



**Office of  
Mental Health**

# Using PSYCKES for Population Health Management and Quality Improvement

**We will begin shortly**

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**Office of Population Health & Evaluation**  
**March 22, 2023**

# 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
- Slides and recording will be emailed to attendees after the webinar

# Agenda

- PSYCKES Overview
- Recipient Search – how to identify children with:
  - HCBS, CFTSS, health home, other services
  - Eligibility: Children Waiver Status & Services
  - Quality Flags & Risk Factors
  - Medications & Diagnoses
  - Hospital Services
- My QI Report/Statewide Reports – how to track performance
- Training and Technical Assistance
- Question & Answer

# PSYCKES Overview



**Office of  
Mental Health**

# What is PSYCKES?

- A web-based application for sharing...
  - Medicaid claims and encounter data
  - Other State administrative data
  - Data and documents entered by providers and members
- Secure, HIPAA-compliant
- Supports:
  - Clinical decision making and care coordination: individual member information
  - Quality improvement: quality measures, quality flags
  - Population health management: identify high need/high risk cohorts

# Who is Viewable in PSYCKES?

- Over 10 million NYS Medicaid enrollees (currently or previously enrolled)
  - Fee for service claims
  - Managed care encounter data
  - Dual-eligible (Medicare/Medicaid): Medicaid data only
- Behavioral Health Population, i.e., at least one of the following:
  - Psychiatric or substance use service,
  - Psychiatric or substance use diagnosis, OR
  - Psychotropic medication
- Provides all data – general medical, behavioral health, residential



# What Data is Available in PSYCKES?

- Clinical Summary provides up to 5 years of data (updated weekly)
- All Medicaid FFS claims and Managed Care encounter data, across treatment settings
  - Medications, medical and behavioral health outpatient and inpatient services, ER, care coordination, residential, 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 currently in PSYCKES:
  - New York City Department of Homeless Services (NYC DHS)
  - State Psychiatric Center EMR
  - Assertive Community Treatment provider contact (OMH CAIRS)
  - Assisted Outpatient Treatment provider contact (OMH TACT)
  - Health Home enrollment & CMA provider (DOH MAPP)
  - Suicide attempt (OMH NIMRS)
  - Managed Care Plan & HARP status (MC Enrollment Table)
  - Safety Plans/Screenings and assessments entered by clients or providers into PSYCKES MyCHOIS
  - MC Plan Assigned Primary Care Physician (Quarterly, DOH)

# Quality Indicators “Flags”

- PSYCKES identifies clients flagged for quality concern in order to inform the treating provider and to support clinical review and quality improvement
- When a client has a quality flag, the provider is allowed access to that individual’s Clinical Summary
- Examples of current quality flags include:
  - Vital Signs Dashboard – Child, e.g., No Well-Care Visit Past Year, Immunization for Adolescents – No HPV or Meningococcal
  - Medication-Related, e.g., No Follow-Up for Child on ADHD Med
  - Acute Care Utilization, e.g., High utilization, Readmission
  - General Medical, e.g., No Outpatient Medical Visit > 1 year

# What Types of Reports Are Available?

- Individual Client Level Reports
  - Clinical Summary: Medicaid and State PC treatment history, up to 5 years
  - Most popular PSYCKES report
- Provider Agency Level Reports
  - Recipient Search Reports: run ad hoc reports to identify cohorts of interest, to support population health
  - My QI Report: current performance on all quality indicators, drill down to client-level views
  - PSYCKES 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 region, county, plan, network, or provider

# Recipient Search

# Recipient Search

Limit results to

50

Search

Reset

## Individual Search

### Recipient Identifiers

Medicaid ID

SSN

OMH State ID

OMH Case #

First Name

Last Name

DOB

AB00000A

MM/DD/YYYY

### Characteristics as of 03/19/2023

## Group Search

Age Range

To

Gender

Population

Race

High Need Population

Ethnicity

AOT Status

Region

Alerts

County

Homelessness Alerts

### Managed Care Plan & Medicaid

Managed Care

Children's Waiver Status

MC Product Line

HARP Status

Medicaid Enrollment Status

HARP HCBS Assessment Status

Medicaid Restrictions

HARP HCBS Assessment Results

### Quality Flag as of 03/01/2023

Definitions

### Services: Specific Provider as of 03/01/2023

Past 1 Year

- 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
- Antipsychotic Polypharmacy (2+ >90days) Children
- Antipsychotic Two Plus

Provider

Region

County

Current Access

Service Utilization

Number of Visits

### Recipient Identifiers

Medicaid ID

SSN

OMH State ID

OMH

AB00000A

### Characteristics as of 03/19/2023

Age Range

To

Gender

Race

Ethnicity

Region

County

CORE Eligible (Community Oriented Recovery and Empowerment)

POP : High User (All)

POP : High User (New)

POP : Potential Clozapine Candidate (All)

POP : Potential Clozapine Candidate (New)

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

Transition Age Youth - Behavioral Health (TAY-BH)

OPWDD NYSTART - Eligible

Health Home Plus (HH+) - Eligible

HH+ Service - Received at least once in past 3 mo. (Source: DOH MAPP)

AOT - Active Court Order

AOT - Expired < 12 months

ACT - Enrolled

ACT - Discharged < 12 months

3+ Inpt MH < 12 months

High Need Population

AOT Status

Alerts

Homelessness Alerts



# Recipient Search

Limit results  
to

Search

Reset

## Recipient Identifiers

Medicaid ID

SSN

OMH State ID

OMH Case #

First Name

AB00000A

## Characteristics as of 03/19/2023

Age Range  To  Gender

Race

Ethnicity

Region

County

Alerts - Any below

- Suicide Attempt (Medicaid/NIMRS) past 1 year
- Suicide Attempt (Medicaid/ NIMRS)
- Suicidal Ideations (Medicaid)
- Self-Inflicted Harm/ Injury (Medicaid)
- Self-Inflicted Poisoning (Medicaid)

- Overdose - Opioid past 1 year
- Overdose - Opioid (Intentional) past 1 year
- Overdose - Opioid (Unintentional) past 1 year
- Overdose - Opioid past 3 years
- Overdose - Opioid (Intentional) past 3 years
- Overdose - Opioid (Unintentional) past 3 years
- Overdose Risk - Concurrent Opioid & Benzodiazepine
- Registry - Suicide Care Pathway - active at any agency
- Registry - High Risk List - active at any agency
- Registry - COVID-19 - active at any agency
- OMH Unsuccessful Discharge

Alerts

Homelessness Alerts



## Managed Care Plan & Medicaid

Managed Care

MC Product Line

Medicaid Enrollment Status

Medicaid Restrictions

Children's Waiver Status

- Children's Waiver - Any
- HARP HCBS - Level of Care (K1)
- HCBS - Serious Emotional Disturbance (K3)
- HARP HCBS - Medically Fragile (K4)
- HCBS - Developmentally Disabled (K5)
- HCBS - Developmentally Disabled and Medically Fragile (K6)
- HCBS - Family of One (KK)

Quality Flag as of 03/01/2023

[Definitions](#)

Services: Sp

- No Follow Up for Child on ADHD Med - Continuation
- No Follow Up for Child on ADHD Med - Initiation
- No Psychosocial Care - Child & Adol on Antipsychotic
- No Well-Care Visit > 1 Yr - Child & Adol
- Readmission (30d) from any Hosp: MH to MH
- Vital Signs Dashboard Child Summary
- Immunization for Adolescents - No HPV
- Immunization for Adolescents - No Meningococcal
- Immunization for Adolescents - No Tdap

Provider

Region  County

Current Access

Service Utilization  Number of Visits

Service Setting:

Service Detail: Selected

Care Coordination

## Medication & Diagnosis as of 03/01/2023

Past 1 Year

Prescriber Last Name

Drug Name

Active Drug

Psychotropic Drug Class\*

ADHD Med  
Antidepressant  
Antipsychotic  
Antipsychotic - Long Acting Injectable

Non-Psychotropic Drug Class\*

Endocrine and Metabolic Drugs  
Gastrointestinal Agents  
Genitourinary Products  
Hematological Agents

Diagnosis

Diagnosis given

1+

Primary Only

Primary/Secondary

BH Diagnosis

Neurodevelopmental Disorders  
Attention Deficit Hyperactivity Disorder  
Autism Spectrum Disorder  
Communication Disorders  
Intellectual Disabilities  
Motor Disorders  
Other Neurodevelopmental Disorders

Medical Diagnosis

Certain conditions originating in the perina  
Certain infectious and parasitic diseases  
Congenital malformations, deformations a  
Diseases of the blood and blood-forming o

Click on the left-hand side dash to open the tree options

Services: Specific Provider as of 03/01/2023

Past 1 Year

Provider MAIN STREET CLINIC

Region

County

Current Access

Service Utilization

Number of Visits

Service Setting:

Service Detail: Selected

Living Support/Residential

Outpatient - MH

Any OMH Outpatient Specialty MH Services

CFTSS - All

CFTSS - CPST

CFTSS - Family Peer Support Services (FPSS)

CFTSS - Other Licensed Practitioners (OLP)

CFTSS - Psychosocial Rehabilitation (PSR)

CFTSS - Youth Peer Support (YPS)

Childrens HCBS - All

Childrens HCBS - Caregiver Family Supports and Services

Childrens HCBS - Prevocational Services

Childrens HCBS - Respite (Plus 1000)



## Services by Any Provider as of 03/01/2023

Past 1 Year ▾

Provider

Region

County

Service Utilization

Number of Visits

Service Setting:

- 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

Service Detail: Selected

Limit results  
to

50 ▾

[Search](#)

[Reset](#)

**Services by Any Provider** as of 03/01/2023

Past 1 Year

Provider

Region

County

Service Utilization

Number of Visits

Service Setting:

- 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

- 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+
- 1+
- 2+
- 3+
- 5+
- 10+
- 20+

- 50
- 100
- 500
- 1,000
- 10,000
- 50,000
- 100,000
- 250,000
- 500,000
- 50

Expand results for large cohort searches

Limit results to

Search

Reset

43 Recipients Found

View: Standard ▾



Modify Search

[Provider Specific] Provider	Main Street Clinic
AND Children's Waiver Status	Children's Waiver - Any

Review recipients in results carefully before accessing Clinical Summary.

Maximum Number of Rows Displayed: 50

Name ▲	Medicaid ID ↕	DOB ↕	Gender ↕	Medicaid Quality Flags	Medicaid Managed Care Plan
QUJVSNCQQ TUFWSWUFN	TUioMTQm MrY	N8ypLplmM Da	R6 LQ MTM	No Vax - HPV (DOH), No Vax - Tdap (DOH)	Healthfirst PHSP, Inc.
QUmMRUu TUFMQUNISQ	TVUmNpMo OFQ	OCynMSyo MDEp	TQ LQ OQ	No Outpt Medical	
QUnWRVJFW6 SaFZREVO RQ	UEisODAvM aQ	MSypLplm MTA	TQ LQ MTM	High MH Need	Healthfirst PHSP, Inc.
QUrBSqVS TEVZTEFOSUU	TbaoMTAnO VA	NSynOCyo MDEn	R6 LQ MTE	3PP(Y), No Gluc/HbA1c & LDL-C - AP, No Gluc/HbA1c - AP, No LDL-C - AP	Healthfirst PHSP, Inc.
QVbERUnPVFQ QUvOSUVCRUnM TQ	RfUnM92n NF6	NCyvlplmM DU	R6 LQ MT2	No Gluc/HbA1c & LDL-C - AP, No Gluc/HbA1c - AP, No LDL-C - AP, No SUD Tx Engage (DOH)	Healthfirst PHSP, Inc.
	WVvNDYvN	MovnlplmM	TQ LQ		UnitedHealthcare

# Bulk Population Management View

# Bulk Population Management Views

- When group searches of populations of interest are conducted in Recipient Search, the results page provides an unduplicated list of the recipients who match the selected search criteria
- The bulk population management “Views” allow users to select a desired view which will display a series of columns to the results page, including:
  - **Care Coordination**
    - MC Product Line, HARP Status (H Code), CORE Eligible, 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)
  - **High Need/High Risk**
    - OMH Unsuccessful Discharge, Transition Age Youth (TAY-BH) OPWDD NYSTART-Eligible, Health Home Plus-Eligible, 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, and CORE or Adult HCBS Service Provider columns each include provider name, most recent service past year, and # visits/services past 1 year



# 43 Recipients Found

View:

Standard ✓

Standard

Care Coordination

High Need/High Risk

Hospital Utilization

Outpatient Providers



PDF



Excel

Modify Search

[Provider Specific] Provider

Main Street Clinic

AND Children's Waiver Status

Children's Waiver - Any

Review recipients in results carefully before accessing Clinical Summary.

Maximum Number of Rows Displayed: 50

Name ▲	Medicaid ID ↕	DOB ↕	Gender ↕	Medicaid Quality Flags ↕	Medicaid Managed Care Plan ↕	Current PHI Access ↕
<a href="#">QUJVSVCQ</a> <a href="#">TUFWSUFN</a>	TUioMTQm MrY	N8ypLplmM Da	R6 LQ MTM	No Vax - HPV (DOH), No Vax - Tdap (DOH)	Healthfirst PHSP, Inc.	Quality Flag
<a href="#">QUnMRUu</a> <a href="#">TUFMQUNISQ</a>	TVUmNpMo OFQ	OCynMSyo MDEp	TQ LQ OQ	No Outpt Medical		Quality Flag
<a href="#">QUnWRVJFW6</a> <a href="#">SaFZREVO RQ</a>	UEisODAvM aQ	MSypLplm MTA	TQ LQ MTM	High MH Need	Healthfirst PHSP, Inc.	No Access
<a href="#">QURBSqVS</a> <a href="#">TEVZTEFOSUU</a>	TbaoMTAnO VA	NSynOCyo MDEn	R6 LQ MTE	3PP(Y), No Gluc/HbA1c & LDL-C - AP, No Gluc/HbA1c - AP, No LDL-C - AP	Healthfirst PHSP, Inc.	Quality Flag
<a href="#">QVbERUnPVFQ</a> <a href="#">QUvOSUVCRUnM TQ</a>	RFUnM92n NF6	NCyvlplmM DU	R6 LQ MT2	No Gluc/HbA1c & LDL-C - AP, No Gluc/HbA1c - AP, No LDL-C - AP	Healthfirst PHSP, Inc.	Quality Flag
<a href="#">QanBQqjXRUnM TUFY</a>	VVYsNDYvN hl	MoypLplmM TE	TQ LQ MTE	No Outpt Medical	UnitedHealthcare Community Plan	Quality Flag

# 43 Recipients Found

View: Care Coordination ▾



[Provider Specific] Provider Main Street Clinic

AND Children's Waiver Status Children's Waiver - Any

Applicable data is displayed for recipients with quality flag or consent.

Name	Medicaid ID	DOB	Gender	Medicaid Managed Care Plan	MC Product Line	Current PHI Access
QUJVSVNCQQ TUFWSUJFN	TUioMTQm MrY	N8ypLplmM Da	R6 LQ MTM	Healthfirst PHSP, Inc.	Mainstream	Quality Flag
QUmMRUu TUFMQUNISQ	TVUmNpMo OFQ	OCynMSyo MDEp	TQ LQ OQ			Quality Flag
QUnWRVJFW6 SaFZREVO RQ	UEisODAvM aQ	MSypLplm MTA	TQ LQ MTM	Healthfirst PHSP, Inc.		No Access
QUrBSqVS TEVZTEFOSUU	TbaoMTAnO VA	NSynOCyo MDEn	R6 LQ MTE	Healthfirst PHSP, Inc.	Mainstream	Quality Flag
QVbERUnPVFQ QUvOSUVCRUm TQ	RfUnM92n NF6	NCyvLplmM	R6 LQ	Healthfirst PHSP, Inc.	Mainstream	Quality Flag
QanBQqjXRUnM TUFY	VVYs bl			care Community Plan	Mainstream	Quality Flag
QbJVWazO SazTRVBI U6	UEErMDYrN q6	MTEIMTUIM 9AnMA	TQ LQ MTI	Healthfirst PHSP, Inc.		No Access

Scroll to the right to view additional columns

# 43 Recipients Found

View: Care Coordination ▾



[Provider Specific] Provider Main Street Clinic

AND Children's Waiver Status Children's Waiver - Any

Applicable data is displayed for recipients with quality flag or consent.

Name ▲	HARP Status (H Code) ▾	CORE Eligible ▾	HARP HCBS Assessment Date (most recent) ▾	Children's Waiver Status (K Code) ▾
QUJVSUNCQQ TUFWSUFN				HCBS - Serious Emotional Disturbance (K3)
QUuMRUu TUFMQUNISQ				HCBS - Serious Emotional Disturbance (K3)
QUuWRVJFW6 SaFZREVO RQ				
QUrBSqVS TEVZTEFOSUU				HCBS - Serious Emotional Disturbance (K3)
QUvERUnPVFQ QUvOSUVCRUnM TQ				HCBS - Family of One (KK)
QanBQqjXRUnM TUFY				HCBS - Medically Fragile (K4)
QbJVWazO SazTRVBI U6				
QqFTVEbMTEzDTrJURV M QUJJRqFJTA				HCBS - Serious Emotional Disturbance (K3)
RU3BT6 RUzJT6				HCBS - Serious Emotional Disturbance (K3)



# 43 Recipients Found

View: Care Coordination ▾



Excel

[Provider Specific] Provider Main Street Clinic

AND Children's Waiver Status Children's Waiver - Any

Applicable data is displayed for recipients with quality flag or consent.

Name	Health Home Name (Enrolled)	Care Management Name (Enrolled)	ACT Provider (Active)	OnTrackNY Early Psychosis Program (Enrolled)
QUJVSVCQQ TUFWSUFN				
QUmMRUu TUFMQUNISQ	THE COLLABORATIVE FOR CHILDREN AND	THE CHILD CENTER OF NY INC MH		OnTrackNY @ The Child Center of NY
QUnWRVJFW6 SaFZREVO RQ				
QUrBSqVS TEVZTEFOSUU	THE COLLABORATIVE FOR CHILDREN AND	MARTIN DE PORRES GROUP HOMES		
QUvERUnPVFQ QUvOSUVCRUnM TQ	SRH CHN LEAD HEALTH HOME LLC	FAMILY SER LEAGUE/SUFFOLK MH		H OnTrackNY@The Jewish Board
QanBQqjXRUnM TUFY	COORDINATED BEHAVIORAL CARE INC	THE CHILD CENTER OF NY INC MH		HCBS - Medically Fragile (K4)
QbJVWazO SazTRVBI U6				
QqFTVEbMTEzDTrJURV M QUJJRqFJTA	COORDINATED BEHAVIORAL CARE INC	THE CHILD CENTER OF NY INC MH		
RU3BT6 RUzJT6	COORDINATED BEHAVIORAL CARE INC	THE CHILD CENTER OF NY INC MH		

# 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, MC Plan, Age
- HH/CM Sites tab breaks out QI prevalence by health home
- Drill down into list of recipients who meet criteria for flag
- 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
- **QI Reports trending over time:**
  - QI Trends Past Year show the prevalence rates of quality flags by provider over time

# MAIN STREET CLINIC

Quality Indicator Overview As Of 03/01/2023

View: Standard



← Provider Search

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

Filters Reset

## Indicator Set

### Quality Improvement Indicators (as of 03/01/2023)

Run monthly on all available data as of run date

Indicator Set	Population	Eligible Population	# with QI Flag	%	Regional %	Statewide %	25%	50%	75%	100%
BH QARR - Improvement Measure	All	396	161	40.7	35.4	36.9	35.40	35.90	40.70	36.90
General Medical Health	All	3,237	439	13.6	11.6	12.6	11.60	12.60	13.60	12.60
Health Home Care Management - Adult	Adult 18+	50	43	86	85.7	85.8	85.70	85.80	86.00	85.80
High Utilization - Inpt/ER	All	3,250	548	16.9	21.8	20.9	20.90	21.80	16.90	20.90
Polypharmacy	All	599	74	12.4	12.5	12.1	12.10	12.50	12.40	12.10
Preventable Hospitalization	Adult	1,110	4	0.4	0.9	0.8	0.80	0.90	0.40	0.80
Readmission Post-Discharge from any Hospital	All	390	42	10.8	12.2	11.3	11.30	12.20	10.80	11.30
Readmission Post-Discharge from this Hospital	All	0	0	0	11.9	11.4	11.40	11.90	0.00	11.40
Treatment Engagement	Adult 18-64	118	49	41.5	34.7	34.7	34.70	34.70	41.50	34.70

## Performance Tracking Indicators (as of 08/01/2022)

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

Indicator Set	Population	Eligible Population	# with QI Flag	%	Regional %	Statewide %	25%	50%	75%	100%
MH Performance Tracking Measure	All	1,294	198	15.3	5.9	6.4	5.90	6.40	15.30	6.40
SUD Performance Tracking Measure	Adol & Adult (13+)	132	110	83.3	83.5	80	83.50	83.50	83.30	80
Vital Signs Dashboard - Adult	Adult	270	117	43.3	46.6	47.8	46.60	47.80	43.30	47.80
Vital Signs Dashboard - Child	Child & Adol	2,441	716	29.3	31	34.1	31.00	34.10	29.30	34.10

Readmission Post-Discharge from this Hospital	All	0	0	0	11.9	11.4	
Treatment Engagement	Adult 18-64	118	49	41.5	34.7	34.7	

**Performance Tracking Indicators (as of 08/01/2022)** Run with intentional lag of 6+ months to allow for complete data

Indicator Set	Population	Eligible Population	# with QI Flag	%	Regional %	Statewide %	
MH Performance Tracking Measure	All	1,294	198	15.3	5.9	6.4	
SUD Performance Tracking Measure	Adol & Adult (13+)	132	110	83.3	83.5	80	
Vital Signs Dashboard - Adult	Adult	270	117	43.3	46.6	47.8	
Vital Signs Dashboard - Child	Child & Adol	2,441	716	29.3	31	34.1	

Indicator Set: Vital Signs Dashboard - Child

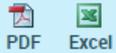
Indicator Set	Indicator	Population	Eligible Population	# with QI Flag	%	Regional %	Statewide %	25%	50%	75%	100%	
Immunization for Adolescents - No HPV	Adol (13)		192	120	62.5	65.1	69.9					62.50 65.10 69.90
Immunization for Adolescents - No Meningococcal				83	43.2	41.2	41.3					43.20 41.20 41.30
Immunization for Adolescents - No				81	42.2	38.6	39.5					42.20 38.60 39.50
No Follow Up After MH ED Visit - 7 Days	Child & Adol (6-20)		180	61	33.9	32.2	30.4					33.90 32.20 30.40
No Follow Up After MH ED Visit - 30 Days	Child & Adol (6-20)		180	29	16.1	21.7	19.6					16.10 21.70 19.60
No Follow Up after MH Inpatient - 7 Days	Child & Adol (6-20)		126	25	19.8	26.9	29.9					19.80 26.90 29.90
No Follow Up after MH Inpatient - 30 Days	Child & Adol (6-20)		126	13	10.3	13.8	14.9					10.30 13.80 14.90
No Follow Up for Child on ADHD Med - Continuation	Child (6-12)		21	7	33.3	24.5	30.1					33.30 24.50 30.10
No Follow Up for Child on ADHD Med - Initiation	Child (6-12)		64	13	20.3	31	37.5					20.30 31.00 37.50
No Psychosocial Care - Child & Adol on Antipsychotic	Child & Adol (1-17)		56	18	32.1	25.2	25.3					32.10 25.20 25.30
No Well-Care Visit > 1 Yr - Child & Adol	Child & Adol (3-21)		2,411	545	22.6	27.9	30.7					22.60 27.90 30.70
Readmission (30d) from any Hosp: MH to MH	Child & Adol (1-20)		187	17	9.1	9.9	9.2					9.10 9.90 9.20
<b>Vital Signs Dashboard Child Summary</b>	<b>Child &amp; Adol</b>		<b>2,441</b>	<b>716</b>	<b>29.3</b>	<b>31</b>	<b>34.1</b>					29.30 31.00 34.10

Drill in to see the recipients with this specific flag

# MAIN STREET CLINIC

Quality Indicator Overview As Of 03/01/2023

View: Standard ▾



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

Filters Reset

Indicator Set: Vital Signs Dashboard - Child Indicator: No Follow Up After MH ED Visit - 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	Most Recent BH Outpatient Attending	Clinical Summary Last Viewed		
Qq7PVqRIVVJZ VEFCQVNTVUq Um	Vq6mOT6vMVQ	MDEIMTYIM9AmNQ	Asian	No MH ED F/U 30d (DOH), No MH ED F/U 30d (DOH) - Adult, No MH ED F/U 30d (DOH) - Child & Adol, No MH ED F/U 7d (DOH), No MH ED F/U 7d (DOH) - Adult, No MH ED F/U 7d (DOH) - Child & Adol, No Well-Care Visit (DOH)	None Identified	No		
UazKQVM QUvBTEa U6	UFepNT6vOFa	MD2IMT6IM9AmNm	Hispanic or Latinx	2+ ER-BH, 2+ ER-MH, No MH ED F/U 7d (DOH), No MH ED F/U 7d (DOH) - Child & Adol	None Identified	No		
QUj UrVSWUbb	UU2rNTloMba	MTAIMTEIM9AmOA	Unknown	No MH ED F/U 7d (DOH), No MH ED F/U 7d (DOH) - Child & Adol, No Vax - HPV (DOH), No Vax - Meningococcal (DOH), No Vax - Tdap (DOH), No Well-Care Visit (DOH)	None Identified	No		
TEzQRVe TUVHQUu TA	UUluNpAtME2	MDMIMDMIM9AmOQ	Hispanic or Latinx	2+ Inpt-BH, 2+ Inpt-MH, High MH Need, No Gluc/HbA1c & LDL-C - AP, No LDL-C - AP, No MH ED F/U 7d (DOH), No MH ED F/U 7d (DOH) - Child & Adol, No Vax - HPV (DOH)	None Identified	No		

Drill into individual Clinical Summary





# MAIN STREET CLINIC

Quality Indicator Overview As Of 03/01/2023

View: Standard



REGION: ALL COUNTY: ALL SITE: ALL PROGRAM T

## QI Filters



Site

ALL

Program Type

ALL

Managed Care

CFTSS - All

CFTSS - CPST

CFTSS - Family Peer Support Services (FPSS)

CFTSS - Family/Youth Peer Support (FPSS/YPS)

CFTSS - Other Licensed Practitioners (OLP)

CFTSS - Psychosocial Rehabilitation (PSR)

CFTSS - Youth Peer Support (YPS)

MC Product

Care Management - Enrolled (Source: DOH MAPP)

Care Management - Enrolled/Outreach (Source: DOH MAPP)

Line

Child Care - MH - Residential Treatment Facility

Age

Childrens HCBS - All

Childrens HCBS - Caregiver Family Supports and Services

Childrens HCBS - Prevocational Services

Childrens HCBS - Respite (Planned & Crisis)

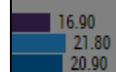
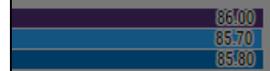
Clinic - MH Specialty

Region

County

Filters

Reset



Indicator Set

## Quality Improvement Indicators (as of 03/01/2023)

Indicator Set

BH QARR - Improvement Measure

General Medical Health

Health Home Care Management - Adult

High Utilization - Inpt/ER

Polypharmacy

Preventable Hospitalization

Adult 1 110 4 0.4 0.9 0.9 0.40 0.90

# MAIN STREET CLINIC

Quality Indicator Overview As Of 03/01/2023

View: Standard ▾



PROGRAM TYPE: CFTSS - ALL

Filters Reset

Indicator Set

## Quality Improvement Indicators (as of 03/01/2023) Run monthly on all available data as of run date

Indicator Set	Population	Eligible Population	# with QI Flag	%	Regional %	Statewide %	25% 50% 75% 100%
BH QARR - Improvement Measure	All	44	22	50	43.2	53	
General Medical Health	All	170	37	21.8	11.6	19.3	
Health Home Care Management - Adult	Adult 18+	5	5	100	91.7	91.3	
High Utilization - Inpt/ER	All	171	35	20.5	11.7	15.2	
Polypharmacy	All	49	8	16.3	19.3	30.8	
Preventable Hospitalization	Adult	24	1	4.2	0.4	0.4	
Readmission Post-Discharge from any Hospital	All	32	3	9.4	10.6	10.7	

My QI Report

QI Trends Past Year

## QI Trends Past Year

Select organization, indicator set, and indicator

Organization: Provider, Network, Plan

MAIN STREET CLINIC

Indicator Set

BH QARR - Improvement Measure

Indicator

5. Antipsychotic Polypharmacy (2+ >90days) Children

Modify filters (optional)

Program Type

ALL

Age Group

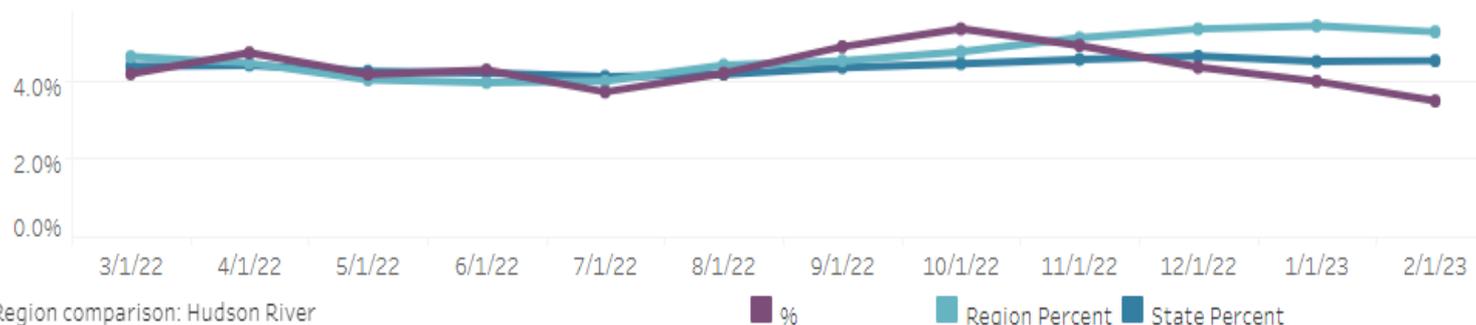
ALL

Managed Care

ALL

MC Product Line

ALL



Region comparison: Hudson River

■ %    ■ Region Percent    ■ State Percent

5. Antipsychotic Polypharmacy (2+ >90days) Children: The percentage of children 1-17 years who were prescribed two or more different antipsychotic medications concurrently for >90 days, among children prescribed any antipsychotic medication for >90 days.

	Eligible Population	# with QI flag	%	Region Percent	State Percent
3/1/22	289	12	4.2%	4.6%	4.3%
4/1/22	320	15	4.7%	4.4%	4.4%
5/1/22	314	13	4.1%	4.0%	4.2%
6/1/22	306	13	4.2%	3.9%	4.2%

# Statewide Reports

# Statewide Reports

- Provides a color coded New York State map and aggregate data that highlights variations in prevalence rates for a selected quality indicator
- Quality indicator information is available at the region, county, network, provider, and Managed Care Plan level
  - Provider tab compares prevalence rates on selected measure for each provider
- Report can be filtered by Managed Care Plan, Managed Care Product Line, Program Type, Age group
  - Compare apples to apples
- Export results page to Excel or PDF

# Statewide Report

As of 03/01/2023



PDF



Excel

Select an Indicator Set and any other filters:

Indicator Set	BH QARR - Improvement Measure ▾	
Indicator Type	5. Antipsychotic Polypharmacy (2+ >90days) Children ▾	
Region	ALL ACT - MH Specialty CCBHC CDT - MH Specialty <b>CFTSS - All</b> CFTSS - CPST CFTSS - Crisis Intervention CFTSS - Family Peer Support Services (FPSS) CFTSS - Family/Youth Peer Support (FPSS/YPS) CFTSS - Other Licensed Practitioners (OLP) CFTSS - Psychosocial Rehabilitation (PSR) CFTSS - Youth Peer Support (YPS)	
County		
Managed Care		
MC Product Line		
Program Type		CFTSS - All ▾
Age Group		ALL ▾

[Indicator Definitions](#)

Submit

Reset





# Training & Technical Assistance

# PSYCKES Training

- PSYCKES website: [www.psyckes.org](http://www.psyckes.org)
- PSYCKES Training Webinars
  - Live webinars: Register on PSYCKES Training Webinars page
  - Recorded webinars: Slides and recordings available
    - Introduction to PSYCKES
    - Where to Start: Getting Access to PSYCKES
    - Using PSYCKES Quality Indicator Reports
    - Navigating PSYCKES Recipient Search for Population Health
    - Using the PSYCKES Clinical Summary
    - Consent, Emergency, Quality Flag: PSYCKES Levels of Access
    - PSYCKES Mobile App for iPhones & iPads
- PSYCKES User Guides & Short How-To Videos
  - [www.psyckes.org](http://www.psyckes.org) > PSYCKES Training Materials

# Self-Service Console

- The Self-Service Console is a way to manage your RSA token and PIN, for logging into secure OMH applications, including PSYCKES
- The console is accessed at: [mytoken.ny.gov](https://mytoken.ny.gov)
- From within your Self-Service Console account, you can:
  - Set security questions
  - Reset your PINs
  - Activate tokens
  - Request a replacement token
- We recommend all users set up security questions in the console so that you can reset your own PIN if ever needed
- As of April 2022, the console must be used when new users need a token or existing users need a replacement token

# Helpdesk Support

- PSYCKES Help (PSYCKES support)
  - 9:00AM – 5:00PM, Monday – Friday
  - [PSYCKES-help@omh.ny.gov](mailto:PSYCKES-help@omh.ny.gov)
- Help Desk (Token, Login & SMS support)
  - ITS (OMH Employee) Helpdesk:
    - 1-844-891-1786; [fixit@its.ny.gov](mailto:fixit@its.ny.gov)
  - Provider Partner (Non-OMH Employee) Helpdesk:
    - 1-800-435-7697; [healthhelp@its.ny.gov](mailto:healthhelp@its.ny.gov)

# Questions?



**Office of  
Mental Health**