



**Office of
Mental Health**

Using PSYCKES for Clinical Care and Care Coordination

We will begin shortly

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**Kristen McLaughlin
Director, Medical Informatics
Office of Population Health & Evaluation
March 15, 2023**

Q&A via WebEx

- All phone lines are muted
- Access “Q&A” box in WebEx menu at the right of your screen; if you expanded the view of the webinar to full screen, hover cursor over green bar at top of screen to see menu
- Type questions using the “Q&A” feature
 - Submit to “all panelists” (default)
 - Please do not use Chat function for Q&A
- Slides and recording will be emailed to attendees after the webinar

Agenda

- PSYCKES Overview
- Access Levels and Enabling Access to Client-Level Data
- Review Client-Level Details within the Clinical Summary
 - Children's Waiver Status & Services
 - Health Home Care Management
 - HCBS & CFTSS
 - Quality Flags & Risk Factors
 - Medications & Diagnoses
 - Outpatient & Hospital Services
- Training and Technical Assistance
- Question & Answer

PSYCKES Overview



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What is PSYCKES?

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

Who is Viewable in PSYCKES?

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



What Data is Available in PSYCKES?

- Clinical Summary provides up to 5 years of data (updated weekly)
- All Medicaid FFS claims and Managed Care encounter data, across treatment settings
 - Medications, medical and behavioral health outpatient and inpatient services, ER, care coordination, residential, etc.
 - Time lag varies from weeks to months, depending on how quickly providers bill and Managed Care plans submit to DOH
- “Real time” (0-7 day lag) data sources currently in PSYCKES:
 - New York City Department of Homeless Services (NYC DHS)
 - State Psychiatric Center EMR
 - Assertive Community Treatment provider contact (OMH CAIRS)
 - Assisted Outpatient Treatment provider contact (OMH TACT)
 - Health Home enrollment & CMA provider (DOH MAPP)
 - Suicide attempt (OMH NIMRS)
 - Managed Care Plan & HARP status (MC Enrollment Table)
 - Safety Plans/Screenings and assessments entered by clients or providers into PSYCKES MyCHOIS
 - MC Plan Assigned Primary Care Physician (Quarterly, DOH)

Quality Indicators “Flags”

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

What Types of Reports Are Available?

- Individual Client Level Reports
 - Clinical Summary: Medicaid and State PC treatment history, up to 5 years
 - Most popular PSYCKES report
- Provider Agency Level Reports
 - Recipient Search Reports: run ad hoc reports to identify cohorts of interest, to support population health
 - My QI Report: current performance on all quality indicators, drill down to client-level views
 - PSYCKES Usage Reports: monitor PHI access by staff
 - Utilization Reports: support provider VBP data needs
- Statewide Reports
 - Can select a quality indicator and review statewide proportions by region, county, plan, network, or provider

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 (physical or eSignature)
 - Clinical Emergency
 - Verbal PSYCKES consent
 - Attest client is being served by/transferred to your agency prior to billing and/or signed 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 an applicable quality indicator 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 (physical or eSignature)

- 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 signed consent
 - In clinical emergencies (limited duration, 72 hours)
- Advantage of obtaining signed consent:
 - Access to data remains in effect until client is discharged (3 years after last billed service) or client withdraws consent

Client Data for Providers: Comparison

| Client data-agency link Type | Client data access type | Quality flag? | Any client data? | Data with special protection? (SUD, HIV, Family Planning, Genetic) | Duration |
|------------------------------|--|---------------|----------------------|---|---|
| Automatic | Billed service in past 9 months | No | No, client name only | No | 9 months after last service |
| | | Yes | Yes | No | While flag is active, up to 9 months after last service |
| Manual | Attest client is being served at/ transferred to agency | No | No, client name only | No | 9 months after last service |
| | | Yes | Yes | No | While flag is active, up to 9 months after last service |
| | Clinical emergency | n/a | Yes | Yes, all data | 72 hours |
| | Verbal PSYCKES Consent | n/a | Yes | No | 9 months |
| | Consent | n/a | Yes | Yes, all data | 3 years after last service |

Enabling Access to Client-Level Data



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Recipient Search: Enable PHI Access Module

Step 1: Search for client

Enter recipient identifier(s) and click “Search”



The screenshot shows the 'Recipient Search' interface. The navigation bar includes 'My QI Report', 'Statewide Reports', 'Recipient Search' (highlighted with a blue arrow), 'Provider Search', 'Registrar', 'Usage Reports', and 'Utilization Reports'. The main heading is 'Recipient Search'. To the right, there is a 'Limit results to' dropdown set to '50', a 'Search' button, and a 'Reset' link. Below the heading, there is a 'Recipient Identifiers' section. It features a 'Search in:' dropdown menu with 'Full Database' selected (indicated by a blue box) and 'MAIN STREET CLINIC' as an alternative. The search form has four input fields: 'Medicaid ID' (containing 'AB00000A'), 'SSN', 'First Name', and 'Last Name'. The 'DOB' field is labeled 'MM/DD/YYYY'.

- Medicaid ID
- Social Security Number (SSN)
- First Name – at least first two characters required, if entered
- Last Name – full last name required, if entered
- Date Of Birth (DOB) – enter to improve search results when searching with name

Recipient Search: Enable PHI Access Module


Step 1: Confirm client match and select “Enable Access”; if no match, click “Modify Search”

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

[← Modify Search](#) **1 Recipients Found**  

Medicaid ID AB12345C

Review recipients in results carefully before accessing Clinical Summary. Maximum Number of Rows Displayed: 50

| Name (Gender - Age) | Unique Identifiers | DOB | Address | Medicaid Quality Flags | Medicaid Managed Care Plan | Current PHI Access | |
|------------------------|-----------------------|-----------|---|------------------------|----------------------------|--------------------|---|
| SMITH JOHN M - 15 | Medicaid ID: AB12345C | 4/12/2007 | 123 MAIN ST CENTER SQUARE, NY 12345 | | Fidelis Care New York | No Access | Enable Access  |

Recipient Search: Enable PHI Access Module

Step 1: Confirm client match

More than 10 recipients meet search criteria message

My QI Report

Statewide Reports

Recipient Search

Provider Search

Registrar ▾

Usage Reports ▾

Utilization Reports

[← Modify Search](#)

No Recipients Found

First Name

JOHN

AND

Last Name

SMITH

There are too many recipients matching your search criteria. You can narrow a search using one of the following strategies:

- Search with a unique identifier (Medicaid ID or Social Security Number)
- When searching by name, use First Name, Last Name, and DOB
- If your provider agency has served this client within the past year, you can limit search to clients served by your provider agency



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Recipient Search: Enable PHI Access Module

Step 2: Attestation to right to access data

My QI Report - Statewide Reports

PHI Access for SMITH JOHN (M - 15), DOB: 04/12/2007

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**

PDF Excel

Maximum Number of Rows Displayed: 50

| Care | Current PHI Access | |
|------|--------------------|---------------|
| | No Access | Enable Access |

SMITH JOHN
M - 15

Medicaid ID: AB

PSYCKES

Logged in as: L0000MHH

PSYCKES Consent Form



MAIN STREET CLINIC

Provider/Facility Name

About PSYCKES

The New York State (NYS) Office of Mental Health maintains the Psychiatric Services and Clinical Enhancement System (PSYCKES). This online database stores some of your medical history and other information about your health. It can help your health providers deliver the right care when you need it.

The information in PSYCKES comes from your medical records, the NYS Medicaid database and other sources. Go to www.psyckes.org, and click on **About PSYCKES**, to learn more about the program and where your data comes from.

This data includes:

- Your name, date of birth, address and other information that identifies you;
- Your health services paid for by Medicaid;
- Your health care history, such as illnesses or injuries treated, test results and medicines;
- Other information you or your health providers enter into the system, such as a health Safety Plan.

What You Need to Do

Your information is confidential, meaning others need permission to see it. Complete this form now or at any time if you want to give or deny your providers access to your records. What you choose will not affect your right to medical care or health insurance coverage.

Please read the back of this page carefully before checking one of the boxes below. Choose:

- "I GIVE CONSENT" if you want this provider, and their staff involved in your care, to see your PSYCKES information.
- "I DON'T GIVE CONSENT" if you don't want them to see it.

If you don't give consent, there are some times when this provider may be able to see your health information in PSYCKES – or get it from another provider – when state and federal laws and regulations allow it.¹ For example, if Medicaid is concerned about the quality of your health care, your provider may get access to PSYCKES to help them determine if you are getting the right care at the right time.

Your Choice. Please check 1 box only.

- I GIVE CONSENT** for the provider, and their staff involved in my care, to access my health information in connection with my health care services.
- I DON'T GIVE CONSENT** for this provider to access my health information, but I understand they may be able to see it when state and federal laws and regulations allow it.

Print Name of Patient

Patient's Date of Birth

Patient's Medicaid ID Number

Signature of Patient or Patient's Legal Representative

Date

Print Name of Legal Representative (if applicable)

Relationship of Legal Representative Patient (if applicable)



Recipient Search: Enable PHI Access Module

Step 3: Confirm client identity

- Check box to indicate provider attests to client identity OR
- Use drop-down lists to verify that client provided at least one form of ID

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

1 Recipients Found

PHI Access for SMITH JOHN (M - 15), DOB: 04/17/2007

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 CLINIC will be given access to all available data for 3 years (renews automatically with billed service).

Previous Cancel Enable Enable and View Clinical Summary

Recipient Search: Enable PHI Access Module

Step 4: Enable or Enable and View Clinical Summary

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

1 Recipients Found

PDF Excel

Medicaid ID

Review recipients in results carefully

| Name (Gender - Age) | Unique Ident | Care | Current PHI Access |
|------------------------|-----------------|-----------|-----------------------|
| SMITH JOHN M - 15 | Medicaid ID: AB | No Access | Enable Access |

Maximum Number of Rows Displayed: 50

PHI Access for SMITH JOHN (M - 15), DOB: 04/17/2007

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 CLINIC will be given access to all available data for 3 years (renews automatically with billed service).

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

PSYCKES

Logged in as: L0000MHH

Clinical Summary



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Clinical Summary

- Refreshed on a weekly basis
- Up to 5-years worth of information across treatment settings, including:
 - Managed Care (MC) Plan information: MC Plan name, MC Plan Assigned Primary Care Physician (PCP), MC Product Line
 - Care Coordination information: Health Home/Care Management, Children Waiver Status/Services, OPWDD NYSTART, OnTrackNY Early Psychosis
 - Alerts (e.g., suicidal ideations, suicide attempt, overdose, etc.)
 - Active quality flags
 - Plans/documents (e.g., safety plan, PAD, etc.)
 - Screenings/assessments (e.g., C-SSRS, PHQ-9)
 - Medical/behavioral health diagnoses & medications
 - Medical/behavioral health outpatient services
 - Hospital/ER/Crisis services

Clinical Summary Viewing Options

- A client's clinical summary has 3 viewing tab options:
 - Brief Overview (default)
 - 1 Year Summary
 - 5 Year Summary
- The Brief Overview was a request by our users include a brief summary of a client's data that contained:
 - Most critical information, easily identifiable
 - Optimize time when reviewing clinical summary to get full clinical picture
 - Fits on a 1-2 pieces of paper, if printed

SMITH, JOHN

Clinical Summary as of 2/19/2023



← Recipient Search



📘 About included data sources ←

Brief Overview

1 Year Summary

5 Year Summary

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

DOB: 4/12/2007 (15 Yrs)
Address: 123 MAIN ST, CENTER SQUARE, NY, 12345

Medicaid ID: AB12345C Medicare: No
Managed Care Plan: HealthPlus (Mainstream)
MC Plan Assigned PCP: N/A

Children's Waiver Status: HCBS - Serious Emotional Disturbance (K3)
HARP HCBS Assessment Status: N/A
Medicaid Eligibility Expires on: 08/01/2023

Current Care Coordination

Health Home (Enrolled) COORDINATED BEHAVIORAL CARE INC (Begin Date: 01-FEB-19) • Status : Active
Main Contact Referral: CBCHealthHome@cbcare.org
Member Referral Number: 866-899-0152
Care Management (Enrolled): JEWISH CHILD CARE ASSOC OF NY

High Mental Health Need due to: 1+ ER or Inpatient past 12 months with suicide attempt, suicide ideation, or self-harm diagnosis

OPWDD NYSTART This client is potentially eligible for OPWDD NYSTART crisis services. Find a START team at: <https://opwdd.ny.gov/crisis-services>

Alerts • all available

Most Recent

3 **Suicidal Ideation (3 ER)** 1/4/2023 WOODHULL MED & MNTL HLTH CTR (ER - MH)

Active Quality Flags • as of monthly QI report 1/1/2023

BH QARR - DOH Performance Tracking Measure - as of 7/01/2022
No Follow Up After MH ED Visit - 30 Days • No Follow Up after MH ED Visit - 7 Days • No Metabolic Monitoring Child & Adol on Antipsychotic

BH QARR - Improvement Measure
No Metabolic Monitoring (Gluc/HbA1c and LDL-C) on Antipsychotic (Child) • No Metabolic Monitoring (LDL-C) on Antipsychotic

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

High Utilization - Inpt/ER
2+ ER - Medical

Polypharmacy
Psychotropics Three Plus

Vital Signs Dashboard - Child
No Follow Up After MH ED Visit - 30 Days • No Follow Up After MH ED Visit - 7 Days

Diagnoses Past Year

Behavioral Health (4) Most Recent: Autism Spectrum Disorder • Unspecified/Other Impulse Control • Intellectual Disabilities • Attention Deficit Hyperactivity Disorder
Most Frequent (# of services): Autism Spectrum Disorder (275) • Unspecified/Other Impulse Control (4) • Attention Deficit Hyperactivity Disorder (1) • Intellectual Disabilities (1)

Medical (7) 5 Most Recent: Epilepsy and recurrent seizures • Other and unspecified disorders of nose and nasal sinuses • Encounter for administrative examination • Long term (current) drug therapy • Body mass index [BMI] ...
5 Most Frequent (# of services): Epilepsy and recurrent seizures (4) • Encounter for general examination without complaint, suspected or reported diagnosis (2) • Body mass index [BMI] (1) • Long term (current) drug therapy (1) • Encounter for administrative examination (1) ...

Medications Past Year

Last Pick Up

Risperidone • Antipsychotic 1/31/2023 Dose: 1 MG, 2/day • Quantit...



Medications Past Year

| | Last Pick Up | |
|--|--------------|--|
| Risperidone • Antipsychotic | 2/6/2023 | Dose: 1 MG, 3/day • Quantity: 90 |
| Loratadine • Antihistamines - Non-Sedating | 1/20/2023 | Dose: 10 MG, 1/day • Quantity: 30 |
| Carbamazepine (Carbamazepine Er) • Mood Stabilizer | 1/20/2023 | Dose: 100 MG, 4/day • Quantity: 120 |
| Clonidine Hcl • ADHD Med | 12/23/2022 | Dose: 0.1 MG, 1/day • Quantity: 30 |
| Clonidine Hcl (Clonidine Hcl Er) • ADHD Med | 8/22/2022 | Dose: 0.1 MG, 1/day • Quantity: 30 |
| Desmopressin Acetate • Posterior Pituitary Hormones | 2/1/2023 | Dose: 0.2 MG, 3/day • Quantity: 84 |
| Lurasidone Hcl (Latuda) • Antipsychotic | 2/1/2023 | Dose: 40 MG, 1/day • Quantity: 28 |
| Methylphenidate Hcl (Methylphenidate Hcl Er (Cd)) • ADHD Med | 1/24/2023 | Dose: 50 MG, 1/day • Quantity: 30 |
| Neomycin-Polymyxin-Hc • Otic Combinations | 12/8/2022 | Dose: 3.5-10000-1 -/day • Quantity: 10 |
| Ofloxacin • Otic Anti-infectives | 11/8/2022 | Dose: 0.3 %, 1/day • Quantity: 10 |
| Ibuprofen • Nonsteroidal Anti-inflammatory Agents (NSAIDs) | 3/15/2022 | Dose: 600 MG, 4.29/day • Quantity: 30 |



| Outpatient Providers Past Year | Last Service Date & Type | |
|------------------------------------|--------------------------|--|
| SAINT DOMINICS HOME | 1/27/2023 | CFTSS - Other Licensed Practitioners (OLP) |
| METRO COMMUNITY HEALTH CENTERS INC | 12/23/2022 | Clinic - Medical Specialty |
| SSHSP NYC BOARD OF EDUCATION | 9/28/2022 | Clinic - DD - Supportive Health Services |
| MONTEFIORE MEDICAL CENTER | 8/5/2022 | Clinic - Medical Specialty |
| BOSTON PEDIATRICS PLLC | 4/18/2022 | Physicians Group - Pediatrics |
| ASTOR HOME FOR CHILDREN | 4/13/2022 | Children's HCBS - Caregiver Family Supports and Services |
| YOUNG ADULT INSTITUTE & WORKS | 4/12/2022 | Clinic - DD Specialty |
| MEDS OOS CLINIC | 3/15/2022 | Clinic - Medical Specialty |

| All Hospital and Crisis Utilization • 5 Years | | |
|---|-------------|---|
| ER Visits | # Providers | Last ER Visit |
| 4 Medical | 3 | 11/23/2022 at LINCOLN MEDICAL/MENTAL HLTH |
| Inpatient Admissions | # Providers | Last Inpatient Admission |
| 1 Medical | 1 | 11/5/2019 at MONTEFIORE MEDICAL CENTER |
| 2 Mental Health | 2 | 6/9/2018 at BELLEVUE HOSPITAL CENTER |
| Crisis Services | | |
| No Medicaid claims for this data type in the past 5 years | | |

Brief Overview as of 2/27/2023

- View 1 Year Summary
- View 5 Year Summary
- Export Overview

About included data sources

PSYCKES Data Sources for Individuals with Medicaid Enrollment

Clinical Summaries display information from multiple sources and are updated weekly.

PDF x close

DOB: 4/1/2007 (15 Yrs)
Address: ... MAIN ST, CEN
Information on data sources within the Clinical Summary

NYS Medicaid billing database

For consumers who have received behavioral health diagnosis, service, or psychotropic medication paid for by Medicaid.

Weekly information on Medicaid Fee for Service claims or Managed Care encounter data, includes:

- Care Coordination information
- Diagnoses
- Medications
- Quality Flags
- Outpatient Medical or Behavioral Health Services
- Hospital/ER services
- Living Support/Residential
- Laboratory & Pathology
- Radiology
- Dental
- Vision
- Medical Equipment
- Transportation

MAPP - Health Home and Care Management Database from DOH

For consumers in outreach or enrolled in Health Homes and Care Management programs

Weekly information from DOH Health Home file:

- Outreach or enrollment status
- Health Home and Care Management provider names
- Start and End Dates
- Health Home/Care Management Agency
- information from DOH website:
 - main contact name/phone number
 - referral contact name and phone number

Managed Care Enrollment Table

For consumers enrolled in a Managed Care Plan/Product Line

Weekly information from MC Enrollment Table

- Name of Managed Care Plan
- HARP Status
- Managed Care Assigned Primary Care Physician (updated quarterly)

Uniform Assessment System New York (UAS-NY) assessment platform

For consumers with a Health and Recovery Plan (HARP) Home and Community Services (HCBS) Assessment Status/Results

Weekly information from UAS-NY:

- HARP HCBS Assessment Status

TACT - Tracking for AOT Cases and Treatment

For consumers on an Assisted Outpatient

Weekly information from TACT (in the past 5 years)

- AOT provider name
- enrollment date



3 Suicidal Ideation

Active Quality Flags - a

BH QARR - DOH Performance
No Follow Up After MH E
Metabolic Monitoring Ch

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

General Medical Health
No Metabolic Monitoring

High Utilization - Inpt/ER
2+ ER - Medical

Polypharmacy
Psychotropics Three Plus

Vital Signs Dashboard - C
No Follow Up After MH E

Medications Past Year

Last Pick Up

Risperidone - Antipsychotic

1/31/2023 Dose: 1 MG, 2/day • Quantity: 14

Hide clinical data.

ous Emotional

A
/2023

d/Other Impulse
yperactivity Disorder
order (275) •
ficit Hyperactivity

er and unspecified
administrative
y mass index [BMI] ...
ent seizures (4) •
t, suspected or
long term (current)
nation (1) ...

General Section

- General section includes client name, DOB, address, Medicaid ID and Medicaid AID/Eligibility information, MC Plan and MC Plan assigned PCP, Children's Waiver Status, and HARP HCBS Assessment Status

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

[← Recipient Search](#) **SMITH, JOHN** Clinical Summary as of 2/19/2023 PDF Excel CCD

Sections **Brief Overview** **1 Year Summary** 5 Year Summary This report contains all available clinical data. - Data with Special Protection Show Hide

General

| | | | |
|---|--|---|--|
| Name SMITH, JOHN | Medicaid ID AB12345C | Medicare No | Children's Waiver Status HCBS - Serious Emotional Disturbance (K3) |
| DOB 4/12/2007 (15 Yrs) | Medicaid Aid Category SSI | Managed Care Plan HealthPlus (Mainstream) | HARP HCBS Assessment Status N/A |
| Address 123 MAIN ST, CENTER SQUARE, NY, 12345 | Medicaid Eligibility Expires on 08/01/2023 | MC Plan Assigned PCP N/A | |

Current Care Coordination & Alerts

- Current Care Coordination section displays status/contact information, if applicable to the client, including:
 - Health Home Outreach/Enrollment
 - Care Management Agency Outreach/Enrollment
 - OnTrack NY Early Psychosis Program Enrollment
 - OPWDD NYSTART eligibility
 - Medicaid Eligibility Alert: New York State of Health (NYSoH) alert for Medicaid recertification
- Alerts (All available NIMRS & Medicaid data)
 - Suicidal ideations
 - Suicide attempt
 - Self-inflicted harm
 - Opioid overdose
 - Homelessness
 - OMH unsuccessful discharge

General/Current Care Coordination

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

Recipient Search

SMITH, JOHN

Clinical Summary as of 2/19/2023

PDF Excel CCD

Sections

Brief Overview

1 Year Summary

5 Year Summary

This report contains all available clinical data.

- Data with Special Protection Show Hide

General

| | | | |
|---|--|---|--|
| Name SMITH, JOHN | Medicaid ID AB12345C | Medicare No | Children's Waiver Status HCBS - Serious Emotional Disturbance (K3) |
| DOB 4/12/2007 (15 Yrs) | Medicaid Aid Category SSI | Managed Care Plan HealthPlus (Mainstream) | HARP HCBS Assessment Status N/A |
| Address 123 MAIN ST, CENTER SQUARE, NY, 12345 | Medicaid Eligibility Expires on 08/01/2023 | MC Plan Assigned PCP N/A | |

Current Care Coordination

Health Home (Enrolled) - Status : Active, COORDINATED BEHAVIORAL CARE INC (Begin Date: 01-FEB-19), Main Contact: Member Referral Number: 866-899-0152, CBCHealthHome@cbc.org

Care Management (Enrolled) : JEWISH CHILD CARE ASSOC OF NY

- This information is updated weekly from DOH MAPP.

High Mental Health Need due to: 1+ ER or Inpatient past 12 months with suicide attempt, suicide ideation, or self-harm diagnosis

This client is potentially eligible for OPWDD services. For individuals with a co-occurring intellectual and/or developmental disability and behavioral health need, NYSTART services may be available in some areas of New York State.

1. To find out about START eligibility and the model [Click Here](#)
2. To see if you have a START team in your area and access contact information [Click Here](#)

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.

OnTrackNY Early Psychosis Program - Enrolled: Individual currently receiving early psychosis clinical services from: OnTrackNY@The Jewish Board, Daniel Tanh, 917-687-0994; after hours 917-674-3874

Alerts & Incidents

The “Alerts” section contains information on suicidality, homelessness, positive screenings, and opioid overdose

Alerts Incidents from NIMRS, Service invoices from Medicaid [Details](#)

Table [Graph](#)

| Alert Type | Number of Events/Meds/Positive Screens | First Date | Most Recent Date | Provider Name(s) | Program Name | Severity/Diagnosis/Meds/Results | |
|---|--|------------|------------------|-------------------------------------|---------------------------------|--|--|
| Homelessness - NYC DHS Shelter | 2 | 1/4/2022 | 5/10/2022 | WILLOW AVENUE FAMILY RESID | Families with Children, General | | |
| Treatment for Self inflicted Poisoning | 4 | 4/30/2018 | 5/10/2019 | UNIVERSITY HOSPITAL | Clinic - Medical Specialty | Poisoning by benzodiazepines, intentional self-harm, initial encounter | |
| Treatment for Suicidal Ideation | 1 | 11/9/2017 | 11/9/2017 | NASSAU UNIVERSITY MEDICAL CTR PSYCH | Inpatient - MH | Suicidal ideations | |
| Treatment for Suicide Attempt | 2 | 12/27/2016 | 12/28/2016 | MOUNT SINAI HOSPITAL | ER - Medical | Suicide attempt | |
| C-SSRS (Suicide Screen) | 1 | 9/8/2016 | 10/6/2016 | Client | Jamaica Avenue Clinic | High Risk: Suicide Attempt(s); Last attempt Past 7 days | |
| PHQ-9 (depression screening and monitoring) | 1 | 9/7/2016 | 10/4/2016 | Client | Jamaica Avenue Clinic | Thoughts of "better off dead" and/or hurting self | |



Social Determinants of Health (SDH)

- The SDH section includes social and environmental conditions that impact a wide range of health risks and outcomes (e.g., education & literacy, upbringing, social environment, etc.)

Social Determinants of Health (SDH)

| | |
|--|--|
| Problems related to education and literacy | Other Problems Related To Education And Literacy |
| Problems related to upbringing | Other Specified Problems Related To Upbringing |

Click on a SDH to drill-in and view more details

Services provided for the selected Social Determinants of Health:
Other Problems Related To Education And Literacy

PDF Excel

Previous 1 2 Next

| Date of Service | Service Type | Service Subtype | Provider Name | Primary, secondary, and quality flag-related diagnoses |
|-----------------|-----------------|-----------------------|---------------------------|--|
| 7/5/2022 | Outpatient - BH | Clinic - MH Specialty | BRONXCARE HOSPITAL CENTER | Anxiety disorder, unspecified, Other problems related to education and literacy |
| 5/31/2022 | Outpatient - BH | Clinic - MH Specialty | BRONXCARE HOSPITAL CENTER | Anxiety disorder, unspecified, Other problems related to education and literacy, Unspecified psychosis not due to a substance or known physiological condition |

health

Quality Flags & PSYCKES Registries

Quality Flags

as of monthly QI report 1/1/2023 [Definitions](#)

Recent

All (Graph)

All (Table)

Indicator Set

BH QARR - DOH

BH QARR - DOH Performance
Days • No Metabolic Monitor

Visit - 30 Days • No Follow Up after MH ED Visit - 7

BH QARR - Improvement Measure

No Metabolic Monitoring (Gluc

Monitoring (LDL-C) on Antipsychotic

General Medical Health

No Metabolic Monitoring (Gluc/HbA1c and LDL-C) on Antipsychotic (any

High Utilization - Inpt/ER

2+ ER - Medical

Polypharmacy

Psychotropics Three Plus • Psychotropics Three Plus • Psychotropics Three Plus (Carbamazepine + Clonidine Hcl + Risperidone)

Vital Signs Dashboard - Child

No Follow Up After MH ED Visit - 30 Days • No Follow Up After MH ED Visit - 7 Days

Click on the “Definitions” link or a specific quality flag to view the indicator description

PSYCKES Registries

[About PSYCKES Registries](#)

Registry

Provider Name(s)

Added On

Removed on

Designations

Suicide Care Pathway

ST. LAWRENCE PSYCHIATRIC CENTER

1/23/2023

Active

Suicide Attempt (Source: NIMRS)

Suicide Care Pathway

ST. LAWRENCE PSYCHIATRIC CENTER

10/15/2022

1/15/2023

Suicide Attempt (Source: NIMRS)



Office of
Mental Health

Plans & Documents, Screenings & Assessments

Plans & Documents [Upload](#) [Create New](#)

| Date Document Created | Document Type | Provider Name | Document Created By | Role | Delete Document |
|-----------------------|-------------------------------|---------------------------|---------------------|-----------|-----------------|
| 2/28/2023 | Safety Plan | | | | |
| 2/28/2023 | PSYCKES Consent Form (e-sign) | | | ker | |
| 1/12/2023 | Relapse Prevention Plan | MONTEFIORE MEDICAL CENTER | JANE DOE | Therapist | |

Create a Safety Plan or PAD, or upload other documentation (e.g., Care Plans, Discharge Plans, etc.)

Screenings & Assessments

[Definitions](#)

[Table](#) [Graph](#)

| Assessment Name | Number of Assessments Entered | Last Assessment Date | Last Assessment Provider | Last Assessment Rated by (Role) | Last Assessment Results | |
|---|-------------------------------|----------------------|-------------------------------|------------------------------------|---|--|
| C-SSRS (Suicide Screen) | 1 | 2/28/2023 | MONTEFIORE MEDICAL CENTER | Administered in PSYCKES mobile app | 2 Suicide Attempt(s); Last attempt 4 to 6 months High Risk: Suicidal Behavior in past 3 months | |
| PHQ-9 (depression screening and monitoring) | 1 | 8/14/2022 | MENTAL HLTH ASSOC WESTCHESTER | Administered in PSYCKES mobile app | | |

Screenings & assessments may be viewed with consent/ER access

Behavioral Health & Medical Diagnoses

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

[Unspecified/Other Anxiety Disorder](#) • [Adjustment Disorder](#) • [Attention Deficit Hyperactivity Disorder](#) • [Major Depressive Disorder](#) • [Generalized Anxiety Disorder](#) • [Phobia-Social Anxiety](#)

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

| | |
|---|--|
| Certain Infectious And Parasitic Diseases | Trichomoniasis |
| Diseases Of The Musculoskeletal System And Connective Tissue | Other joint disorder, not elsewhere classified |
| Diseases Of The Nervous System | Other headache syndromes • Mononeuropathies of upper limb |
| Diseases Of The Respiratory System | Asthma |
| Endocrine, Nutritional And Metabolic Diseases | Type 1 diabetes mellitus • Type 2 diabetes mellitus • Disorders of puberty, not elsewhere classified |
| Factors Influencing Health Status And Contact With Health Services | Encounter for screening for infectious and parasitic diseases • Encounter for screening for other diseases and disorders • Personal risk factors, not elsewhere classified |
| Symptoms, Signs And Abnormal Clinical And Laboratory Findings, Not Elsewhere Classified | Abnormal blood-pressure reading, without diagnosis • Nausea and vomiting • Symptoms and signs involving emotional state |

Click on any diagnosis to see more details about the billed services associated with that selected diagnosis

Diagnosis Drill-in

Services provided for the selected Diagnosis:
Adjustment Disorder

When drilling into a diagnosis, you'll see information on date of service, service type & subtype, provider, and other diagnoses

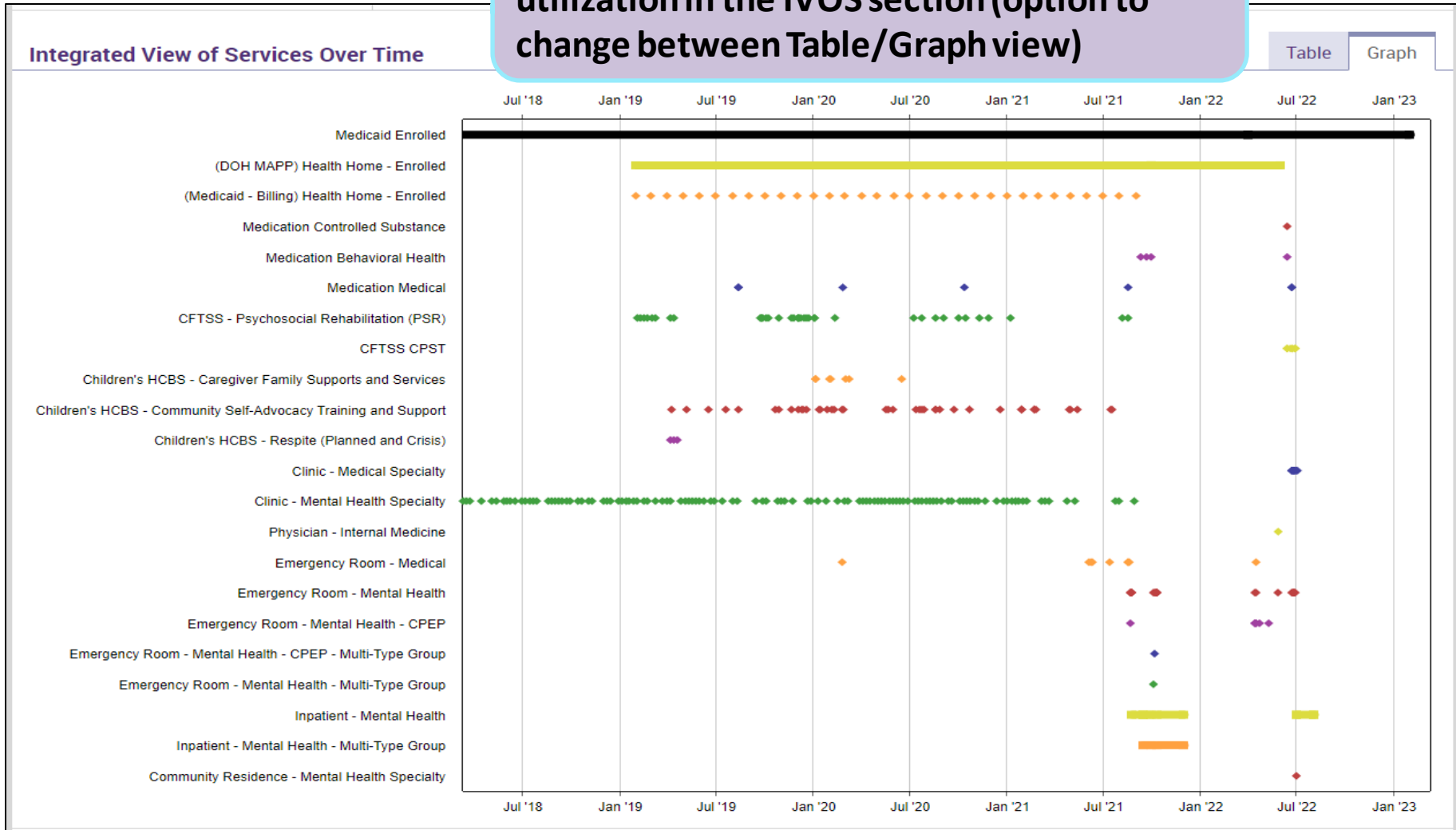


us 1 2 3 Next

| Date of Service | Service Type | Service Subtype | Provider Name | Primary, secondary, and quality flag-related diagnoses |
|-----------------|--------------|--|---------------------------|--|
| 4/20/2022 | Inpatient-ER | Inpatient - MH - Group - Physician - Psychiatry and Pediatrics | MONTEFIORE MEDICAL CENTER | Adjustment disorder with mixed disturbance of emotions and conduct, Gender identity disorder, unspecified, Type 2 diabetes mellitus with ketoacidosis without coma |
| 4/19/2022 | Inpatient-ER | Inpatient - MH - Group - Physician - Psychiatry and Pediatrics | JACOBI MEDICAL CENTER | Adjustment disorder with mixed disturbance of emotions and conduct, Gender identity disorder, unspecified, Type 2 diabetes mellitus with ketoacidosis without coma |
| 4/14/2022 | Inpatient-ER | Inpatient - MH - Group - Physician - Psychiatry and Pediatrics | MONTEFIORE MEDICAL CENTER | Adjustment disorder with mixed disturbance of emotions and conduct, Gender identity disorder, unspecified, Type 2 diabetes mellitus with ketoacidosis without coma |

Integrated View of Services (IVOS) Over Time

View patterns of service and medication utilization in the IVOS section (option to change between Table/Graph view)






Care Coordination (Historical)

- The “Care Coordination” section displays historical Care Coordination information (e.g., Health Home enrollment, Child Waiver Services, etc.)

Care Coordination [Details](#)

Table **Graph**

| Service Type | Provider | First Date Billed | Last Date Billed | Number of bills | |
|-----------------------------------|--|-------------------|------------------|-----------------|---|
| Health Home - Enrolled (DOH MAPP) | COORDINATED BEHAVIORAL CARE INC (HH), JEWISH CHILD CARE ASSOC OF NY (CM) | 11/1/2020 | Current | |  |
| Health Home - Enrolled | COORDINATED BEHAVIORAL CARE INC | 3/1/2022 | 11/1/2022 | 6 |  |
| Child Waiver Services - OMH | VILLA OF HOPE | 8/23/2022 | 8/23/2022 | 1 |  |

Medications (Controlled, BH, Medical)

Medication: Controlled Substance [Details](#)



Table Graph

| Schedule | Drug Class | Drug Name | Last Dose* | Estimated Duration | First Day Picked Up | Last day Picked Up | |
|----------|------------|---|--------------|----------------------|---------------------|--------------------|--|
| II | ADHD Med | Amphetamine-Dextroamphetamine (Amphetamine-Dextroamphet Er) | 30 MG, 1/day | 10 Month(s) 5 Day(s) | 3/15/2022 | 12/21/2022 | |

Medication: Behavioral Health [Details](#)

Table Graph

| Drug Class | Drug Name | Last Dose* | Estimated Duration | First Day Picked Up | Last day Picked Up | |
|------------|---|------------|--------------------|---------------------|--------------------|--|
| ADHD Med | Amphetamine- Dextroamphetamine (Amphetamine- Dextroamphet Er) | | | | | |

Click on any medication's "See Details" button to view more about that medication's orders/trials

Medication: Medical [Details](#)

Table Graph

| Drug Class | Drug Name | Last Dose* | Estimated Duration | First Day Picked Up | Last day Picked Up | |
|-----------------------------|---|---------------------------|---------------------|---------------------|--------------------|--|
| Beta Blockers Non-Selective | Propranolol Hcl | 10 MG, 2/day | 5 Month(s) 6 Day(s) | 8/19/2022 | 12/26/2022 | |
| Influenza Agents | Oseltamivir Phosphate | 6 MG/ML, 20/day | 6 Day(s) | 12/23/2022 | 12/23/2022 | |
| Sympathomimetics | Albuterol Sulfate (Albuterol Sulfate Hfa) | 108 (90 Base) MCG/ACT/day | 2 Week(s) 2 Day(s) | 12/3/2022 | 12/3/2022 | |
| Ophthalmic Anti-infectives | Ofloxacin | 0.3 %, .17/day | 1 Month(s) | 4/4/2022 | 4/4/2022 | |

Medications Drill-in

When drilling into a medication you'll see pick-up date, drug information, prescriber, and pharmacy

RX detail for Amphetamine- Dextroamphetamine (Amphetamine- De

PDF Excel

Orders Trials

Previous 1 Next

| Pick Up Date | Brand Name | Generic Name | Drug Class | Strength | Quantity Dispensed | Supply | Days per day* | Dose* | Route | Prescriber | Pharmacy |
|--------------|-----------------------------|-------------------------------|------------|----------|--------------------|--------|---------------|-------|-------|---------------|------------------------------|
| 1/30/2023 | Amphetamine-Dextroamphet ER | Amphetamine-Dextroamphetamine | ADHD Med | 15 MG | 30 | 30 | 1 | 15 MG | Oral | Kuchuk Robert | RITE AID OF NEW YORK INC 758 |
| 12/28/2022 | Amphetamine-Dextroamphet ER | Amphetamine-Dextroamphetamine | ADHD Med | 15 MG | 30 | 30 | 1 | 15 MG | Oral | Kuchuk Robert | RITE AID OF NEW YORK INC 758 |
| 12/2/2022 | Amphetamine-Dextroamphet ER | Amphetamine-Dextroamphetamine | ADHD Med | 15 MG | 30 | 30 | 1 | 15 MG | Oral | Kuchuk Robert | WEGMANS PHARMACY #092 |
| 11/1/2022 | Amphetamine-Dextroamphet ER | Amphetamine-Dextroamphetamine | ADHD Med | 10 MG | 30 | 30 | 1 | 10 MG | Oral | Kuchuk Robert | WEGMANS PHARMACY #092 |

RX detail for Amphetamine- Dextroamphetamine (Amphetamine- Dextroamphet Er) Medication

PDF Excel

Orders Trials

Previous 1 Next

| Brand Name | Generic Name | Drug Class | First Day Picked Up | Estimated End of Trial | Estimated Duration |
|------------------------------|--------------------------------|------------|---------------------|------------------------|--------------------|
| Amphetamine- Dextroamphet ER | Amphetamine- Dextroamphetamine | ADHD Med | 11/1/2022 | 3/1/2023 | 4 Month(s) |

Medications (Controlled, BH, Medical)

Medication: Controlled Substance [Details](#)

| Schedule | Drug Class | Drug Name |
|----------|------------|-----------|
|----------|------------|-----------|

| | | |
|----|--|----------------------------|
| II | | e- tamin e- t Er) |
|----|--|----------------------------|

Click on a medication to view more information on warnings/effects

Medication: Medical [Details](#)

| Drug Class | Drug Name |
|------------|-----------|
|------------|-----------|

| | |
|----------|--|
| ADHD Med | Amphetamine- Dextroamphet (Amphetamine- Dextroamphe |
|----------|--|

Medication: Medical [Details](#)

| Drug Class | Drug Name |
|------------|-----------|
|------------|-----------|

| | |
|-----------------------------|--------------------------------|
| Beta Blockers Non-Selective | Propranolol Hcl |
| Influenza Agents | Oseltamivir Phosphate |
| Sympathomimetics | Albuterol Sulfate (Albuterol S |
| Ophthalmic Anti-infectives | Ofloxacin |

InfoButton Access: DrugPoints Document - Google Chrome
micromedexsolutions.com/infobutton/librarian/PFActionId/infobutton.retrieveDoc

Dextroamphetamine/Amphetamine

Jump To:

Dosing & Indications

- Dosing Information
 - Adult Dosing
 - Pediatric Dosing
 - Dose Adjustments
- Indications
 - FDA-Labeled Indications

Black Box Warning

Contraindications/Warnings

- Do Not Confuse
- Contraindications
- Precautions
- Pregnancy Category
- Breast Feeding

Drug Interactions (single)

- Drug-Drug
 - Contraindicated
 - Major

Adverse Effects

- Common
- Serious

Name Info

- Drug Images
- US Trade Names
- Synonyms
- Class
- Regulatory Status
- Generic Availability

Mechanism of Action/Pharmacokinetics

- Mechanism of Action
- Pharmacokinetics
 - Absorption
 - Metabolism
 - Excretion
 - Elimination Half Life

Administration/Monitoring

How Supplied

Toxicology

- Clinical Effects
- Treatment
- Range of Toxicity

Clinical

Teaching

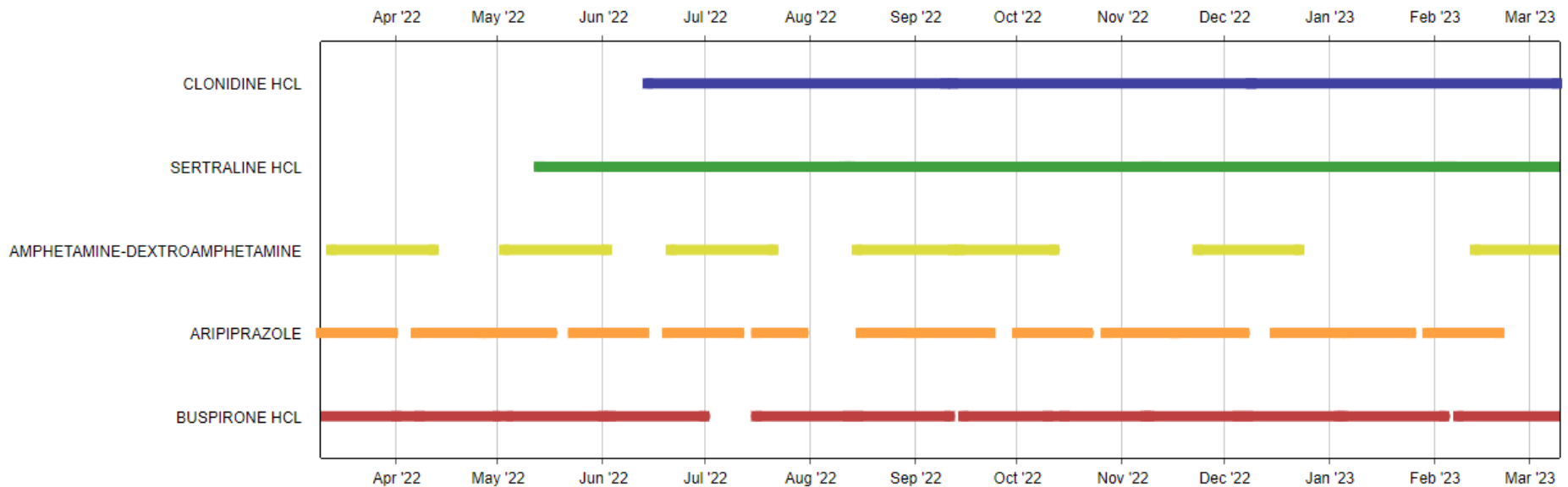
References

Medications (Controlled, BH, Medical)

Toggle between “Table” and “Graph” views to see patterns of medication utilization

Medication: Behavioral Health [Details](#)

Table **Graph**



Outpatient Services (BH & Medical)

Behavioral Health Services [Details](#) Table Graph

| Service Type | Provider | First Date Billed | Last Date Billed | Number of Visits | Most Recent Primary Diagnosis | Most Recent Procedures (Last 3 Months) | |
|--|------------------------------------|-------------------|------------------|------------------|---|--|--|
| CFTSS - Other Licensed Practitioners (OLP) | SAINT DOMINICS HOME | 11/1/2022 | 12/26/2022 | 5 | Autistic disorder | - Psych Diagnostic Evaluation | |
| Clinic - Medical Specialty | METRO COMMUNITY HEALTH CENTERS INC | 6/22/2022 | 12/23/2022 | 4 | | | |
| Clinic - DD - Supportive Health Services | SSHSP NYC BOARD OF EDUCATION | 6/2/2022 | 9/28/2022 | 20 | | | |
| Physicians Group - Pediatrics | BOSTON PEDIATRICS PLLC | 4/18/2022 | 4/18/2022 | 1 | | | |
| Children's HCBS - Caregiver Family Supports and Services | ASTOR HOME FOR CHILDREN | 4/13/2022 | 4/13/2022 | 1 | disabilities | | |
| Clinic - DD Specialty | YOUNG ADULT INSTITUTE & WORKS | 4/12/2022 | 4/12/2022 | 1 | Encounter for general psychiatric examination, requested by authority | - Psych Diagnostic Evaluation | |
| Clinic - Medical Specialty | MEDS OOS CLINIC | 3/15/2022 | 3/15/2022 | 1 | Autistic disorder | - Psycl/Nrpsyc Tst Phy/Qhp 1st - Psycl Tst Eval Phys/Qhp 1st - Psycl/Nrpsyc Tst Phy/Qhp Ea - Psycl Tst Eval Phys/Qhp Ea | |

Click on "See Details" button to view more information about the claims associated with the service type

Medical Outpatient Services [Details](#) Table Graph

| Service Type | Provider | First Date Billed | Last Date Billed | Number of Visits | Most Recent Primary Diagnosis | Most Recent Procedures (Last 3 Months) | |
|-------------------------------|------------------------------------|-------------------|------------------|------------------|---|--|--|
| Physician Group | TRUSTEES OF COLUMBIA UNIVERSITY IN | 1/11/2023 | 1/11/2023 | 1 | Type 1 diabetes mellitus with hyperglycemia | - Hemoglobin Glycosylated A1c - Office O/P Est Mod 30-39 Min | |
| Physicians Group - Pediatrics | TRUSTEES OF COLUMBIA UNIVERSITY IN | 4/21/2022 | 9/29/2022 | 3 | Type 1 diabetes mellitus with hyperglycemia | - Hemoglobin Glycosylated A1c - Office O/P Est Mod 30-39 Min - Cont Gluc Mntr Analysis I&R | |
| Physician - Pediatrics | TIZER KAREN | 3/31/2022 | 3/31/2022 | 1 | Type 1 diabetes mellitus with hypoglycemia | - Office O/P Est Low 20-29 Min | |

Outpatient Services (BH & Medical)

All Behavioral Health Services for SAINT DOMINICS HOME Provider

PDF Excel

Previous 1 2 3 4 5 6 7 Next

| Date of Service/First Visit | Service Type | Provider | Primary, secondary, and quality flag-related diagnoses | Practitioner | Procedure |
|-----------------------------|--|---------------------|---|---------------------|------------------------------|
| 12/26/2022 | CFTSS - Other Licensed Practitioners (OLP) | SAINT DOMINICS HOME | Adjustment disorder with mixed disturbance of emotions and conduct, Attention-deficit hyperactivity disorder, combined type, Disruptive mood dysregulation disorder | | Alcohol And/Or Drug Services |
| 11/29/2022 | CFTSS - Other Licensed Practitioners (OLP) | SAINT DOMINICS HOME | Adjustment disorder with mixed disturbance of emotions and conduct, Attention-deficit hyperactivity disorder, combined type, Disruptive mood dysregulation disorder | | Alcohol And/Or Drug Services |
| 11/23/2022 | CFTSS - Other Licensed Practitioners (OLP) | SAINT DOMINICS HOME | Adjustment disorder with mixed disturbance of emotions and conduct, Attention-deficit hyperactivity disorder, combined type, Disruptive mood dysregulation disorder | | Diagnostic Services |
| 11/8/2022 | CFTSS - Other Licensed Practitioners (OLP) | SAINT DOMINICS HOME | Adjustment disorder with mixed disturbance of emotions and conduct, Attention-deficit hyperactivity disorder, combined type, Disruptive mood dysregulation disorder | Saint Dominics Home | Alcohol And/Or Drug Services |
| 11/1/2022 | CFTSS - Other Licensed Practitioners (OLP) | SAINT DOMINICS HOME | Adjustment disorder with mixed disturbance of emotions and conduct, Attention-deficit hyperactivity disorder, combined type, Disruptive mood dysregulation disorder | Saint Dominics Home | Alcohol And/Or Drug Services |

When drilling into an outpatient service you'll see service date/type, provider, other diagnoses, practitioner, and procedure

Hospital/ER/Crisis: Integrated Behavioral/Medical

Hospital/ER/Crisis Services [Details](#) Table Graph

| Service Type | Provider | Admission | Discharge Date/Last Date Billed | Length of Stay | Most Recent Primary Diagnosis | Procedure(s) (Per Visit) | |
|---|---|-----------|---------------------------------|----------------|---|--|--|
| Crisis Intervention Service - Telephonic Response | NIAGARA COUNTY DEPARTMENT OF MENTAL | 10/3/2022 | 10/3/2022 | 1 | Mental Disorder, Not Otherwise Specified | - Crisis Interven Svc, 15 Min | |
| ER - MH - CPEP | ERIE COUNTY MEDICAL CTR | 9/13/2022 | 9/13/2022 | 1 | Encounter For Screening Examination For Mental Health And Behavioral Disorders, Unspecified | - Psych Diagnostic Evaluation | |
| Inpatient - MH | BRY-LIN HOSPITALS INC | 7/14/2022 | 8/3/2022 | 20 | Attention-Deficit Hyperactivity Disorder, Combined Type | - Individual Psychotherapy, Supportive | |
| Inpatient - MH | BRY-LIN HOSPITALS INC | 6/28/2022 | 7/7/2022 | 9 | Attention-Deficit Hyperactivity Disorder, Combined Type | - Individual Psychotherapy, Supportive | |
| ER - Medical - Physician Group | UPMC CHAUTAUQUA AT WCA | 6/26/2022 | 6/26/2022 | 1 | Foreign Body In Left Ear, Initial Encounter | - Emergency Dept Visit Sf Mdm | |
| ER - MH | ERIE COUNTY MEDICAL CTR | 6/25/2022 | 6/25/2022 | 1 | Oppositional Defiant Disorder | - Emergency Dept Visit Sf Mdm | |
| ER - MH - CPEP | ERIE COUNTY MEDICAL CTR | 5/21/2022 | 5/21/2022 | 1 | Oppositional Defiant Disorder | - Psych Diagnostic Evaluation | |
| ER - MH | ERIE COUNTY MEDICAL CTR | 5/21/2022 | 5/21/2022 | 1 | Oppositional Defiant Disorder | - Emergency Dept Visit Mod Mdm - Sarscov2 & Inf A&B Amp Prb | |
| ER - MH - CPEP | ERIE COUNTY MEDICAL CTR | 5/12/2022 | 5/12/2022 | 1 | Conduct Disorder, Childhood-Onset Type | - Psych Diagnostic Evaluation | |

Dental, Vision, Living Support/Residential

Dental [Details](#) Table Graph

| Service Type | Provider | First Date Billed | Last Date Billed | Number of Visits | Most Recent Procedures (Last 3 Months) | |
|-------------------|--|-------------------|------------------|------------------|--|--|
| Office/Outpatient | MONTEFIORE MEDICAL CENTER - HENRY & | 11/1/2022 | 11/1/2022 | 1 | - Dental Prophylaxis Child - Oral Evaluation, Pt < 3yrs - Oral Hygiene Instruction - Topical App Fluorid Ex Vrnsh | |

Vision [Details](#)

| | | | | | | |
|---|--------------------------------|----------|----------|---|--|--|
| Eye Care Services - Unspecified Setting | 25 WESTCHESTER SQ OPTICAL CORP | 7/5/2022 | 7/5/2022 | 1 | - Eye Exam&Tx Estab Pt 1/>Vst | |
| Eye Appliances - Unspecified Setting | 25 WESTCHESTER SQ OPTICAL CORP | 7/5/2022 | 7/5/2022 | 1 | - Vision Svcs Frames Purchases - Lens Polycarb Or Equal - Lens Spher Single Plano 4.00 | |

Living Support/Residential Treatment [Details](#) Table Graph



| Program/Type | Provider Name | First Date of Service (last 5 years) | Last Date Billed | Number of Visits | |
|---------------------------------------|-------------------------------------|--------------------------------------|------------------|------------------|--|
| Intermediate Care Facility - DD | THE CENTER FOR DISCOVERY BALSAM ICF | 3/1/2022 | 2/5/2023 | 123 | |
| Home Care - HHA Professional Services | EXTRAORDINARY HOME CARE | 4/13/2022 | 8/30/2022 | 12 | |

Labs, Radiology, Medical Equipment, and Transportation

Laboratory & Pathology [Details](#)

Table



Graph

| Test/Panel Name | First Billed | Last Billed | # Tests | Most Recent Lab/Pathology Provider | |
|--|--------------|-------------|---------|------------------------------------|---|
| Sars-Cov-2/2019-Ncov (Covid-19), Any Tec | 12/29/2022 | 12/29/2022 | 1 | ACCU REFERENCE MEDICAL LAB LLC |  |
| Culture Othr Specimn Aerobic | 7/14/2022 | 12/29/2022 | 2 | ACCU REFERENCE MEDICAL LAB LLC |  |

Radiology [Details](#)

Table

Graph

| Program/Type | Test Name | Date Billed | Provider | |
|--------------------------------|----------------------------|-------------|-------------------------------|---|
| Office/ Outpatient/ Laboratory | X-Ray Exam Of Facial Bones | 6/23/2022 | MILLENNIUM MEDICAL IMAGING PC |  |
| Office/ Outpatient/ Laboratory | X-Ray Exam Of Skull | 6/23/2022 | MILLENNIUM MEDICAL IMAGING PC |  |

Medical Equipment [Details](#)

No Medicaid claims for this data type in the past 1 year

Transportation [Details](#)

Table

Graph

| Type | Provider Name | First Date of Service (last 5 years) | Last Date Billed | Number of Visits | Most Recent Primary Diagnosis | |
|-----------|--------------------------------|--------------------------------------|------------------|------------------|-------------------------------|---|
| Ambulance | TLC MEDICAL TRANSPORT SVCS INC | 6/17/2022 | 6/17/2022 | 1 | Suicidal ideations |  |

Export Data to PDF, Excel

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

← Recipient Search

SMITH, JOHN
Clinical Summary as of 2/19/2023

PDF Excel CCD

Sections

Brief Overview **1 Year Summary** 5 Year Summary

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

All available data = sections will be “unrolled,” ie., each scrip or visit will be listed in a separate row.

To select multiple sections, “Shift ”+ click or “Ctrl”+ click.

Export

Include Brief Overview as “cover page”

Export Options

- All sections - Summary data
- Selected section(s) - Summary data
- Selected section(s) - All available data

Page Orientation

- Portrait
- Landscape

Sections Select All

- POP Intensive Care Transition Service:
- Alerts
- Social Determinants of Health (SDH)
- Quality Flags

* Use ctrl key to select/unselect multiple items.

Export Cancel

Protected Health Information: Save only to secure server!

Training & Technical Assistance



**Office of
Mental Health**

PSYCKES Training

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

Self-Service Console

- The Self-Service Console is a way to manage your RSA token and PIN, for logging into secure OMH applications, including PSYCKES
- The console is accessed at: mytoken.ny.gov
- 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)
 - ITS (OMH Employee) Helpdesk:
 - 1-844-891-1786; fixit@its.ny.gov
 - Provider Partner (Non-OMH Employee) Helpdesk:
 - 1-800-435-7697; healthhelp@its.ny.gov

Questions?



**Office of
Mental Health**