental Healt	h Center	Add Client	t Add Staff	DF Excel
All Clients Staff Roster Suicide Care Pat	thway High Risk List		Search	h:		
Name	DOB(Gender)	Assigned Staff	Medicaid QI Flag	\$	Registries	Edit Client
QWniZWu, VGFp0GFk1cE6QQ	MDEIMT2IM9AmNSAeR8a	Primary Therapist: Vasan, Prabhakar				G
QWva2cVt2m, ScFe1WFfZWm	MD2IMpEIMTauNCAeTSa	Primary Therapist: Vasan, Prabhakar	2+ ER-BH, 2+ ER-MH, 2+ ER-Me Inpt/ER-BH, 4+ Inpt/ER-Med, BI DOH, No SUD ER f/u 30d, No SI No SUD Tx Engage, No SUD Tx	H QARR - UD ER f/u 7d,	Suicide Care Pathway	G
QcVo3A, TGzvIEE	MDYIMT2IMTasMCAeTSa	Primary Therapist: Vasan, Prabhakar	2AP, BH QARR - DOH, HARP No Home, No Outpt Medical	Health		G
SGVkZGVo2szkIEbf0Q, UtRb2G7b16	MD6lMDalMTavOSAeTSa	Primary Therapist: Vasan, Prabhakar	2+ ER-Medical, Adher-MS	Client F		
TWboYWvaYQ, SdV71cbqYQ	MDalMD6lMTasMoAeR8a	Primary Therapist: Vasan, Prabhakar		Client F	cess/Consent Registries Other Databas	6
TXbqZXNq, ScFjZXM	MDEIMDEIMTauM8AeTSa	Primary Therapist: Vasan, Prabhakar		(Medic	aid, MHARS) Client Passwor	G
Ucza2cbd3WVw, SXN7YcVi	MD6IMDEIMTatMSAeR8a	Primary Therapist: Vasan, Prabhakar		Remov	e Client From	Site
VGVo2dbqZXNq, TWb90m	MDEIMDEIMTatMCAeTSa	Primary Therapist: Vasan, Prabhakar				G
	1				Previous 1	2 Next



My QI Report	- Statewide Reports	Recipient Search	Provider Search	Registrar 🗸 🛛 Usage Repo	rts - Uti	lization Re	ports	MyCHO	IS
✓ MyCH●IS Home		Main	Street Mental Change Site			Add Client	Add Sta	ff PDF	X Excel
All Clients Staff	Roster Suicide Care Pathw	a High Risk List			Search:]
Name	 DOB (Gender) 	Medicaid QI Flag	PSYCKES Alerts	High Risk List Designation(s)	Added On 🗍	Expires in	Renew	Remove	Edit
Thompson, Smith	MD6IMDalMTavOSAeTSa	2+ ER-Medical, Adher- MS		High Hospital/ER Utilization, Self Harm	2/26/2020	90 days	0	8	.
DOE, JANE	MDalMD6lMTasMoAeR8a		Suicide Attempt	Self Harm	2/26/2020	90 days	0	8	
SMITH, JOHN	MD6IMDEIMTatMSAeR s a	6	Suicide Attempt	AOT Court Order	2/26/2020	90 days	0	8	
	Previous 1 Next								



MyCHOIS Enhancements: PHI Access/Consent

My QI Report - S	tatewide Reports	Recipient Search	Provider Search Registrar	Usage Reports - Utilization	Reports MyCH	iois
KMYCHOIS Home		Main S	Street Mental Health	n Center Add Clier	nt Add Staff PD)F Excel
All Clients Staff Roster	Suicide Care Path	way High Risk List		Search:		
Name	*	DOB(Gender)	Assigned Staff	Medicaid QI Flag	Registries 🔶	Edit Client
QWniZWu, VGFp0GFk1cE6QQ	l	MDEIMT2IM9AmNSAeR8a	Primary Therapist: Vasan, Prabhakar			G
QWva2cVt2m, ScFe1WFfZWn	n	MD2IMpElMTauNCAeTSa	Primary Therapist: Vasan, Prabhakar	2+ ER-BH, 2+ ER-MH, 2+ ER-Medical, 2AP, 4+ Inpt/ER-BH, 4+ Inpt/ER-Med, BH QARR - DOH, No SUD ER f/u 30d, No SUD ER f/u 7d, No SUD Tx Engage, No SUD Tx Initiation	Suicide Care Pathway	G
QcVo3A, TGzvIEE		MDYIMT2IMTasMCAeTSa	Primary Therapist: Vasan, Prabhakar	2AP, BH QARR - DOH, HARP No Health Home, No Outpt Medical		G
SGVkZGVo2szklEbf0Q, UtRb2	G7b16	MD6lMDalMTavOSAeTSa	Primary Therapist: Vasan, Prabhakar	2+ ER-Medical, Adher-MS	-	
TWboYWvaYQ, SdV71cbqYQ		MDalMD6lMTasMoAeR8a	Primary Therapist: Vasan, Prabhakar			G
TXbqZXNq, ScFjZXM		MDEIMDEIMTauM8AeTSa	Primary Therapist: Vasan, Prabhakar		Suicide Care Pathway	G
Ucza2cbd3WVw, SXN7YcVi		MD6IMDEIMTatMSAeR8a	Primary Therapist: Vasan, Prabhakar			G
VGVo2dbqZXNq, TWb90m		MDEIMDEIMTatMCAeTSa	Primary Therapist: Vasan, Prabhakar			G
					Previous 1 2	Next

My QI Report +	Statewide Reports	Recipient Search	Provider Search Registra	r 🗸 Usage Reports 🕇	Utilization F	Reports MyCH	IOIS
✓ MyCHOIS Home		Main	Street Mental Healt	h Center	Add Clien	t Add Staff PD) 🔳 F Excel
All Clients Staff Roster	Suicide Care Path	hway High Risk List		Sear	ch:		
Name		DOB(Gender)	Assigned Staff	Medicaid QI Flag	÷	Registries 🔶	Edit Client
QWniZWu, VGFp0GFk1cE6Q	Q	MDEIMT2IM9AmNSAeR8a	Primary Therapist: Vasan, Prabhakar				G
QWva2cVt2m, ScFe1WFfZW	/m	MD2lMpElMTauNCAeTSa	Primary Therapist: Vasan, Prabhakar	2+ ER-BH, 2+ ER-MH, 2+ ER-M Inpt/ER-BH, 4+ Inpt/ER-Med, E DOH, No SUD ER f/u 30d, No S No SUD Tx Engage, No SUD Tx	3H QARR - SUD ER f/u 7d,	Suicide Care Pathway	G
QcVo3A, TGzvIEE		MDYIMT2IMTasMCAeTSa	Primary Therapist: Vasan, Prabhakar	2AP, BH QARR - DOH, HARP N Home, No Outpt Medical	o Health		G
SGVkZGVo2szklEbf0Q, UtRb	o2G7b16	MD6lMDalMTavOSAeTSa	Primary Therapist: Vasan, Prabhakar	2+ ER-Medical, Adher-MS	Client I		
TWboYWvaYQ, SdV71cbqYC	2	MDalMD6lMTasMoAeR8a	Primary Therapist: Vasan, Prabhakar		Client	cess/Consent Registries Other Database	6
TXbqZXNq, ScFjZXM		MDEIMDEIMTauM8AeTSa	Primary Therapist: Vasan, Prabhakar		(Medicaid, MHARS) Reset Client Password		G
Ucza2cbd3WVw, SXN7YcVi		MD6IMDEIMTatMSAeR8a	Primary Therapist: Vasan, Prabhakar		Remov	e Client From Si	te
VGVo2dbqZXNq, TWb90m		MDEIMDEIMTatMCAeTSa	Primary Therapist: Vasan, Prabhakar				G
						Previous 1 2	Next

COI	PHI	Access for Doe, Ja	ne (F - 39)			×
	Befo	re changing PHI acc	ess, confirm this is the correct clien	t		
		Name	Doe, Jane			A1c &
		Date of Birth	03/31/1980			30d - E
		Gender	F			
		Address	123 MAIN ST, NY, 12345			ome
				Cancel	Next	

Why are you allowed to view this data?

Why are you allowed to view this data?	8
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 Nex	t
	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

How do you know this is the correct person?

łow do you k	now this is th	ne correct pe	erson?	
O Provider attes	ts to client identity			
O Client provided	1 1 photo ID or 2 for	ms of non-photo II)	
Identification 1	select			
Identification 2	select			
MAIN STREET C automatically with	LINIC will be given ac billed service).	cess to all available	data for 3 years (ren	ews

My QI F	Report - Statewid	e Reports Recipient	Search Provider Se	earch Registrar - U	lsage Reports 👻	Utilization Reports	MyCHOIS
MyCHOIS	Dashboard		DOE	E, JANE	Clinical	Summary Create Ne	w Assessment +
			Client Ove	erview CSSRS			
Active As	ssessments			Quality Flags			
Due Date	Assessment Name	Frequency (Days)	Action	Indicator Set		Indicators	
				High Utilization - Inpt/ER	2+ ER - Medical		
5/4/2019	Depression (PHQ-9)	30 • Activated	Overdue 🖑	Treatment Engagement	Adherence - Mood	d Stabilizer (Bipolar)	
	CGAS	Select					
	PSC17	Select Activate		Integrated View of Ser	vices Over Time		
	Suicide Screen (C-SSRS)	Select V Activate		Medicaid Enro	lled		
	Depression (PHQ-3 To	Select V Activate		Medication Behavioral He	alth 🔳 🔳	1 C C	
	PHQ-9)	Activate		Medication Med	lical		•
	CECI	Select Activate		Clinic - Mental Health Speci	alty 💶 🗖		
	Depression & Suicide			Emergency Room - Med	lical	10 A 10 A 10	•
	(PHQ-3 To PHQ-9 and C- SSRS)	Select V Activate		Community Residence -Menta	I I I I		• •
	00110)						2020

Plans & Documents 🔮 Upload 💿 Create New								
Date Document Created	Document Type	Provider Name	Document Created By	Role	Delete Document			
2/26/2020	Safety Plan	JEWISH BOARD OF FAMILY & CHILDREN'S SERVICES	ERICA VAN DE WAL	N/A	Ŵ			

PSYCKES Training & Technical Support

PSYCKES Training

- PSYCKES website: www.psyckes.org
- Webinars
 - Live: Register in "Calendar" section of website
 - Recorded: Posted in "Recorded Webinars" of website
 - Using PSYCKES for Clinicians
 - Enable Access to Client-Level Data in PSYCKES
 - Using PSYCKES Recipient Search
 - Using PSYCKES Quality Indicator Reports
 - PSYCKES Mobile App for iPhones & iPads
- User Guides
 - Available in "About PSYCKES" section of website

PSYCKES Technical Support

- PSYCKES Help
 - Support using PSYCKES and questions about data
 - 9:00AM 5:00PM, Monday Friday
 - PSYCKES-help@omh.ny.gov
- ITS Help Desk
 - Token, login, and SMS support
 - Provider Partner ITS Helpdesk:
 - healthhelp@its.ny.gov; 1-800-435-7697
 - OMH Employee ITS Helpdesk:
 - fixit@its.ny.gov; 1-844-891-1786