



**Office of
Mental Health**

Navigating PSYCKES Recipient Search for Population Health

We will begin shortly

To hear the webinar, click “Call Me” in the Audio Connection box and enter your phone number - the WebEx system will call your phone

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**Hannah Ritz
PSYCKES Implementation Team
November 30, 2023**

Q&A via WebEx

- All phone lines are muted
- Access “Q&A” box by clicking on the 3 dots on the bottom right of the screen
- 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

- PSYCKES Overview
- Access to Client-Level Data
- Recipient Search
 - Individual & Group Searches
 - And / Or Logic
 - Bulk Population Management Views
 - Example Searches
- Streamlined Consent in Recipient Search
- Training and Technical Assistance
- Question & Answer

PSYCKES Overview



**Office of
Mental Health**

What is PSYCKES?

- A secure, HIPAA-compliant web-based platform for sharing Medicaid claims and encounter data and other state administrative data
- Designed to support clinical decision-making and quality improvement
- Ongoing updates
 - Bulk Population Management Views in Recipient Search
 - Active PSYCKES Registry Status: SCP; High Risk List, COVID-19
 - Overdose Risk: Concurrent Opioid & Benzodiazepine Alert – Link to resources
 - ACT Reason for Discharge
 - Population Filters including Behavioral Health High Need – Dual (Medicaid + Medicare)
 - New Social Determinants of Health Filter in Recipient Search

Who is Viewable in PSYCKES?

- Over 11 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:
 - 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)
 - DHS data
 - 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:
 - Medication-Related, e.g., Polypharmacy, Low Adherence
 - Acute Care Utilization, e.g., High utilization, Readmission
 - General Medical, e.g., No Diabetes Screening on AP, No Outpatient Medical Visit > 1 year
 - Health Home Plus Eligible – No Health Home Plus Service, Health Home Plus Eligible – Not Health Home Enrolled

PSYCKES Use Cases

1. Support Quality Improvement Projects

- Use My QI Reports to see report in real-time of clients flagged for specific quality indicators and drill down into Clinical Summary

2. Clinical Review and Decision-Making

- Look up individual Clinical Summaries of treatment and services
- Intake, evaluation, risk-assessment, and treatment planning for clients presenting to any provider (e.g., ERs, corrections)
- Case review by quality managers (e.g., state, county, or MCOs)

3. Identify cohorts of interest

- Use Recipient Search to perform flexible searches to answer a question about clients served in your agency/hospital
- Export search results list to PDF or Excel

Access to Client-Level Data

Access to Client Data in PSYCKES

Clients are assigned to agency/hospital in one of two ways:

- Automatically: Client had a billed service at the agency/hospital within the past 9 months
- Manually: Through Registrar Menu/ PHI Access Module
 - Signed consent
 - Emergency (72 hours)
 - Attest client is served by / being transferred to agency prior to billing and/or signed consent
 - Verbal PSYCKES consent
- Recipient Search menu can be used to manually link clients to your agency/hospital, in addition to the Registrar Menu

Access to Client Data Without Signed Consent

- Certain data provided without signed consent...
 - Positive for any quality concern flagged in PSYCKES
 - At least one billed service anywhere in agency/hospital in past 9 months
- Rationale: monitor quality and safety of Medicaid program
- Does not include Protected Health Information (PHI) with special protections
 - Substance use information/treatment
 - HIV
 - Genetic testing
 - Reproductive / family planning

Access to Client Data With Signed Consent

- Expanded access
 - Search among all Medicaid enrollees in the Behavioral Health population, including those not yet linked to agency/hospital through Medicaid billing and those not positive for a quality flag
 - Includes information with special protections (substance use, HIV, genetic testing, family planning)
- Access to client-level data
 - With consent
 - In clinical emergencies (limited duration, 72 hours)
- Advantage of obtaining consent:
 - Access to data remains in effect until client is discharged (3 years after last bill) or client withdraws consent

Choose PSYCKES Home Screen

MAIN STREET MENTAL HEALTH CLINIC
Quality Indicator Overview As Of 11/01/2023

View: Standard PDF Excel

SITE: ALL PROGRAM TYPE: ALL AGE GROUP: ALL MC PRODUCT LINE: ALL CLIENT REGION: ALL CLIENT COUNTY: ALL PROVIDER REGION: ALL PROVIDER COUNTY: ALL
MANAGED CARE: ALL Filters Reset

Indicator Set

Quality Improvement Indicators (as of 11/01/2023) 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	6,815	2,333	34.2	37.7	38.2	34.20	37.70	38.20	39.20
General Medical Health	All	184,579	17,345	9.4	13.5	13.4	9.40	13.50	13.40	
Health Home Care Management - Adult	Adult 18+	10,051	8,073	80.3	80.3	86.6	80.30	80.30	86.60	86.60
High Utilization - Inpt/ER	All	184,671	47,941	26	21.8	20.5	26.00	21.80	20.50	
Polypharmacy	All	17,300	2,410	13.9	16	12.3	13.90	16.00	12.30	
Preventable Hospitalization	Adult	131,484	2,028	1.5	0.9	0.8	1.50	0.90	0.80	
Readmission Post-Discharge from any Hospital	All	35,902	5,370	15	13.8	11.3	15.00	13.80	11.30	
Readmission Post-Discharge from this Hospital	All	25,500	3,190	12.5	12.5	11.4	12.50	12.50	11.40	
Treatment Engagement	Adult 18-64	5,616	1,911	34	32.3	34.8	34.00	32.30	34.80	

Performance Tracking Indicators (as of 12/01/2022) 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	9,837	4,938	50.2	51.1	52.5	50.20	51.10	52.50	
SUD Performance Tracking Measure	Adol & Adult (13+)	11,467	9,007	78.5	76.7	78.4	78.50	76.70	78.40	
Vital Signs Dashboard - Adult	Adult	32,926	14,396	43.7	47.6	47.4	43.70	47.60	47.40	
Vital Signs Dashboard - Child	Child & Adol	50,724	13,604	26.8	34.4	32.9	26.80	34.40	32.90	

User Settings: Change My Home Page



De-identify

Settings ▾

Log Off

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

Change My Home Page
Update My User Profile

Update My Home Page

Changes will be reflected at next login



My QI Report



Statewide Reports



Recipient Search



Provider Search



MyCHOIS



Manage MyCHOIS Users



Manage PHI Access

Save



Recipient Search: Overview

Recipient Search Options

- Individual Search
 - Look up one person to view their Clinical Summary
 - Unique identifiers: Medicaid ID, SSN
 - First Name, Last Name, DOB
- Group Search
 - Flexible search to identify cohort of people served in your agency/hospital who meet specified criteria
 - Age Group, Quality Flag, AOT Status, HARP Status, MC Plan, history of suicide attempt, ideation, or self-harm, Region, County, Social Determinants of Health
 - People taking psychotropic and non-psychotropic meds
 - People with specific behavioral health and medical diagnoses
 - People served in specific service setting in your agency/hospital or an outside agency/hospital, statewide (e.g., ACT, Health Home, Inpatient/ER, Clinic, etc.)

Recipient Search: Individual or Cohort

My QI Report - Statewide Reports **Recipient Search** Provider Search Registrar Usage Utilization Reports Adult Home

Individual Search

Recipient Search

Limit results to 50

Recipient Identifiers

Search in: Full Database MAIN STREET MENTAL HEALTH CLINIC

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

Characteristics as of 11/20/2023

Age Range	<input type="text"/>	To	<input type="text"/>	Gender	<input type="text"/>
Race	<input type="text"/>				
Ethnicity	<input type="text"/>				

Region	<input type="text"/>
County	<input type="text"/>

Group/Cohort Search

Special Populations

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

Social Determinants of Health (SDOH)

SDOH Conditions (reported in billing)	SDOH
<ul style="list-style-type: none">Problems related to upbringingProblems related to social environmentProblems related to physical environmentProblems related to other psychosocialProblems related to medical facilities aProblems related to housing and econo	<input type="text"/>

Managed Care Plan & Medicaid

Managed Care	<input type="text"/>
MC Product Line	<input type="text"/>
Medicaid Enrollment Status	<input type="text"/>
Medicaid Restrictions	<input type="text"/>

Children's Waiver Status	<input type="text"/>
HARP Status	<input type="text"/>
HARP HCBS Assessment Status	<input type="text"/>
HARP HCBS Assessment Results	<input type="text"/>

Quality Flag as of 11/01/2023

[Definitions](#)

Services: Specific Provider as of 11/01/2023

Past 1 Year

<input type="text" value="HARP Enrolled - Not Health Home Enrolled - (updated weekly)"/>
<input type="text" value="HARP-Enrolled - No Assessment for HCBS - (updated weekly)"/>
<input type="text" value="Eligible for Health Home Plus - Not Health Home Enrolled"/>
<input type="text" value="Eligible for Health Home Plus - No Health Home Plus Service Past 12 Months"/>
<input type="text" value="Eligible for Health Home Plus - No Health Home Plus Service Past 3 Months"/>

Provider	<input type="text" value="MAIN STREET MENTAL HEALTH CLINIC"/>
Region	<input type="text"/>
County	<input type="text"/>

Recipient Search: Individual

Recipient Search

Limit results to 50 Search

Recipient Identifiers

Search in: Full Database MAIN STREET MENTAL HEALTH CLINIC

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

Enter a Recipient Identifier and Click "Search"

Click on recipient name to go to Clinical Summary

[← Modify Search](#)

1 Recipients Found

View: Standard

Medicaid ID AB12345C

Review recipients in results carefully before accessing Clinical Summary.

Maximum Number of Rows Displayed: 50

Name (Gender - Age) Medicaid ID	DOB	Address	Quality Flags	Managed Care Plan	Current PHI Access	
DOE JANE F - 50 AB12345C >	8/16/1971	123 MAIN ST #5 BROOKLYN, NY 12345	3PP(Y)	HIP (EmblemHealth)	Quality Flag	Update Access

Confirm client match is correct and click client name to view Clinical Summary

Recipient Search: Group

Characteristics as of 11/20/2023

Age Range To Gender

Race

Ethnicity

Region

County

Special Populations

Population

High Need Population

AOT Status

Alerts

Homelessness Alerts

Social Determinants of Health (SDOH)

Past 1 Year

SDOH Conditions (reported in billing)

- Problems related to upbringing
- Problems related to social environment
- Problems related to physical environment
- Problems related to other psychosocial
- Problems related to medical facilities a
- Problems related to housing and econ

SDOH Conditions: Selected

Managed Care Plan & Medicaid

Managed Care

MC Product Line

Medicaid Enrollment Status

Medicaid Restrictions

Children's Waiver Status

HARP Status

HARP HCBS Assessment Status

HARP HCBS Assessment Results

Quality Flag as of 11/01/2023

[Definitions](#)

- 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
- Antipsychotic Three Plus
- Antidepressant Two Plus - SC
- Antidepressant Three Plus
- Psychotropics Three Plus
- Psychotropics Four Plus
- Polypharmacy Summary
- Discontinuation - Antidepressant <12 weeks (MDE)
- Adherence - Mood Stabilizer (Bipolar)
- Adherence - Antipsychotic (Schiz)
- Treatment Engagement - Summary
- No Metabolic Monitoring (Gluc/HbA1c and LDL-C) on Antipsychotic (All)
- No Metabolic Monitoring (Gluc/HbA1c and LDL-C) on Antipsychotic (Child)

Services: Specific Provider as of 11/01/2023

Past 1 Year

Provider

Region

County

Current Access

Service Utilization

Number of Visits

Service Setting:

- Care Coordination
- Inpatient - ER
- Living Support/Residential
- Other
- Outpatient - DD
- Outpatient - MH
- Outpatient - Medical
- Outpatient - Medical Specialtv

Service Detail: Selected

Medication & Diagnosis as of 11/01/2023

Past 1 Year

Services by Any Provider as of 11/01/2023

Past 1 Year

Recipient Search: And / Or Search Logic

- Multiple selections within the same filter box creates an “Or” logic
 - Use the “Ctrl” key on keyboard
 - Recipients in search results have one selection or the other, for example:
 - Depression or Schizophrenia
- Multiple selections from separate filter boxes creates an “And” logic
 - Recipients in search results meet all of the selected criteria, for example:
 - Schizophrenia and Type 1 Diabetes

Recipient Search: Look-back Periods

- Different filter options have different look-back periods in which the data in that filter is updated
- Read the date at the top of the main filter box
- Select a different look-back period from a drop-down box when available, if desired
 - Default for medications, diagnoses, and service settings is past 1 year as of the Recipient Search report date
 - Other options include past 6 months, 9 months, 2 years, 3 years, or specific calendar year

Recipient Search: Max No. Rows to display

- Search results page will provide:
 - Total number of people who matched search criteria
 - The filter selections included in your search
 - Names of all the people who matched your search criteria
 - Ability to export names in search results to PDF or Excel
- The default number of names of people listed in your search results is 50
 - To see more than 50 names in your results page, expand the “Limit results to” drop-down located in Recipient Search screen by “Search” button

Recipient Search: Data w/ Special Protection

- Certain data in PSYCKES has special protection:
 - Substance use, HIV, family planning, genetic testing
- When selecting a filter option from Recipient Search that contains data with special protection, results page will provide:
 - Total number of people who matched search criteria
 - Number of names excluded from your search results because you do not have their consent
 - Number of names included in your search results because you have their consent

Recipient Characteristics

Characteristics as of 11/20/2023

Age Range To Gender ▼

Race ▼

Ethnicity ▼

Region ▼

County ▼

Special Populations

Special Populations

Population

High Need Population

AOT Status

Alerts

Homelessness Alerts

Social Determinants of Health (SDOH)

Social Determinants of Health (SDOH)

Past 1 Year

SDOH Conditions (reported in billing)

- Problems related to upbringing
- Problems related to social environment
- Problems related to physical environment
- Problems related to other psychosocial ci
- Problems related to medical facilities and
- Problems related to life management diffi

SDOH Conditions: Selected

Managed Care Plan and Medicaid

Managed Care Plan & Medicaid

Managed Care	<input type="text"/>	Children's Waiver Status	<input type="text"/>
MC Product Line	<input type="text"/>	HARP Status	<input type="text"/>
Medicaid Enrollment Status	<input type="text"/>	HARP HCBS Assessment Status	<input type="text"/>
Medicaid Restrictions	<input type="text"/>	HARP HCBS Assessment Results	<input type="text"/>

Quality Flag

Quality Flag as of 11/01/2023

 Definitions

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
Antipsychotic Three Plus
Antidepressant Two Plus - SC
Antidepressant Three Plus
Psychotropics Three Plus
Psychotropics Four Plus
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Adherence - Antipsychotic (Schiz)
Treatment Engagement - Summary
No Metabolic Monitoring (Gluc/HbA1c and LDL-C) on Antipsychotic (All)
No Metabolic Monitoring (Gluc/HbA1c and LDL-C) on Antipsychotic (Child)

Medication & Diagnosis

Medication & Diagnosis as of 11/01/2023

Past 1 Year ▼

Prescriber Last Name

Drug Name

Active Drug

Active medication (past 3 months) requiring Prior Authorization

Psychotropic Drug Class*

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

Non-Psychotropic Drug Class*

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

BH Diagnoses

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

Medical Diagnoses

- Cerebral degenerations usually manifest i
- Certain conditions originating in the perin
- Certain infectious and parasitic diseases
- Codes for special purposes


Individual Diagnosis

Given

Primary Only

Services by a Specific Provider (Your Agency/Hospital)

Services: Specific Provider as of 11/01/2023

Past 1 Year 

Provider

Region

County

Current Access

Service Utilization

Number of Visits

Service Setting:

- Care Coordination
- Inpatient - ER
- Living Support/Residential
- Other
- Outpatient - DD
- Outpatient - MH
- Outpatient - Medical
- Outpatient - Medical Specialty

Service Detail: Selected

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Services by Any Provider (Any Agency/Hospital in NYS)

Services by Any Provider as of 11/01/2023

Past 1 Year

Provider

Region

County

Service Utilization

Number of Visits

Service Setting:

Service Detail: Selected

- Housing - Supported Housing Community Services (Source: OMH CAIRS)
- Housing - Supported Single Room occupancy (Source: OMH CAIRS)
- ICF/IDD - Community - Day Svcs
- ICF/IDD - Community - Residential Svcs
- ICF/IDD - Institutional
- ICF/IDD - Other
- Live-in Caregiver - DD
- Nursing Home Services
- Residential Rehab for Youth - SU Specialty
- Residential Treatment, Part 820 - SU Specialty
- Respite - DD
- Teaching Family Home - MH Specialty
- Other
- Outpatient - DD

Bulk Population Management Views in Recipient Search

Recipient Search: Group

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

Recipient Search

Limit results to

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

Search

Reset



Recipient Identifiers

Search in: Full Database Medicaid Mental Health Clinic

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

Characteristics as of 11/20/2023

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

Special Populations

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

Social Determinants of Health (SDOH)

Past 1 Year ▾

SDOH Conditions (reported in billing)	SDOH Conditions: Selected
<ul style="list-style-type: none">Problems related to upbringingProblems related to social environmentProblems related to physical environmentProblems related to other psychosocialProblems related to medical facilities and servicesProblems related to life management difficulties	<input type="text"/>

Recipient Search: Standard View

[← Modify Search](#)

233 Recipients Found

View: Standard ▾

- Standard
- Care Coordination
- High Need/High Risk
- Hospital Utilization
- Managed Care POP
- Outpatient Providers

PDF Excel

[Provider Specific] Provider	MAIN STREET MENTAL HEALTH CLINIC
AND [Provider Specific] Service Utilization	Inpatient - MH (2+ Visits)


Maximum Number of Rows Displayed: 50

Name ▲	Medicaid ID ▾	DOB ▾	Gender ▾	Medicaid Quality Flags ▾	Medicaid Managed Care Plan ▾	Current PHI Access ▾
QUJPQU3ZRQ Sr3BTUU	WVEpNDAu OUq	OCyoMoynO T6m	TQ LQ NDA	2+ ER-BH, 2+ ER-MH, 2+ ER-Medical, 2+ Inpt-BH, 2+ Inpt-MH, 4+ Inpt/ER-BH, 4+ Inpt/ER-MH, 4+ Inpt/ER-Med, Adher-AP, Adher-MS, BH QARR - DOH, HHPlus No HHPlus Service, No Gluc/HbA1c & LDL-C - AP, No LDL-C - AP, POP Cloz Candidate, POP High User, Readmit 30d - BH to BH, Readmit 30d - MH to MH	Affinity Health Plan	Quality Flag
QUncQU7SSQ TazlQQ	UUenNTatN Ue	NSynNCyo MDAp	R6 LQ MT2		Healthfirst PHSP, Inc.	No Access
QUvEUaVB REVBT6	VaUvNTMs NVY	MTAIMpEIM TatM6	TQ LQ ND2	2+ ER-BH, 2+ ER-MH, 2+ ER-Medical, 2+ Inpt-BH, 2+ Inpt-MH, 2+ Inpt-Medical, 4+ Inpt/ER-BH, 4+ Inpt/ER-MH, 4+ Inpt/ER-Med, Adher-AD <12wks, BH QARR - DOH, Cloz Candidate, HHPlus No HHPlus Service, No Outpt Medical, POP High User, Readmit 30d - BH to BH, Readmit 30d - MH to MH, Readmit 30d - Medical to Medical	MetroPlus Health Plan	Quality Flag

Recipient Search: Care Coordination View

◀ Modify Search

233 Recipients Found

View: Standard ▾ 

- Standard
- Care Coordination**
- High Need/High Risk
- Hospital Utilization
- Managed Care POP
- Outpatient Providers



[Provider Specific] Provider MAIN STREET MENTAL HEALTH CLINIC
AND [Provider Specific] Service Utilization Inpatient - MH (2+ Visits)

Maximum Number of Rows Displayed: 50

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

Name ▲	Medicaid ID ▾	DOB ▾	Gender ▾	Current PHI Access ▾	Medicaid Managed Care Plan ▾	HARP Status (H Code) ▾	
QaFLRVI VFbIRUbN	WVApN9IpN Ue	MSynNoynO T6r	TQ LQ MpU	Quality Flag	MetroPlus Health Plan	HARP Enrolled (H1)	
QaFSQVJXQUvESUjB SUvFUm SQ	WFQqMp2o Nb2	OCyoLpEvO TI	R6 LQ M96	Quality Flag	UnitedHealthcare Community Plan		
QaFSQaVSTm TUzOSVFVRQ W6	VaMqNDYtO	MTEIOSynO	R6 LQ M9a	Quality Flag	HIP (EmblemHealth)	Eligible Pending Enrollment (H9)	
QaFSTaVT RanPUa UEFUJabDSUE			R6 LQ Mpl	PSYCKES Consent	Healthfirst PHSP, Inc.	HARP Enrolled (H1)	

CLICK HERE TO SCROLL

Recipient Search: Care Coordination View

← Modify Search

233 Recipients Found

View: Care Coordination ▾  Excel

[Provider Specific] Provider	MAIN STREET MENTAL HEALTH CLINIC
AND [Provider Specific] Service Utilization	Inpatient - MH (2+ Visits)

Maximum Number of Rows Displayed: 50

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

Name ▲	HARP HCBS Assessment Date (most recent) ⌵	Children's Waiver Status (K Code) ⌵	Health Home Name (Enrolled) ⌵	Care Management Name (Enrolled) ⌵
QaFSQaVSTm TUzOSVFVRQ W6				
QaFSTaVT RanPUaVT UEFUUabDSUE	7/15/2022			
QaVOTaVUVA TEbTQQ VA			HUDSON VALLEY CARE COALITION	MONTEFIORE MOUNT VERNON HOSPITAL
QanBTaM RVJORVNU			MEDICAL CENTER	NATIONAL ASSOCIATION ON DRUG ABUSE

CLICK HERE TO SCROLL



Recipient Search: Care Coordination View

[Modify Search](#)
233 Recipients Found

 View: Care Coordination
 Excel

[Provider Specific] Provider MAIN STREET MENTAL HEALTH CLINIC
 AND [Provider Specific] Service Utilization Inpatient - MH (2+ Visits)

Maximum Number of Rows Displayed: 500

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

Name	ACT Provider (Active)	OnTrackNY Early Psychosis Program (Enrolled)	AOT Status	AOT Provider (Active)
TUFMTEzSWQ UVVBTbRBSVJF	Community Access, Inc.			
TUFSUaVSTm RrJJUqjB TQ		OnTrackNY@ Main Street	Active Court Order	Family Service League, Inc.
TUFSVEbORVe TFVDWQ	Visiting Nurse Service of NY Home Care II		Active Court Order	Visiting Nurse Service of NY Home Care II
TUNDTqvORU3IRVa Uq7BREFZQQ R6	NYC-HHC North Central Bronx Hospital		Active Court Order	NYC-HHC North Central Bronx Hospital

Recipient Search: High Need/High Risk View

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

← Modify Search

189 Recipients Found

View: **High Need/High Risk** ▾
Standard
Care Coordination
High Need/High Risk
Hospital Utilization
Managed Care POP
Outpatient Providers



[Provider Specific] Provider MAIN STREET MENTAL HEALTH CLINIC
AND [Provider Specific] Service Utilization Inpatient - MH (2+ Visits)

Maximum Number of Rows Displayed: 500

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

Name ▲	Medicaid ID ◆	DOB ◆	Gender ◆	Current PHI Access ◆	Medicaid Managed Care Plan ◆	OMH Unsuccessful Discharge ◆	Transition Age Youth (TAY-BH) ◆	OPWDD NYST
TUFUVE7Fvrm REFMTEbB	WVUtNT6p Nq6	MoyoOSynO T2q	R6 LQ NDY	Quality Flag	VNSNY Choice Select Health			
TUNMRUFO VEBT&E	UFImMDUo Na2	MoynN8ynO Tat	R6 LQ M9M	Quality Flag	Healthfirst PHSP, Inc.		Yes	
TUbMTEVU R&ECSUEQ RQ	VhF&N&M	QCypLpEvO Q	TQ LQ M9Y	Quality Flag				Yes
TUzOVEFO		SypMSyn O&as	TQ LQ M9Q	Quality Flag			Yes	

CLICK HERE TO SCROLL

Recipient Search: High Need/High Risk View

◀ Modify Search

189 Recipients Found

View: High Need/High Risk ▾



[Provider Specific] Provider MAIN STREET MENTAL HEALTH CLINIC
AND [Provider Specific] Service Utilization Inpatient - MH (2+ Visits)

Maximum Number of Rows Displayed: 500

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

Name ▲	OPWDD NYSTART-Eligible ◊	Health Home Plus-Eligible ◊	AOT		Suicide Risk		
			AOT Status ◊	AOT Expiration Date ◊	Suicide Attempt (Medicaid/NIMRS) Past 1 year	Suicidal Ideations (Medicaid) ◊	Self - Inflicted Harm / Injury(Medicaid) ◊
TUFUVE7FvRM RaFOVEFTSUE RQ		Yes					
TUNDTqvORU3IRVa Uq7BREFZQQ R6		Yes	AOT-Active Court Order	8/4/2022		Yes	
TUBmTEVU RaFCSUFO RQ	Yes	Yes					
TUzOVEFORVe TFVJUm		Yes				Yes	

CLICK HERE TO SCROLL

Recipient Search: High Need/High Risk View

[← Modify Search](#) **189 Recipients Found** View: High Need/High Risk ▾ [Excel](#)

[Provider Specific] Provider MAIN STREET MENTAL HEALTH CLINIC
 AND [Provider Specific] Service Utilization Inpatient - MH (2+ Visits)

Maximum Number of Rows Displayed: 500


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

Name	Suicide Risk				Overdose Risk		PSYCKES Registries	
	ion	Suicide Attempt (Medicaid/NIMRS) Past 1 year	Suicidal Ideations (Medicaid)	Self - Inflicted Harm / Injury(Medicaid)	Self-Inflicted Poisoning (Medicaid)	Overdose - Opioid past 1 year	Overdose Risk - Concurrent Opioid & Benzodiazepine past 1 year	High Risk List Registry
QqzMRUfS UazCRVJU RQ			Yes	Yes				
QqzMTEF0Tm RbJBTai			Yes	Yes				
QqzMTEbOUm Qq7SSVM			Yes					
Qqz0TEbO SazIT6			Yes			Yes		

Recipient Search: Hospital Utilization

[← Modify Search](#)

233 Recipients Found

View: High Need/High Risk ▾ 

- Standard
- Care Coordination
- High Need/High Risk
- Hospital Utilization**
- Managed Care POP
- Outpatient Providers



[Provider Specific] Provider MAIN STREET MENTAL HEALTH CLINIC
 AND [Provider Specific] Service Utilization Inpatient - MH (2+ Visits)

Maximum Number of Rows Displayed: 50

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

Name ▲	Medicaid ID ▾	DOB ▾	Gender ▾	Medicaid Managed Care Plan ▾	Current PHI Access ▾	# ER Services Past Yr			# Inpatient Services Past Yr		
						ALL ▾	Behavioral Health ▾	Medical ▾	ALL ▾	Behavioral Health ▾	Medical ▾
QaFSTaVT RanPUaVT UEFUUabDSUE	WFEsM96u OUq	N8yoMCyn OT6u	R6 LQ Mpl	Healthfirst PHSP, Inc.	PSYCKES Consent				1	1	
QaVHVUq RaFSWabOQQ	UUYtM9aq MEi	MoyrLpEvO TE	R6 LQ M9a	Healthfirst PHSP, Inc.	Quality Flag	2		2	2	1	
QaVOTaVUVA TEbTQQ VA	QU6mM9It NEu	N8ynMSyn OTYs	R6 LQ NTQ		Quality Flag	6		6	10	2	
QazDQVvFRrJB RURVQVJETm	WVamNpar MUe	M8yvLpEvN 9Y	TQ LQ NTQ		Quality Flag	247	223	24	21	17	

Recipient Search: Managed Care POP

115 Recipients Found

View: **Managed Care POP** ▾
Standard
Care Coordination
High Need/High Risk
Hospital Utilization
Managed Care POP
Outpatient Providers



[Provider Specific] Provider MAIN STREET MENTAL HEALTH CLINIC

AND [Provider Specific] Service Utilization Inpatient - MH (2+ Visits)

Review recipients in results carefully before accessing Clinical Summary.

Maximum Number of Rows Displayed: 115

Name	Medicaid ID	DOB	Gender	Quality Flags	Medicaid Managed Care Plan	POP Index	
						Admission	Discharge
QUNFVaVETm UabDSEbF S6	VqQnNpYvN qE	M8ynN8ynO Tap	TQ LQ M9a	2+ Inpt-BH, 2+ Inpt-MH, 4+ Inpt/ER-BH, Adher-AP, Adher-MS, HARP No Assessment for HCBS, HARP No Health Home, HHPlus No HHPlus Service > 12 mos, HHPlus No HHPlus Service > 3 mos, HHPlus Not HH Enrolled, High MH Need, No DM Screen - AP, No Gluc/HbA1c & LDL-C - AP, No Gluc/HbA1c - AP, No LDL-C - AP, No MAT Utilization - OUD, No MH ED F/U 7d (DOH), No MH Inpt F/U 7d (DOH), No OUD	UnitedHealthcare Community Plan	3/2/2021	3/15/2021
QUNPurRB SazOQVRIQUu TQ			TQ LQ M96	2+ ER-BH, 2+ ER-MH, 2+ Inpt-BH, 2+ Inpt-MH, 4+ Inpt/ER-BH, 4+ Inpt/ER-MH, Adher-AP, Adher-AP (DOH), Adher-MS, Cloz Candidate, HHPlus No HHPlus Service > 12 mos, HHPlus No HHPlus Service > 3 mos, HHPlus Not HH Enrolled, High MH Need, No Gluc/HbA1c & LDL-C - AP, No LDL-C - AP, No MH ED F/U 7d (DOH), POP Cloz Candidate, POP High User	Fidelis Care New York		
				2+ Inpt-BH, 2+ Inpt-MH, 4+ Inpt/ER-BH, 4+ Inpt/ER-MH, Adher-AP, Adher-AP (DOH), Adher-AP, Adher-AP (DOH), HHPlus			

**CLICK HERE TO
SCROLL**



Recipient Search: Managed Care POP

[← Modify Search](#)

115 Recipients Found

View: Managed Care POP ▾

- Standard
- Care Coordination
- High Need/High Risk
- Hospital Utilization
- Managed Care POP**
- Outpatient Providers



[Provider Specific] Provider MAIN STREET MENTAL HEALTH CLINIC

AND [Provider Specific] Service Utilization Inpatient - MH (2+ Visits)

Review recipients in results carefully before accessing Clinical Summary.

Maximum Number of Rows Displayed: 115


Name ▲	POP Index		POP Subsequent Inpatient/ER Most Recent		# POP Care Transition Services		
	Admission ▾	Discharge ▾	Admission ▾	Discharge ▾	Visit in Inpatient/ER ▾	Escort Home/Community/Residence ▲	Visit in Home/Community/Residence ▲
QUNFVaVETm UabDSEbF S6	3/2/2021	3/15/2021			1	0	1
QUNPUrRB SazOQVRIQUu TQ							



Recipient Search: Managed Care POP

[← Modify Search](#)

115 Recipients Found

View: Managed Care POP 

- Standard
- Care Coordination
- High Need/High Risk
- Hospital Utilization
- Managed Care POP**
- Outpatient Providers

[Provider Specific] Provider MAIN STREET MENTAL HEALTH CLINIC

AND [Provider Specific] Service Utilization Inpatient - MH (2+ Visits)

Review recipients in results carefully before accessing Clinical Summary.

Maximum Number of Rows Displayed: 115


Name	# POP Care Transition Services			POP Most Recent Care Transition Services		
	Inpatient/ER	Escort Home/Community/Residence	Visit in Home/Community/Residence	Type	Provider	Date
QUNFVaVETm UabDSEbF S6	1	0	1	Visit in inpatient/ER	UnitedHealthcare Community Plan	3/29/2021
QUNPUrRB SazOQVRIQUu TQ						

Recipient Search: Outpatient Providers - PCP Assignment

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

[Modify Search](#)

233 Recipients Found

View: Outpatient Providers 

- Standard
- Care Coordination
- High Need/High Risk
- Hospital Utilization
- Managed Care POP
- Outpatient Providers**



[Provider Specific] Provider MAIN STREET MENTAL HEALTH CLINIC

AND [Provider Specific] Service Utilization Inpatient - MH (2+ Visits)

Maximum Number of Rows Displayed 500

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

Name	Medicaid ID	DOB	Gender	Medicaid Managed Care Plan	Current PHI Access	Primary Care Physician Assignment(Assigned by MC Plan)		
						Name	Most Recent Service Past 1 yr	# Visits with Assigned PCP past 1 yr
QbVSRqVTUm SaFSVabT	VrAtMpUpM qQ	NoyoMoynO T6v	TQ LQ MpE	Amerigroup New York	Quality Flag			
QqFMSUvEQQ SaFNRVM	TaltMDQpN VA	MTIIM9MIM TauNm	TQ LQ Mpl	Healthfirst PHSP, Inc.	Quality Flag	SMITH, JOHN	7/15/2022	2
QqFNRVJPT6 SVNSQVM	VFQnMpAm	N8ynNoynO	TQ LQ M9E	Amerigroup New York	Quality Flag			
QqFNUEJFTEnKU6 SazTRVBI Vm			TQ LQ M92	Healthfirst PHSP, Inc.	Quality Flag	BROWN, JANE	8/11/2022	1

CLICK HERE TO SCROLL



Recipient Search: Outpatient Providers - Mental Health Outpatient Provider

[Modify Search](#)

233 Recipients Found

View: Outpatient Providers



[Provider Specific] Provider	MAIN STREET MENTAL HEALTH CLINIC
AND [Provider Specific] Service Utilization	Inpatient - MH (2+ Visits)

Maximum Number of Rows Displayed: 50

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


Name	Mental Health Outpatient Provider			Medical Outpatient Provider			Most Recent Provider Facility Name
	Most Recent Provider Facility Name	Most Recent 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	
SazOQVRIQUu TQ							
QUNPurRB SbVTVEbO Um	POSTGRADUATE CENTER FOR MENTAL HEALTH, INC.	11/29/2022	1	MOUNT SINAI HOSPITAL	2/4/2023	1	
QU3PurRP QUvHRUm	BRONXCARE HEALTH SYSTEM	12/1/2022	6	BRONX LEBANON HOSPITAL CENTER	12/20/2022	8	
QUmMRUu UazCRVJU	WILLIAM F. RYAN COMMUNITY HEALTH CENTER	11/25/2022	1		7/28/2022	2	
QUmWQVJFW6 TUFSSUFI	MONTEFIORE MEDICAL CENTER	2/27/2023	9				

CLICK HERE TO SCROLL

Recipient Search: Outpatient Providers - Medical Outpatient

◀ Modify Search

233 Recipients Found

View: Outpatient Providers ▾  Excel

[Provider Specific] Provider	MAIN STREET MENTAL HEALTH CLINIC
AND [Provider Specific] Service Utilization	Inpatient - MH (2+ Visits)

Maximum Number of Rows Displayed: 500

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

Name	Mental Health Outpatient Provider		Medical Outpatient Provider			CORE or Adult HCBS	
	Most Recent 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	Most Recent Provider Facility Name	Most Recent Service Type Past 1 yr
Saz0QVRIQUu TQ							
QUNPurRB SbVTVEb0 Um	9/2022	1	MOUNT SINAI HOSPITAL	2/4/2023	1		
QU3PurRP QUvHRUm	12/2022	6	BRONX LEBANON HOSPITAL CENTER	12/20/2022	8		
QUnMRUu UazCRVJU	5/2022	1	HUDSON RIVER HEALTHCARE INC	7/28/2022	2		

CLICK HERE TO SCROLL



Recipient Search: Outpatient Providers – CORE or Adult HCBS Provider

[← Modify Search](#)

233 Recipients Found

View: Outpatient Providers ▾



[\[Provider Specific\] Provider](#) MAIN STREET MENTAL HEALTH CLINIC
 AND [\[Provider Specific\] Service Utilization](#) Inpatient - MH (2+ Visits)

Maximum Number of Rows Displayed: 500

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

Name	Medical Outpatient Provider			CORE or Adult HCBS Service Provider			
	Most Recent Provider Facility Name	Most Recent Service Past 1 yr	# Services this Provider Past 1 yr	Most Recent Provider Facility Name	Most Recent Service Type Past 1 yr	Most Recent Service Past 1 yr	# Services this Provider Past 1 yr
UEFMTUVS UazCRVJUTA	COLN MEDICAL/MENTAL TH	4/25/2023	2				
UEFSTaVT TabDSEE	ONTEFIORE MEDICAL CTR AI	12/8/2022	2	HAND IN HAND FAMILY SERVICES LTD	Childrens HCBS - All, Childrens HCBS - Community Self-Advocacy Training and Support	3/5/2023	4
UEVBUBRSRUU UaFZTUzORA SA	IDSON RIVER ALTHCARE INC	5/4/2023	3				

Recipient Search: Example Searches

Identify recipients based on AOT status

1. Login to PSYCKES and go to “Recipient Search”
2. Select from AOT Status filter:
 - Active Court Order
 - Expired < 6 months
 - Expired < 12 months
 - Active or expired within the last 3 years
3. Consider expanding “Maximum number of rows to be displayed” in order to see more than 50 names in results page (if needed)
4. Click Search



Recipient Search

Limit results to

1. Click "Recipient Search" from top menu options

Recipient Identifiers

Search in: Full Database MAIN STREET MENTAL HEALTH CLINIC

Medicaid ID

First Name

Last Name

DOB

Characteristics as of 11/20/2023

Age Range To Gender

Race

Ethnicity

Region

County

Special Populations

Population

High Need Population

AOT Status

Alerts

Homelessness Alerts

Social Determinants of Health (SDOH)

Past 1 Year ▾

SDOH Conditions (reported in billing)

- Problems related to upbringing
- Problem...
- Proble...
- Proble...
- Proble...

SDOH Conditions: Selected

2. Select from AOT Status filter

2. Select from AOT Status filter (detail)

Special Populations

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

AOT-Active Court Order

AOT-Expired < 6 months

AOT-Expired < 12 months

AOT Active or expired within the last 3 years

AOT Active or expired within the last 5 years

Medication & Diagnosis as of 11/01/2023

Past 1 Year

Prescriber Last Name

Drug Name Active Drug

Active medication (past 3 months) requiring Prior Authorization

Psychotropic Drug Class*

ADHD Med
Antidepressant
Antipsychotic
Antipsychotic - Long Acting Injectab

Non-Psychotropic Drug Class*

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

BH Diagnoses

Any BH Diagnosis
Any MH Diagnosis
Acute Stress Disorder
Anxiety Disorders

Medical Diagnoses

Cerebral degenerations usually manifest
Certain conditions originating in the peri
Certain infectious and parasitic diseases
Codes for special purposes

Individual Diagnosis

Given Primary Only

Services by Any Provider as of 11/01/2023

Past 1 Year

Provider

Region County

Service Utilization Number of Visits

Service Setting:

Service Detail: Selected

3. Consider expanding number of recipient names to be displayed

Nursing Home Services
Residential Rehab for Youth -
Residential Treatment, Part 8
Respite - DD
Teaching Family Home - MH:
Other

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

Limit results to

50

Search

Reset

4. Click "Search"

- 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.

◀ Modify Search

103 Recipients Found

View: Standard ▾

PDF Excel

Search results can be exported to PDF or Excel.

AOT Status

AOT-Active Court Order

AND [Provider Specific] Provider

MAIN STREET MENTAL HEALTH CLINIC

Number of Rows Displayed: 50

Name ▲	Medicaid ID	DOB	Gender	Medicaid Quality Flags	Medicaid Managed Care Plan	Current PHI Access
QUJTRUvDRQ VaFVRFJFQm VQ	UqipN9Mm OEE	MTAIMT2IM TasOA	TQ LQ NTI	2+ ER-Medical, HHPlus Not HH Enrolled, No Outpt Medical	Fidelis Care New York	Quality Flag
QURBTVM TUVMVabO	RUQtO			2+ ER-BH, 2+ ER-MH, 2+ ER-Medical, 2+ Inpt-BH, 2+ Inpt-MH, 2+ Inpt-Medical, 4+ Inpt/ER-BH, 4+ Inpt/ER-MH, 4+ Inpt/ER-Med, BH QARR - DOH, Cloz Candidate, HARP No Assessment HARP No Health Home, HHPlus Not HH Enrolled, No LDL-C - AP, No LDL-C - AP, No Outpt Medical, POP High User, Readmit 30d - BH to BH, Readmit 30d - Medical to All Cause	Affinity Health Plan	Quality Flag
QVZJTEVT TUbDSEFFTA	WV2s MFQ			ical, 4+ Inpt/ER-Med, HHPlus No HHPlus Service, Not HH Enrolled, No Outpt Medical		Quality Flag
QVZJTa3FU6 TaFUSEFOSUVM	VF2rM96tN b2	NCyoNSynO T2m	TQ LQ NTA	2+ ER-BH, 2+ ER-MH, 2+ Inpt-BH, 2+ Inpt-MH, 4+ Inpt/ER-BH, 4+ Inpt/ER-MH, BH QARR - DOH, HARP No Health Home, HHPlus No HHPlus Service, HHPlus Not HH Enrolled, No Outpt Medical, POP Cloz Candidate, POP High User	Healthfirst PHSP, Inc.	Quality Flag
QVfDTqvB SazOQVRIQUu	WEMtOTUq MaQ	NoynOCynO T6q	TQ LQ MpY	BH QARR - DOH, HARP No Health Home, HHPlus No HHPlus Service, HHPlus Not HH Enrolled, No Outpt Medical	UnitedHealthcare Community Plan	Quality Flag
QanBSqU VaVDVVM S6	UUYmNplo NUE	MTIIMTMIM TauMQ	TQ LQ Mp6	2+ Inpt-BH, 2+ Inpt-MH, BH QARR - DOH, HHPlus No HHPlus Service, HHPlus Not HH Enrolled, No Outpt Medical		Quality Flag

Click on a recipient name to review Clinical Summary

Identify recipients enrolled in a specific Managed Care Plan

1. Go to “Recipient Search” screen
2. Select from Managed Care (MC) filter:
 - Click on name of MC Plan
3. Choose from additional filter options in Recipient Search screen, if desired
4. Consider expanding “Maximum number of rows to be displayed” if needed
5. Click Search

Recipient Search

Limit results to 50

Recipient Identifiers

Search in: Full Database MAIN STREET MENTAL HEALTH CLINIC

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

Characteristics

<input type="text" value="1/20/2023"/>	Gender <input type="text"/>	Region <input type="text"/>
<input type="text"/>	<input type="text"/>	County <input type="text"/>

1. Click "Recipient Search" from top menu options

Special

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

Social Determinants of Health (SDOH)

Past 1 Year ▾

<p>SDOH Conditions (reported in billing)</p> <ul style="list-style-type: none"> Problems related to employment and u Problems related to education and liter Problems related to certain psychosoci Persons encountering health services f Personal risk factors, not elsewhere cla Other problems related to primary supp 	<p>SDOH Conditions: Selected</p> <div style="border: 1px solid gray; height: 100px;"></div>
--	---

Managed Care Plan & Medicaid

Managed Care <input type="text"/>	<input type="text"/>
MC Product Line <input type="text"/>	<input type="text"/>
Medicaid Enrollment Status <input type="text"/>	<input type="text"/>
Medicaid Restrictions <input type="text"/>	<input type="text"/>

2. Select from Managed Care (MC) filter

2. Select from Managed Care (MC) filter (detail)

Managed Care Plan & Medicaid

Managed Care

MC Product Line

Medicaid Enrollment Status

Medicaid Restrictions

Quality Flag as of 11/01/2023

HARP Enrolled - Not Health Home	Any Managed Care
HARP-Enrolled - No Assessment	Aetna
Eligible for Health Home Plus - No	Affinity Health Plan
Eligible for Health Home Plus - No	Agewell New York
Eligible for Health Home Plus - No	Amida Care
HH Enrolled, Eligible for Health H	Archcare
High Mental Health Need	CDPHP
Antipsychotic Polypharmacy (2+	CenterLight Healthcare
Antipsychotic Two Plus	Centers Plan for Healthy Living
Antipsychotic Three Plus	ElderPlan
Antidepressant Two Plus - SC	ElderServe Health, Inc dba RiverSpring Health Plans
Antidepressant Three Plus	Excelsus BlueCross BlueShield
Psychotropics Three Plus	Extended MLTC
Psychotropics Four Plus	Fidelis Care New York
Polypharmacy Summary	HIP (EmblemHealth)
Discontinuation - Antidepressant <12 weeks (MDE)	Hamaspik Choice
Adherence - Mood Stabilizer (Bipolar)	Health Advantage Plan
Adherence - Antipsychotic (Schiz)	HealthPlus
Treatment Engagement - Summary	Healthfirst PHSP, Inc.
No Metabolic Monitoring (Gluc/HbA1c and LDL-C) on Antipsychotic (All)	
No Metabolic Monitoring (Gluc/HbA1c and LDL-C) on Antipsychotic (Child)	

- 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
- Antipsychotic Three Plus
- Antidepressant Two Plus - SC
- Antidepressant Three Plus
- Psychotropics Three Plus
- Psychotropics Four Plus
- Polypharmacy Summary
- Discontinuation - Antidepressant <12 weeks (MDE)
- Adherence - Mood Stabilizer (Bipolar)
- Adherence - Antipsychotic (Schiz)
- Treatment Engagement - Summary
- No Metabolic Monitoring (Gluc/HbA1c and LDL-C) on Antipsychotic (All)
- No Metabolic Monitoring (Gluc/HbA1c and LDL-C) on Antipsychotic (Child)

Provider: MAIN STREET MENTAL HEALTH CLINIC

Region: [Dropdown] County: [Dropdown]

Current Access: [Dropdown]

Service Utilization: [Dropdown] Number of Visits: [Dropdown]

Service Setting:

- Care Coordination
- Inpatient - ER
- Living Support/Residential
- Other
- Outpatient - DD
- Outpatient - MH
- Outpatient - Medical
- Outpatient - Medical Specialty

Service Detail: Selected

Prescriber Last Name: [Text Box]

Drug Name: [Text Box]

Active medication (past 3 months) requiring Prior Authorization

Psychotropic Drug Class* [Dropdown]

Non-Psychotropic Drug Class [Dropdown]

BH Diagnoses [List-Group]

Medical Diagnoses [List-Group]

Individual Diagnosis: [Text Box]

Given: [Dropdown] Primary Only

Provider: [Text Box]

County: [Dropdown]

Number of Visits: [Dropdown]

Service Detail: Selected

- Foster Care
- Inpatient - ER
- Living Support/Residential
- Other

3. Choose from additional filter options, if desired

4. Consider expanding number of recipient names to be displayed

5. Click "Search"

138 Recipients Found

View: Standard

PDF Excel

Search results can be exported to PDF or Excel.

Managed Care	MetroPlus Health Plan
AND Quality Flag	HARP Enrolled - Not Health Home Enrolled - (updated weekly)
AND [Provider Specific] Provider	MAIN STREET MENTAL HEALTH CLINIC

Maximum Number of Rows Displayed: 50

Name	Medicaid ID	DOB	Gender	Medicaid Quality Flags	Medicaid Managed Care Plan	Current PHI Access
QUFSTqu RanFVENIRVI	WbEnNTUv NqY	OCynOCynO TYm	TQ LQ N9A	2AP, BH QARR - DOH, HARP No Assessment for HCBS, HARP No Health Home, No Gluc/HbA1c & LDL-C - AP, No Gluc/HbA1c - AP, No HbA1c & LDL-C (DM & Schiz), No HbA1c-DM, No LDL-C - AP, No SUD Tx Engage	MetroPlus Health Plan	PSYCKES Consent
QUJCTrRU REVMQVp S6	M			2+ ER-BH, 2+ ER-MH, 2+ ER-Medical, 2+ Inpt-BH, 2+ Inpt-MH, 4+ H, 4+ Inpt/ER-MH, 4+ Inpt/ER-Med, BH QARR - DOH, Cloz e, HARP No Assessment for HCBS, HARP No Health Home, HARP No HHPlus No HHPlus Service, HHPlus Not HH Enrolled, POP High User, Readmit 30d - BH to BH, Readmit to MH	MetroPlus Health Plan	Quality Flag
QUJEVUnSQU7NQUn TaFJTQ	VVQnOTMr MV2	MTEIM9YIM TatNm	TQ LQ NDI	2AP, BH QARR - DOH, HARP No Health Home, No DM Screen - AP, No Gluc/HbA1c & LDL-C - AP, No Gluc/HbA1c - AP No LDL-C - AP	MetroPlus Health Plan	Quality Flag
QUJSRVU QURJUqnFWURB	WEQsM9lu Mr6	OSynM8ynO TYs	R6 LQ NTQ	2+ ER-Medical, BH QARR - DOH, HARP No Assessment for HCBS, HARP No Health Home, No DM Screen - AP, No Gluc/HbA1c & LDL-C - AP, No Gluc/HbA1c - AP, No LDL-C - AP	MetroPlus Health Plan	Quality Flag

Click on a recipient name to review Clinical Summary

Identify recipients based on HARP status

1. Go to “Recipient Search” screen
2. Select from HARP Status filter, for example:
 - Eligible/Enrolled All (H1-H9)
3. Consider expanding “Maximum number of rows to be displayed” if needed
4. Click Search

Recipient Search

Limit results to 50

1. Click "Recipient Search" from top menu options

Recipient Identifier

Me SN
AB00000A

Search in: Full Database MAIN STREET MENTAL HEALTH CLINIC

First Name Last Name DOB
MM/DD/YYYY

Characteristics as of 11/20/2023

Age Range To Gender
Race
Ethnicity

Region
County

Special Populations

Population
High Need Population
AOT Status
Alerts
Homelessness Alerts

Social Determinants of Health (SDOH)

Past 1 Year ▾

SDOH Conditions (reported in billing)
-Problems related to employment and u
-Problems related to education and liter
-Problems related to certain psychosoci
-Persons encountering health services f
-Personal risk factors, not elsewhere cla
-Other problems related to primary supp

SDOH Conditions: Selected

Managed Care Plan & Medicaid

Managed Care
MC Product Line
Medicaid Enrollment Status
Medicaid Restrictions

Children's Waiver Status
HARP Status
HARP HCBS Assessment Status
HARP HCBS Assessment Results

2. Select from HARP Status filter

2. Select from HARP Status filter (detail)

Managed Care Plan & Medicaid

Managed Care

MC Product Line

Medicaid Enrollment Status

Medicaid Restrictions

Children's Waiver Status

HARP Status

- Eligible/Enrolled All (H1-H9)
- HARP Enrolled (H1)
- HARP Enrolled Tier 1 HCBS (H1 with H2)
- HARP Enrolled Tier 2 HCBS (H1 with H3)
- SNP HARP Eligible (H4)
- SNP HARP Eligible Tier 1 HCBS (H4 with H5)
- SNP HARP Eligible Tier 2 HCBS (H4 with H6)
- Eligible Pending Enrollment (H9)
- Not HARP Eligible (Current Medicaid Enrollees excluding H1-H9)

Quality Flag as of 11/01/2023

[Definitions](#)

Service

- 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

Medication & Diagnosis as of 11/01/2023

Past 1 Year

Prescriber Last Name

Drug Name Active Drug

Active medication (past 3 months) requiring Prior Authorization

Psychotropic Drug Class*

ADHD Med
Antidepressant
Antipsychotic
Antipsychotic - Long Acting Injectab

Non-Psychotropic Drug Class*

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

BH Diagnoses

Any BH Diagnosis
Any MH Diagnosis
Acute Stress Disorder
Anxiety Disorders

Medical Diagnoses

Cerebral degenerations usually manifest
Certain conditions originating in the peri
Certain infectious and parasitic diseases
Codes for special purposes

Individual Diagnosis

Given Primary Only

Services by Any Provider as of 11/01/2023

Past 1 Year

Provider

Region County

Service Utilization Number of Visits

Service Setting:

Service Detail: Selected

Housing - Supported Housing
Housing - Supported Single R
ICF/IDD - Community - Day Sv
ICF/IDD - Community - Reside
ICF/IDD - Institutional

3. Consider expanding number of recipient names to be displayed

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

Limit results to

50

Search

Reset

4. Click "Search"

- 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.

612 Recipients Found

View: Standard ▾

PDF Excel

Search results can be exported to PDF or Excel.

HARP Status	Eligible/Enrolled All (H1-H9)
AND [Provider Specific] Provider	MAIN STREET MENTAL HEALTH CLINIC

Maximum Number of Rows Displayed: 50

Name ▲	Medicaid ID ↕	DOB ↕	Gender ↕	Medicaid Quality Flags ↕	Medicaid Managed Care Plan ↕	Current PHI Access ↕
QUFSTqu RanFVENIRVI	WbEnNTUv NqY	OCynOCynO TYm	TQ LQ N9A	2AP, BH QARR - DOH, HARP No Assessment for HCBS, HARP No Health Home, No Gluc/HbA1c & LDL-C - AP No Gluc/HbA1c - AP, No HbA1c & LDL-C (DM & Schiz), No HbA1c-DM, No LDL-C - AP, No SUD Tx Engage	MetroPlus Health Plan	PSYCKES Consent
QUJBTEnF TFbESUE	WbluNTInM VM	NSytLpEvN 9Y	R6 LQ NTQ	HARP No Assessment for HCBS, HARP No Health Home, No Outpt Medical	Affinity Health Plan	Quality Flag
QUJCQUJJUm RVZFTFbO V6	WVUqN9As Mqi	MoyoLpEvN T6	R6 LQ Nqi	4PP(A), HARP No Assessment for HCBS, HARP No Health Home	Affinity Health Plan	Quality Flag
QUJCQUJJUm SEFOTaFI	WVUqN9As Mqi	MoyoLpEvN T6	R6 LQ Nqi	2+ Inpt-BH, 4+ Inpt/ER-BH, BH QARR - DOH, HARP No Assessment for HCBS, HARP No Health Home, No Outpt Medical	Healthfirst PHSP, Inc.	Quality Flag
QUJCQVNUQUvURQ REFOSUVM Um	VEYmN Mae	pM	ND2	2+ ER-MH, 2+ ER-Medical, 2+ Inpt-BH, 2+ Inpt-Medical, 2+ Inpt-ER-MH, 4+ Inpt/ER-MH, 4+ Inpt/ER-Med, Adher-MS, HARP No Assessment for HCBS, HARP No Health Home, HHPlus No HHPlus Service, HHPlus Not HH Enrolled, No MAT Utilization - OUD, No SUD ER f/u 7d, POP High User, Readmit 30d - BH to BH, Readmit 30d - Medical to Medical	Affinity Health Plan	PSYCKES Consent
QUJCQVRF UqVMRUvB TQ	REEvMTAnO VU	NCyuLpEvO Ta	R6 LQ M9E	2+ ER-BH, 2+ ER-MH, 2+ Inpt-BH, 2+ Inpt-MH, 4+ Inpt/ER-BH, 4+ Inpt/ER-MH, HARP No Assessment for HCBS, No Gluc/HbA1c & LDL-C - AP, No LDL-C - AP, POP High User	Healthfirst PHSP, Inc.	PSYCKES Consent

Click on a recipient name to review Clinical Summary

Identify recipients with any Social Determinants of Health (SDOH) services

1. Go to “Recipient Search” screen
2. Locate the “SDOH Conditions” filter box in the “Social Determinants of Health (SDOH)” section
3. Expand the “Problems related to housing and economic circumstances” condition by clicking the + sign
4. Select multiple filters at a time
5. Consider expanding “Maximum number of rows to be displayed” if needed
6. Click Search

Recipient Search

Limit results to 50 Search Reset

Recipient Identifiers

Search in: Full Database MAIN STREET MENTAL HEALTH CLINIC

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

Characteristics as of 11/20/2023

Age Range	Region
Race	County
Ethnicity	

1. Locate the "SDOH Conditions" box in "Social Determinants of Health (SDOH)" section

Special Populations

Population	
High Need Population	
AOT Status	
Alerts	
Homelessness Alerts	

Social Determinants of Health (SDOH) Past 1 Year

<p>SDOH Conditions (reported in billing)</p> <ul style="list-style-type: none"> <input type="checkbox"/> Problems related to upbringing <input type="checkbox"/> Problems related to social environment <input type="checkbox"/> Problems related to physical environment <input type="checkbox"/> Problems related to other psychosocial <input type="checkbox"/> Problems related to medical facilities a <input type="checkbox"/> Problems related to housing and econo 	<p>SDOH Conditions: Selected</p> <div style="border: 1px solid gray; height: 100px;"></div>
--	---

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 11/01/2023

Definitions

- 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

Services: Specific Provider as of 11/01/2023

Past 1 Year

Provider	MONTEFIORE MEDICAL CENTER
Region	
County	

2. Expand the “Problems related to housing and economic circumstances” filter

2. Expand the “Problems related to housing and economic circumstances” by clicking on + sign

Social Determinants of Health (SDOH)

Past 1 Year ▼

SDOH Conditions (reported in billing)

SDOH Conditions: Selected

- Problems related to life management difficulty
- Problems related to housing and economic circumstances
 - Problems related to living in residential institution
 - Homelessness
 - Housing instability, housed
 - Housing instability, housed, with risk of homelessness
 - Inadequate housing

3. Select Multiple filters, then click search

3. Consider expanding number of recipient names to be displayed

4. Click Search

Limit results to

Last Name DOB

Region

County

Social Determinants of Health (SDOH)

5. Select Multiple filters from "SDOH Conditions" filter box

SDOH Conditions (reported in billing)

- Problems related to housing and economic stability
 - Problems related to living in residential structures
 - Homelessness
 - Housing instability, housed
 - Housing instability, housed, with risk of homelessness
 - Inadequate housing

SDOH Conditions: Selected

- Homelessness
- Inadequate housing
- Extreme poverty

Modify Search

294 Recipients Found

View: Standard

PDF Excel

Search results can be exported to PDF or Excel.

[Provider Specific] Provider MAIN STREET MENTAL HEALTH CLINIC
AND SDOH Condition (reported in billing) Homelessness OR Inadequate housing OR Extreme poverty

Maximum Number of Rows Displayed: 50

Name	Medicaid ID	DOB	Gender	Medicaid Quality Flags	Medicaid Managed Care Plan	Current PHI Access
QUNPUB TUFSSUE	VrYqMDMv OFa	MoynN8ynO Tan	R6 LQ M9a	2+ ER-Medical, BH QARR - DOH, No DM Screen - AP, No Gluc/HbA1c & LDL-C - AP, No Gluc/HbA1c - AP, No LDL-C - AP	MetroPlus Health Plan	Quality Flag
QURBTVM TUVMVabO	RUQtOTMq OFE	NSyoLpEvN pY	TQ LQ NDQ	2+ ER-BH, 2+ ER-MH, 2+ ER-Medical, 2+ Inpt-BH, 2+ Inpt-MH, 2+ Inpt-Medical, 4+ Inpt/ER-BH, 4+ Inpt/ER-MH, 4+ Inpt/ER-Med, Adher-AP, BH QARR - DOH, Cloz Candidate, HARP No Assessment for HCBS, HARP No Health Home, HHPlus Not HH Enrolled, No Gluc/HbA1c & LDL-C - AP, No LDL-C - AP, No Outpt Medical, POP Cloz Candidate, POP High User, Readmit 30d - BH to BH, Readmit 30d - MH to MH, Readmit 30d - Medical to All Cause	Affinity Health Plan	Quality Flag
QURPTEzS RUnPRq7PUqE	Sr			2+ ER-BH, 2+ ER-MH, 2+ ER-Medical, 2+ Inpt-BH, 2+ Inpt-MH, 2+ Inpt-Medical, 4+ Inpt/ER-BH, 4+ Inpt/ER-MH, 4+ Inpt/ER-Med, AP, Adher-MS, BH QARR - DOH, HHPlus No HHPlus Service, Hosp-All, PrevHosp-DM, Readmit 30d - BH to BH, Readmit 30d - All Cause to Medical		Quality Flag
QUnFWEbT Sa7FUbjZ Um	W			BH QARR - DOH, HARP No Health Home, No Gluc/HbA1c & LDL-C - AP, No Gluc/HbA1c - AP, No LDL-C - AP, No Outpt Medical	Affinity Health Plan	Quality Flag
QUnJSrBBUaFI QU7NRUQ	WFEuNDAn MEI	MoynOSynO Tar	TQ LQ M9U	2+ ER-Medical, HARP No Assessment for HCBS, HARP No Health Home	Fidelis Care New York	Quality Flag
QUvERVJTTqu REVOSVNF	TbEnM9apN Ue	MTIIM9UIM TavMA	R6 LQ M9a	2+ ER-BH, 2+ ER-Medical, 4+ Inpt/ER-BH, HARP No Assessment for HCBS, HARP No Health Home	Healthfirst PHSP, Inc.	Quality Flag

Click on a recipient name to review Clinical Summary

Identify recipients with any Health Home or Care Management Enrollment or Outreach

1. Go to “Recipient Search” screen
2. Locate the “Service Setting” filter box in the “Services by Any Provider” section
3. Expand the “Care Coordination” service setting by clicking the + sign
4. Click on “Health Home” or “Care Management” “Enrolled” or “Outreach”
5. Consider expanding “Maximum number of rows to be displayed” if needed
6. Click Search

- 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
- Antipsychotic Three Plus
- Antidepressant Two Plus - SC
- Antidepressant Three Plus
- Psychotropics Three Plus
- Psychotropics Four Plus
- Polypharmacy Summary
- Discontinuation - Antidepressant <12 weeks (MDE)
- Adherence - Mood Stabilizer (Bipolar)
- Adherence - Antipsychotic (Schiz)
- Treatment Engagement - Summary
- No Metabolic Monitoring (Gluc/HbA1c and LDL)
- No Metabolic Monitoring (Gluc/HbA1c and LDL)

Provider: MAIN STREET MENTAL HEALTH CLINIC

Region: [Dropdown] County: [Dropdown]

Current Access: [Dropdown]

Service Utilization: [Dropdown] Number of Visits: [Dropdown]

Service Setting: [List Box]

Service Detail: Selected [Text Area]

1. Locate the Service Setting filter box in "Any Provider" section

Medication & Diagnosis as of 11/01/2023

Prescriber Last Name: [Text Box]

Drug Name: [Text Box] Active

Active medication (past 3 months) requiring Prior Authorization

Psychotropic Drug Class* [Dropdown]

Non-Psychotropic Drug Class* [Dropdown]

BH Diagnoses [List Box]

Medical Diagnoses [List Box]

Individual Diagnosis: [Text Box]

Given: [Dropdown] Primary Only

Services by Any Provider as of 11/01/2023

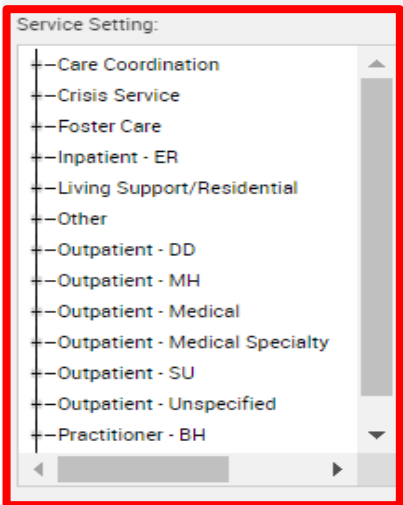
Provider: [Text Box]

Region: [Dropdown] County: [Dropdown]

Service Utilization: [Dropdown] Number of Visits: [Dropdown]

Service Setting: [List Box]

Service Detail: Selected [Text Area]



2. Expand the Care Coordination Service Setting

2. Expand the Care Coordination service setting by clicking on + sign

Service Setting:

Service Detail: Selected

- + Care Coordination
 - ACT - MH Specialty
 - Care Coordination Organization (DD Health Home)
 - Care Management - Enrolled (Source: DOH)
 - Care Management - Enrolled/Outreach (Source: DOH)
 - Care Management - Outreach (Source: DOH)
 - Case Management - ALL
 - Case Management - DOH
 - Case Management - OMH
 - Child Waiver Services - OMH
 - Health Home - Enrolled (Source: DOH)
 - Health Home - Enrolled/Outreach (Source: DOH)

3. Select Care Management Enrolled or Outreach

4. Or select Health Home Enrolled or Outreach

Services by Any Provider as of 11/01/2023

Past 1 Year

Provider

Region

County

Service Utilization

Number of Visits

Service Setting:

- Care Coordination
 - ACT - MH Specialty
 - Care Coordination Organization (
 - Care Management - Enrolled (So
 - Care Management - Enrolled/Out
 - Care Management - Outreach (S
 - Case Management - All
 - Case Management
 - Case Management
 - Case Management
 - Child Waiver Service
 - Health Home - Enrol
 - Health Home - Enrolled, Outreach

Service Detail: Selected

- Care Coordination
 - Health Home - Outreach (Source: DOH MAPP)

5. Consider expanding number of recipient names to be displayed

6. Click "Search"

Limit results to

50

Search

Reset

Modify Search

14,867 Recipients Found

View: Standard

PDF Excel

Search results can be exported to PDF or Excel.

[Provider Specific] Provider: MAIN STREET MENTAL HEALTH CLINIC
 AND [Any Provider] Service Setting: Health Home - Enrolled/Outreach (Source: DOH)

Maximum Number of Rows Displayed: 50

Name	Medicaid ID	DOB	Gender	Medicaid Quality Flags	Medicaid Managed Care Plan	Current PHI Access
QUJCQVRF UqVMRUvB TQ	REEvMTAnO VU	NCyuLpEvO Ta	R6 LQ M9E	2+ ER-BH, 2+ ER-MH, 2+ Inpt-BH, 2+ Inpt-MH, 4+ Inpt/ER-BH, 4+ Inpt/ER-MH, HARP No Assessment for HCBS, No Gluc/HbA1c & LDL-C - AP, No LDL-C - AP, POP High User	Healthfirst PHSP, Inc.	PSYCKES Consent
QUJCQVRJRUnMTm VabOQqVOVA	WFQrODUs NEQ	OCytLpEvN Ta	TQ LQ N9E		Fidelis Care New York	No Access
QUJCRQ TEBTQQ S6	UFApM9Im NVU	MTIINoynOT	R6 LQ	HARP No Assessment for HCBS	MetroPlus Health Plan	Quality Flag
QUJETm SaFMQUm RA	WlqM...			+ ER-MH, HARP No Assessment for HCBS	MetroPlus Health Plan	Quality Flag
QUJETrVMQVbF TUFTUqFPVURPVQ	UrlqMC UU			cal, 2+ Inpt-Medical, 4+ Inpt/ER-Med, Readmit 30d - Medical	Healthfirst PHSP, Inc.	Quality Flag
QUJEVUnSQU7JTQ QU7NQURV	WUMtM9ap NEI	NoyqLpEvO DE	TQ LQ Mpa	BH QARR - DOH, No Gluc/HbA1c & LDL-C - AP, No Gluc/HbA1c - AP, No LDL-C - AP	Healthfirst PHSP, Inc.	Quality Flag
QUJEVVJSQUzVR6 VEFQURBU6 TQ	UalsN9ErNF 2	NSypMCyn OTYn	TQ LQ NTa	2+ Inpt-Medical, 4+ Inpt/ER-Med, HHPlus No HHPlus Service, Readmit 30d - Medical to Medical		Quality Flag

Click on a recipient name to review Clinical Summary

Identify recipients taking psychotropic or non-psychotropic medication

From “Recipient Search” screen

1. Locate “Medication & Diagnosis” section
2. Type specific “Drug Name” in text box or select from “Psychotropic Drug Class” or “Non-Psychotropic Drug Class”
3. Consider expanding “Maximum number of rows to be displayed” if needed
4. Click Search

- 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
- Antipsychotic Three Plus
- Antidepressant Two Plus - SC
- Antidepressant Three Plus
- Psychotropics Three Plus
- Psychotropics Four Plus
- Polypharmacy Summary
- Discontinuation - Antidepressant <12
- Adherence - Mood Stabilizer (Bipolar)
- Adherence - Antipsychotic (Schiz)
- Treatment Engagement - Summary
- No Metabolic Monitoring (Gluc/HbA1c and LDL-C) - Antipsychotic (All)
- No Metabolic Monitoring (Gluc/HbA1c and LDL-C) - Antipsychotic (Child)

1. Locate "Medication & Diagnosis" section

Provider: MAIN STREET MENTAL HEALTH CLINIC

Region: [dropdown] County: [dropdown]

Current Access: [dropdown]

Service Utilization: [dropdown] Number of Visits: [dropdown]

Service Setting: [dropdown list: Care Coordination, Inpatient - ER, Living Support/Residential, Other, Outpatient - DD, Outpatient - MH, Outpatient - Medical, Outpatient - Medical Specialty]

Service Detail: Selected [dropdown]

Medication & Diagnosis as of 11/01/2023

Past 1 Year

11/2023

Past 1 Year

Prescriber Last Name: [input]

Drug Name: [input] Active

Active medication (past 3 months) requiring Prior Authorization

2. Select from a "Drug Class" filter box

Psychotropic Drug Class* [dropdown: ADHD Med, Antidepressant, Antipsychotic, Antipsychotic - Long Acting Injectab]

Non-Psychotropic Drug Class* [dropdown: Analgesics and Anesthetics, Anti-Infective Agents, Anti-Obesity Agents, Antidiabetic]

BH Diagnoses [dropdown: Any BH Diagnosis, Any MH Diagnosis, Acute Stress Disorder, Anxiety Disorders]

Medical Diagnoses [dropdown: Cerebral degenerations usually manifest, Certain conditions originating in the peri, Certain infectious and parasitic diseases, Codes for special purposes]

Individual Diagnosis: [input: enter name or ICD-10 code]

Given: [dropdown: 1+]

Primary Only

Service Setting: [dropdown list: Care Coordination, Crisis Service, Foster Care, Inpatient - ER, Living Support/Residential, Other, Outpatient - DD, Outpatient - MH, Outpatient - Medical, Outpatient - Medical Specialty]

Service Detail: Selected [dropdown]

3. Consider expanding number of recipient names to be displayed

4. Click "Search"

- 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.

Example search containing data with special protection: Alcohol Related Disorders

From “Recipient Search” screen:

1. Locate the “BH Diagnosis” box in the “Medication & Diagnosis” section
2. Expand the category “Substance-Related and Addictive Disorders” by clicking the + sign and select the sub-category “Alcohol related disorders”
3. Click Search
4. Search results page will provide:
 - # Total recipients matching search criteria
 - # Recipients excluded from search results (consent required)
 - # Recipients included in search results

Medication & Diagnosis as of 11/01/2023

Past 1 Year

Services by Any Provider as of 11/01/2023

Past 1 Year

Prescriber Last Name

Drug Name Active Drug

Active medication (past 3 months) requiring Prior Authorization

Psychotropic Drug Class*

Non-Psychotropic Drug Class*

- ADHD Med
- Ar
- Ar
- Ar

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

1. Locate the "BH Diagnosis" filter box

2. Expand "Substance-Related and Addictive Disorders" category and select "Alcohol related disorders"

Diagnosen 1+ Primary Only

BH Diagnosis Medical Diagnosis

- Substance-Related and Addictive Disorders (1 Dx selected)
 - Cannabis related disorders
 - Other psychoactive substance related disorders
 - Other stimulant related disorders
 - Sedative, hypnotic, or anxiolytic related disorders
 - Pathological gambling
 - Alcohol related disorders
 - Cocaine related disorders

erations usually manifest

ons originating in the peri

us and parasitic diseases

al purposes

refreshed monthly.

s.

ing additional selections.

Service Setting:

Service Detail: Selected

- Outpatient - Medical Specialty
- Outpatient - SU
- Outpatient - Unspecified
- Practitioner - BH

3. Click "Search"

Limit results to 50 Search Reset

< Modify Search

4,576 Recipients Found

View: Standard

PDF Excel

BH Diagnosis Alcohol related disorders
 AND [Provider Specific] Provider MAIN STREET MENTAL HEALTH CLINIC

93 Recipients included in search results (Note: This search includes data with special protection; i.e. HIV, Substance use or Family Planning)
 4483 Recipients excluded from search results (consent required)

Maximum Number of Rows Displayed: 50

Name	Medicaid ID	DOB	Gender	Medicaid Quality Flags	Medicaid Managed Care Plan	Current PHI Access
QJJCQVNUQUvURQ REFOUVM Um	VEYmNDAo Mae	OSyqLpEvN pM	TQ LQ ND2	2+ ER-BH, 2+ ER-MH, 2+ ER-Medical, 2+ Inpt-BH, 2+ Inpt-Medical, 4+ Inpt/ER-BH, 4+ Inpt/ER-MH, 4+ Inpt/ER-Med, Adher-MS, HARP No Assessment for HCBS, HARP No Health Home, HHPlus No HHPlus Service, HHPlus Not HH Enrolled, No MAT Utilization - OUD, No SUD ER f/u 7d, POP High User, Readmit 30d - BH to BH, Readmit 30d - Medical to Medical	Affinity Health Plan	PSYCKES Consent
QUnCRVJU REBoQU6	WbasM9An MVU	MTAIM8ynO T2r	R6 LQ NDU	2+ ER-Medical, BH QARR - DOH, No SUD Tx Engage	Fidelis Care New York	PSYCKES Consent
QUnFSaFORFJP TFVJUUm	VU6rNpUrM UE	OCytLpEvN pl	TQ LQ ND6	2+ Inpt-Medical, 4+ Inpt/ER-Med, BH QARR - DOH, HHPlus No HHPlus Service, HHPlus Not HH Enrolled, No Gluc/HbA1c & LDL-C - AP, No Gluc/HbA1c - AP, No HbA1c-DM, No LDL-C - AP, PrevHosp-All, PrevHosp-DM, Readmit 30d - BH to All Cause, Readmit 30d - Medical to Medical		PSYCKES Consent
QVJSTrbP RaVSTaFOREy	VrMvMDYr Mqi	MTEIM8ynO TYp	TQ LQ NTY	BH QARR - DOH, No SUD Tx Engage, No SUD Tx Initiation	Healthfirst PHSP, Inc.	PSYCKES Consent
QaFQVEbTVEU RrJFRqzSWQ	VrAoN9EsN FY	MTIINSynO TYo	TQ LQ NT2	2AP, 4PP(A)	HIP (EmblemHealth)	PSYCKES Consent
QazSTbNURUbO REFOUVM RQ	VVluOTarM qi	MTEIM9EIM TatMQ	TQ LQ ND6	No Gluc/HbA1c & LDL-C - AP No Gluc/HbA1c - AP, No LDL-C - AP	Healthfirst PHSP, Inc.	PSYCKES Consent

Streamlined Consent in Recipient Search

Recipient Search: Streamlined Consent

Recipient Search

Limit results to

Recipient Identifiers

Search in: Full Database MAIN STREET MENTAL HEALTH CLINIC

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

Characteristics as of 11/20/2023

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

Special Populations

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

Social Determinants of Health (SDOH)

Past 1 Year

SDOH Conditions (reported in billing)	SDOH Conditions: Selected
<ul style="list-style-type: none">Problems related to upbringingProblems related to social environmentProblems related to physical environmentProblems related to other psychosocialProblems related to medical facilities aProblems related to housing and econo	<input type="text"/>

Managed Care Plan & Medicaid

Managed Care <input type="text"/>	Children's Waiver Status <input type="text"/>
MC Product Line <input type="text"/>	HARP Status <input type="text"/>
Medicaid Enrollment Status <input type="text"/>	HARP HCBS Assessment Status <input type="text"/>
Medicaid Restrictions <input type="text"/>	HARP HCBS Assessment Results <input type="text"/>

Recipient Search: Individual Search

Search for client: Enter recipient identifier(s) and click “search”

- Medicaid ID
- Social Security Number (SSN)
- First name (at least first 2 characters)
- Last Name (full last name required)
- Date Of Birth (DOB)

Recipient Identifiers

Search in: Full Database MAIN STREET MENTAL HEALTH CLINIC

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

Confirm Correct Match, Select “Enable Access”

[← Modify Search](#)

1 Recipients Found



Medicaid ID ABCD1234

Review recipients in results carefully before accessing Clinical Summary.

Maximum Number of Rows Displayed: 50

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



Step 1: Why are you allowed to view data?

Attest to right to access client's Medicaid data:
Client consent, clinical emergency, or attestation of service

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

PHI Access for DOE JANE (F - 49)

Why are you allowed to view this data? [About access levels](#)

The client signed consent

- Client signed a PSYCKES Consent
- Client signed a BHCC Patient Information Sharing Consent
- Client signed a DOH Health Home Patient Information Sharing Consent

Provider attests to other reason for access

- Client gave Verbal PSYCKES Consent
- This is a clinical emergency
- Client is currently served by or being transferred to my facility

Cancel Next



Maximum Number of Rows Displayed: 50

PHI Access

Enable Access

Step 2: How do you know this is correct person?

Attest that client identity has been verified: Provider attests to client identity or client provided 1 form of photo ID or 2 forms of non-photo ID

Name (Gender - Age) Medicaid ID
DOE JANE F - 49 ABCD1234

PHI Access for DOE JANE (F - 49)

How do you know this is the correct person?

Provider attests to client identity

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

Identification 1

Identification 2

MAIN STREET HEALTH HOME, INC Health Home and/or Care Management users will be given access to all available data while the client is enrolled in your Health Home program. Only staff who work for the Health Home and/or Care Management program should view the clinical summary with this access.

[Previous](#) [Cancel](#) [Enable](#) [Enable and View Clinical Summary](#)

Number of Rows Displayed: 50

[Enable Access](#) 🔒

Clinical Summary Contains All Available Data

< Recipient Search

QUJBUaNBLA RrVTVEFWTm

As of 11/20/2023 Data sources



Brief Overview Full Summary

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

DOB: XX/XX/XXXX (XX Yrs) Medicaid ID: RE2mM9MmMVQ Medicare: No HARP Status: HARP Enrolled (H1)
 Address: MTIq TUNLSUvMRVa UrQ, QbJFTbRXTqzE, Tba, Managed Care Plan: Fidelis Care New York (HARP) HARP HCBS Assessment Status: Never Assessed
 MTEtMT2 MC Plan Assigned PCP : N/A Medicaid Eligibility Expires on:

Current Care Coordination

AOT SUFFOLK COUNTY COMMUNITY MENTAL HYGIENE SERV (Enrolled Date: 18-JAN-23, Expiration Date: 17-JAN-24)
 Main Contact : Jeanine Yannucciello: (631) 853 - 6205

Notifications

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

POP Potential Clozapine Candidate Evaluate for potential clozapine initiation/referral due to schizophrenia, high psychiatric Inpatient/ER use, and no recent clozapine use. Identify a community-based clozapine prescriber and other supports for clozapine treatment by contacting the client's managed care plan : Fidelis Care New York • Behavioral Health High Risk Alert Team, 718-896-6500 ext. 16077 for HARP members or ext. 16072 for Non-HARP members (see HARP status above), BHHHighRisk@fideliscare.org

Health Home Plus Eligibility This client is eligible for Health Home Plus due to: 3+ Inpt MH < 13 months, AOT - Active Court Order

High Mental Health Need due to: 1+ Inpt MH in past 13 months ; AOT active or expired in past 5 years

Medicaid Eligibility Alert This client uses the New York State of Health (NYSoH) enrollment system for Medicaid recertification • For more information contact NYSoH at 1-855-355-5777.

CORE Eligibility This client is eligible for Community Oriented Recovery and Empowerment (CORE) services. For more information on CORE, visit:<https://omh.ny.gov/omhweb/bho/core>

Alerts - all available

Most Recent

Count	Alert Description	Date	Location
7	Homelessness - NYC DHS Shelter	9/15/2023	DAYS INN 36TH STREET WELCOME CENTER (Single Adult, General)
17	Treatment for Suicidal Ideation (6 Inpatient, 6 ER, 6 Other)	10/29/2023	NEW YORK PRESBYTERIAN HOSPITAL (Inpatient - Medical)
1	Treatment for Self inflicted Poisoning (1 Inpatient)	10/2/2023	NYU LANGONE HOSPITALS (Inpatient - MH)

Social Determinants of Health (SDOH) Past Year - reported in billing

Problems related to housing and economic circumstances Homelessness unspecified

Active Quality Flags - as of monthly QI report 11/1/2023

BH QARR - Improvement Measure
 No Metabolic Monitoring (LDL-C) on Antipsychotic

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

Health Home Care Management - Adult
 Eligible for Health Home Plus - No Health Home Plus Service Past 12 Months • Eligible

Diagnoses Past Year

Behavioral Health (6) 5 Most Recent: Borderline Personality Disorder • Unspecified/Other Bipolar • Major Depressive Disorder • Schizoaffective Disorder • Schizophrenia ...

5 Most Frequent (# of services): Borderline Personality Disorder(6) • Major Depressive Disorder(6) • Unspecified/Other Bipolar(4) • Schizoaffective Disorder(4) • Schizophrenia(1) ...

Training & Technical Assistance

PSYCKES Training

- PSYCKES website: www.psyckes.org
- PSYCKES Training Webinars
 - Live webinars: Register on PSYCKES Training Webinars page
 - Recorded webinars: Slides and recordings available
 - 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
 - Introduction to PSYCKES
 - Where to Start: Getting Access to PSYCKES
- PSYCKES User Guides & Short How-To Videos
 - www.psyckes.org > PSYCKES Training Materials

Have you heard about the 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
- 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
- Help Desk (Token, Login & SMS support)
 - OMH Employee ITS Helpdesk:
 - 1-844-891-1786; fixit@its.ny.gov
 - Provider Partner OMH Helpdesk (for Non-OMH Employees):
 - 518-474-5554, option 2; healthhelp@its.ny.gov

