



**Office of
Mental Health**

New PSYCKES Features Training

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

If you do not see the Audio Connection box, go to the top of your WebEx screen, click “Communicate” > “Audio Connection” > “Join Teleconference”

Erica Van De Wal, MA
PSYCKES Implementation Team
2015

Question & Answer 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” box
- Submit to “all panelists” (default)
- Please do not use Chat function for Q&A
- Slides will be emailed to attendees after the webinar

Overview

- PSYCKES-Medicaid Overview
- Use My QI Report to identify:
 - Managed Care Organizations clients are enrolled in
 - Date Clinical Summary was last viewed for flagged clients
- Use Recipient Search to identify clients based on:
 - AOT Status, MC Organization, HARP Eligibility, ACT Services, Health Home Outreach or Enrollment
- New information in the Clinical Summary
- How to contact PSYCKES-Help
- Question & Answer

PSYCKES-Medicaid Overview



**Office of
Mental Health**



Quality Indicator Overview As Of 08/01/2015

Provider Details Find Provider

Provider: Main Street Mental Health Clinic

Export PDF Excel

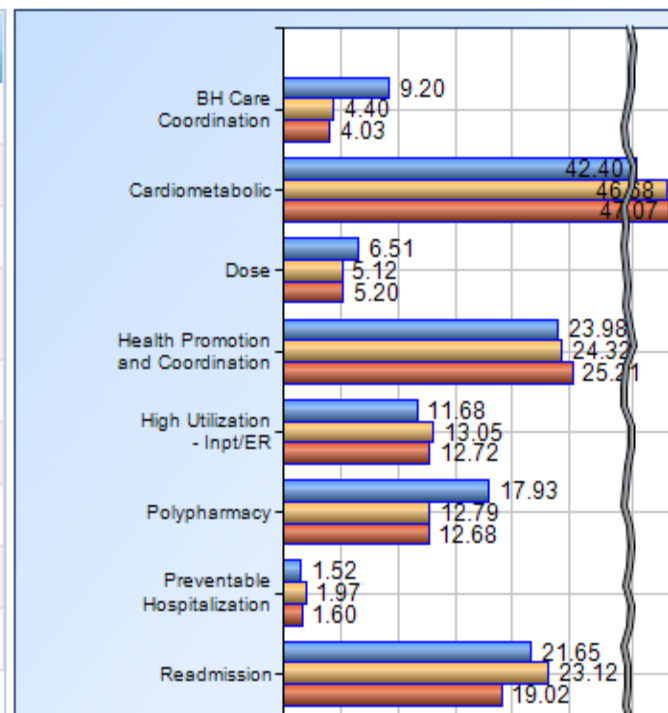
Modify Filter Region:ALL, County:ALL, Site:ALL, Attending:ALL, Program Type:ALL, Age:ALL, Population:ALL, Managed Care Program:ALL

Select Indicator Set for Details

Report View Type: ☐ Report Only ☐ Graph Only ☒ Both

Indicator Set

Indicator Set ▲	Population	Eligible Population	# with QI Flag	%	Regional %	Statewide %
BH Care Coordination	All	19,637	1,806	9.20	4.40	4.03
Cardiometabolic	All	2,670	1,132	42.40	46.68	47.07
Dose	All	8,116	528	6.51	5.12	5.20
Health Promotion and Coordination	All	19,637	4,708	23.98	24.32	25.21
High Utilization - Inpt/ER	All	19,637	2,293	11.68	13.05	12.72
Polypharmacy	All	6,231	1,117	17.93	12.79	12.68
Preventable Hospitalization	Adult	15,764	240	1.52	1.97	1.60
Readmission	All	2,189	474	21.65	23.12	19.02
Youth Indicator	Child	1,254	306	24.40	19.50	22.57





Statewide Report As Of 08/01/2015

Indicator Set*

* Mandatory Field

High Utilization - Inpt/ER

Indicator Type

4+ Inpatient/ER - All

Region

ALL

County

ALL

Managed Care Program:

ALL

Program Type

ALL

Age Group

ALL

Population:

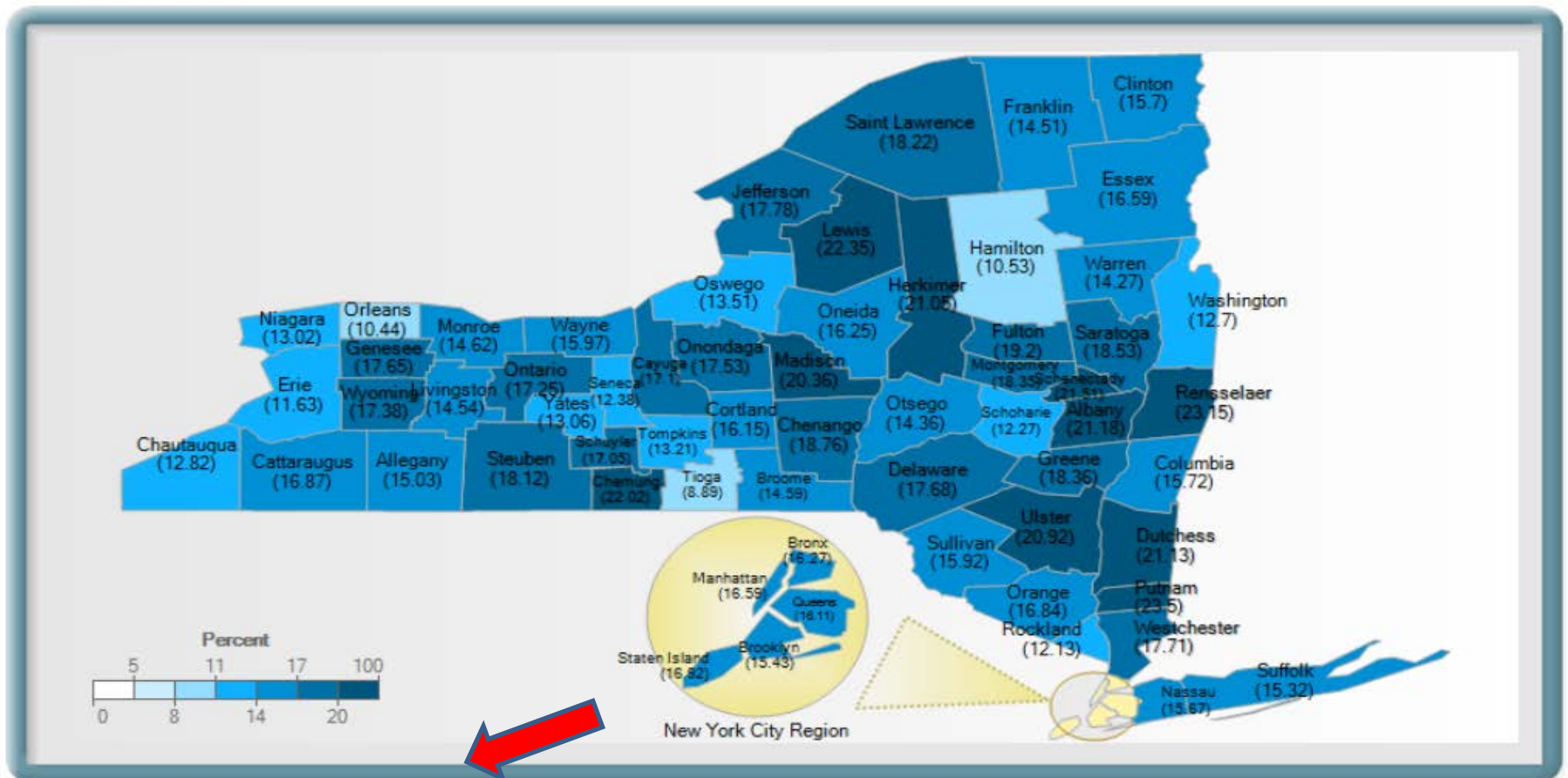
ALL



Submit

Reset

Indicator Set:High Utilization - Inpt/ER, **Indicator Type:**4+ Inpatient/ER - All, **Region:**ALL, **County:**ALL, **Program Type:**ALL, **Age Group:**ALL, **Population:**ALL, **Managed Care Program:**ALL





Recipient Identifiers

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

Recipient Characteristics - as of: 10/09/2015

Quality Flag*: 08/01/2015 Definitions

Age Group:

Gender:

HARP Status:

AOT Status:

Population:

Managed Care (MC):

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

Medication & Diagnosis: 08/01/2015

Past 1 Year

Prescriber Last Name:

Drug Name: Active Drug: ☐

Psychotropic Drug Class*:

ADHD Med
Antidepressant
Antipsychotic
Anxiolytic/Hypnotic
Mood Stabilizer
Side-Effect Management

Non-Psychotropic Drug Class*:

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

Diagnosis:

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

BH Diagnosis*:

Adjustment Disorder
Anxiety Disorder
Attention Deficit Disorder
Autism & Pervasive Developmental Dis
Bipolar Disorder
Conduct Disorder

Medical Diagnosis*:

Certain Conditions Originating in the Pe
Complications of Pregnancy, Childbirth,
Congenital Anomalies
Diabetes
Diseases of Skin and Subcutaneous Ti
Diseases of the Blood and Blood-Formi

Services by a Specific Provider: 08/01/2015

Past 1 Year

Provider:

Region: County:

Current Access Status:

Service Utilization: Number of Visits:

Service Setting*:

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

Service Detail: Selected

Services by Any Provider: 08/01/2015

Past 1 Year

Provider(Optional):

Region: County:

Service Utilization: Number of Visits:

Service Setting*:

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

Service Detail: Selected

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

Maximum No. of Rows to be displayed: 50

Search

Reset



Provider Search



Pick Region or County

Select Region

Select County

Alphabetical Search

A B C D E F G H I J K L M

N O P Q R S T U V W X Y Z

0-9



PSYCKES Medicaid Protected Health Information (PHI) Access Menu

Enable access to client's Clinical Summary by attesting to one or more of the following:

- Client signed a consent form
- Client data is needed due to clinical emergency
- Client is served at/is being transferred to your provider agency

Register client's withdrawal of consent to disable access to client data. Client must sign the PSYCKES Withdrawal of Consent Form located in the Registrar Menu > Consent Forms. For clients of lead Health Homes, the DOH Health Home Withdrawal of Consent form can be used.

Note: under certain circumstances (e.g., client quality flag), your provider agency may still have access to limited client data.

Deactivate an attestation of service that created a manual link between a client and your provider agency.

Note: Clients may still be linked to your provider agency based on Medicaid data.



[My QI Report](#) [Statewide Reports](#) [Recipient Search](#) [Provider Search](#) [Registrar Menu](#) [Usage Reports](#) [User Settings](#)

[PSYCKES Users](#) [PHI Access Module](#) [Clinical Summaries](#)

PSYCKES User Activity

Export to PDF Excel

Provider:

User Status: Registrar:

Date Range: Start date End date

Graph Interval: ☐ Quarterly ☒ Monthly ☐ Weekly

User Information:

Setting:

State Provider (e.g. OMH, DOH, OASAS)
Local Government Unit
BHO - Behavioral Health Organization
MCO - Managed Care Organization
Provider Administration
Health Home Administration
Case Management
Emergency Department/CRP

Role in Organization:

Leadership (e.g. CEO, Dept. Chair, Prg Director, Administrator, et
Quality Management (QI/QA/UR)
Information Technology
Administrative Support (clerical, registration/medical records)
Attending Physician
Peer Worker
SW, RN, NP, Other Clinician/Direct Service
Resident/Intern/Trainee

Licensed Profession:

Physician
Physician - Limited 3-year license
Physician Assistant
Registered Professional Nurse
Nurse Practitioner
Licensed Practical Nurse
Licensed Master Social Worker (LMSW)
Licensed Clinical Social Worker (LCSW)



Office of
Mental Health

PSYCKES

Log Off

☐ My QI Report ☐ Statewide Reports ☐ Recipient Search ☐ Provider Search ☐ Registrar Menu ☐ Usage Reports ☒ User Settings

☒ Change My Home Page ☐ Update My User Profile

Update My Home Page (Changes will be reflected at next login.)



My QI Report



Statewide Reports

A screenshot of the 'Recipient Search' interface. It shows a complex search form with multiple fields for filtering results, including dropdown menus and text input fields.

Recipient Search



Provider Search

Save

My QI Report: MCO tab



**Office of
Mental Health**

Review Quality Indicator prevalence for each MC Plan in which your clients are enrolled

1. Go to “My QI Reports”
 - Review prevalence rates for your organization on all indicators
2. Use “Modify Filter” to select specific program type of interest within your organization, for example Clinic MH
3. Select desired indicator set from table
4. Select sub-indicator or “summary”
5. Click on “MCO” tab

1. Click “My QI Report” from top menu options

Quality Indicator Overview

Provider Details Find Provider

Provider: Main Street Mental Health Clinic

Export PDF Excel

Modify Filter

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

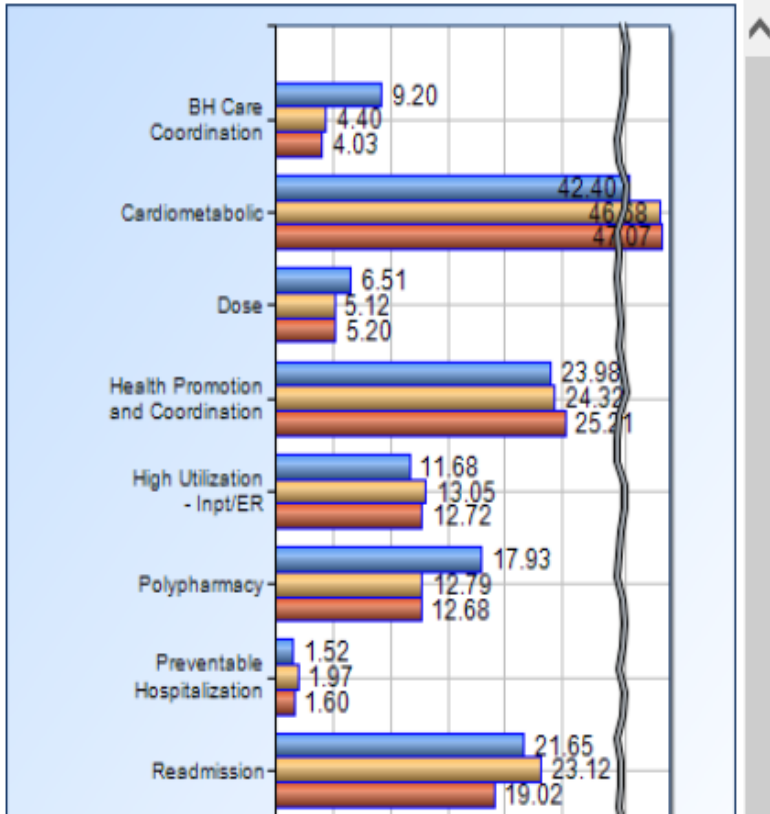
Select Indicator Set for Details

2. Click “Modify Filter” to select specific program type of interest within your organization, for example MH Clinic

Report View Type: ☐ Report Only ☐ Graph Only ☒ Both

Indicator Set

Indicator Set ▲	Population	Eligible Population	# with QI Flag	%	Regional %	Statewide %
BH Care Coordination	All	19,637	1,806	9.20	4.40	4.03
Cardiometabolic	All	2,670	1,132	42.40	46.68	47.07
Dose	All	8,116	528	6.51	5.12	5.20
Health Promotion and Coordination	All	19,637	4,708	23.98	24.32	25.21
High Utilization - Inpt/ER	All	19,637	2,293	11.68	13.05	12.72
Polypharmacy	All	6,231	1,117	17.93	12.79	12.68
Preventable Hospitalization	Adult	15,764	240	1.52	1.97	1.60
Readmission	All	2,189	474	21.65	23.12	19.02
Youth Indicator	Child	1,254	306	24.40	19.50	22.57



Modify Filter page in My QI Report

Quality Indicator Overview As Of 08/01/2015

Select a particular program type, for example, Clinic MH All and click "Submit"

Provider Details Find Provider

Provider: Main Street Mental Health Clinic

Export PDF Excel

Sites: ALL

Program Type:

Clinic - MH Specialty
Clinic - Medical Specialty - MH Dx/Svc
Clinic - Unspecified Specialty - MH Dx/Svc
Clinic MH - ALL
Community Residence - MH Specialty
Day Treatment - MH Specialty
Health Home - Enrolled (Source: DOH)
Health Home - Enrolled/Outreach (Source: DOH)

Population: ALL

Attending: ALL

Age: ALL
(0-17)
Adult (+18)

Region: ALL

County: ALL

Managed Care Program: ALL

Submit

Reset

Cancel

Quality Indicator Overview As Of 08/01/2015

Provider Details Find Provider

Provider: Main Street Mental Health Clinic

Export PDF Excel

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

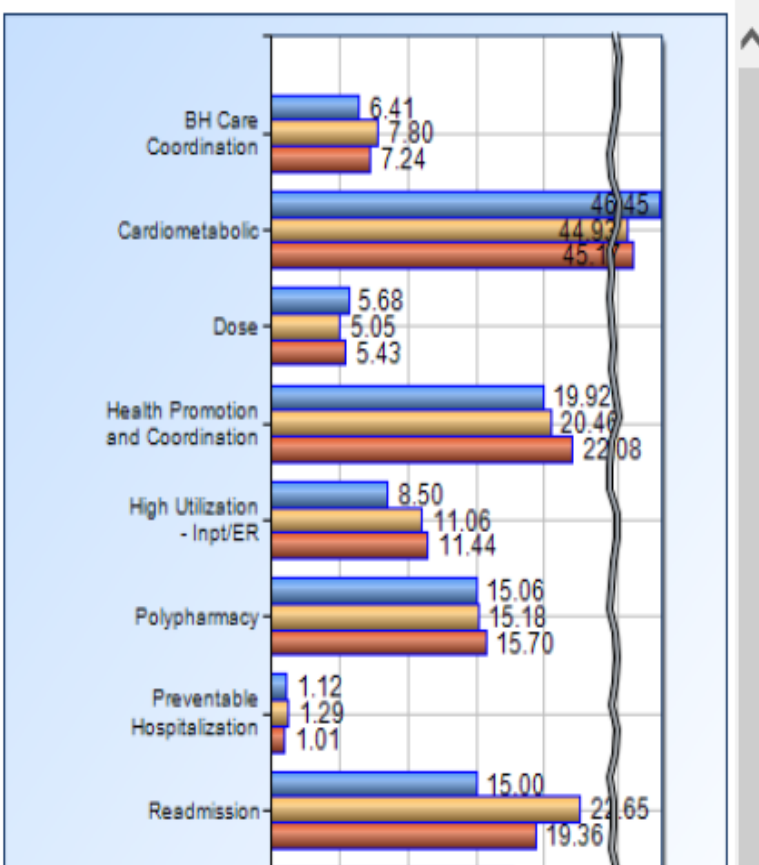
Select Indicator Set for Details

Report View Type: Report Only Graph Only Both

Indicator Set

Indicator Set ^	Population	Eligible Population	# with QI Flag	%	Regional %	Statewide %
BH Care Coordination	All	12,308	789	6.41	7.80	7.24
Cardiometabolic	All	1,266	588	46.45	44.93	45.17
Dose	All	5,004	284	5.68	5.05	5.43
Health Promotion and Coordination	All				20.46	22.08
High Utilization - Inpt/ER	All	12,308	1,046	8.50	11.06	11.44
Polypharmacy	All	3,746	564	15.06	15.18	15.70
Preventable Hospitalization	Adult	8,897	100	1.12	1.29	1.01
Readmission	All	840	126	15.00	22.65	19.36
Youth Indicator	Child	962	170	17.67	15.58	20.64

3. Select desired quality indicator set



Quality Indicator Overview As Of 08/01/2015

Provider Details Find Provider

Provider: Main Street Mental Health Clinic

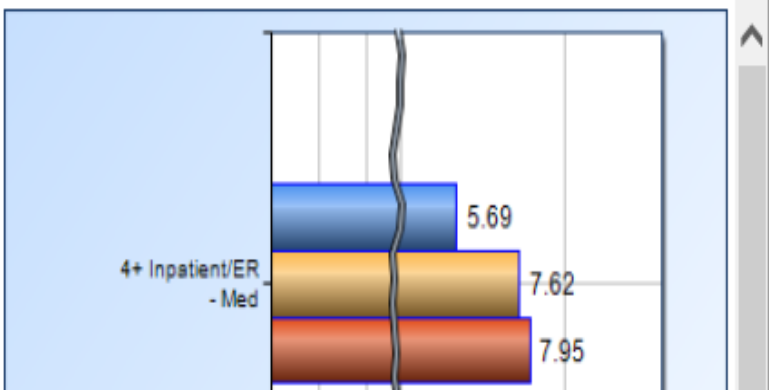
Export PDF Excel

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

Indicator Set:High Utilization - Inpt/ER Select indicator for detail. Report View Type: Report Only Graph Only Both

Indicator Set Indicator 4. Select sub-indicator or "summary"

Indicator	Population	Eligible Population	# with QI Flag	%	Regional %	Statewide %
4+ Inpatient/ER - Med	All	12,308	700	5.69	7.62	7.95
4+ Inpatient/ER - BH	All	12,308	202	1.64	2.58	2.46
4+ Inpatient/ER - All	All	12,308	1,046	8.50	11.06	11.44



Quality Indicator Overview As Of 08/01/2015

[Provider Details](#)
[Find Provider](#)

Provider: Main Street Mental Health Clinic

Export  PDF  Excel

[Modify Filter](#)

Region:ALL, **County:**ALL, **Site:**ALL, **Attending:**ALL, **Program Type:**Clinic MH - ALL, **Age:**ALL, **Population:**ALL, **Managed Care Program:**ALL

Indicator Set:High Utilization - Inpt/ER, **Indicator:**4+ Inpatient/ER - BH

5. Click on MCO tab

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

Recipient ^	Medicaid ID	DOB	Quality Flags	Medications (BH; excludes enhanced PHI)	Most Recent BH Outpatient Attending	Clinical Summary Last Viewed
Abaeacc Befdaec	Ddejfaa Ebbafbb	12/31/9999	3+ ER-BH, 4+ Inpt/ER-BH		John Smith	No
Abbaacc Bqdhiba	Cceifad Bfadcee	12/31/9999	3+ ER-BH, 4+ Inpt/ER-BH, No HbA1c-DM, No Outpt Med	BENZTROPINE MESYLATE, DIVALPROEX SODIUM, FLUPHENAZINE HCL	Ann Doe	No
Acajfcc Jhbdecb	Dfdeech Affdceb	12/31/9999	3+ ER-BH, 3+ Inpatient - BH, 4+ Inpt/ER-BH, 4+ Inpt/ER-Med, Readmit-All BH 30d	CLONAZEPAM, DULOXETINE HCL, LAMOTRIGINE, MIRTAZAPINE, PAROXETINE HCL	None Identified	No
Accibff Dbabbca	Hdficdf Fdbaach	12/31/9999	3+ Inpatient - BH, 4+ Inpt/ER-BH, 4+ Inpt/ER-Med, Adher-AP, Adher-MS, Readmit-All BH 7d	LAMOTRIGINE	None Identified	9/3/2015
Acejgfc Biafafd	Eibegeg Ebbecce	12/31/9999	3+ Inpatient - BH, 4+ Inpt/ER-BH, Adher-AP, Adher-MS, No Outpt Med	LITHIUM CARBONATE, QUETIAPINE FUMARATE	None Identified	10/8/2015

Quality Indicator Overview As Of 08/01/2015

Provider Details Find Provider

Provider: Main Street Mental Health Clinic

Export PDF Excel

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

Indicator Set: High Utilization - Inpt/ER, Indicator: 4+ Inpatient/ER - BH

Sort by MCO Census to see MCOs in which largest number of your clients are enrolled on top

Indicator Set Indicator Site HH/CM Site(s) MCO Attending Recipients New QI Flag Dropped QI Flag

Managed Care Name	MCO Census	Eligible Population for QI Flag	# With QI Flag	%
Healthfirst PHSP, Inc.	4,187	2,689	49	1.82
Fidelis Care New York	2,707	1,536	22	1.43
Amerigroup New York	1,974	1,103	12	1.09
UnitedHealthcare Community Plan	1,781	1,059	10	0.94
HIP (EmblemHealth)	1,374	819	25	3.05
Affinity Health Plan	1,298	894	18	2.01
MetroPlus Health Plan	1,098	562	8	1.42
WellCare of New York	184	84	1	1.19
VNSNY Choice Select Health	60	40	0	0.00
Amida Care	30	15	0	0.00

Click on MC Plan name to view list or Recipients in that plan who are flagged

Provider: Main Street Mental Health Clinic

Export PDF Excel

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

Indicator Set:High Utilization - Inpt/ER, Indicator:4+ Inpatient/ER - BH

Indicator Set	Indicator	Site	HH/CM Site(s)	MCO	MCO Recipient(s)	Attending	Recipients	New QI Flag	Dropped QI Flag
Recipient ▲		Medicaid ID	DOB	Quality Flags		Medications (BH; excludes enhanced PHI)		Most Recent BH Outpatient Attending	
Accibff Dbebbca		Hdficdf Fdbaach	12/31/9999	3+ Inpatient - BH, 4+ Inpt/ER -BH, 4+ Inpt/ER-Med, Adher-AP, Adher-MS, Readmit-All BH 7d		LAMOTRIGINE		None Identified	
Addadii Cjehqfa			9999	3+ ER-BH, 4+ Inpt/ER-BH, 4+ Inpt/ER-Med, 4PP(A), HL		DULOXETINE HCL, GABAPENTIN, QUETIAPINE FUMARATE, TOPIRAMATE, TRAZODONE HCL		None Identified	
Bddjacq Cdaeeea		Dabiabb Efdabfe	12/31/9999	3+ ER-BH, 3+ Inpatient - BH, 4+ Inpt/ER-BH, Readmit-All BH 7d		CLONIDINE HCL, QUETIAPINE FUMARATE		None Identified	
Cfdichh Hhedbec		Cbbbjcc Gdeebcc	12/31/9999	3+ Inpatient - BH, 4+ Inpt/ER -BH, Readmit-All BH 45d				None Identified	
Dfabebq Cbeafih		Ajafcia Bgieeib	12/31/9999	3+ ER-BH, 4+ Inpt/ER-BH		AMPHETAMINE- DEXTROAMPHETAMINE, GABAPENTIN		None Identified	

My QI Report: Filter by MC Plan



**Office of
Mental Health**

Review all Quality Indicator prevalence for your organization, for enrollees of a specific MC Plan

1. Go to “My QI Reports”
2. Click “Modify Filter”
3. Select specific Managed Care Plan
4. Review Quality Indicator prevalence for all indicators, filtered to show enrollees of a specific MC Plan
5. Select specific indicator set

1. Click “My QI Report” from top menu options

Quality Indicator Overview

Provider Details Find Provider

Provider: Main Street Mental Health Clinic

Export PDF Excel

Modify Filter

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

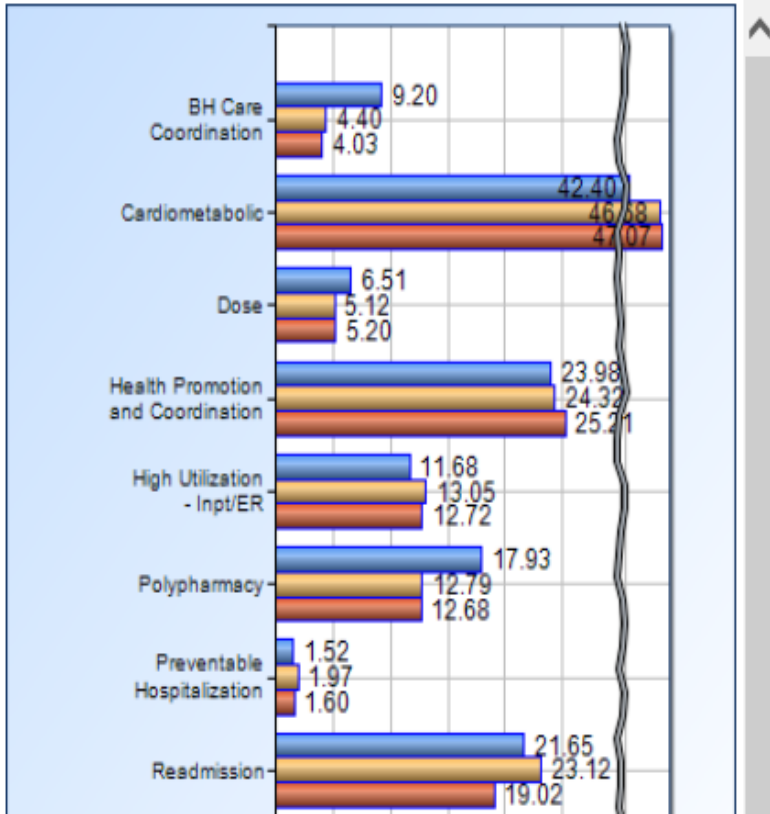
2. Click “Modify Filter” to select specific Managed Care Plan

Select Indicator Set for Details

Report View Type: ☐ Report Only ☐ Graph Only ☒ Both

Indicator Set

Indicator Set ▲	Population	Eligible Population	# with QI Flag	%	Regional %	Statewide %
BH Care Coordination	All	19,637	1,806	9.20	4.40	4.03
Cardiometabolic	All	2,670	1,132	42.40	46.68	47.07
Dose	All	8,116	528	6.51	5.12	5.20
Health Promotion and Coordination	All	19,637	4,708	23.98	24.32	25.21
High Utilization - Inpt/ER	All	19,637	2,293	11.68	13.05	12.72
Polypharmacy	All	6,231	1,117	17.93	12.79	12.68
Preventable Hospitalization	Adult	15,764	240	1.52	1.97	1.60
Readmission	All	2,189	474	21.65	23.12	19.02
Youth Indicator	Child	1,254	306	24.40	19.50	22.57



Modify Filter page in My QI Report

Quality Indicator Overview As Of 08/01/2015

Provider DetailsFind Provider

Provider: Main Street Mental Health Clinic

ExportPDFExcel

Sites: ALL

Program Type: ALL

Population: ALL

ACT - MH Specialty

Care Management - Enrolled (Source: DOH)

Care Management - Enrolled/Outreach (Source: DOH)

Care Management - Outreach (Source: DOH)

Case Management - OMH

Child Care - MH - Residential Treatment

Child Waiver Services - OMH

3. Select a specific Managed Care Plan and click "Submit"

Attending: ALL

Age: ALL

Region: ALL

County: ALL

Managed Care Program

SubmitResetCancel

Release: 4.9.7

ALL

Affinity Health Plan

Amerigroup New York

Amida Care

CDPHP

Excellus BlueCross BlueShield

Fidelis Care New York

HIP (EmblemHealth)

HealthNow New York Inc.

Healthfirst PHSP, Inc.

Hudson Health Plan

Independent Health's MediSource

MVP

MetroPlus Health Plan

Neighborhood Health Providers

Total Care

UnitedHealthcare Community Plan

Univera Community Health

VNSNY Choice Select Health

WellCare of New York

Provider: Main Street Mental Health Clinic

Export PDF Excel

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

Select Indicator Set for Details

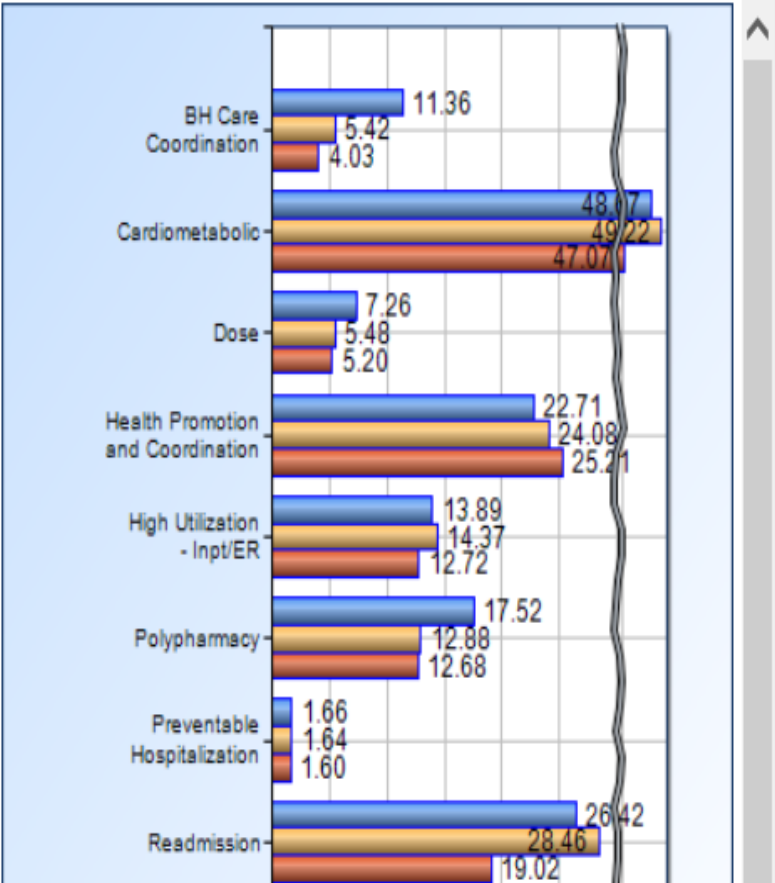
4. Review QI Report, now filtered for MC Plan

Report View Type: Report Only Graph Only Both

Indicator Set

Indicator Set ^	Population	Eligible Population	# with QI Flag	%	Regional %	Statewide %
BH Care Coordination	All	907	103	11.36	5.42	4.03
Cardiometabolic	All	150	73	48.67	49.22	47.07
Dose	All	441	32	7.26	5.48	5.20
Health Promotion and Coordination	All				24.08	25.21
High Utilization - Inpt/ER	All	907	126	13.89	14.37	12.72
Polypharmacy	All	331	58	17.52	12.88	12.68
Preventable Hospitalization	Adult	662	11	1.66	1.64	1.60
Readmission	All	106	28	26.42	28.46	19.02
Youth Indicator	Child	60	11	18.33	18.34	22.57

5. Select desired quality indicator set



My QI Report: View for MC Plan Users



**Office of
Mental Health**

MC Plan View: Review prevalence for plan on all indicators

● My QI Report

● Statewide Reports

● Recipient Search

● Provider Search

● Registrar Menu

● Usage Reports

● User Settings

☐ De-Identify

Quality Indicator Overview As Of 08/01/2015

Plan: ABC Health Plan

Export PDF Excel

Modify Filter

Program Type:ALL, Age:ALL, Population:ALL, Managed Care Program: ABC Health Plan

Region:ALL, County:ALL

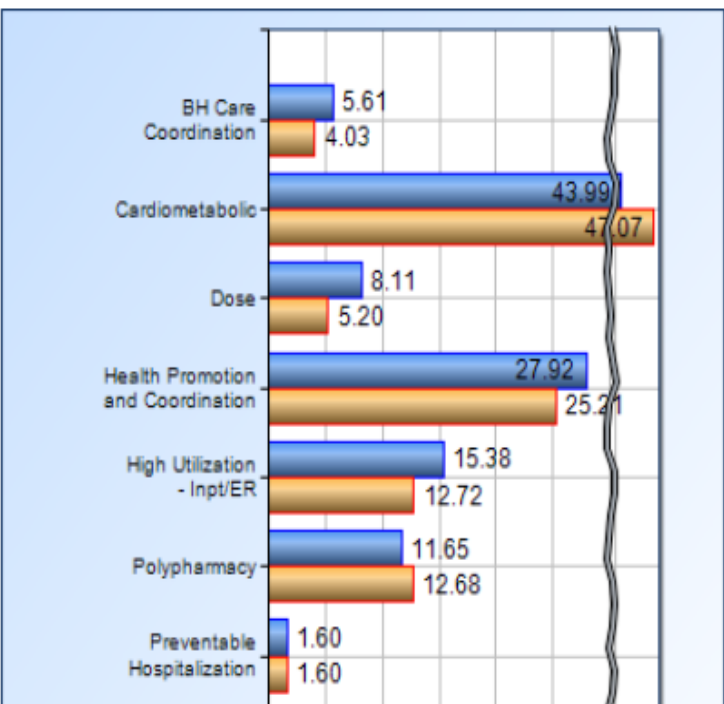
Select Indicator Set for Details

Select desired quality indicator set

Report View Type: ☐ Report Only ☐ Graph Only ☒ Both

Indicator Set

Indicator Set ^	Population	Eligible Population	# with QI Flag	%	Statewide %
BH Care Coordination	All	39,950	2,241	5.61	4.03
Cardiometabolic	All	3,030	1,333	43.99	47.07
Dose	All	13,792	1,118	8.11	5.20
Health Promotion and Coordination	All	39,950	11,156	27.92	25.21
High Utilization - Inpt/ER	All	39,950	6,144	15.38	12.72
Polypharmacy	All	8,792	1,024	11.65	12.68
Preventable Hospitalization	Adult	32,738	524	1.60	1.60
Readmission	All	2,863	542	18.93	19.02
Youth Indicator	Child	1,368	250	18.27	22.57



MC Plan View

Quality Indicator Overview As Of 08/01/2015

Plan: ABC Health Plan

Export  PDF  Excel

Modify Filter Program Type:ALL, Age:ALL, Population:ALL, Managed Care Program: ABC Health Plan Region:ALL, County:ALL

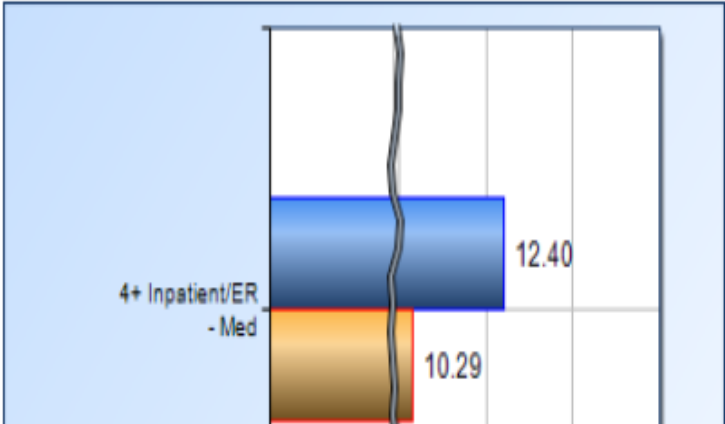
Indicator Set:High Utilization - Inpt/ER Select Indicator

Select sub-indicator or “summary”

 Report View Type: ☐ Report Only ☐ Graph Only ☒ Both

Indicator Set Indicator

Indicator	Population	Eligible Population	# with QI Flag	%	Statewide %
4+ Inpatient/ER - Med	All	39,950	4,955	12.40	10.29
4+ Inpatient/ER - BH	All	39,950	818	2.05	1.64
4+ Inpatient/ER - All	All	39,950	6,144	15.38	12.72



Use Modify Filter to identify providers for a particular type of service, for example, specialty MH clinics

Sort by Eligible Population to see which providers serve the largest number of your enrollees overall

Quality Indicator Overview

Plan: ABC Health Plan

Modify Filter

Program Type:ALL, Age:ALL, Population:ALL, Managed Care Program: ABC Health Plan

Export PDF Excel

Indicator Set: High Utilization - Inpt/ER, Indicator: 4+ Inpatient/ER - BH Select Provider

Indicator Set Indicator Provider

Provider Facility Name	County	Eligible Population	# with QI Flag	%
MONTEFIORE MEDICAL CENTER	Bronx	2,829	51	1.80
NORTH SHORE-LONG ISLAND JEWISH HEALTH SYSTEM	Nassau	1,504	55	3.66
HUDSON RIVER HEALTH CARE	Westchester	1,397	80	5.73
THE NEW YORK AND PRESBYTERIAN HOSPITAL	Manhattan	1,321	76	5.75
BETH ISRAEL MEDICAL CENTER	Manhattan	1,244	74	5.95
STATE UNIVERSITY OF NY AT STONY BROOK	Suffolk	1,224	64	5.23
ST. LUKE'S-ROOSEVELT HOSPITAL CENTER	Manhattan	1,094	75	6.86
STATEN ISLAND UNIVERSITY HOSPITAL	Staten Island	1,041	50	4.80
MOUNT SINAI MEDICAL CENTER	Manhattan	933	32	3.43
JAMAICA HOSPITAL MEDICAL CENTER	Queens	924	43	4.65
LI JEWISH MEDICAL CENTER ZUCKER HILLSIDE DIV	Queens	884	47	5.32
BROOKDALE HOSPITAL MEDICAL CENTER	Brooklyn	864	50	5.79

Plan view: Modify Filter page in My QI Report

Quality Indicator Overview As Of 08/01/2015

Plan: ABC Health Plan

Export  PDF  Excel

Program
Type:

- Care Management - Enrolled (Source: DOH)
- Care Management - Enrolled/Outreach (Source: DOH)
- Care Management - Outreach (Source: DOH)
- Case Management - OMH
- Child Care - MH - Residential Treatment Facility
- Child Waiver Services - OMH
- Clinic - MH Specialty
- Clinic - Medical Specialty - MH Dx/Svc
- Clinic - Medical Specialty - SLL Dx/Svc

Select a particular type of service, for example, specialty MH clinics and click "Submit."

Age: ALL

Region: ALL

County: ALL

Population: ALL

Managed Care Program: ABC Health Plan

Submit

Reset

Cancel



Quality Indicator Overview As Of 08/01/2015

Plan: ABC Health Plan

Export PDF Excel

Modify Filter Program Type: Clinic - MH Specialty, Age: ALL, Population: ALL, Managed Care Program: ABC Health Plan

Indicator Set: High Utilization - Inpt/ER, Indicator: 4+ Inpatient/ER - BH Select Provider

Indicator Set Indicator Provider

Sort by Eligible Population to see which providers serve the largest number of your enrollees overall

If desired, select provider of interest to review full QI reports for that provider

Provider Facility Name	County	Eligible Population	# with QI Flag	%
NEW YORK PSYCHOTHERAPY AND COUNSELING CENTER	Brooklyn	306	9	2.94
MONTEFIORE MEDICAL CENTER		293	8	2.73
Main Street Mental Health Clinic		286	6	2.10
JEWISH BOARD OF FAMILY & CHILDREN'S SERVICES	Manhattan	262	6	2.29
NEW HORIZON COUNSELING CENTER, INC., THE	Queens	198	4	2.02
INTERBOROUGH DEVELOP & CONSULTATION CTR, INC.	Brooklyn	183	4	2.19
THE INSTITUTE FOR FAMILY HEALTH	Manhattan	180	9	5.00
LI JEWISH MEDICAL CENTER ZUCKER HILLSIDE DIV	Queens	159	4	2.52
JEWISH BOARD OF FAMILY & CHILDREN'S SERVICES	Suffolk	134	2	1.49
PENINSULA COUNSELING CTR	Nassau	125	5	4.00
THE CHILD CENTER OF NY, INC.	Queens	124	1	0.81

My QI Report: Clinical Summaries Viewed



**Office of
Mental Health**

Identify the date the Clinical Summary was last viewed for each recipient flagged

1. Go to “My QI Reports”
2. Use “Modify Filter” to select specific program type of interest within your organization, for example Clinic MH
3. Select desired indicator set from table
4. Select sub-indicator or “summary”
5. From “Recipients” tab, view “Clinical Summaries Last Viewed” column on the right

Quality Indicator Overview

Provider Details Find Provider

Provider: Main Street Mental Health Clinic

Export PDF Excel

Modify Filter

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

Select Indicator Set for Details

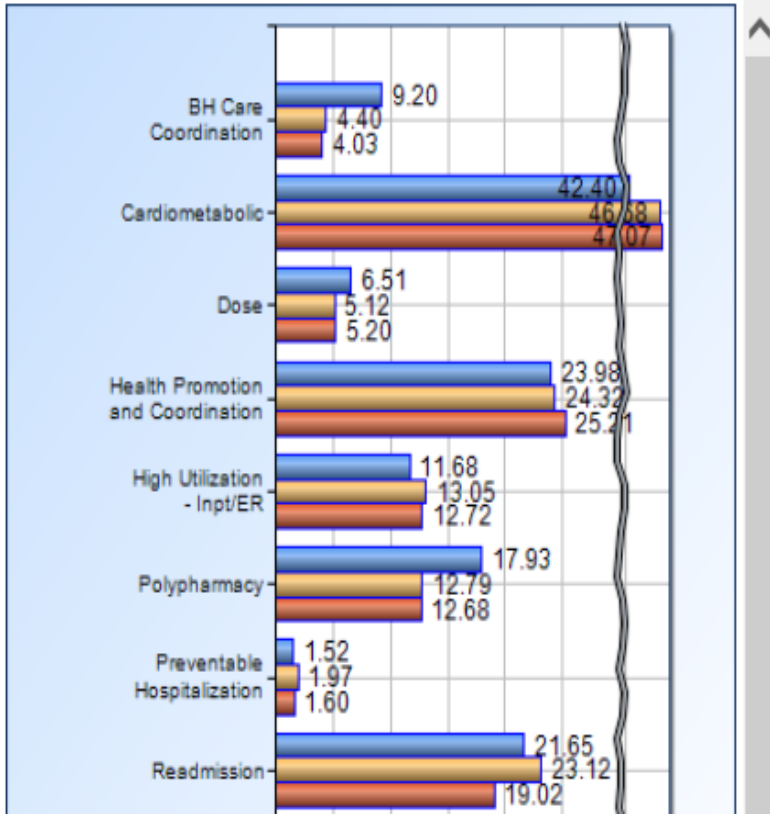
Report View Type: ☐ Report Only ☐ Graph Only ☒ Both

Indicator Set

2. Click "Modify Filter" to select specific program type of interest within your organization, for example MH Clinic

Indicator Set ▲	Population	Eligible Population	# with QI Flag	%	Regional %	Statewide %
BH Care Coordination	All	19,637	1,806	9.20	4.40	4.03
Cardiometabolic	All	2,670	1,132	42.40	46.68	47.07
Dose	All	8,116	528	6.51	5.12	5.20
Health Promotion and Coordination	All				24.32	25.21
High Utilization - Inpt/ER	All	19,637	2,293	11.68	13.05	12.72
Polypharmacy	All	6,231	1,117	17.93	12.79	12.68
Preventable Hospitalization	Adult	15,764	240	1.52	1.97	1.60
Readmission	All	2,189	474	21.65	23.12	19.02
Youth Indicator	Child	1,254	306	24.40	19.50	22.57

3. Select desired quality indicator set



Quality Indicator Overview As Of 08/01/2015

Provider Details Find Provider

Provider: Main Street Mental Health Clinic

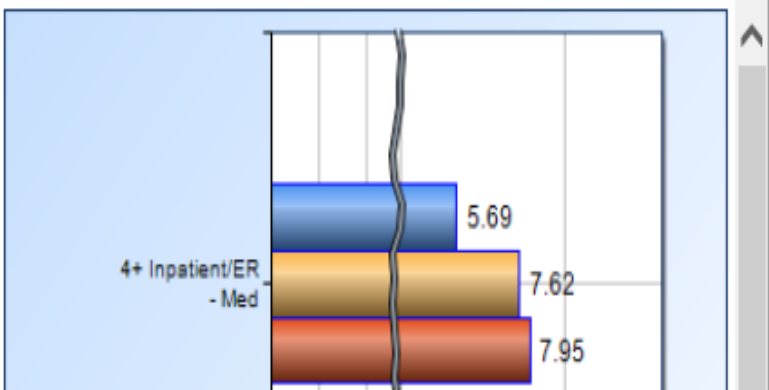
Export PDF Excel

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

Indicator Set:High Utilization - Inpt/ER Select indicator for detail. Report View Type: Report Only Graph Only Both

Indicator Set Indicator 4. Select sub-indicator or "summary"

Indicator	Population	Eligible Population	# with QI Flag	%	Regional %	Statewide %
4+ Inpatient/ER - Med	All	12,308	700	5.69	7.62	7.95
4+ Inpatient/ER - BH	All	12,308	202	1.64	2.58	2.46
4+ Inpatient/ER - All	All	12,308	1,046	8.50	11.06	11.44



Quality Indicator Overview As Of 08/01/2015

Provider Details Find Provider

Provider: Main Street Mental Health Clinic

Export PDF Excel

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

Indicator Set:High Utilization - Inpt/ER, Indicator:4+ Inpatient/ER - BH

Sort by Clinical Summary Last Viewed column

Indicator Set	Indicator	Site	HH/CM Site(s)	MCO	MCO Recipient(s)	Attending	Recipients	New QI Flag	Dropped QI Flag
Recipient ^	Medicaid ID	DOB	Quality Flags	Medications (BH; excludes enhanced PHI)	Most Recent BH Outpatient Attending	Clinical Summary Last Viewed			
Acaifcc Jhbdecb			R-BH, 3+ Inpatient - 4+ Inpt/ER-BH, 4+ ER-Med, Readmit-All 0d	CLONAZEPAM, DULOXETINE HCL, LAMOTRIGINE, MIRTAZAPINE, PAROXETINE HCL	None Identified	No			
Accibff Dbebbca	Hdficdf Fdbaach	12/31/9999	3+ Inpatient - BH, 4+ Inpt/ER-BH, 4+ Inpt/ER-Med, Adher-AP, Adher-MS, Readmit-All BH 7d	LAMOTRIGINE	None Identified	9/3/2015			
Aceigfc Biafafd	Eibegeg Ebbecce	12/31/9999	3+ Inpatient - BH, 4+ Inpt/ER-BH, Adher-AP, Adher-MS, No Outpt Med	LITHIUM CARBONATE, QUETIAPINE FUMARATE	None Identified	10/8/2015			
Adccajh Geedajg	Abdbgid Bcdfife	12/31/9999	3+ ER-BH, 4+ Inpt/ER-BH, No DM Screen-AP	HYDROXYZINE PAMOATE, PAROXETINE HCL, RISPERIDONE	None Identified	No			
Adccebf Bebgqid	Baccejg Iadfdih	12/31/9999	3+ ER-BH, 4+ Inpt/ER-BH	HYDROXYZINE HCL, PERPHENAZINE, TRAZODONE HCL	None Identified	No			

Click on a recipient name to review Clinical Summary

AOT Status



**Office of
Mental Health**

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

1. Click "Recipient Search" from top menu options

2. Select from AOT Status filter

Recipient Identifiers

Medicaid ID: or SSN:

Recipient Characteristics - as of: 10/09/2015 Quality Flag*

Age Group: Polypharmacy Summary
Gender: Antipsychotic Three Plus
HARP Status: Antipsychotic Two Plus
AOT Status: Antidepressant Three Plus
Population: Antidepressant Two Plus
Managed Care (MC): AP
AP
AP

Medication & Diagnosis: 08/01/2015 Past 1 Year

Prescriber Last Name:

Drug Name: Active Drug: ☐

Psychotropic Drug Class*: **Non-Psychotropic Drug Class*:**

ADHD Med
Antidepressant
Antipsychotic
Anxiolytic/Hypnotic
Mood Stabilizer
Side-Effect Management

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

Diagnosis:

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

BH Diagnosis*: **Medical Diagnosis*:**

Adjustment Disorder
Anxiety Disorder
Attention Deficit Disorder
Autism & Pervasive Developmental Dis
Bipolar Disorder
Conduct Disorder

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

Services by a Specific Provider: 08/01/2015 Past 1 Year

Provider: Main Street Mental Health Clinic

Region: County:

Current Access Status:

Service Utilization: Number of Visits:

Service Setting*: **Service Detail: Selected**

Care Coordination
Foster Care
Living Support/Residential
Other

Services by Any Provider: 08/01/2015 Past 1 Year

Provider(Optional):

Region: County:

Service Utilization: Number of Visits:

Service Setting*: **Service Detail: Selected**

Care Coordination
Foster Care
Inpatient - ER
Living Support/Residential

- 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.

2. Select from AOT Status filter (detail)

Recipient Characteristics - as of: 10/09/2015		Quality Flag*: 08/01/2015	<u>Definitions</u>
Age Group:	<input type="text"/>		Polypharmacy Summary
Gender:	<input type="text"/>		Antipsychotic Three Plus
HARP Status:	<input type="text"/>		Antipsychotic Two Plus
AOT Status:	<input type="text"/>		Antidepressant Three Plus
Population:	<input type="text"/>		Antidepressant Two Plus - SC
Managed Care (MC):	<input type="text"/>		Psychotropics Four Plus

AOT Status:
 Population:
 Managed Care (MC):
 Psychotropics Three Plus
 Cardiometabolic Risk Summary
 AP + Diabetes Risk
 AP + Hyperlipidemia Risk
 AP + Substance Use Risk

Medication & Diagnosis: 08/01/2015 Past 1 Year

Prescriber Last Name:
 Drug Name: Active Drug: ☐
 Psychotropic Drug Class*:
 ADHD Med
 Antidepressant
 Antipsychotic
 Anxiolytic/Hypnotic
 Mood Stabilizer
 Side-Effect Management
 Non-Psychotropic Drug Class*:
 Analgesics and Anesthetics
 Anti-Infective Agents
 Anti-Obesity Agents
 Antidiabetic
 Antihyperlipidemic
 Antihypertensive
 Diagnosis:
 Diagnosis given: times Primary Only: ☒ Primary/Secondary: ☐
 BH Diagnosis*:
 Adjustment Disorder
 Anxiety Disorder
 Attention Deficit Disorder
 Autism & Pervasive Developmental Dis
 Bipolar Disorder
 Conduct Disorder
 Medical Diagnosis*:
 Certain Conditions Originating in the Pe
 Complications of Pregnancy, Childbirth,
 Congenital Anomalies
 Diabetes
 Diseases of Skin and Subcutaneous Tis
 Diseases of the Blood and Blood-Formi

Service Utilization: Number of Visits:
 Service Setting*:
 --Care Coordination
 --Foster Care
 --Living Support/Residential
 --Other
 Service Detail: Selected

Services by Any Provider: 08/01/2015 Past 1 Year

Provider(Optional):
 Region: County:
 Service Utilization: Number of Visits:
 Service Detail: Selected

**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.
- *To select multiple options within a list, hold down "CTRL" while making additional selections.

Maximum No. of Rows to be displayed

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

Search

Reset



Modify Search

Total Number of Recipients: 131

Maximum Number of Rows Displayed: 50

AOT Status - AOT-Active Court Order
AND
[Provider Specific] Provider Name - Main Street Mental Health Clinic

Search results can
be exported to
PDF or Excel.

Export  PDF  Excel

Name	Medicaid ID	DOB	Gender	Quality Flags	Current PHI Access
Agjcfib Ihhhiab	Bhdbiff Afeddeb	01/01/9999	Ddfdbaf Bbefhad		No Access
Agjcfib Ihhhiab	Cfdifeb Iagcgaj	01/01/9999	Aebccfe Ifhaeac		No Access
Agjcfib Ihhhiab		99	Bgehehg Dfejabg	No Outpt Med	Quality Flag
Agjcfib Ihhhiab	Jbfabbd Caacbdi	01/01/9999	Fhbgefe Ceaafah		No Access
Agjcfib Ihhhiab	Eeafhjc Biahgbf	01/01/9999	Fdcbjjj Cdbfcaj	HTN, No Outpt Med	Quality Flag
Agjcfib Ihhhiab	Diheaja Hgehbce	01/01/9999	Bgehehg Dfejabg	4+ Inpt/ER-All, No Outpt Med	Quality Flag

Managed Care Plan



**Office of
Mental Health**

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

1. Click "Recipient Search" from top menu options

2. Select from Managed Care (MC) filter

Recipient Identifiers

Medicaid ID: or SSN:

Last Name: DOB:

Recipient Characteristics - as of: 10/09/2015 Quality Flag*: 08/01/2015 Definitions

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

Polypharmacy Summary
Antipsychotic Three Plus
Antipsychotic Two Plus
Antidepressant Three Plus
Antidepressant Two Plus - SC
Psychotropics Four Plus
Psych
Card
AP
AP
AP

Services by a Specific Provider: 08/01/2015 Past 1 Year

Provider: Main Street Mental Health Clinic

Region: County:

Current Access Status:

Service Utilization: Number of Visits:

Service Setting*: Service Detail: Selected

—Care Coordination
—Foster Care
—Living Support/Residential
—Other

Medication & Diagnosis: 08/01/2015 Past 1 Year

Prescriber Last Name:

Drug Name: Active Drug: ☐

Psychotropic Drug Class*: Non-Psychotropic Drug Class*:

ADHD Med
Antidepressant
Antipsychotic
Anxiolytic/Hypnotic
Mood Stabilizer
Side-Effect Management

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

Diagnosis:

Diagnosis given: times Primary Only: ☒ Primary/Secondary: ☐

BH Diagnosis*: Medical Diagnosis*:

Adjustment Disorder
Anxiety Disorder
Attention Deficit Disorder
Autism & Pervasive Developmental Dis
Bipolar Disorder
Conduct Disorder

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

Services by Any Provider: 08/01/2015 Past 1 Year

Provider(Optional):

Region: County:

Service Utilization: Number of Visits:

Service Setting*: Service Detail: Selected

—Care Coordination
—Foster Care
—Inpatient - ER
—Living Support/Residential

- 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.

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

Recipient Characteristics - as of: 10/09/2015		Quality Flag*: 08/01/2015	<u>Definitions</u>
Age Group:	<input type="text"/>		<div>Polypharmacy Summary Antipsychotic Three Plus Antipsychotic Two Plus Antidepressant Three Plus Antidepressant Two Plus - SC Psychotropics Four Plus Psychotropics Three Plus Cardiometabolic Risk Summary AP + Diabetes Risk AP + Hyperlipidemia Risk Apoptosis Risk</div>
Gender:	<input type="text"/>		
HARP Status:	<input type="text"/>		
AOT Status:	<input type="text"/>		
Population:	<input type="text"/>		
Managed Care (MC)	<div>Affinity Health Plan Amerigroup New York Amida Care CDPHP Excellus BlueCross BlueShield Fidelis Care New York HIP (EmblemHealth) HealthNow New York Inc. Healthfirst PHSP, Inc. Hudson Health Plan Independent Health's MediSource MVP MetroPlus Health Plan Neighborhood Health Providers Total Care UnitedHealthcare Community Plan Univera Community Health VNSNY Choice Select Health WellCare of New York</div>		

Recipient Characteristics - as of: 10/09/2015

Quality Flag*: 08/01/2015 [Definitions](#)

Age Group:

Gender:

HARP Status:

AOT Status:

Population:

Managed Care (MC): MetroPlus Health Plc

Prevent Hosp Asthma
Prevent Hosp Dehydration
Prevent Hosp Diabetes
4+ Inpatient/ER - All
4+ Inpatient/ER - BH
4+ Inpatient/ER - Med
Readmission - All BH 7 day
Readmission - All BH 30 day
Readmission - Hosp BH d/c 15 day
Readmission - Hosp BH d/c 30 day

3. Choose from additional filter options, if desired

Medication & Diagnosis: 08/01/2015

Prescriber Last Name:

Drug Name:

Active Drug: ☐

Psychotropic Drug Class*:

ADHD Med
Antidepressant
Antipsychotic
Anxiolytic/Hypnotic
Mood Stabilizer
Side-Effect Management

Non-Psychotropic Drug Class*:

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

Diagnosis:

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

BH Diagnosis*:

Adjustment Disorder
Anxiety Disorder
Attention Deficit Disorder
Autism & Pervasive Developmental Dis
Bipolar Disorder
Conduct Disorder

Medical Diagnosis*:

Certain Conditions Originating in the Pe
Complications of Pregnancy, Childbirth,
Congenital Anomalies
Diabetes
Diseases of Skin and Subcutaneous Tiss
Diseases of the Blood and Blood-Formi

Services by a Specific Provider: 08/01/2015

Past 1 Year

Provider: Main Street Mental Health Clinic

Region:

County:

nt Access Status:

Service Utilization:

Number of Visits:

Service Setting*:

Care Coordination
Foster Care
Living Support/Residential
Other

Service Detail: Selected

Services by Any Provider: 08/01/2015

Past 1 Year

Provider(Optional):

Region:

County:

Se

Service

Se

Se

Se

Se

Se

Se

Se

4. Consider expanding number of recipient names to be displayed

5. Click Search

Maximum No. of Rows to be displayed

50

Search

Reset

- 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

Total Number of Recipients: 47

Maximum Number of Rows Displayed: 50

Managed Care (MC)	- MetroPlus Health Plan
Quality Indicator	- 4+ Inpatient/ER - BH
[Provider Specific] Provider Name	- Main Street Mental Health Center

Search results can be exported to PDF or Excel.

Export PDF Excel

Name	Medicaid ID	DOB	Gender	Quality Flags	Current PHI Access
Agicfib Ihhhiab	Jbbdbhg Bbgceca	01/01/9999	Dagdjjc Daadhcd	3+ ER-BH, 4+ Inpt/ER-BH, Adher-AP, Adher-MS, No Outpt Med	Quality Flag
Agicfib Ihhhiab	Hdcfdgf Ceebdca	01/01/9999	Jecibda Eajbeaj	3+ Inpatient - BH, 4+ Inpt/ER-BH, 4+ Inpt/ER-Med, Readmit-All BH 7d	Quality Flag
Agicfib Ihhhiab		01/9999	Fecadbc Ibafdag	3+ ER-BH, 4+ Inpt/ER-BH, 4+ Inpt/ER-Med, Readmit-All BH 45d	Quality Flag
Agicfib Ihhhiab	Icfecba Hjabfcc	01/01/9999	Jgbfbhb Fddidib	3+ Inpatient - BH, 4+ Inpt/ER-BH, Readmit-All BH 7d	Quality Flag
Agicfib Ihhhiab	Aebdeji Bdfcijc	01/01/9999	Ecbbabf Cbieefj	3+ Inpatient - BH, 4+ Inpt/ER-BH, Readmit-All BH 7d	Quality Flag
Agicfib Ihhhiab	Ddbbfji Eebagca	01/01/9999	Aaegffb Gjfacgb	3+ Inpatient - BH, 4+ Inpt/ER-BH, Adher-AP, Readmit-All BH 30d	Quality Flag
Bichbfc Cbfefdg	Decagah Afgaacf	01/01/9999	Jddgafh Eafeibg	3+ ER-BH, 4+ Inpt/ER-BH, No DM Screen-AP, Readmit-All BH 30d	Quality Flag
Bichbfc Cbfefdg	Egdbbah Dacdhad	01/01/9999	Bijiaaj	4+ Inpt/ER-BH, No DM Screen-AP, No Outpt	Quality Flag

HARP Status



**Office of
Mental Health**

Identify recipients based on HARP status

1. Go to “Recipient Search” screen
2. Select from HARP Status filter:
 - Eligible
 - Not Eligible
3. Consider expanding “Maximum number of rows to be displayed” if needed
4. Click Search

Note: HARP “Enrolled” status coming soon!

1. Click "Recipient Search" from top menu options

2. Select from HARP Status filter

Recipient Identifiers

Medicaid ID: or SSN:

Recipient Characteristics - as of: 10/09/2015 **Quality Flag**: 08/01/2015 **Definitions**

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

Polypharmacy Summary
Antipsychotic Three Plus
Antipsychotic
Antipsychotic
Antipsychotic
Psychotropic
Psychotropic
Cardiovascular
AP + Diabetes Risk
AP + Hyperlipidemia Risk
AP + Hyperlipidemia Risk

Services by a Specific Provider: 08/01/2015 Past 1 Year

Provider: Region: County: Current Access Status:

Service Utilization: Number of Visits:

Service Setting*: Service Detail: Selected

—Care Coordination
—Foster Care
—Living Support/Residential
—Other

Medication & Diagnosis: 08/01/2015 Past 1 Year

Prescriber Last Name: Drug Name: Active Drug: ☐

Psychotropic Drug Class*: Non-Psychotropic Drug Class*:

ADHD Med
Antidepressant
Antipsychotic
Anxiolytic/Hypnotic
Mood Stabilizer
Side-Effect Management

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

Diagnosis:

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

BH Diagnosis*: Medical Diagnosis*:

Adjustment Disorder
Anxiety Disorder
Attention Deficit Disorder
Autism & Pervasive Developmental Dis
Bipolar Disorder
Conduct Disorder

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

Services by Any Provider: 08/01/2015 Past 1 Year

Provider(Optional): Region: County: Service Utilization: Number of Visits:

Service Setting*: Service Detail: Selected

—Care Coordination
—Foster Care
—Inpatient - ER
—Living Support/Residential

- 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.

2. Select from HARP Status filter (detail)

Recipient Characteristics - as of: 10/09/2015		Quality Flag*: 08/01/2015	<u>Definitions</u>
Age Group:	<input type="text"/>		<div>Polypharmacy Summary Antipsychotic Three Plus Antipsychotic Two Plus Antidepressant Three Plus Antidepressant Two Plus - SC Psychotropics Four Plus Psychotropics Three Plus Cardiometabolic Risk Summary AP + Diabetes Risk AP + Hyperlipidemia Risk AP + Hypertension Risk</div>
Gender:	<input type="text"/>		
HARP Status	<div>Eligible</div>		
AOT Status:	<div>Not Eligible</div>		
Population:	<input type="text"/>		
Managed Care (MC):	<input type="text"/>		

HARP Status: Eligible

AOT Status:

Population:

Managed Care (MC):

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

Medication & Diagnosis: 08/01/2015 Past 1 Year

Prescriber Last Name:

Drug Name: Active Drug: ☐

Psychotropic Drug Class*:

ADHD Med
Antidepressant
Antipsychotic
Anxiolytic/Hypnotic
Mood Stabilizer
Side-Effect Management

Non-Psychotropic Drug Class*:

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

Diagnosis:

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

BH Diagnosis*:

Adjustment Disorder
Anxiety Disorder
Attention Deficit Disorder
Autism & Pervasive Developmental Dis
Bipolar Disorder
Conduct Disorder

Medical Diagnosis*:

Certain Conditions Originating in the Pe
Complications of Pregnancy, Childbirth,
Congenital Anomalies
Diabetes
Diseases of Skin and Subcutaneous Ti
Diseases of the Blood and Blood-Formi

Current Access Status:

Service Utilization: Number of Visits: -

Service Setting*:

Care Coordination
Foster Care
Living Support/Residential
Other

Service Detail: Selected

Services by Any Provider: 08/01/2015 Past 1 Year

Provider(Optional):

Region: County:

Service Utilization: Number of Visits: -

Service Detail: Selected

**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.
- *To select multiple options within a list, hold down "CTRL" while making additional selections.

Maximum No. of Rows to be displayed 50

Modify Search

Total Number of Recipients: 5,793
Maximum Number of Rows Displayed: 50

HARP Status

- Eligible

AND

[Provider Specific] Provider Name

- Main Street Mental Health Clinic

Search results can be exported to PDF or Excel

Export PDF Excel

Name	Medicaid ID	DOB	Gender	Quality Flags	Current PHI Access
Aeaagef Ieeacbc	Gcijfd Fddbda	01/01/9999	Addehj Ahcbjbe	3+ ER-BH, 3+ Inpatient - BH, 4+ Inpt/ER-BH, 4+ Inpt/ER-Med, DoseANX, Readmit-All BH 30d	All Data - Consent
Agjcfib Ihhhiab	Ecdjdeb Cdiaadg	01/01/9999	Dijdjcb Hiecafd		No Access
Agjcfib Ihhhiab		9999	Feegccc Fabbdab	3+ Inpatient - BH, D/C-AD <12wks, No Outpt Med, Readmit-All BH 45d	Quality Flag
Agjcfib Ihhhiab	Caeabfc Eijfadj	01/01/9999	Effjjic Jbhjdcd	3+ ER-BH, 3+ Inpatient - BH, 4+ Inpt/ER-BH, 4+ Inpt/ER-Med, Readmit-All BH 7d	Quality Flag
Agjcfib Ihhhiab	Hajfjcf Fbiaahg	01/01/9999	Edfdjcd Iaccich	4+ Inpt/ER-All	Quality Flag
Bichbfc Cbfefdg	Fcgbead Eecee	01/01/9999	Abhaebe Djdiced	4PP(A), No DM Screen-AP, No Outpt Med	Quality Flag
Bichbfc Cbfefdg	Jccbacc Fibdbaf	01/01/9999	Ahedjha Dhcdhde	4+ Inpt/ER-Med, PrevHosp-All, PrevHosp-Asthma	Quality Flag

ACT Services



**Office of
Mental Health**

Identify recipients with any ACT services

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 “ACT – MH Specialty”
5. Consider expanding “Maximum number of rows to be displayed” if needed
6. Click Search

Recipient Identifiers

Medicaid ID: or SSN:

Recipient Characteristics - as of: 10/09/2015

Quality Flag

Age Group:

Gender:

HARP Status:

AOT Status:

Population:

Managed Care (MC):

Polypharmacy Summary

Antipsychotic Three Plus

Antipsychotic Two Plus

Antidepressant Three Plus

Antidepressant Two Plus - SC

Psychotropics Four Plus

Psychotropics Three Plus

Cardiometabolic Risk Summary

AP + Diabetes Risk

AP + Hyperlipidemia Risk

AP + Hypertension Risk

Medication & Diagnosis: 08/01/2015

Past 1 Year

Prescriber Last Name:

Drug Name:

Active Drug: ☐

Psychotropic Drug Class*:

ADHD Med

Antidepressant

Antipsychotic

Anxiolytic/Hypnotic

Mood Stabilizer

Side-Effect Management

Non-Psychotropic Drug Class*:

Analgesic

Antibiotic

Anticancer

Anticonvulsant

Antihypertensive

Antihyperlipidemic

Antihistamine

Antiparkinsonian

Antipsychotic

Antitubercular

Antiviral

Cardiovascular

Chemotherapy

Diabetes

Diuretic

Immunosuppressant

Insulin

Iron Supplement

Local Anesthetic

Mineral/Vitamin

Narcotic

Other

Proton Pump Inhibitor

Tranquilizer

Vaccine

Diagnosis:

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

BH Diagnosis*:

Adjustment Disorder

Anxiety Disorder

Attention Deficit Disorder

Autism & Pervasive Developmental Dis

Bipolar Disorder

Conduct Disorder

Medical Diagnosis*:

Certain Conditions Originating in the Pe

Complications of Pregnancy, Childbirth,

Congenital Anomalies

Diabetes

Diseases of Skin and Subcutaneous Tis

Diseases of the Blood and Blood-Formi

Services by a Specific Provider: 08/01/2015

Past 1 Year

Provider: Main Street Mental Health Clinic

Region:

County:

Current Access Status:

Service Utilization:

Number of Visits:

Service Setting*:

Care Coordination

ACT - MH Specialty

Care Management - Enrolled (S

Care Management - Enrolled/C

Service Detail: Selected

Services by Any Provider: 08/01/2015

Past 1 Year

Provider(Optional):

Region:

County:

Service Utilization:

Number of Visits:

Service Setting*:

Care Coordination

Foster Care

Inpatient - ER

Living Support/Residential

Service Detail: Selected

Services by Any Provider: 08/01/2015

Past 1 Year



Provider(Optional):

Region:



County:



Service Utilization

Number of Visits:



Service Setting*:

Service Detail: Selected

— Care Coordination

— ACT - MH Specialty

— Care Management - Enrolled (Source: DOH)

— Care Management - Enrolled/Outreach (Source: DOH)

— Care Management - Outreach (Source: DOH)

— Health Home - Enrolled (Source: DOH)

— Health Home - Enrolled/Outreach (Source: DOH)

— Health Home - Outreach (Source: DOH)

— Health Home and/or Care Management - Enrolled (Source: DOH and Medicaid)

— Health Home and/or Care Management - Outreach/Enrolled (Source: DOH and Medicaid)

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

4. Select Act – MH Specialty

Recipient Characteristics - as of: 10/09/2015 Quality Flag*: 08/01/2015 Definitions

Age Group:

Gender:

HARP Status:

AOT Status:

Population:

Managed Care (MC):

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

Medication & Diagnosis: 08/01/2015 Past 1 Year

Prescriber Last Name:

Drug Name: Active Drug: ☐

Psychotropic Drug Class*:

ADHD Med
Antidepressant
Antipsychotic
Anxiolytic/Hypnotic
Mood Stabilizer
Side-Effect Management

Non-Psychotropic Drug Class*:

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

Diagnosis:

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

BH Diagnosis*:

Adjustment Disorder
Anxiety Disorder
Attention Deficit Disorder
Autism & Pervasive Developmental Dis
Bipolar Disorder
Conduct Disorder

Medical:

Certain C
Complica
Congeni
Diabetes
Diseases
Diseases

5. Consider expanding number of recipient names to be displayed

Services by a Specific Provider: 08/01/2015 Past 1 Year

Provider: Main Street Mental Health Clinic

Region: County:

Current Access Status:

Service Utilization: Number of Visits:

Service Setting*:

— Care Coordination
— Foster Care
— Living Support/Residential
— Other

Service Detail: Selected

Services by Any Provider: 08/01/2015 Past 1 Year

Provider(Optional):

Region: County:

Service Utilization: Number of Visits:

Service Setting*:

— Care Coordination
— ACT - MH Specialty
— Care Management - Enrolled (S
— Care Management - Enrolled/C

Service Detail: Selected

— Care Coordination
— ACT - MH Specialty

6. Click Search

Maximum No. of Rows to be displayed: 50

- 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.

Modify Search

Total Number of Recipients: 143

Maximum Number of Rows Displayed: 50

[Provider Specific] Provider Name

- Main Street Mental Health Clinic

AND

[Any Provider] Service Settings

- ACT - MH Specialty

Search results can be exported to PDF or Excel

Export PDF Excel

Name	Medicaid ID	DOB	Gender	Quality Flags	Current PHI Access
Afccjec Hlifjei	Ggbcdej Badbefh	01/01/9999	Ceebebd Cdbliibj		No Access
Aqjcfib Ihhhiab		01/9999	Feegccc Fabbdab	4+ Inpt/ER-All, Readmit-All BH 45d	Quality Flag
Aqjcfib Ihhhiab	Hcfccbc Ebfacib	01/01/9999	Iceahjd Ccbiebe		No Access
Aqjcfib Ihhhiab	Bbdidag Cdebhfi	01/01/9999	Babdaid Hieefej	3+ Inpatient - BH, Readmit-All BH 45d	Quality Flag
Cehcgdf Fcieide	Dhacfea Gddifbh	01/01/9999	Cjbdbdg Cjhafaj		All Data - Consent
Cehcgdf Fcieide	Cgecbfc Ggaaaea	01/01/9999	Bbgccbc Agfcech	3+ Inpatient - BH	Quality Flag

Health Home and Care Management Services



**Office of
Mental Health**

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

Recipient Identifiers

Medicaid ID: or SSN:

Recipient Characteristics - as of: 10/09/2015

Quality Flag

Age Group:

Gender:

HARP Status:

AOT Status:

Population:

Managed Care (MC):

Polypharmacy Summary

Antipsychotic Three Plus

Antipsychotic Two Plus

Antidepressant Three Plus

Antidepressant Two Plus - SC

Psychotropics Four Plus

Psychotropics Three Plus

Cardiometabolic Risk Summary

AP + Diabetes Risk

AP + Hyperlipidemia Risk

AP + Hypertension Risk

Medication & Diagnosis: 08/01/2015

Past 1 Year

Prescriber Last Name:

Drug Name:

Active Drug: ☐

Psychotropic Drug Class*:

ADHD Med

Antidepressant

Antipsychotic

Anxiolytic/Hypnotic

Mood Stabilizer

Side-Effect Management

Non-Psychotropic Drug Class*:

Analgesic

Antibiotic

Anticancer

Anticonvulsant

Antihypertensive

Antihyperlipidemic

Antihistamine

Antiparkinsonian

Antipsychotic

Antitubercular

Antiviral

Cardiovascular

Chemotherapy

Diabetes

Diuretic

Immunosuppressant

Insulin

Iron Supplement

Local Anesthetic

Mineral/Vitamin

Narcotic

Other

Proton Pump Inhibitor

Tranquilizer

Vaccine

Diagnosis:

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

BH Diagnosis*:

Adjustment Disorder

Anxiety Disorder

Attention Deficit Disorder

Autism & Pervasive Developmental Dis

Bipolar Disorder

Conduct Disorder

Medical Diagnosis*:

Certain Conditions Originating in the Pe

Complications of Pregnancy, Childbirth,

Congenital Anomalies

Diabetes

Diseases of Skin and Subcutaneous Tis

Diseases of the Blood and Blood-Formi

Services by a Specific Provider: 08/01/2015

Past 1 Year

Provider: Main Street Mental Health Clinic

Region:

County:

Current Access Status:

Service Utilization:

Number of Visits:

Service Setting*:

Care Coordination

ACT - MH Specialty

Care Management - Enrolled (S

Care Management - Enrolled/C

Service Detail: Selected

Services by Any Provider: 08/01/2015

Past 1 Year

Provider(Optional):

Region:

County:

Service Utilization:

Number of Visits:

Service Setting*:

Care Coordination

Foster Care

Inpatient - ER

Living Support/Residential

Service Detail: Selected

Services by Any Provider: 08/01/2015

Past 1 Year



Provider(Optional):

Region:



County:



Service Utilization

Number of Visits:



Service Setting*:

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

Service Detail: Selected

+ Care Coordination

— ACT - MH Specialty

— Care Management - Enrolled (Source: DOH)

— Care Management - Enrolled/Outreach (Source: DOH)

— Care Management - Outreach (Source: DOH)

— Health Home - Enrolled (Source: DOH)

— Health Home - Enrolled/Outreach (Source: DOH)

— Health Home - Outreach (Source: DOH)

— Health Home and/or Care Management - Enrolled (Source: DOH and Medicaid)

— Health Home and/or Care Management - Outreach/Enrolled (Source: DOH and Medicaid)

4. Select Care Management Enrolled or Outreach

Or select Health Home Enrolled or Outreach



Office of
Mental Health

Medication & Diagnosis: 08/01/2015 Past 1 Year

Prescriber Last Name:

Drug Name: Active Drug: ☐

Psychotropic Drug Class*:

- ADHD Med
- Antidepressant
- Antipsychotic
- Anxiolytic/Hypnotic
- Mood Stabilizer
- Side-Effect Management

Non-Psychotropic Drug Class*:

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

Diagnosis:

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

BH Diagnosis*:

- Adjustment Disorder
- Anxiety Disorder
- Attention Deficit Disorder
- Autism & Pervasive Developmental Dis
- Bipolar Disorder
- Conduct Disorder

Medication*:

- Certa
- Com
- Cong
- Diab
- Disea
- Disea

Services by a Specific Provider: 08/01/2015		Past 1 Year	
Provider: Main Street Mental Health Clinic			
Region:		County:	
Current Access Status:			
Service Utilization:		Number of Visits:	
Service Setting*:		Service Detail: Selected	
Care Coordination ACT - MH Specialty Care Management - Enrolled (S Care Management - Enrolled/C			

Services by Any Provider: 08/01/2015 Past 1 Year

Provider(Optional):

Region: County:

Service Utilization: Number of Visits:

Service Setting*:

- Health Home - Enrolled (Source)
- Health Home - Enrolled/Outreach (Source)
- Health Home - Outreach (Source)
- Health Home Plus
- Health Home and/or Care Management

Service Detail: Selected

- Care Coordination
 - Health Home and/or Care Management

6. Click Search

5. Consider expanding number of recipient names to be displayed

6. 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.

Maximum No. of Rows to be displayed: 50 ▼ Search Reset

Modify Search

Total Number of Recipients: 7,012

Maximum Number of Rows Displayed: 50

Search results can be exported to PDF or Excel

[Provider Specific] Provider Name - Main Street Mental Health Clinic
AND
[Any Provider] Service Settings - Health Home and/or Care Management - Enrolled (Source: DOH and Medicaid)

Export PDF Excel

Name	Medicaid ID	DOB	Gender	Quality Flags	Current PHI Access
Aeaagef Ieeacbc	Feehedj Aaahced	01/01/9999	Bijiaaj Effecah		No Access
Aeaagef Ieeacbc		99	Fecadbc Ibafdag		All Data - Consent
Agjcfib Ihhhiab	Hedjbfe Cabacbf	01/01/9999	Ahedjha Dhcdhde	HTN	All Data - Consent
Agjcfib Ihhhiab	BhahdjB BbhcdBd	01/01/9999	Jgbfbhb Fddidib	4PP(A)	Quality Flag
Agjcfib Ihhhiab	Ceedadc Aajfagf	01/01/9999	Ahedjha Dhcdhde		No Access
Agjcfib Ihhhiab	Cfdciei Eliibfg	01/01/9999	Iceahjd Ccbiebe	No Outpt Med	Quality Flag

Clinical Summary

Brief Overview &
New Information



**Office of
Mental Health**

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

Recipient Characteristics - as of: 10/09/2015
Age Group: Gender: HARP Status: AOT Status: Population: Managed Care (MC):

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

Medication & Diagnosis: 08/01/2015 Past 1 Year
Prescriber Last Name:
Drug Name: Active Drug: ☐

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

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

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

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

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

Specific Provider: 08/01/2015 Past 1 Year
Provider: Region: County:
Current Access Status:
Service Utilization: Number of Visits:
Service Setting*:
- Care Coordination
- Foster Care
- Living Support/Residential
- Other
Service Detail: Selected

Services by Any Provider: 08/01/2015 Past 1 Year
Provider(Optional): Region: County:
Service Utilization: Number of Visits:
Service Setting*:
- Care Coordination
- Foster Care
- Inpatient - ER
- Living Support/Residential
Service Detail: Selected

- Recipient Related data is refreshed weekly and all other sections are refreshed monthly.
- Search uses "OR" criteria within a list and "AND" criteria between lists.

Click on recipient name to go to Clinical Summary

Modify Search

Total Number of Recipients: 1
Maximum Number of Rows Displayed: 50

Medicaid ID - XXXXXXXX
AND
[Provider Specific] Provider Name - Main Street Mental Health Clinic

Export  PDF  Excel

Name ▲	Medicaid ID ▲	DOB ▲	Gender ▲	Quality Flags ▲	Current PHI Access ▲
Geqfhcq Jhdibed ←	Bcdccfb Hbgabdg	01/01/9999	Iaaifc Cdfffgb	2AP, 3+ ER-BH, 3+ Inpatient - BH, 3PP(Y), 4+ Inpt/ER-BH, Dose(Y), DoseAP, Readmit-All BH 7d	Quality Flag

Clinical Summary provides up to 5 years of data

Clinical Summary

Return to Search Results

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

OMH PHI

Please choose summary period

Last 6 months

Last Year

Last 2 Years

All Available (up to 5 years)

Clinical Report Date: 10/9/2015 (This report contains all available clinical data.)

Data with Special Protection ☒ Show ☐ Hide

Name: Eebbcda Hhjeagh

Medicaid ID: JFFFFA CFCFADF

DOB: 01/01/9999 (999 Yrs)

Address: Aahccad Gficibf, Bechefg Efiegfb, Icabiij Cbhffba Iiibc Cedaac

Medicaid Eligibility: SSI

Medicare: No

HARP Status: Eligible

Managed Care Plan: HIP (EmblemHealth)

Current Care Coordination Contact Information

AOT : PUERTO RICAN FAMILY INSTITUTE, INC. (Enrolled Date: 12-JUN-15), Main Contact: LAUREN PALUMBO, Phone: (212) 414 - 7888

- This information is updated monthly from TACT.

Health Home (Enrolled) : ST LUKES ROOSEVELT HSP CTR (Begin Date: 01-APR-12), Main Contact: Kristina Monti 212-523-5002, KMonti@chpnet.org

Care Management (Enrolled) : PUERTO RICAN FAMILY INST MH

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

Quality Flags (as of monthly QI report 8/1/2015)

Flag History: ☐ Graph ☐ Table

Quality Flag Definitions ?

Indicator Set	
BH Care Coordination	3+ ER - BH
Cardiometabolic	Drug (Quetiapine) and Cardiometabolic Condition (AP + Hyperlipidemia Risk AP + Hypertension Risk)
Hospital ER Utilization	4+ Inpatient/ER - BH 4+ Inpatient/ER - Med
Polypharmacy	Antipsychotic Two Plus (Clozapine + Haloperidol + Quetiapine Fumarate)

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

Substance Abuse

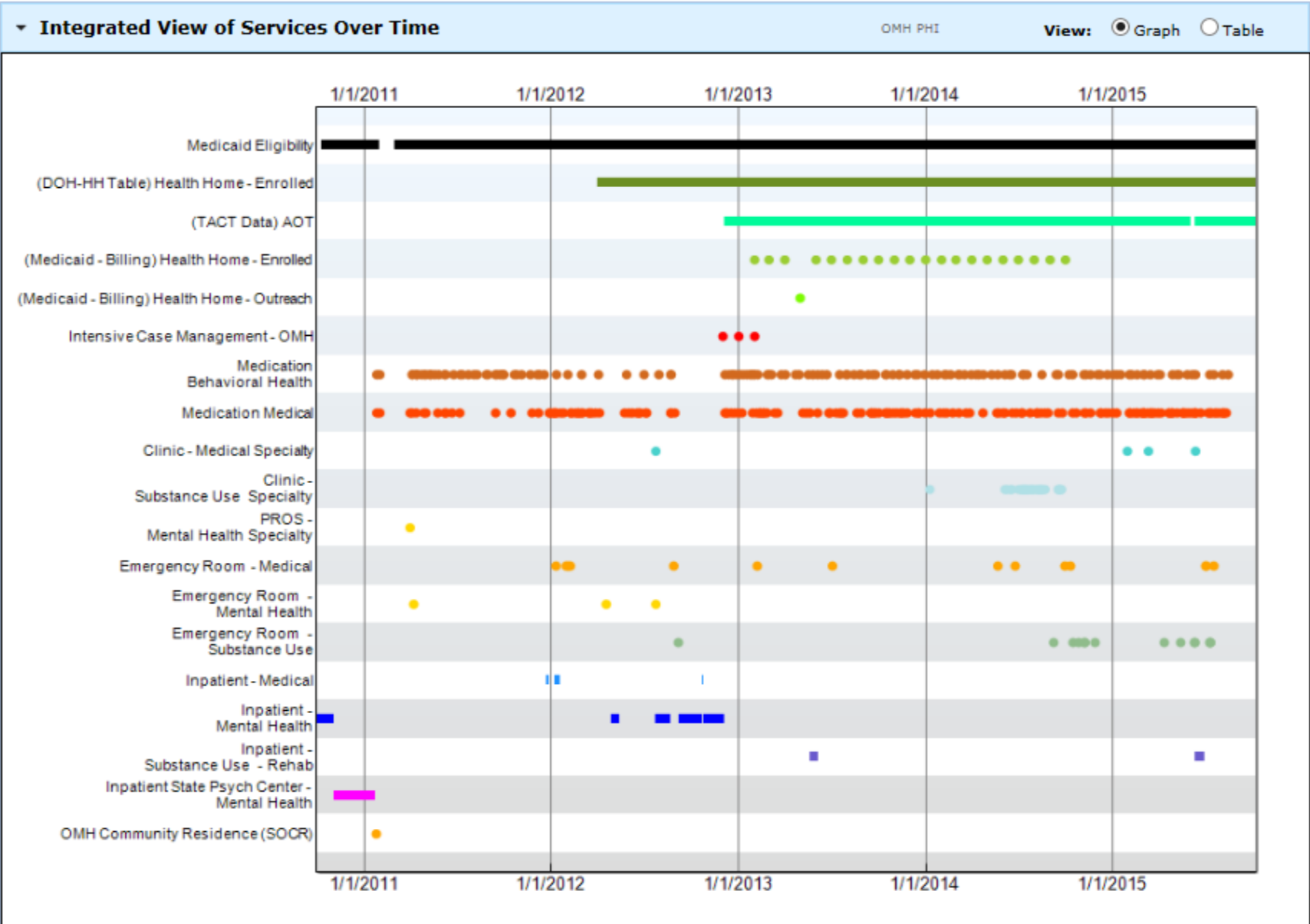
Medical Diagnoses - Primary and Secondary Dx (most frequent shows first, click diagnoses for more information)

Cardiometabolic Flag Related Conditions



Hyperlipidemia | Hypertensive




Clinical Summary: Integrated BH & General Health







Behavioral Health and Medical Medications

▼ Medication: Behavioral Health				See All Prescription Details			OMH PHI		View: <input type="radio"/> Graph <input checked="" type="radio"/> Table	
Drug Class	Brand Name	Generic Name	Last Dose*	Estimated Duration	First Day Picked Up	Last day Picked Up	Active in Past Month	MPR	Most Recent Prescriber	See Details
Side-Effect Management	BENZTROPINE Mesylate	BENZTROPINE Mesylate	2 MG	4 Week(s) 2 Day(s)	8/15/2015	8/15/2015	Yes		Tsuboyama Gabriel Kazuo	
Antipsychotic	Quetiapine Fumarate	Quetiapine Fumarate	400 MG	1 Month(s) 3 Week(s) 6 Day(s)	7/18/2015	8/15/2015	Yes	0.64	Tsuboyama Gabriel Kazuo	

▼ Medication: Medical				See All Prescription Details			OMH PHI		View: <input type="radio"/> Graph <input checked="" type="radio"/> Table	
Drug Class	Brand Name	Generic Name	Last Dose*	Estimated Duration	First Day Picked Up	Last day Picked Up	Active in Past Month	Most Recent Prescriber		See Details
Anticonvulsants - Misc.	Levetiracetam	Levetiracetam	1000 MG	9 Month(s)	12/10/2014	8/11/2015	Yes	Koppel Barbara Sue		
Coumarin Anticoagulants	Warfarin Sodium	Warfarin Sodium	5.5 MG	2 Yr(s) 8 Month(s) 1 Week(s) 6 Day(s)	12/5/2012	8/11/2015	No			

Outpatient Behavioral Health and Medical Services

▼ Care Coordination		See All Service Details	OMH PHI		View: <input type="radio"/> Graph <input checked="" type="radio"/> Table
Service Type	Provider	First Date Billed	Last Date Billed	Number of bills	See Service Details
Health Home - Enrolled (DOH-HH Table)	ST LUKES ROOSEVELT HSP CTR (HH), PUERTO RICAN FAMILY INST MH (CM)	4/1/2012	Current		
AOT (TACT Data)	PUERTO RICAN FAMILY INSTITUTE, INC.	6/12/2015	Current		



▼ Behavioral Health Services					See All Service Details	OMH PHI	View: <input type="radio"/> Graph <input checked="" type="radio"/> Table	
Service Type	Provider	First Date Billed	Last Date Billed	Number of Visits	Most Recent Primary Diagnosis	Most Recent Procedures (Last 3 Months)	Practitioner	See Service Details
Clinic - SU Specialty	SOUTHEAST NASSAU GUIDANCE	7/9/2015	8/31/2015	19	Opioid Type Dependence, Unspecified Use [304.00]	- Group Psychotherapy - PsytX Pt&/Family 45 Minutes		
Clinical Social Work	SCHEININ HOLISHER KARA B	4/15/2015	5/12/2015	5	Dysthymic Disorder [300.4]			

▼ Medical Outpatient Services






See All Service Details

OMH PHI

View: ☐ Graph ☒ Table




Service Type	Provider	First Date Billed	Last Date Billed	Number of Visits	Most Recent Primary Diagnosis	Most Recent Procedures (Last 3 Months)	See Service Details
Physician - Internal Medicine	BERENSTEIN ANNA	4/30/2015	7/20/2015	3	Backache, Unspecified [724.5]	- Office/Outpatient Visit Est	
Physician - Obstetrics and Gynecology	KOKA JOSEPH ROBERT	5/19/2015	5/21/2015	2	Abdominal Or Pelvic Swelling, Mass, Or Lump, Other Specified Site; Multiple Sites [789.39]		


Inpatient/ER Behavioral Health and Medical Services

▼ Hospital/ER Services					See All Service Details	OMH PHI	View: <input type="radio"/> Graph <input checked="" type="radio"/> Table
Service Type	Provider	Admission	Discharge Date/Last Date Billed	Length of Stay	Most Recent Primary Diagnosis	Procedure(s) (Per Visit)	See Service Details
Inpatient - MH	FLUSHING HSP MED CNT	8/17/2015	8/21/2015	4	Paranoid Type Schizophrenia, Chronic State With Acute Exacerbation [295.34]	- Other Group Therapy	
ER - MH	LENOX HILL HOSPITAL	7/19/2015	7/19/2015	1	Hallucinations [780.1]	- Complete Cbc W/Auto Diff Wbc - Clinical Chemistry Test - Drug Screen Multip Class	
ER - MH - CPEP	BELLEVUE HOSPITAL CENTER	6/28/2015	6/28/2015	1	Schizo-Affective Type Schizophrenia, Chronic State With Acute Exacerbation [295.74]	- Emergency Dept Visit	
ER - SU	MEDS OOS ER & OUTPATIENT	6/23/2015	6/23/2015	1	Alcohol Abuse, Unspecified Drinking Behavior [305.00]	- Complete Cbc W/Auto Diff Wbc - Emergency Dept Visit - Drug Screen Class List A - Comprehen Metabolic Panel - Assay Dipropylacetic Acid Tot	
ER - Medical	NASSAU UNIVERSITY MEDICAL CENTER	5/6/2015	5/6/2015	1	Immersion Foot [991.4]	- Emergency Dept Visit - Measure Blood Oxygen Level	

Dental, Vision, Living Support / Residential Treatment

▼ Dental					See All Service Details	OMH PHI	View: <input type="radio"/> Graph <input checked="" type="radio"/> Table
Service Type	Provider	First Date Billed	Last Date Billed	Number of Visits	Most Recent Primary Diagnosis	Most Recent Procedures (Last 3 Months)	See Service Details
Office/Outpatient	GADKAR VASANT L DDS	7/2/2015	7/21/2015	3		- Amalgam Two Surfaces Permane	

▼ Vision					See All Service Details	OMH PHI	View: <input type="radio"/> Graph <input checked="" type="radio"/> Table
Service Type	Provider	First Date Billed	Last Date Billed	Number of Visits	Most Recent Procedures (Last 3 Months)	See Service Details	
Eye Care Services - Office/Outpatient	FRACASSA PHILIP C MD	8/9/2014	4/15/2015	3			 

▼ Living Support/Residential Treatment			See All Service Details		OMH PHI	View: <input type="radio"/> Graph <input checked="" type="radio"/> Table
Program/Type	Provider Name	First Date of Service (last 5 years)	Last Date Billed	Number of Visits	See Service Details	
Home Care - Physical/Occupational Therapy- Long Term	NORTH SHORE UNIVERSITY HOSP CHHA	6/13/2015	6/13/2015	1		


Laboratory, Radiology, Med Equipment, and Transportation

Laboratory and Pathology

See All Service Details

OMH PHI

View: ☐ Graph ☒ Table


Program/Type	Test Name	Date Billed	Provider	See Test Details
Office/ Outpatient/ Laboratory	Comprehen Metabolic Panel	7/18/2015	MEDS OOS LAB	

Radiology

See All Service Details

OMH PHI

View: ☐ Graph ☒ Table


Program/Type	Test Name	Date Billed	Provider	See Test Details
Emergency	Chest X-Ray 1 View Frontal	7/15/2015	GUY RODRIGUEZ EVA PORTER	

Medical Equipment

See All Service Details

OMH PHI

View: ☐ Graph ☒ Table


Service Type	Provider	First Date Billed	Last Date Billed	Number of Visits	Most Recent Primary Diagnosis	Procedure(s) (Per Visit)	See Service Details
Ear/Foot/Other Appliances - Home Care	CONVA AIDS INC	5/28/2015	5/28/2015	1	Other Unspecified Back Disorders [724.9]		

Transportation

See All Service Details

OMH PHI

View: ☐ Graph ☒ Table

Type	Provider Name	First Date of Service (last 5 years)	Last Date Billed	Number of Visits	Most Recent Primary Diagnosis	See Service Details
Ambulance	TC AMBULANCE CORPORATION	7/14/2015	7/22/2015	2	Other, Mixed, Or Unspecified Drug Abuse, Unspecified Use [305.90]	

New: HARP Eligibility, Care Coordination Contact

Clinical Summary

Export to  PDF  Excel  CCD

[Return to Search Results](#)

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

OMH PHI **Please choose summary period**

Last 6 months

Last Year

Last 2 Years

All Available (up to 5 years)

Clinical Report Date: 10/9/2015 (This report contains all available clinical data.) Data with Special Protection ☒ Show ☐ Hide

Name: Bajeeeg Didbgfd


Medicaid ID: CBEDBDG

DOB: 01/01/9999 (999 Yrs)

Address: Bdhjafe Egafcaf, Fdbgbec Hacjcaf, Icabiij Cbhffbe, Jdhiahd

Medicaid Eligibility: SSI

Medicare: No

 **HARP Status: Eligible**

Managed Care Plan: HIP (EmblemHealth)

▼ Current Care Coordination Contact Information

AOT : PATHWAYS TO HOUSING, INC. (Enrolled Date: 26-DEC-14), Main Contact: Nikenya Hall, Phone: (718) 291 - 4591

- This information is updated monthly from TACT.


Health Home (Enrolled) : COORDINATED BEHAVIORAL CARE INC (Begin Date: 01-AUG-15), Main Contact: Inna Borik 212-590-2573 iborik@cbcare.org
Care Management (Enrolled) : POSTGRADUATE CTR FOR MH MH

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



ACT : Angelo J. Melillo Center for Mental Health (CAIRS Admission Date: 15-FEB-12), Main Contact: Barry Wilson, Phone (516) 676-2388

- This information is updated monthly from CAIRS.

New: OMH State Psychiatric Center data

▼ Behavioral Health Services					See All Service Details		OMH PHI	View: <input type="radio"/> Graph <input checked="" type="radio"/> Table
Service Type	Provider	First Date Billed	Last Date Billed	Number of Visits	Most Recent Primary Diagnosis	Most Recent Procedures (Last 3 Months)	Practitioner	See Service Details
Clinic - MH Specialty - PMHP	MANHATTAN PSYCH CTR PMHP ←	1/1/2013	7/1/2015	29	Other Unknown And Unspecified Cause Of Morbidity Or Mortality [799.9]			

▼ Hospital/ER Services					See All Service Details		OMH PHI	View: <input type="radio"/> Graph <input checked="" type="radio"/> Table
Service Type	Provider	Admission	Discharge Date/Last Date Billed	Length of Stay	Most Recent Primary Diagnosis	Procedure(s) (Per Visit)	See Service Details	
Inpatient State Psych Center - MH	MANHATTAN PC 	3/6/2012	8/28/2012	175	Disorganized Type Schizophrenia, Unspecified State [295.10]			
Inpatient - MH	HARLEM HOSPITAL CENTER	3/2/2012	3/6/2012	4	Paranoid Type Schizophrenia, Unspecified State [295.30]	- Other Psychiatric Interview And Evaluati		

▼ Living Support/Residential Treatment			See All Service Details		OMH PHI	View: <input type="radio"/> Graph <input checked="" type="radio"/> Table
Program/Type	Provider Name	First Date of Service (last 5 years)	Last Date Billed	Number of Visits	See Service Details	
OMH Operated - Community Residence (SOCR)	<u>MANHATTAN PC</u> 	8/28/2012	5/8/2013			

Additional PSYCKES Training

- PSYCKES website: www.psyckes.org
- Webinars
 - Live webinars: Register on [PSYCKES Calendar](#)
 - Recorded webinars: Posted on [PSYCKES Website](#)
- 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
- OMH Help Desk (PSYCKES Login & SMS support)
 - 7:00AM – 8:00PM, 7 days
 - 800-HELP-NYS (800-435-7697)
 - Helpdesk@omh.ny.gov