

## Frequently Asked Questions

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### Section 1: Getting Access

#### **1. How we do obtain usernames and passwords if we do not have any yet?**

*Answer:* The Security Manager adds users to the Security Management System, and then user IDs and passwords are automatically generated by the system. See [“Preparing for and Getting Access to PCS”](#) for further information and instructions.

#### **2. I don’t have/lost my password/my password doesn’t work/how do I reset or get a new password?**

*Answer:* Contact your facility Security Manager (SM) and have them go into the Security Management System (SMS), select your name, confirm your email address and click the Reset Password button. An email will be sent to you with the new password. If you do not receive the email, please check your junk or spam mail folders. If not found, your Security Manager may want to try an alternate email address for you and can make note of the day and time of the password reset so it is easier to find in your spam email folder. Remember to wait 1 hour for system to update before attempting to use your new password.

#### **3. How do you know who is the security manager?**

*Answer:* On the top menu of the application, you will see a link to the list of Security Managers for your facility. If you cannot access PCS, you can ask a co-worker or send an [email](mailto:pcs@omh.ny.gov) request to pcs@omh.ny.gov.

#### **4. My supervisor asked me to help enter data. Can I log-on with his User ID to enter data for clients on his caseload?**

*Answer:* No, User IDs are user specific. Data in the Patient Characteristic Survey (PCS) are Protected Health Information (PHI), and Health Insurance Portability and Accountability Act (HIPAA) rules require tracking users ("User IDs") who access PHI. In order to do this, Office of Mental Health (OMH) Security requires each user to have his own User ID. If appropriate, the Security Manager at your facility can establish a User ID for you and grant you access to the PCS application.

## **Section 2: Using the Application**

### **1. My unit/site was closed prior to the start of the survey week, but still appears in the drop-down list for my facility. When will it be removed?**

*Answer:* Closed units/sites are retained in the PCS application so that the application does not delete any client data that may have been entered. If no data have been entered for a closed unit/site, the PCS Supervisor should note the site's closure on the application's Supervisor Page. If your unit/site closed after the start of the survey week you are expected to enter data for services delivered during the PCS week when the unit/site was still open.

### **2. My request to add a unit/site to my facility was approved in Mental Health Provider Data Exchange (MHPD) today, but in the PCS it doesn't appear in the drop-down list for my facility. How do I report data?**

*Answer:* New unit/sites will be added to the PCS application on a daily basis. You will see the unit tomorrow.

### **3. I tried to edit an existing submission but received the message: "Another user is currently editing this survey. Try again later." I did try again later and received the same message. What can I do to edit the submission?**

*Answer:* When a person is editing a submission, it becomes "locked" for editing by others. Sometimes a record will remain locked even though the original user is no longer editing it because the user was unable to exit from the edit mode. To exit completely from the edit mode, a user must select "Save this record" or "Cancel these changes." When a record is locked from editing by others because of an incomplete exit, the PCS Supervisor can view the locked record, identify the user holding the lock, and "unlock" the record.

### **4. What would make a submission invalid?**

*Answer:* An invalid submission would be a survey that was not fully completed i.e., items left blank, or 2 inconsistent answers. Please see [validations](#).

### **5. Can an entry be printed once completed?**

*Answer:* Yes. At the bottom of the List of Submissions, you will find an option to print a range of surveys. Choose one or several to print at a time. Remember, you should only print surveys if you need to do so for your own purposes. Do not send paper forms to OMH.

**6. In 2013, Health Home Care Management programs for adults were required to report in the PCS for their clients who were previously served in targeted case management programs. Do they still do so?**

*Answer:* No, Health Home Care Management (HHCM, program 2730) programs **do not** report in the 2015 PCS. However, Health Home **Non-Medicaid** Care Management (program 2620) programs do report adult and children with primary mental illness served in their programs.

**7. If one client has separate appointments with a doctor, a nurse and a clinician, do they need three PCS filled out?**

*Answer:* If all three appointments are in the same program, then no, only one survey needs to be filled out, but make sure you indicate all the dates of service.

**8. In a residential placement, what happens if a resident is on a trial visit at another site?**

*Answer:* If your facility is holding a bed for the client, report on them as if they were in residence for the survey week.

**9. Are all the behavioral health ICD diagnosis listed in the diagnosis drop-down lists for DSMIV/ICD9 and DSM5/ICD10?**

*Answer:* Starting October 28<sup>th</sup>, all current DSM5/ICD10 diagnoses and all DSMIV/ICD9 behavioral health diagnoses current as of 9/20/2015 will be listed..

### **Section 3: CAIRS-MHARS**

**1. One of our unit/sites has data imported from Child and Adult Integrated Reporting System (CAIRS) or Mental Health automated Record System (MHARS) and there are a large number of clients on the associated drop-down roster. Should we create a PCS submission for each client that appears on the associated client roster?**

*Answer:* You should create a submission for only those clients who received a service during the survey week, which may or may not include the entire roster.

**2. One of our unit/sites has data imported from CAIRS or MHARS. How can I find a particular client on this large list to include in the PCS?**

*Answer:* The drop-down client roster exhibits a column for each of the following variables: Client's First name, Client's Last name, Date of Birth, Gender, and CAIRS (or MHARS) ID. It may be sorted by any of these columns by clicking on the column header. Click any header a second time to sort in reverse order.

## Section 4: Uploads

### **1. Once you upload data, will the data appear on survey forms like other submissions and can the data be edited?**

*Answer:* Yes. Once data is successfully uploaded, it appears in PCS just as any other submission and can be edited and corrected in the same manner.

### **2. Are the specifications on the layout of the data for uploading affected by new questions that are being asked this year? Will we need to revamp our format from 2013?**

*Answer:* Yes. New questions and new requirements mean that the file layout will be different. Please see "[Using the Electronic Data Upload Feature](#)" for more information.

## Section 5: Other Questions

### **1. May I fill out a paper copy of the survey form and have someone else at my facility enter it into the PCS application?**

*Answer:* Yes. To access a paper copy, click on survey form hyperlink on <http://www.omh.ny.gov/omhweb/pcs/submissions/> . Please do not send OMH the paper forms.

### **2. Is there a phone number/live person that we can speak to?**

*Answer:* Yes, you can call 1-800-HELP-NYS for assistance in accessing PCS. The OMH Service Center can also take a message and direct your call to the proper department if you have more questions.

### **3. What are the statutes that give OMH authority to collect the Patient Characteristics Survey?**

*Answer:* **The NYS Office of Mental Health is a health oversight agency. HIPAA permits covered entities to disclose Protected Health Information to a health oversight agency for oversight activities authorized by law, such as audits, licensure activities, program monitoring and evaluation, or the licensure of facilities (See 45 C.F.R. Section 164.512(d). Conducting the Patient Characteristics Survey is consistent with OMH's oversight activities as detailed in NYS Mental Hygiene Law Section 7.07. The Mental Hygiene Law also authorizes Commissioners to examine records and obtain such information as may be required to carry out his or her responsibilities, requires the Commissioner to periodically evaluate all services for individuals with serious mental illness,(including those that are provided by licensed providers) and states that Commissioners may require that statistical information about patients or clients be reported to the Offices.**

**4. If we are using the client's full name do we need releases to protect confidentiality?**

*Answer:* No release is necessary. State and Federal law permit disclosure of protected health information (PHI) for activities related to oversight of the public mental health system. The Patient Characteristics Survey has always collected PHI, for example, date of birth, gender, date of service and zip code of residence. In 2011, full name replaced initials to help with identifying unique individuals and linkage of the PCS with other OMH data systems. We also protect that data, both with secure servers and personnel who have been fully trained in handling data per Health Insurance Portability and Accountability Act provisions. No PHI is released from OMH, all such data is stripped before any composite PCS data is made available to anyone.

**5. Can the survey be completed over the phone with clients that week or does it need to be face to face?**

*Answer:* The PCS is not designed to be completed directly with clients, but rather answered from data stored in your facility's records. In general, your answers will be drawn from data that you have collected previously. If you are supplementing the data stored in your records, it is best to collect the data through a face to face interview.

**6. We do not track Gender and Sexuality and aren't sure about asking our clients about Transgender identity or Sexual Orientation. What should we do? Is it necessary to collect this information?**

*Answer:* For the purposes of PCS, reporting on Gender Identity and Sexuality allows OMH to identify underserved populations and to plan for and provide better services statewide.

*Answer:* For your facility, asking the questions of your clients may give you a better clinical picture and help you provide better service for your clients, but you need to decide what to ask. For example, what is appropriate for a clinic may not be helpful for a drop-in center. When the questions are asked, however, this information is asked of all clients, heterosexual, lesbian, gay, bisexual, transgender, or other. As with all client data, PCS data are HIPAA protected and kept strictly confidential. It may be helpful to assure your clients about all three of these elements; that this information is asked of everyone, it allows for improved care, and is completely confidential. And, while we recommend that you add this question to your clinical records, if you do not have the information for the 2015 PCS, you may answer "unknown."

The OMH Bureau of Cultural Competency has some fine training videos and webinars available to help your clinicians to feel more comfortable in asking these important questions. One highly recommended webinar is called ["Collecting Sexual Orientation and Gender Identity Information on the OMH 725 Patient Admission Form"](#)

**7. If a resident does not want to disclose his/her gender or sexual orientation is that unknown or other?**

*Answer:* Enter “client didn’t answer.” If the client has not been asked to self-identify, please answer “unknown.” Do not guess.

**8. How do I respond when a client refuses to answer questions on the survey?**

*Answer:* The PCS is not designed to be completed directly with clients, but rather answered from data stored in your facility’s records. In general, your answers will be drawn from data that you have collected previously. Information needs to be updated if not relatively current. If you choose to supplement that data, it may be helpful to assure your clients that this information is asked of all clients, and, as with all client data, is HIPAA protected and kept strictly confidential. However, if a client refuses to answer, please enter “client didn’t answer” if that choice is in the response set. Otherwise, answer “unknown.”

You need to decide whether asking the questions of your clients helps you provide better service for your clients. For example, what is appropriate for a clinic may not be helpful for a drop-in center.

**9. Are integrated licensed programs required to report all of their clients, including cases from other agencies (such as OASAS cases)?**

*Answer:* Integrated licensed programs that are an OMH host site should report all clients who receive a mental health service during the survey week.