

Using PSYCKES Quality Indicator Reports

We will begin shortly

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Erica Van De Wal-Ward Medical Informatics Project Director PSYCKES Team July 31, 2018

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
- Note: slides will be emailed to attendees after the webinar



Overview

- What is PSYCKES?
- Quality Indicators "Flags"
- Demonstration using "High Utilization" Indicator
 - My QI Report
 - Recipient Search
 - Clinical Summary
- PSYCKES Training and Technical Assistance
- Question & Answer

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 data-driven clinical decisionmaking and quality improvement
- Ongoing data updates



Who is Viewable in PSYCKES?

- Over 7 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:
 - Health Home enrollment and CM provider information (DOH MAPP)
 - Managed Care Plan & HARP status (MC Enrollment Table)
 - State Psychiatric Center EMR
 - ACT provider and contact information (OMH CAIRS)
 - AOT provider and contact information (OMH TACT)
 - Suicide attempt incidents (OMH NIMRS)

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
- My QI Report provides prevalence information at the program, agency, MC plan, region, and state levels
- 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
 - HARP-Enrolled, Not Health Home Enrolled

QI Flag: High Utilization



PSYCKES Quality Indicator: High Utilization Inpt/ER

Clients of all ages who had two or more ER visits or inpatient stays in the past 12 months for any cause, or for specific cause in selected sub-indicator

- 2+ ER BH (Behavioral Health)
- 2+ ER Medical
- 2+ ER MH (Mental Health)
- 2+ Inpatient BH
- 2+ Inpatient Medical
- 2+ Inpatient MH
- 4+ Inpatient/ER MH
- 2+ Inpatient / 2+ ER Summary

PSYCKES Quality Indicator: High Utilization Inpt/ER

- My QI Report
 - Updated Monthly
 - Eligible Population (Denominator) is clients served
 - Number with QI Flag (Numerator) is clients who had 2 or more inpatient or ER visits in past 12 months, as of report date
 - Compare prevalence rates for provider agency, region, state
 - Drill down into list of recipients who meet criteria for flag
 - Filter report by: Program Type, MC Plan, Age
- Recipient Search
 - Updated Monthly
 - Identify number of clients who meet criteria for HU flag and view list
 - Choose from wide variety of other report filters
- Reports can be exported to Excel and PDF

My QI Report



My QI Report

My QI Report Sta	atewide Reports	Recipient Search	Provider	r Search R	legistrar+	Usage Reports +	Utilizatio	on Reports	MyCHO	ois
		MAIN		IENTAL HEA tor Overview As Of		TER ()			PDI	Excel
REGION: ALL COUNTY: ALL S	SITE: ALL PROGRAM 1	TYPE: ALL AGE: ALL MC	PRODUCT LINE: A	ALL MANAGED C	ARE-ALL DSRII	P PPS:ALL			Filters	Reset
Indicator Set										
Indicator Set	•	Population	Eligible Population	# with QI Flag	%	Regional %	Statewide %	25%	50% 75%	100%
BH QARR - DOH Perform Measure - as of 12/01/2		All	429	225	52.4 5	65.64	66.45		52.45 65.64 66.45	
BH QARR - Improvemen	t Measure	All	116	38	32.76	34.74	35.54	3	2.76 4.74 85.54	
General Medical Health		All	1,975	399	20.20	10.65	12.05	10.65 12.05		
Health and Recovery Pla	an (HARP)	Adult 21+	285	263	92.28	87.97	85.87			92.: 87.97 85.87
High Utilization - Inpt/EF	R	All	1,975	406	20.56	22.91	23.72	20.56 22.91 23.72		
Polypharmacy		All	338	27	7.99	12.63	12.24	7.99 12.63 12.24		
Preventable Hospitaliza	tion	Adult	1,715	11	0.64	1.04	0.89	0.64 1.04 0.89		
Readmission Post-Disch Hospital	narge from any	All	293	34	11.60	12.85	11.49	11.60 12.85 11.49		
Treatment Engagement		(0-64) yrs	92	36	39.13	39.42	39.36		39.13 39.42 39.36	V

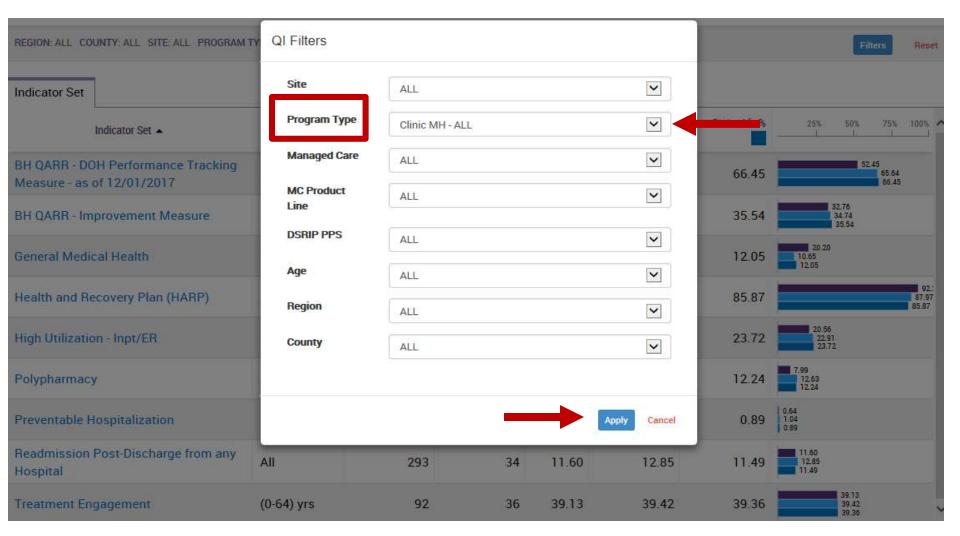
My QI Report: Filter by Program Type

MAIN STREET MENTAL HEALTH CENTER (A

	MA	IN STREET M Quality Indicat	tor Overview As Of 06		ER 9		PDF	Excel
REGION: ALL COUNTY: ALL SITE: ALL PROGRAM	TYPE: ALL AGE: ALL	MC PRODUCT LINE: A	ALL MANAGED CAP	RE:ALL DSRIP	PPS:ALL		Filters	Reset
Indicator Set								
Indicator Set 🔺	Population	Eligible Population	# with QI Flag	%	Regional %	Statewide %	25% 50% 75% 11	00%
BH QARR - DOH Performance Tracking Measure - as of 12/01/2017	All	429	225	52.45	65.64	66.45	52.45 65.64 66.45	
BH QARR - Improvement Measure	All	116	38	32.76	34.74	35.54	32.76 34.74 35.54	
General Medical Health	All	1,975	399	20.20	10.65	12.05	20.20 10.65 12.05	
Health and Recovery Plan (HARP)	Adult 21+	285	263	92.28	87.97	85.87		92.: 87.97 85.87
High Utilization - Inpt/ER	All	1,975	406	20.56	22.91	23.72	20.56 22.91 23.72	
Polypharmacy	All	338	27	7.99	12.63	12.24	7.99 12.63 12.24	
Preventable Hospitalization	Adult	1,715	11	0.64	1.04	0.89	0.64 1.04 0.89	
Readmission Post-Discharge from any Hospital	All	293	34	11.60	12.85	11.49	11.60 12.85 11.49	
Treatment Engagement	(0-64) yrs	92	36	39.13	39.42	39.36	39.13 39.42 39.36	

39.42 39.36

My QI Report: Filter by Program Type

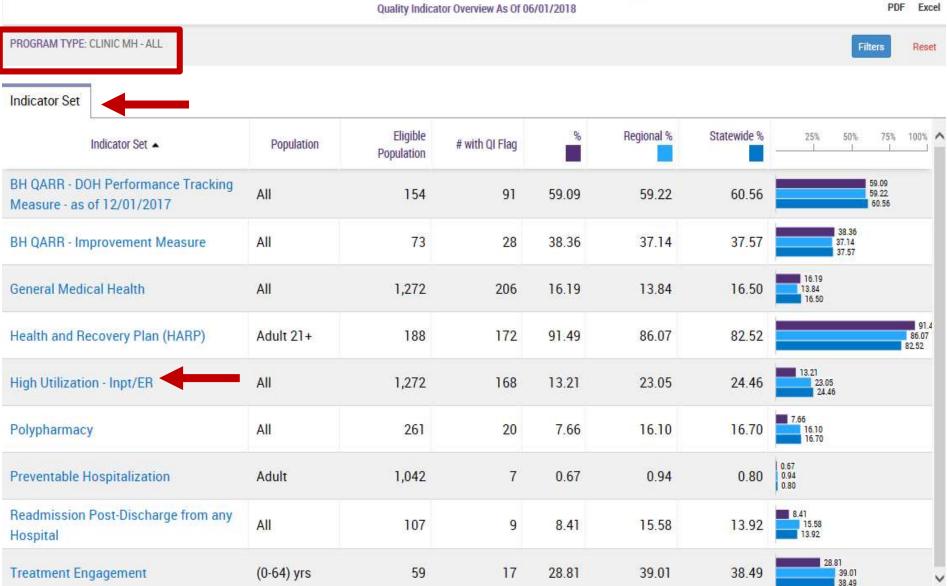




My QI Report: Drill into Indicator Set

MAIN ST

TREET MENTAL HEALTH CENTER	9
uality Indicator Overview As Of 06/01/2018	



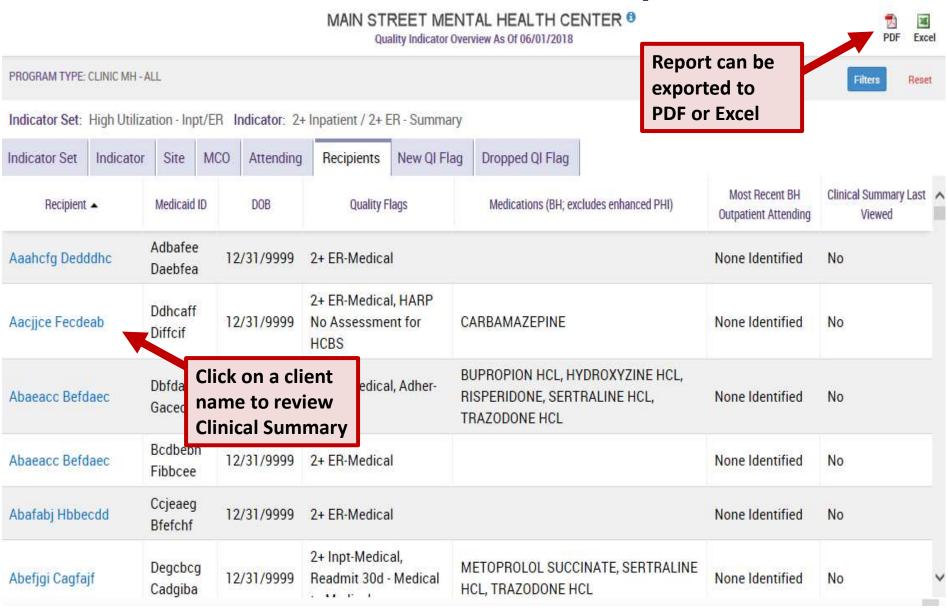




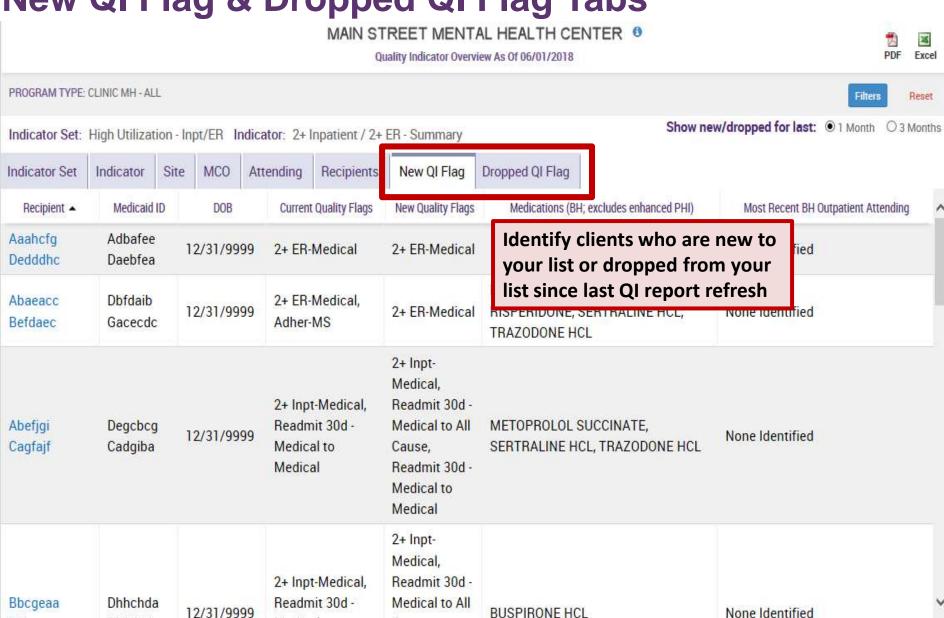
Quality	Indicator	Overview	As Of	06/01	/201	8
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PROGRAM TYPE: CLINIC MH - ALL							Filters Reset
Indicator Set: High Utilization Indicator Set Indicator	- Inpt/ER Population	Eligible Population	# with QI Flag	%	Regional %	Statewide %	25% 50% 75% 100%
2+ ER - BH	All	1,272	12	0.94	3.66	3.85	0.94 3.66 3.85
2+ ER - Medical	All	1,272	147	11.56	18.66	20.12	11.56 18.66 20.12
2+ ER - MH	All	1,272	'n	0.86	2.86	3.03	0.86 2.86 3.03
2+ Inpatient - BH	All	1,272	7	0.55	3.01	3.03	0.55 3.01 3.03
2+ Inpatient - Medical	Select indicator to	1,272	21	1.65	3.09	2.84	1.65 3.09 2.84
2+ Inpatient - MH	generate report of flagged clients	1,272	4	0.31	1.69	1.71	0.31 1.69 1.71
4+ Inpatient/ER - MH	All	1,272	5	0.39	1.57	1.58	0.39 1.57 1.58
2+ Inpatient / 2+ ER - Summ	ary All	1,272	168	13.21	23.05	24.46	13.21 23.05 24.46

List of Clients who Meet Criteria: Export to Excel



New QI Flag & Dropped QI Flag Tabs



HH/CM Sites Tab for Health Homes & CMAs

COMMUNITY HEALTHCARE NETWORK, INC. 9

Quality Indicator Overview As Of 06/01/2018





REGION: ALL COUNTY: ALL SITE: ALL PROGRAM TYPE: ALL AGE: ALL MC PRODUCT LINE: ALL MANAGED CARE: ALL DSRIP PPS: ALL											
Indicator Set: High Utilization - Inpt/ER Indicator: 2+ Inpatient / 2+ ER - Summary											
Indicator Set Indicator Site HH/C	M Site(s) MCO Attending	Recipients	New QI Flag	Dropped QI Fla	g						
Site Name (Source: DOH)	Site Address		Program Type Status) ▼	e (Enrollment	Eligible Population	# with QI Flag	%				
QUEENS COORDINATED CARE PARTNERS LL	60 MADISON AVE FL 5	60 MADISON AVE FL 5			6,026	1,759	29.19				
COMMUNITY CARE MANAGEMENT PARTNERS	1250 BROADWAY FL 22	1250 BROADWAY FL 22			5,889	1,727	29.33				
COMMUNITY HLTHCARE NETWORK AI	60 MADISON AVE FL 5		Health Ho Enrolled (S DOH)		5,570	1,636	29.37				
HOUSING WORKS INC AI	Select HH or CMA to		Care Mana Enrolled (S DOH)	_	172	59	34.30				
COMMUNITY HEALTH ACTION OF SI	list of clients in that program who meet criteria for the indic		Care Mana Enrolled (S DOH)	_	14	5	35.71				

Care Management -

HH/CM's Recipients

COMMUNITY HEALTHCARE NETWORK, INC. •





Quality Indicator Overview As Of 06/01/2018

	quality indicator overview as a contract of											
REGION: ALL COUNTY: ALL SITE: ALL PROGRAM TYPE: ALL AGE: ALL MC PRODUCT LINE: ALL MANAGED CARE: ALL DSRIP PPS: ALL											eset	
Indicator Set:	High Utilization -	Inpt/ER Indicato	t/ER Indicator: 2+ Inpatient / 2+ ER - Summary									
Indicator Set	Indicator Sit	e HH/CM Site(s) HH/CM's Re	ecipient(s)	мсо	Attendi	ng Recipients	New QI Flag	Dropped QI Flag			
Reci	pient 🔺	Medicaid ID	DOB	Qu	ality Flags		Attending		Site Address	Program Type	^	
Aaihdbf Ajcdj	ide	ladfaih Jffgheh	12/31/9999	2+ ER-BI Medical	Н, 2+ ER-		MBAIDJOL MOROMBAYE KA	_{SBRA} 57 WI	LLOUGHBY ST STE 2	Care Managemen - Enrolled (Source: DOH)	nt	
Acgcjae Jcffo	dfb	Hjbafdd Hhdcfid	12/31/9999	2+ FR-Medical		SHRIER ERIC MAURICE 57 WILLOUGHB		LLOUGHBY ST STE 2	Care Managemen - Enrolled (Source: DOH)	ıt		
Adcafed Eech	pecb	Agdbcac Diahaff	12/31/9999	2+ Inpt-Medical		YOE LINUS MYIN LWIN	T 57 WI	LLOUGHBY ST STE 2	Care Managemen - Enrolled (Source: DOH)	nt		
W1 1 5		Biafecg	10/01/0000	0 5014	l: Lae	ND(4)	GROSSMAN EVA	N	LLOUIDURY OT OTE O	Care Managemen	nt 🗸	

Understanding My QI Report

- Attributing clients to agency QI reports:
 - Clients linked to provider agency if served by agency in the past
 9 months
 - This rule is used to automatically link clients to providers so that current clients are included in the report each month
- Period of observation for the quality indicator:
 - Assessed by a measure, varies for each measure
 - For example, the period of observation for the High Utilization quality indicator is 12 months
- Trending over time:
 - The PSYCKES team is working to add trending reports to My QI Report to show the prevalence rates of quality flags by provider over time

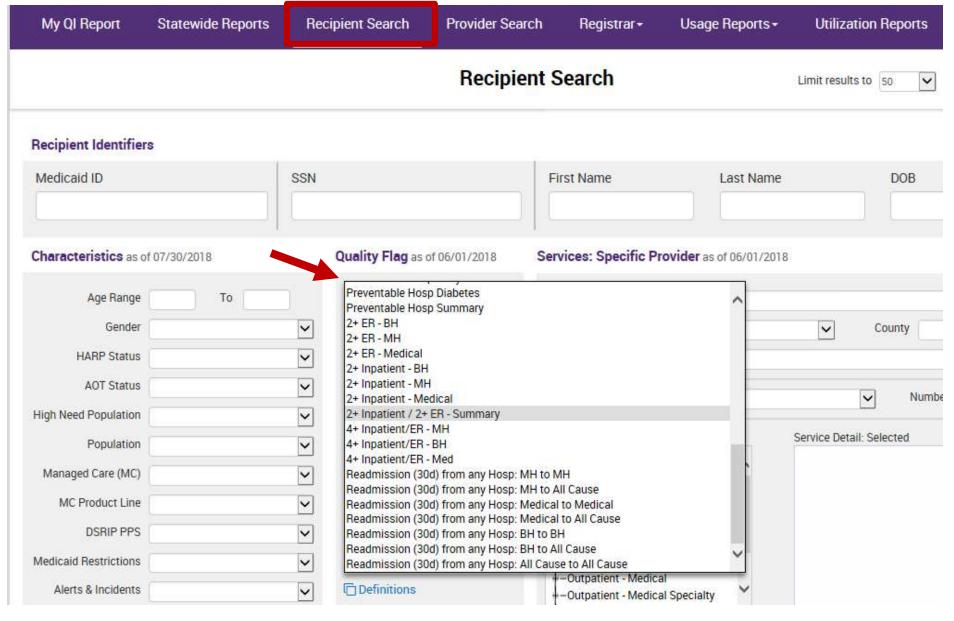
Recipient Search



Recipient Search: Search for Clients Flagged for High Utilization

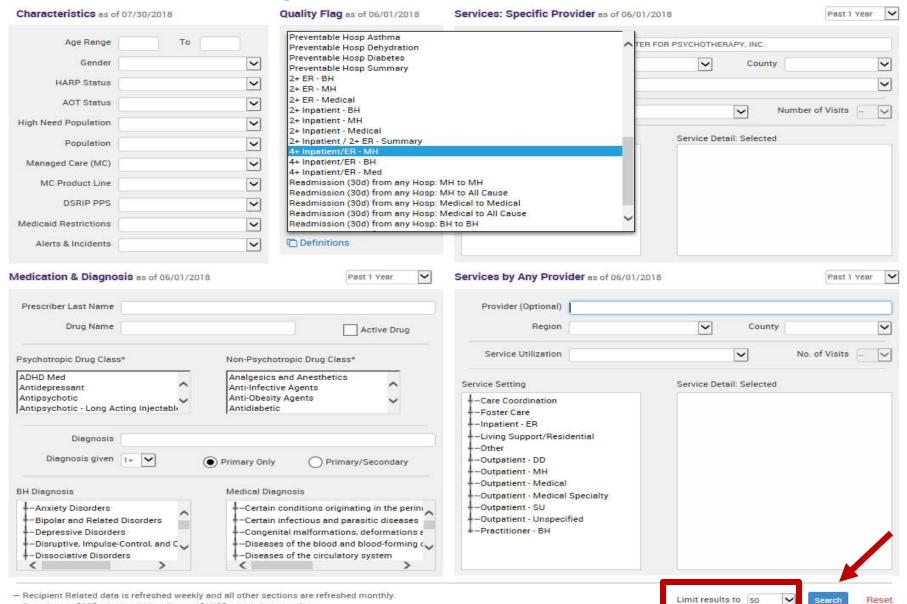
- 1. Select "Recipient Search" from Navigation Bar
- 2. Select one of the High Utilization flags (2+ or 4+ Inpatient or ER) from "Quality Flag" filter box
- 3. Choose from other filter options, if desired
- 4. Consider expanding "Limit results to" option in order to see more than 50 names in results page
- 5. Click Search

Select "2+" or "4+" High Utilization flag and click "Search"



Select other filter options and click "Search"

- Search uses "OR" criteria within a list and "AND" criteria between lists.



Search Results: Click on name to view Clinical Summary



Review recipients in results carefully before accessing Clinical Summary.

Maximum Number of Rows Displayed: 50

Name	Á	Medicaid ID	DOB \$	Gender	Quality Flags	Managed Care Plan	÷
Abhhecf Aicgbii		Cbdcfid Bdfaaee	01/01/9999	Jecibda Eajbeaj	2+ ER-BH, 2+ ER-MH, 2+ Inpt-BH, 4+ Inpt/ER-BH, 4+ Inpt/ER-MH, BH QARR - DOH, Readmit 30d - BH to BH		^
Agjcfib Ihhhiab		Egbeeih Gejaace	01/01/9999	Fdcbjjj Cdbfcaj	2+ ER-BH, 2+ ER-MH, 2+ ER-Medical, 4+ Inpt/ER-BH, 4+ Inpt/ER-MH, BH QARR - DOH	Fidelis Care New York	
Bghdfaf Beghgfg	na	ck on a recipion me to review nical Summar	01/9999	laaiffc Cdfffgb	2+ ER-BH, 2+ ER-MH, 2+ Inpt-BH, 2+ Inpt-MH, 4+ Inpt/ER-BH, 4+ Inpt/ER-MH, BH QARR - DOH, No Gluc/HbA1c & LDL-C - AP, No Gluc/HbA1c - AP, No LDL-C - AP	UnitedHealthcare Community Plan	
Bichbfc Cbfefdg		Ifcabbd ljbadjg	01/01/9999	Ajadidb Dcdbdbh	2+ ER-BH, 2+ ER-MH, 2+ Inpt-BH, 2+ Inpt-MH, 4+ Inpt/ER-BH, 4+ Inpt/ER-MH, No Outpt Medical		V

Clinical Summary

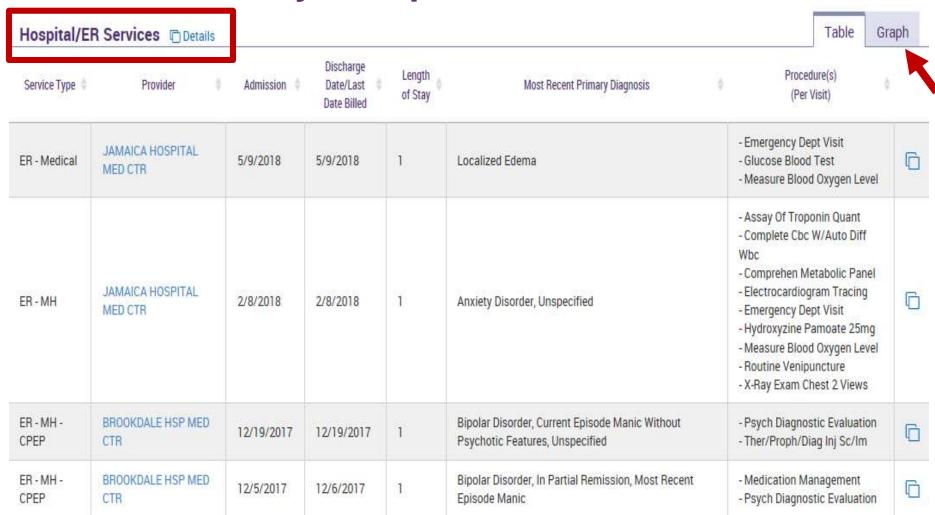


Clinical Summary: Quality Flags

My QI Report Statewide Reports	Recipient Search	Provider Search	Registrar +	Usage Reports •	Utilization Reports	MyCHOIS
Recipient Search		Dgfjfhe Aa				PDF Excel CCI
Sections		his report contains all av PHI - Data with Special Pr		Hide	Summary Period 1 Yr	2 Yrs All
General						
Name Dgfjfhe Aagebje	Medicaid ID ABIDHGD HBAJBGH		Medicare No		DSRIP PPS New York City Healt Corp PPS	h and Hospitals
DOB 01/01/9999 (999 Yrs)	Medicaid Aid Categor N/A	у	Managed Care Pl Healthfirst PHSP	l <mark>an</mark> P, Inc. (Mainstream)		
Address Dcdeahb Ddfffhf, Daaeacd Cebhfai, Icabijj Cbhffbe, Ejhhcfe Ibaacbi	Medicaid Eligibility E	xpires on	HARP Status Not Eligible			
Quality Flags as of monthly QI report 6/1	/2018 🖺 Definitions				Recent All (Graph	n) All (Table)
Indicator Set	\$					
General Medical Health	Diabetes Monit	oring-No HbA1c >1 Yr				
High Utilization - Inpt/ER	2+ ER - BH •	2+ ER - MH • 2+ ER - N	Medical • 4+ Inpa	tient/ER - MH		
Treatment Engagement	Adherence - Mo	ood Stabilizer (Bipolar)				



Clinical Summary: Hospital/ER Services





PSYCKES Training & Technical Assistance



PSYCKES Training

- PSYCKES website: www.psyckes.org
- Webinars
 - Live webinars: Register on PSYCKES Calendar
 - Recorded webinars: Posted on PSYCKES Website
 - Using PSYCKES for Clinicians
 - Enable Access to Client-Level Data in PSYCKES
 - Using PSYCKES Recipient Search
 - PSYCKES Mobile App for iPhones & iPads
 - Access & Implementation
- PSYCKES User's Guides
 - www.psyckes.org > About PSYCKES > Training
 - Each User's Guide explains an individual section of the PSYCKES application

Helpdesk Support

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

