



**Office of
Mental Health**

PSYCKES Demonstration

**Clinical Summary, Recipient Search,
My QI Reports**

**Erica Van De Wal, MA
Medical Informatics Project Director
PSYCKES Implementation Team - Office of Mental Health
July 2015**

What is PSYCKES?

- A web-based platform for sharing Medicaid claims data and other state administrative data
- Comprehensive, user-friendly client information
- Secure, HIPAA-compliant
- Supports:
 - Clinical decision-making
 - Quality improvement



Who is in PSYCKES?

- Medicaid enrollees
 - Fee-for-service
 - Managed care
 - Dual-eligible (Medicare/Medicaid): Medicaid data only, includes services but not pharmacy
- Behavioral health population
 - Mental health
 - Substance abuse
- Currently over 5 million individuals

What Client Information is in PSYCKES?

- All Medicaid-reimbursable services for which a claim was submitted, across treatment settings
 - Behavioral health (outpatient and inpatient)
 - Pharmacy (psychotropic and medical)
 - Medical (services, lab tests, and procedures)
 - Living Supports (if Medicaid-billable)
- Up to 5 years of data

Quality Indicators / “Flags”: Clinical Utility

- Medication-Related, e.g.:
 - Polypharmacy
 - High dose
- Acute Care Utilization, e.g.:
 - High utilization
 - Readmission
- Health Promotion and Care Coordination
 - Behavioral health
 - Medical

Clinical Summary

Clinical Summary Header:

[Return to Search Results](#)

[Care Coordination](#) |
 [Medication: BH](#) |
 [Medication: Medical](#) |
 [BH Outpatient](#) |
 [Medical Outpatient](#) |
 [Hospital/ER Dental](#) |
 [Vision](#) |
 [Support/Residential](#) |
 [Lab & Pathology](#) |
 [Radiology](#) |
 [Medical Equipment](#) |
 [Transportation](#)

OMH PHI **Please choose summary period**
Last 6 months
Last Year
Last 2 Years
All Available (up to 5 years)

Clinical Report Date: 1/8/2015 (This report contains all available clinical data.) Data with Special Protection Show Hide

Name: Chfgcaa Bdbagbh	Medicaid ID: FHDBHCF IEAAEJD	DOB: 01/01/9999 (999 Yrs)	Address: Caefhfd Ehbcbfb, Bechefg Efiegfb, Icabiij Cbhffbe, Cfajchh Cbcfef
Medicaid Eligibility: SSI	Medicare: No	MC Phone:	Managed Care Plan: MetroPlus Health Plan

Current Care Coordination Contact Information

Health Home (Enrolled) : COMMUNITY CARE MANAGEMENT PARTNERS (Begin Date: 01-JAN-14)
 Care Management (Enrolled) : HELP/PSI SNF

- This information is updated weekly from DOH Health Home file.

Active Medicaid Restrictions

Restrictions Type	Restrictions Provider
Clinic	(Begin Date: 13-OCT-14) : MEDICAL ARTS SANITARIUM, 159-05 Union Turnpike, Fresh Meadows, NY, Phone: (718) 906-6700
Inpatient	(Begin Date: 29-SEP-14) : INTERFAITH MEDICAL, Po Box 27554, New York, NY, Phone: (718) 613-4000
Pharmacy	(Begin Date: 13-OCT-14) : CHEM RX PHARMACY SERVICES LLC, 1901 Campus Pl, Louisville, KY, Phone: (502) 627-7100

Quality Flags (as of monthly QI report 11/1/2014) Flag History: Graph Table Quality Flag Definitions ?

Indicator Set	
BH Care Coordination	Adherence - Mood Stabilizer (Bipolar) Adherence - Antipsychotic (Schz) 3+ ER - BH 3+ Inpatient - BH
Hospital ER Utilization	4+ Inpatient/ER - BH 4+ Inpatient/ER - Med Readmission - All BH 7 day

Includes:

- Health Home
- ACT
- AOT

Clinical Summary Header: Levels of Access

With client consent, data with special protection is available

OMH PHI **Please choose summary period** Last 6 months Last Year Last 2 Years All Available (up to 5 years)

Clinical Report Date: 1/8/2015 (This report contains all available clinical data.) Data with Special Protection Show Hide

Name: Chfgcaa Bdbagbh	Medicaid ID: FHDBHCF IEAAEJD	DOB: 01/01/9999 (999 Yrs)	Address: Caefhfd Ehbcbfb, Bechefg Efiegfb, Icabiij Cbhffbe, Cfajchh Cbcfef
Medicaid Eligibility: SSI	Medicare: No	MC Phone:	Managed Care Plan: MetroPlus Health Plan

- ▶ **Current Care Coordination Contact Information**
- ▶ **Active Medicaid Restrictions**
- ▶ **Quality Flags (as of monthly QI report 11/1/2014)** Quality Flag Definitions ?
- ▼ **Behavioral Health Diagnoses - Primary and Secondary Dx (most frequent shows first, click diagnoses for more information)**
 - Substance Abuse | Alcohol Abuse | Schizoaffective Disorder | Bipolar Disorder | Schizophrenia | Alcohol Related Organic Mental Disorder | Major Depressive Disorder | Other Nonpsychotic Mental Disorder | Personality & Impulse Control Disorders | Adjustment Disorder | Other Psychotic Disorder
- ▼ **Medical Diagnoses - Primary and Secondary Dx (most frequent shows first, click diagnoses for more information)**

Endocrine, Nutritional, And Metabolic Diseases And Immunity Disorders	Disorders of lipid metabolism Diabetes mellitus without complication
Infectious And Parasitic Diseases	HIV infection
Injury And Poisoning	Sprains and strains
Symptoms, Signs, And Ill-Defined Conditions	Nonspecific chest pain Abdominal pain Other circulatory disease Other nervous system disorders Residual codes; unclassified
The Circulatory System	Pulmonary heart disease Coronary atherosclerosis and other heart disease Other circulatory disease
The Digestive System	Disorders of teeth and jaw

Clinical Summary Header: Levels of Access

Without client consent, data with special protection is hidden

OMH PHI **Please choose summary period**

Clinical Report Date: 1/8/2015 (This report does not contain clinical data with special protection - consent required.) Data with Special Protection Show Hide

Name: Chfgcaa Bdbagbh Medicaid ID: FHDBHCF DOB: 01/01/9999 (999 Yrs) Address: Caefhfd Ehbcbfb, Bechefg Efiegfb, Icabiij Cbhffbe, Cfajchh Cbcfec
 Medicaid Eligibility: SSI Medicare: No MC Phone: Managed Care Plan: MetroPlus Health Plan

▶ **Current Care Coordination Contact Information**

▶ **Active Medicaid Restrictions**

▶ **Quality Flags (as of monthly QI report 11/1/2014)** Quality Flag Definitions ?

▼ **Behavioral Health Diagnoses - Primary and Secondary Dx (most frequent shows first, click diagnoses for more information)**

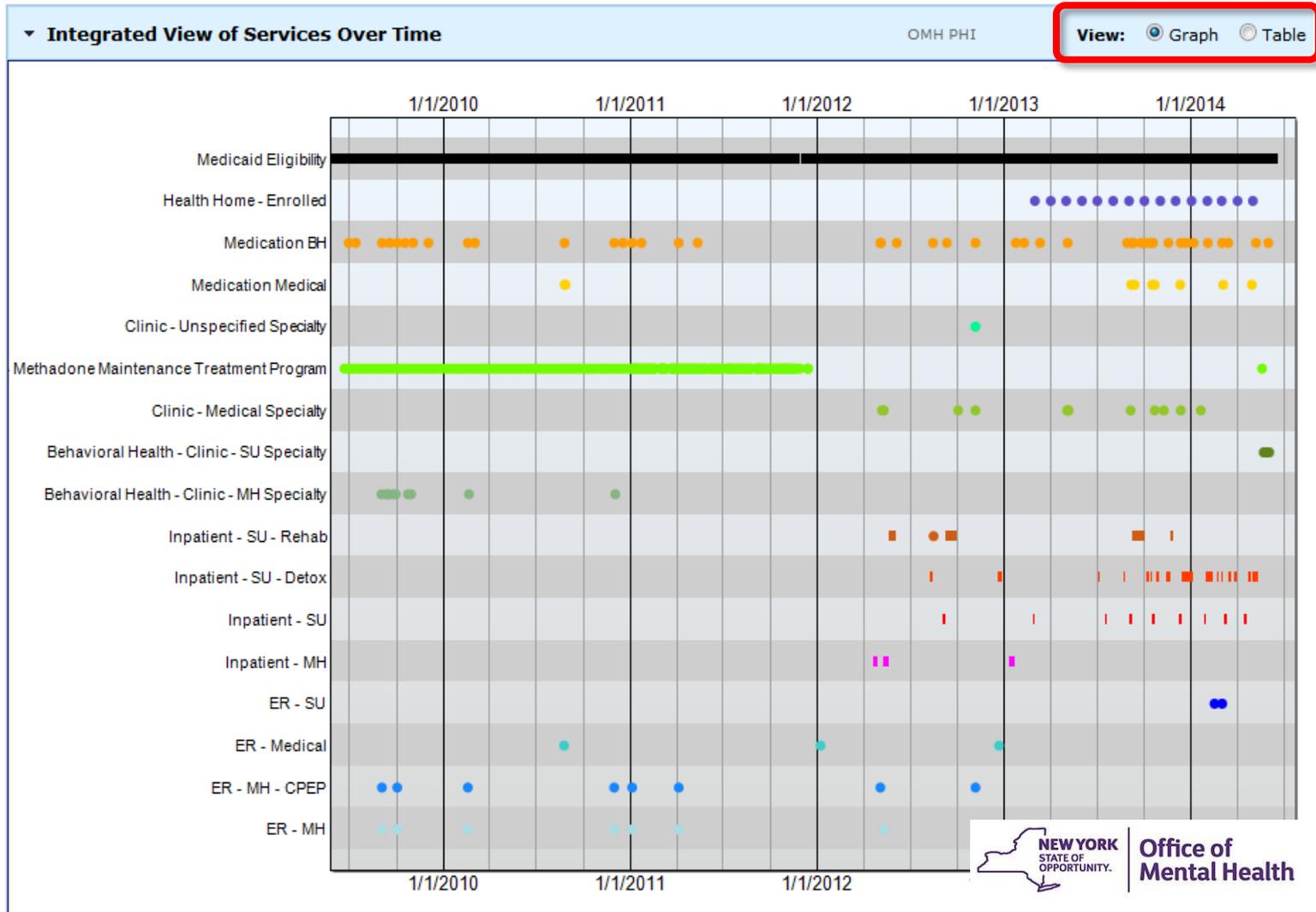
Schizoaffective Disorder | Bipolar Disorder | Schizophrenia | Major Depressive Disorder | Other Nonpsychotic Mental Disorder | Personality & Impulse Control Disorders | Adjustment Disorder | Other Psychotic Disorder

▼ **Medical Diagnoses - Primary and Secondary Dx (most frequent shows first, click diagnoses for more information)**

Endocrine, Nutritional, And Metabolic Diseases And Immunity Disorders	Disorders of lipid metabolism Diabetes mellitus without complication
Injury And Poisoning	Sprains and strains
Symptoms, Signs, And Ill-Defined Conditions	Nonspecific chest pain Abdominal pain Other circulatory disease Other nervous system disorders Residual codes; unclassified
The Circulatory System	Pulmonary heart disease Coronary atherosclerosis and other heart disease Other circulatory disease
The Digestive System	Disorders of teeth and jaw
The Musculoskeletal System And Connective Tissue	Spondylosis; intervertebral disc disorders; other back problems Other connective tissue disease Other non-traumatic joint disorders

Clinical Summary: Integrated View as Graph (Show PHI)

All services displayed in graphic form to allow ready identification of utilization patterns, including medication adherence and outpatient, inpatient and ER services.



Pharmacy Data:

Behavioral Health and Medical

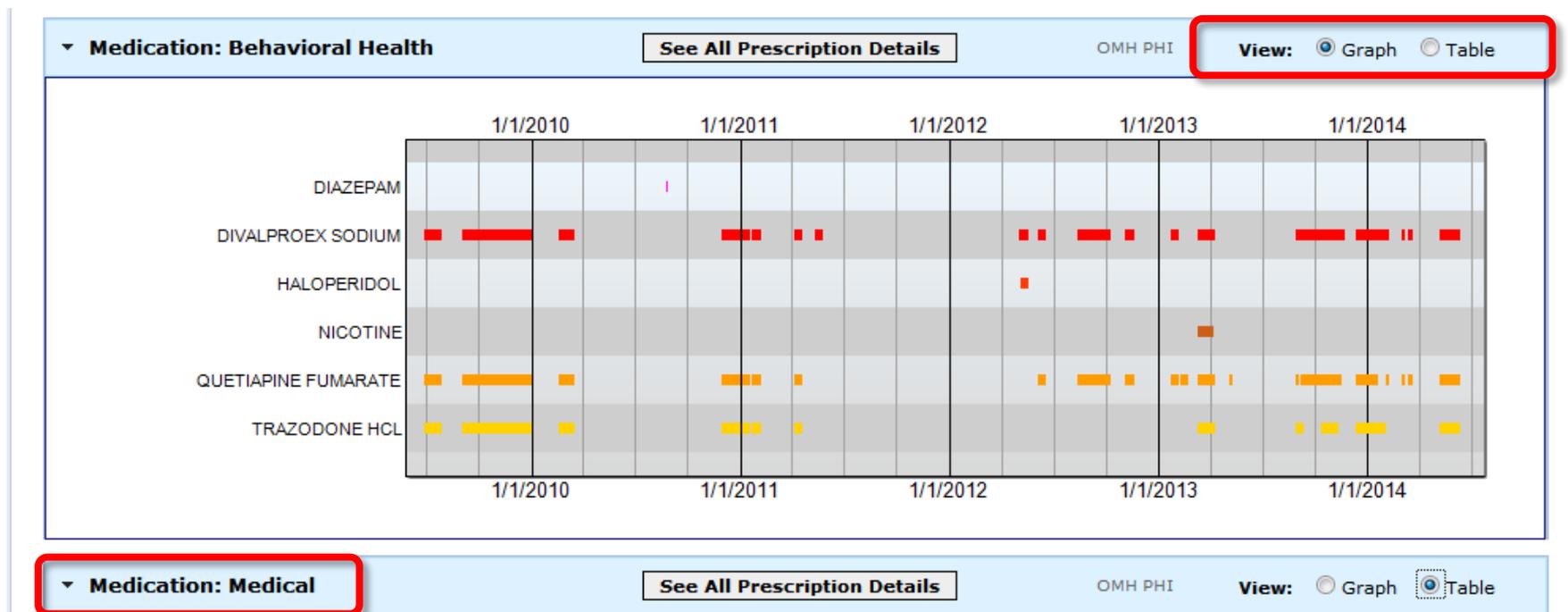
Drug, daily dose, duration, start date, last pick up, prescriber

Medication: Behavioral Health		See All Prescription Details					OMH PHI	View: <input type="radio"/> Graph <input checked="" type="radio"/> Table	
Drug Class	Brand Name	Generic Name	Last Dose*	Estimated Duration	First Day Picked Up	Last day Picked Up	Active in Past Month	Most Recent Prescriber	See Details
Mood Stabilizer	Divalproex Sodium	Divalproex Sodium	1000 MG	1 Month(s) 1 Week(s)	5/7/2014	5/31/2014	Yes	Kelly Meredith Ann	
Antipsychotic	Quetiapine Fumarate	Quetiapine Fumarate	400 MG	1 Month(s) 1 Week(s)	5/7/2014	5/31/2014	Yes	Kelly Meredith Ann	
Antidepressant	Trazodone Hcl	Trazodone Hcl	100 MG	1 Month(s) 1 Week(s)	5/7/2014	5/31/2014	Yes	Kelly Meredith Ann	
Antipsychotic	Quetiapine Fumarate	Quetiapine Fumarate	400 MG	6 Month(s) 3 Week(s)	8/28/2013	3/14/2014	No	Quyym Akm	
Mood Stabilizer	Divalproex Sodium	Divalproex Sodium	750 MG	6 Month(s) 3 Week(s)	8/28/2013	3/14/2014	No		
Antidepressant	Trazodone Hcl	Trazodone Hcl	100 MG	5 Month(s) 1 Week(s)	8/28/2013	1/5/2014	No	Meyerzon Savely	
Antipsychotic	Quetiapine Fumarate	Quetiapine Fumarate	200 MG	3 Month(s) 2 Week(s) 4 Day(s)	1/23/2013	5/4/2013	No	Chaput France Irene	
Mood Stabilizer	Divalproex Sodium	Divalproex Sodium	1000 MG	2 Month(s) 2 Week(s) 4 Day(s)	1/23/2013	3/11/2013	No		
Withdrawal Management	Sm Nicotine	Nicotine	21 MG/24H R	4 Week(s)	3/11/2013	3/11/2013	No		



Pharmacy Data: View as a Graph

Utilization trends over time



Outpatient Services: Behavioral Health and Medical

Dates, # of visits, diagnosis, procedures, practitioner, provider

Behavioral Health Services See All Service Details OMH PHI View: Graph Table

Service Type	Provider	First Date Billed	Last Date Billed	Number of Visits	Most Recent Primary Diagnosis	Most Recent Procedures (Last 3 Months)	Practitioner	See Service Details
Clinic - SU Specialty	BRIDGE BACK TO LIFE CTR INC	10/23/2013	6/16/2014	39	Other And Unspecified Alcohol Dependence, Unspecified Drinking Behavior [303.90]	- Alcohol And/Or Drug Screenin - Alcohol And/Or Drug Services - Alcohol/Subs Interv 15 -30mn - Alcohol/Subs Interv >30 Min		
Clinic - MH Specialty	CCMS	11/1/2012	6/10/2014	23	Dysthymic Disorder [300.4]	- Med Serv Eve/Wkend/Holiday - Psytx Pt&Family 30 Minutes		
Nurse Practitioner	JOSEPH MYRIAM BERTHNELL	12/23/2013	5/2/2014	2		- Behav Chng Smoking 3-10 Min - Office/Outpatient Visit Est		

Medical Outpatient Services See All Service Details OMH PHI View: Graph Table

Service Type	Provider	First Date Billed	Last Date Billed	Number of Visits	Most Recent Primary Diagnosis	Most Recent Procedures (Last 3 Months)	Practitioner	See Service Details
Clinic - Medical Specialty	HELP/PROJECT SAMARITAN SVCS CORP	9/25/2013	7/29/2014	10	Unspecified [097.9]	- Behav Chng Smoking 3-10 Min - Office/Outpatient Visit		
Nurse Practitioner	JOSEPH MYRIAM BERTHNELL	6/24/2014	6/24/2014	1	Unspecified [097.9]	- Office/Outpatient Visit		



Hospital/ER Services: Integrated Behavioral/Medical

Service type, provider, diagnosis, admission/discharge dates, length of stay, procedures

Hospital/ER Services		See All Service Details		OMH PHI		View: <input type="radio"/> Graph <input checked="" type="radio"/> Table	
Service Type	Provider	Admission	Discharge Date/Last Date Billed	Length of Stay	Most Recent Diagnosis	Procedure(s)	See Provider Detail
Inpatient BH	AREBA CASRIEL INSTITUTE	3/2/2012	4/2/2012	31	Substance Abuse		
Inpatient BH	BELLEVUE HOSPITAL CENTER	2/22/2012	2/23/2012	1	Schizoaffective Disorder		
Inpatient BH	ST BARNABAS HOSPITAL	12/3/2011	12/21/2011	18	Major Depressive Disorder		
Inpatient BH	INTERFAITH MEDICAL CENTER	10/11/2011	11/2/2011	22	Schizoaffective Disorder		
ER BH	JAMAICA HOSPITAL MED CTR	10/2/2011	10/4/2011	1	Mental Illness	- Ther/Proph/Diag Inj Sc/Im	
CPEP	BETH ISRAEL MEDICAL CENTER PSYCH	10/4/2011	10/4/2011	1	Mental Illness	- Drug Screen, Single	
Inpatient BH	NY HOSPITAL	9/2/2011	9/30/2011	28	Substance Abuse		

Labs, X-Ray and Other Data

Other services (if Medicaid billable): Dental, Vision, Living Support, Labs, Radiology, Medical Equipment, Transportation

▶ **Dental**

▶ **Vision**

▶ **Living Support/Residential Treatment**

▶ **Laboratory and Pathology**

▶ **Radiology**

▶ **Medical Equipment**

▶ **Transportation**

Please note that there is often a lag (often months) from the time a service is delivered until the service is able to be identified by PSYCKE!
The time period selected will represent the time from the most recent service or medication

Recipient Search



**Office of
Mental Health**

Recipient Search: Search for Individual or Cohort

My QI Report
 Statewide Report
 Recipient Search
 Provider Search
 MyPSYCKES
 Registrar Menu
 Usage Report
 User Settings

De-Identify

Recipient Identifiers

Medicaid ID: or SSN: or First Name: Last Name: DOB: MM/DD/YYYY

Recipient Characteristics - as of: 09/11/2014

Quality Flag*: 07/01/2014 [Definitions](#)

Age Group: Select Age Range
 Gender: Any
 Managed Care: Select MCO
 Population: All

Polypharmacy Summary
 Antipsychotic Three Plus
 Antipsychotic Two Plus
 Antidepressant Three Plus
 Antidepressant Two Plus - SC
 Psychotropics Four Plus
 Psychotropics Three Plus

Services by a Specific Provider: 07/01/2014

Past 1 Year

Provider: HOSPITAL CENTER
 Region: Select Region County: Select County
 Consent Status: All (Consented, Non-Consented, Emergency, Manually-linked)

Service Utilization: Select Setting Type Number of Visits: --

Service Setting*: Care Coordination
 Inpatient - ER
 Living Support/Residential
 Other

Service Detail: Selected

Medication & Diagnosis: 07/01/2014

Past 1 Year

Prescriber Last Name:
 Drug Name:
 Active Drug:

Psychotropic Drug Class*: Antidepressant
 Antipsychotic
 Anxiolytic
 Mood Stabilizer
 Side-Effect Management
 Stimulant

Non-Psychotropic Drug Class*: Analgesics and Anesthetics
 Anti-Infective Agents
 Anti-Obesity Agents
 Antidiabetic
 Antihyperlipidemic
 Antihypertensive

Diagnosis:
 Diagnosis given: 1+ times Primary Only: Primary/Secondary:

BH Diagnosis*: Adjustment Disorder
 Anxiety Disorder
 Attention Deficit Disorder
 Autism & Pervasive Developmental Dis:
 Bipolar Disorder
 Conduct Disorder

Medical Diagnosis*: Certain Conditions Originating in the Pe
 Complications of Pregnancy, Childbirth,
 Congenital Anomalies
 Diabetes
 Diseases of Skin and Subcutaneous Tis:
 Diseases of the Blood and Blood-Formi:

Services by Any Provider: 07/01/2014

Past 1 Year

Provider(Optional):
 Region: Select Region County: Select County
 Service Utilization: Select Setting Type Number of Visits: --

Service Setting*: Care Coordination
 Foster Care
 Inpatient - ER
 Living Support/Residential

Service Detail: Selected

- Recipient Related data is refreshed weekly and all other sections are refreshed monthly.
- Search uses "OR" criteria within a list and "AND" criteria between lists.
- *To select multiple options within a list, hold down "CTRL" while making additional selections.

Maximum No. of Rows to be displayed: 50



Office of
Mental Health

Search for Individual Recipient

Search by unique identifier or name plus any modifier below

Recipient Identifiers

Medicaid ID: or SSN: or First Name: Last Name: DOB:

Recipient Characteristics - as of: 07/16/2015 **Quality Flag*: 05/01/2015** **Definitions**

Age Group: Gender: Managed Care (MC): HARP Status: Population:

Polypharmacy Summary
Antipsychotic Three Plus
Antipsychotic Two Plus
Antidepressant Three Plus
Antidepressant Two Plus - SC
Psychotropics Four Plus
Psychotropics Three Plus
Cardiometabolic Risk Summary
AP + Diabetes Risk
AP + Hyperlipidemia Risk

Medication & Diagnosis: 05/01/2015 Past 1 Year

Prescriber Last Name: Drug Name: Active Drug:

Psychotropic Drug Class*:
ADHD Med
Antidepressant
Antipsychotic
Anxiolytic/Hypnotic
Mood Stabilizer
Side-Effect Management

Non-Psychotropic Drug Class*:
Analgesics and Anesthetics
Anti-Infective Agents
Anti-Obesity Agents
Antidiabetic
Antihyperlipidemic
Antihypertensive

Diagnosis:

Diagnosis given: 1+ times Primary Only: Primary/Secondary:

BH Diagnosis*:
Adjustment Disorder
Anxiety Disorder
Attention Deficit Disorder
Autism & Pervasive Developmental Dis.
Bipolar Disorder
Conduct Disorder

Medical Diagnosis*:
Certain Conditions Originating in the Pe
Complications of Pregnancy, Childbirth,
Congenital Anomalies
Diabetes
Diseases of Skin and Subcutaneous Tis
Diseases of the Blood and Blood-Formi

Services by a Specific Provider: 05/01/2015 Past 1 Year

Provider: Region: County:

Current Access Status:
PSYCKES Census(Billing, Consent, ER, Attestation of service)

Service Utilization: Number of Visits:

Service Setting*:
Care Coordination
Foster Care
Inpatient - ER
Living Support/Residential

Service Detail: Selected

Services by Any Provider: 05/01/2015 Past 1 Year

Provider(Optional): Region: County:

Service Utilization: Number of Visits:

Service Setting*:
Care Coordination
Foster Care
Inpatient - ER
Living Support/Residential

Service Detail: Selected



- Recipient Related data is refreshed weekly and all other sections are refreshed monthly.
- Search uses "OR" criteria within a list and "AND" criteria between lists.
- *To select multiple options within a list, hold down "CTRL" while making additional selections.

Maximum No. of Rows to be displayed: 50

Search for a Cohort

Search by provider, prescriber, age, gender, service, quality flag, diagnosis, drug or drug class, etc.

Recipient Related

Age Group: Quality Indicator*:

Gender:

Managed Care:

Population:

Polypharmacy Summary
Antipsychotic Three Plus
Antipsychotic Two Plus
Antidepressant Three Plus
Antidepressant Two Plus - SC
Psychotropic Four Plus

Medication & Diagnosis

Prescriber Last Name:

Drug Name:

Active Drug:

Psychotropic Drug Class*:
Antipsychotic
Anxiolytic
Mood Stabilizer
Side-Effect Management
Stimulant

Non-Psychotropic Drug Class*:
Anti-Infective Agents
Anti-Obesity Agents
Antidiabetic
Antihyperlipidemic
Antihypertensive

Diagnosis Group:

Diagnosis given: times Primary Only: Primary/Secondary:

BH Diagnosis*:
Anxiety Disorder
Attention Deficit Disorder
Autism & Pervasive Developmental D
Bipolar Disorder
Conduct Disorder

Medical Diagnosis*:
Complications of Pregnancy, Childbir
Congenital Anomalies
Diabetes
Diseases of Skin and Subcutaneous T
Disorders of the Blood and Blood Cells

Provider Specific

Provider:

Region: County:

Consent Status:

Service Utilization: Number of Visits:

Service Setting*:
Foster Care
Inpatient - ER
Living Support/Residential

Service Detail: Selected

All Services By Any Provider

Provider(Optional):

Region: County:

Service Utilization: Number of Visits:

Service Setting*:
Foster Care
Inpatient - ER
Living Support/Residential

Service Detail: Selected

*To select multiple options within a list, hold down "CTRL" while making (up to 4) additional selections.
Search uses "OR" criteria within a list and "AND" criteria between lists.

Filter by Service Setting

Care Management and Health Home, Outreach / Enrolled

Services by a Specific Provider: 04/01/2015 Past 1 Year

Provider:

Region: County:

Current Access Status:

Service Utilization: Number of Visits:

Service Setting*: Service Detail: Selected

- Care Coordination
 - ACT - MH Specialty
 - Care Management - Enrolled (Source: DOH)
 - Care Management - Enrolled/Outreach (Source: DOH)
 - Care Management - Outreach (Source: DOH)
 - Health Home - Enrolled (Source: DOH)
 - Health Home - Enrolled/Outreach (Source: DOH)
 - Health Home - Outreach (Source: DOH)
 - Health Home and/or Care Management - Enrolled (Source: DOH and Medicaid)
 - Health Home and/or Care Management - Outreach/Enrolled (Source: DOH and Medicaid)

Search Results

Click on recipient name for clinical summary

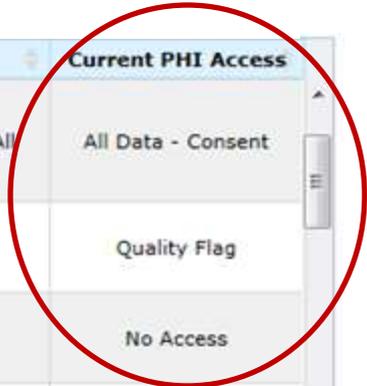
Total Number of Recipients: **6,322**
Maximum Number of Rows Displayed: **50**

[Modify Search](#)

[Provider Specific] Provider Name Main Street Behavioral Health
AND
[Provider Specific] Service Settings - Health Home - Enrolled (Source: DOH)

Export  PDF  Excel

Name	Medicaid ID	DOB	Gender	Quality Flags	Current PHI Access
Afcciec Hiiifjei	Badjcgf Feceddb	01/01/9999	Feggfad Eiaeidb	2AP, 3+ ER-BH, 3+ Inpatient - BH, 4+ Inpt/ER-BH, 4PP(A), CVD, Obes, Readmit-All BH 30d	All Data - Consent
Agicfib Ihhhiab	Iabfeed Cbebdbg	01/01/9999	Aaegffb Gjfacgb	No DM Screen-AP	Quality Flag
Agicfib Ihhhiab	Ihfcacd Cddeffe	01/01/9999	Abhaebe Djdiced		No Access
Agicfib Ihhhiab	Deaegba Fiabbbb	01/01/9999	Effjjic Jbhjdcd	4PP(A), No DM Screen-AP, No HbA1c-DM	Quality Flag
Agicfib Ihhhiab	Eabgajd Jihecfc	01/01/9999	Ahedjha Dhcdhde		All Data - Consent
Agicfib Ihhhiab	Jcaceih Aieaeah	01/01/9999	Ddfdbaf Bbefhad	2AP, 4+ Inpt/ER-Med, DoseAP, HL, HTN, No DM Screen-AP	Quality Flag



My QI Reports

My QI Report

View quality indicator information for all flags; click on an indicator set name to display the sub-indicators within set

My QI Report
 Statewide Reports
 Recipient Search
 Provider Search
 MyPSYCKES
 Registrar Menu
 Usage Reports
 User Settings
 De-Identify

Quality Indicator Overview As Of 05/01/2015

Provider: COMMUNITY HEALTHCARE NETWORK, INC.

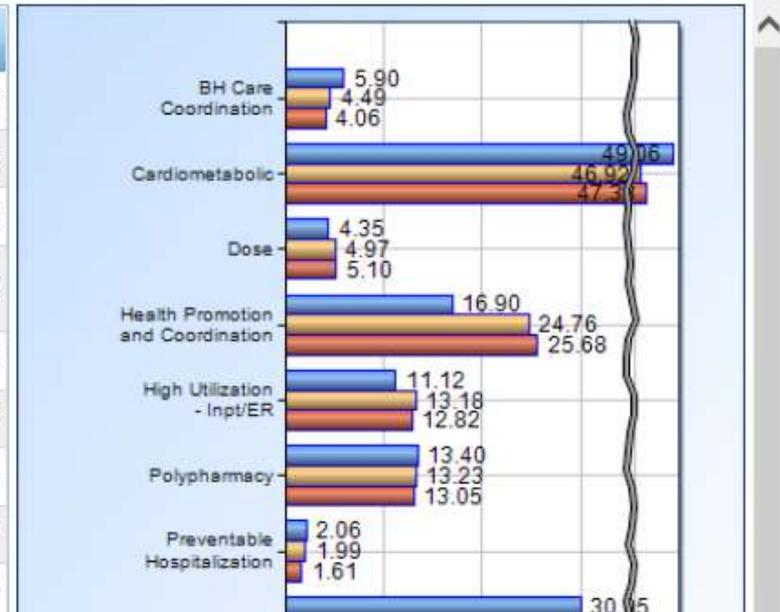
Region:ALL, County:ALL, Site:ALL, Attending:ALL, Program Type:ALL, Age:ALL, Population:ALL, Managed Care Program:ALL

Select Indicator Set for Details

Report View Type: Report Only Graph Only Both

Indicator Set

Indicator Set ▲	Population	Eligible Population	# with QI Flag	%	Regional %	Statewide %
BH Care Coordination	All	16,317	962	5.90	4.49	4.06
Cardiometabolic	All	1,323	649	49.06	46.92	47.33
Dose	All	4,897	213	4.35	4.97	5.10
Health Promotion and Coordination	All	16,317	2,757	16.90	24.76	25.68
High Utilization - Inpt/ER	All	16,317	1,814	11.12	13.18	12.82
Polypharmacy	All	3,202	429	13.40	13.23	13.05
Preventable Hospitalization	Adult	16,113	332	2.06	1.99	1.61
Readmission	All	1,015	305	30.05	23.53	19.29
Youth Indicator	Child	23	4	17.39	19.06	22.22



My QI Report

Click on a sub-indicator or “summary” measure to drill down to a list of providers or list of recipients

Quality Indicator Overview As Of 05/01/2015

Provider Details Find Provider

Provider: COMMUNITY HEALTHCARE NETWORK, INC.

Export PDF Excel

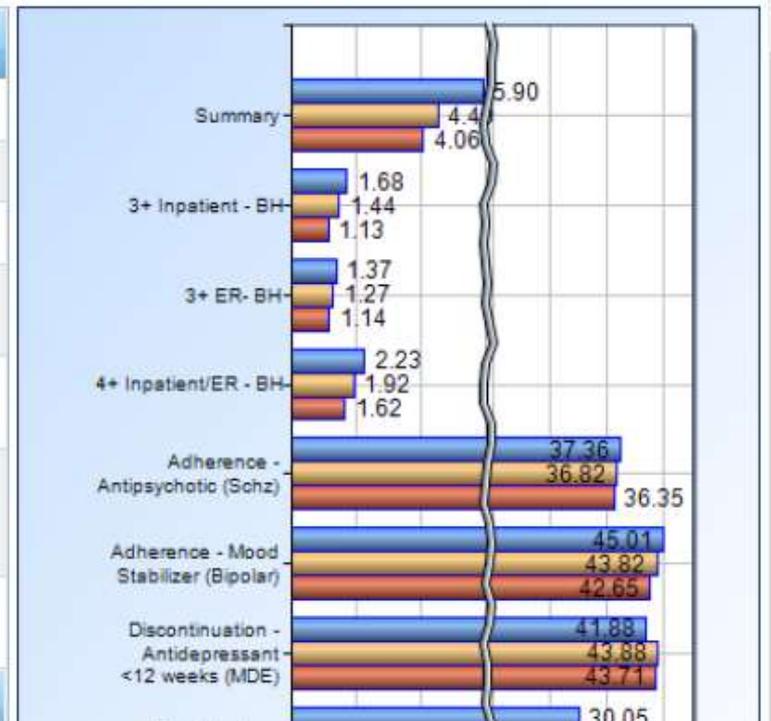
Modify Filter Region:ALL, County:ALL, Site:ALL, Attending:ALL, Program Type:ALL, Age:ALL, Population:ALL, Managed Care Program:ALL

Indicator Set: BH Care Coordination Select indicator for detail.

Report View Type: Report Only Graph Only Both

Indicator Set Indicator

Indicator	Population	Eligible Population	# with QI Flag	%	Regional %	Statewide %
3+ Inpatient - BH	All	16,317	274	1.68	1.44	1.13
3+ ER- BH	All	16,317	223	1.37	1.27	1.14
4+ Inpatient/ER - BH	All	16,317	364	2.23	1.92	1.62
Adherence - Antipsychotic (Schz)	(0-64) yrs	728	272	37.36	36.82	36.35
Adherence - Mood Stabilizer (Bipolar)	(0-64) yrs	531	239	45.01	43.82	42.65
Discontinuation - Antidepressant <12 weeks (MDE)	(0-64) yrs	277	116	41.88	43.88	43.71
Readmission - All BH 45 day	All	1,015	305	30.05	23.53	19.29
Summary	All	16,317	962	5.90	4.49	4.06



HH/CM Site(s) Tab

QI Report for a Health Home or Care Management provider includes a tab with associated HH & CM providers; click on site name for list of flagged recipients

Quality Indicator Overview As Of 05/01/2015

Provider Details

Find Provider

Provider: COMMUNITY HEALTHCARE NETWORK, INC.

Export PDF Excel

Modify Filter

Region:ALL, County:ALL, Site:ALL, Attending:ALL, Program Type:ALL, Age:ALL, Population:ALL, Managed Care Program:ALL

Indicator Set: BH Care Coordination, Indicator: Summary

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

Site Name (Source: DOH)	Site Address	Program Type (Enrollment Status)	Eligible Population	# with QI Flag	%
QUEENS COORDINATED CARE PARTNERS LL	60 MADISON AVE FL 5	Health Home - Enrolled (Source: DOH)	4,402	422	9.59
COMMUNITY CARE MANAGEMENT PARTNERS	1250 BROADWAY FL 22	Health Home - Enrolled (Source: DOH)	4,168	404	9.69
COMMUNITY HLTHCARE NETWORK AI	60 MADISON AVENUE 5TH FLOOR	Health Home - Enrolled (Source: DOH)	3,971	389	9.80
COMMUNITY HLTHCARE NETWORK AI	60 MADISON AVENUE 5TH FLOOR	Care Management - Enrolled (Source: DOH)	1,856	138	7.44
PUERTO RICAN FAMILY INST MH	ICM COORDINATOR	Care Management - Enrolled (Source: DOH)	220	56	25.45
BRIDGE,INC	Not Available	Care Management - Enrolled (Source: DOH)	113	36	31.86
OFFICE MENTAL HEALTH MH	OMH DIR REIMB	Care Management - Enrolled (Source: DOH)	160	34	21.25
BRONX AIDS SERVICE AI	540 E FORDHAM RD	Care Management - Enrolled (Source: DOH)	244	31	12.70
CAMBA INC	JOANNE M OPLUSTIL	Care Management - Enrolled (Source: DOH)	486	28	5.76

Next Steps: PSYCKES Access

- Approximately 50% of Health Homes and 50% of Care Management agencies in New York State are already have Access to PSYCKES
 - Security for PSYCKES organized by Tax ID
- Contact PSYCKES-Help to find out if your Health Home or Care Management agency already has access
 - PSYCKES-help@omh.ny.gov
- If your agency already has access to PSYCKES, contact the agency's Security Manager to grant additional staff access
- If you don't know who your agency's Security Manager is, or would like to appoint an additional Security Manager, contact PSYCKES-Help for instructions

Next Steps: PSYCKES Access

- For Health Homes and Care Management agencies that **do not** have access to PSYCKES, the following will need to be submitted for access:
 - PSYCKES Access Online Contact Form
 - https://www.surveymonkey.com/s/PSYCKES_Access_Contact_Form
 - PSYCKES Confidentiality Agreement
 - CEO / ED of facility must sign
- Contact PSYCKES Help if you have questions
 - PSYCKES-help@omh.ny.gov



Next Steps: PSYCKES Training

- PSYCKES website: www.psyckes.org
- Webinars
 - Live webinars: Register on [PSYCKES Calendar](#)
 - Recorded webinars: Posted on [PSYCKES Website](#)
 - Recommended for Health Home Care Managers:
 - “Using PSYCKES for Clinicians”
 - “PSYCKES PHI Access Module”
 - “PSYCKES for Managers and Administrators”
 - “PSYCKES Train the Trainer” (*for people who want to become PSYCKES trainers at their agency*)
- PSYCKES User’s Guides
 - www.PSYCKES.org > About PSYCKES > Training
 - Each User’s Guide explains an individual section of the PSYCKES application



Next Steps: PSYCKES Training

- PSYCKES Implementation Toolkit
 - Protocol for PSYCKES Access
 - Implementation Planning Tool (Milestones)
 - Policies & Procedures for using PSYCKES
 - Login Instructions
 - Training Recommendations
 - Core Competencies Checklist (training tool)
- Toolkit is available by request and will be posted to PSYCKES website soon!
 - PSYCKES-Help@omh.ny.gov

