Enable Access to Client-Level Data in PSYCKES

We will begin shortly

To listen to the audio:
Call 1-518-549-0500 and enter MeetingPlace ID: 645 579 845#
Ask Your **Questions** via WebEx Q&A
Overview

1. PSYCKES overview
2. Access to client data
3. Using the PSYCKES Enable PHI Access Menu
   - Set up and print PSYCKES Consent form
   - Attest to right to view client Clinical Summary
   - Withdrawal of consent
4. PSYCKES Clinical Summary and Recipient Search
5. Implementing PSYCKES Enable PHI Access Menu
6. Resources
New in PSYCKES!

- The PSYCKES iOS Mobile App is now available in the App Store for iPhones and iPads!

- Value Based Payment (VBP) reports for providers
  - Identify the other providers who serve your clients

- Upload and view “Care Plans and Other Documents”
What is PSYCKES?
PSYCKES is…

- A secure, HIPAA-compliant web-based platform for sharing Medicaid claims data
- Designed to support clinical decision-making and quality improvement
- Ongoing data updates
Over 6 million NYS Medicaid enrollees currently or historically, in the Behavioral Health population (BH service / diagnosis / medication)
Data Available in PSYCKES

- PSYCKES clinical reports provide up to **5 years** of claims data for NYS Medicaid enrollees in the Behavioral Health population
  - Including Fee for Service and Managed Care

- The PSYCKES **My QI Report** screen provides provider/system level performance on indicators developed for quality concerns
  - Promotes quality improvement by providing lists of recipients served by providers who meet criteria for quality concerns
Quality Concerns or Quality Indicators

“Flags”

- PSYCKES identifies clients flagged for quality concerns in order to inform the treating provider and to support clinical review and quality improvement.

- When a client has a quality flag, the provider is allowed access to that individual’s Clinical Summary.

- Examples of current quality flags include:
  - Medication-Related, e.g., Polypharmacy, Medication Adherence
  - Acute Care Utilization, e.g., High utilization, Readmission
  - General Medical Health, e.g. No Diabetes Screening on an antipsychotic
Access to Client Data in PSYCKES
Clients are linked to an agency / hospital in one of two ways:

1. **Automatically**: Client had a billed service at the agency within the past 9 months and are positive for a quality indicator.

2. **Manually**: Through the Enable PHI Access Menu
   - Signed consent
   - Emergency (72 hours)
   - Attest client is served by / being transferred to agency prior to billing and/or signed consent
Automatic access to client data

Without consent

- Certain data provided without consent...
  - Positive for any quality concern flagged in PSYCKES
  - At least one billed service anywhere in your agency/hospital in past 9 months

- Rationale: monitor quality and safety of Medicaid program. Does not include Protected Health Information (PHI) with special protections:
  - HIV
  - Substance use information/treatment
  - Genetic information
  - Reproductive / family planning
Manual access to client data

With consent using Enable PHI Access Menu

- Expanded access
  - Search among all Medicaid enrollees in the Behavioral Health population, including those not yet linked to your agency/hospital through Medicaid billing and those not positive for a quality flag
  - Includes information with special protections (substance use, HIV, genetic information, family planning)

- Access to client-level data
  - With consent
  - In clinical emergencies (limited duration, 72 hours)

- Advantage of obtaining consent:
  - Access to data remains in effect until client is discharged (3 years after last bill) or client withdraws consent
# Client Data for Providers: Comparison

<table>
<thead>
<tr>
<th>Client data-agency link Type</th>
<th>Client data access type</th>
<th>Quality flag?</th>
<th>Any client data?</th>
<th>Data with special protection? (SUD, HIV, Family Planning, Genetic)</th>
<th>Duration</th>
</tr>
</thead>
<tbody>
<tr>
<td>Automatic</td>
<td>Billed service in past 9 months</td>
<td>No</td>
<td>No, client name only</td>
<td>No</td>
<td>9 months after last service</td>
</tr>
<tr>
<td></td>
<td></td>
<td>Yes</td>
<td>Yes</td>
<td>No</td>
<td>While flag is active, up to 9 months after last service</td>
</tr>
<tr>
<td>Manual (using Enable PHI Access Menu)</td>
<td>Attest client is being served at / transferred to agency</td>
<td>No</td>
<td>No, client name only</td>
<td>No</td>
<td>9 months after last service</td>
</tr>
<tr>
<td></td>
<td></td>
<td>Yes</td>
<td>Yes</td>
<td>No</td>
<td>While flag is active, up to 9 months after last service</td>
</tr>
<tr>
<td></td>
<td>Clinical emergency</td>
<td>n/a</td>
<td>Yes</td>
<td>Yes, all data</td>
<td>72 hours</td>
</tr>
<tr>
<td></td>
<td>Consent</td>
<td>n/a</td>
<td>Yes</td>
<td>Yes, all data</td>
<td>3 years after last service</td>
</tr>
</tbody>
</table>
### Login to PSYCKES: My QI Report Screen

#### Indicator Set

<table>
<thead>
<tr>
<th>Indicator Set</th>
<th>Population</th>
<th>Eligible Population</th>
<th>% with QI Flag</th>
<th>Regional %</th>
<th>Statewide %</th>
</tr>
</thead>
<tbody>
<tr>
<td>BH QARR - DOH Performance Tracking Measure - as of MM/DD/YYYY</td>
<td>All</td>
<td>479</td>
<td>321</td>
<td>67.01</td>
<td>67.71</td>
</tr>
<tr>
<td>BH QARR - Improvement Measure</td>
<td>All</td>
<td>343</td>
<td>201</td>
<td>58.60</td>
<td>51.15</td>
</tr>
<tr>
<td>General Medical Health</td>
<td>All</td>
<td>1,401</td>
<td>412</td>
<td>29.41</td>
<td>14.46</td>
</tr>
<tr>
<td>HARP Enrolled - Not Health Home Enrolled</td>
<td>Adult 21+</td>
<td>233</td>
<td>123</td>
<td>52.79</td>
<td>67.43</td>
</tr>
<tr>
<td>High Utilization - Inpt/ER</td>
<td>All</td>
<td>1,450</td>
<td>456</td>
<td>31.45</td>
<td>27.64</td>
</tr>
<tr>
<td>Polypharmacy</td>
<td>All</td>
<td>456</td>
<td>103</td>
<td>22.59</td>
<td>11.07</td>
</tr>
<tr>
<td>Preventable Hospitalization</td>
<td>Adult</td>
<td>1,128</td>
<td>8</td>
<td>0.71</td>
<td>0.58</td>
</tr>
<tr>
<td>Readmission Post-Discharge from any Hospital</td>
<td>All</td>
<td>446</td>
<td>59</td>
<td>13.23</td>
<td>10.50</td>
</tr>
<tr>
<td>Readmission Post-Discharge from this Hospital</td>
<td>All</td>
<td>176</td>
<td>15</td>
<td>8.52</td>
<td>9.64</td>
</tr>
<tr>
<td>Treatment Engagement</td>
<td>(0.64) yrs</td>
<td>228</td>
<td>96</td>
<td>42.11</td>
<td>45.75</td>
</tr>
</tbody>
</table>

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**PSYCKES**  
Release: 6.0.0  
Logged in as: USERID  
Agency: BEHAVIORAL HEALTH PROVIDER AGENCY
How to find Enable PHI Access Menu

- **Recipient Search: Recipient identifier search**

- **Registrar: Manage PHI Access submenu**

Enable PHI Access

Enable access to client’s Clinical Summary by attesting to one or more of the following:
- Client signed the PSYCKES Consent Form or, for a lead Health Home only, the Health Home Patient Information Sharing Consent, DOH-5055.
- Client data is needed due to clinical emergency.
- Client is served by/being transferred to your provider agency.
Recipient Search: Enable PHI Access Menu
Recipient Search: Enable PHI Access Menu

Step 1: Search for client

Enter recipient identifier(s) and click “Search”

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

Step 1: Confirm client match and select “Change PHI Access Level”; if no match, click “Modify Search”
Recipient Search: Enable PHI Access Menu

Step 1: Confirm client match

More than 10 recipient meet search criteria message

No Recipients Found

First Name: ASDFNEFG
Last Name: ASDFNEFG

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

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

Recipient Search: Enable PHI Access Menu

Step 2: Attestation to right to access data
Recipient Search: Enable PHI Access Menu

Step 2: Attestation to right to access data

Attestation for right to access client’s Medicaid data (Select at least one option):

1. □ Client signed the PSYCKES Consent Form for Hutchings Psychiatric Center
   Note: For a lead Health Home only, the Health Home Patient Information Sharing Consent, DOH-5055 may be used.

2. In the absence of signed consent, you may get limited access to client’s clinical data. Please check all that apply:
   □ a. Attestation of Clinical Emergency by Hutchings Psychiatric Center
   □ b. Attestation of Service. Client is currently served by/ being transferred to Hutchings Psychiatric Center

① Check box 1 if client granted consent and signed PSYCKES Consent Form

② If no consent was obtained, check box 2a if it is a clinical emergency or 2b if client is being served by/ transferred to agency/hospital
Recipient Search: Enable PHI Access Menu

Step 2: Options for Attestation to right to access data – Client Consent

- Client signed consent form
  - PSYCKES Consent Form
  - Health Home Patient Information Sharing Consent, DOH form 5055 (lead Health Home only)

- PSYCKES Consent Form can be printed from Registrar: Manage PHI Access submenu or Recipient Search: Enable PHI Access menu
Step 2: Options for Attestation to right to access data – Client Consent

- Obtaining client consent
  - Client is asked to sign designated consent form
  - Give copy of consent form to client
  - Original is retained in the client’s medical record

- Clinically, consent is the single best option
  - Obtaining consent is always better than not obtaining consent
  - You will get all of the PHI data, for up to 3 years
  - You will get data even if the client is not positive for a quality flag
"Emergency condition" means a medical or behavioral condition, **the onset of which is sudden**, that manifests itself by symptoms of sufficient severity, including severe pain, that a prudent layperson, possessing an average knowledge of medicine and health, could reasonably expect the **absence of immediate medical attention** to result in (a) placing the health of the person afflicted with such condition in serious jeopardy, or in the case of a behavioral condition placing the health of such person or others in serious jeopardy; (b) serious impairment to such person's bodily functions; (c) serious dysfunction of any bodily organ or part of such person; or (d) serious disfigurement of such person.
Enable PHI Access Menu

Step 2: Options for Attestation to right to access data – Attestation of Service

▪ When to use:
  – Clients for whom you do not yet have consent
  – Clients with whom you are beginning to work but have not billed for yet
  – At the point of intake or during the first few months of treatment
  – Program provides clinical Medicaid services, but does not bill Medicaid (e.g., non-billable partner in a health home or a state-operated inpatient service)

▪ Level of access:
  – Does not include data with special protections (HIV, SUD, Reproductive, Genetic, Care Plans & Documents)
  – Community providers (not operated by OMH) have access for up to 9 months after last billed service, if client is positive for a quality flag
  – State-op providers have access for up to 3 years, regardless of quality flag status
Recipient Search: Enable PHI Access Menu

Step 3: Confirm client identity

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

Client has been identified via the following:

- Service Provider attests to client identity
- Client provided 1 photo ID or 2 forms of non-photo ID

- Identification 1: Select Document 1
- Identification 2: Select Document 2

Submit and View client's Clinical Summary  Submit and Quit  Quit and do not submit
Recipient Search: Enable PHI Access Menu
Submit and quit or Submit and Go to Clinical Summary

Step: Why are you allowed to view this data?
Attestation for right to access client’s Medicaid data (Select at least one option):

1. □ Client signed the PSYCKES Consent Form for BEHAVIORAL HEALTH PROVIDER AGENCY
   Note: For a lead Health Home only, the Health Home Patient Information Sharing Consent, DOH-5055 may be used.

2. In the absence of signed consent, you may get limited access to client’s clinical data.
   Please check all that apply:
   □ a. Attestation of Clinical Emergency by BEHAVIORAL HEALTH PROVIDER AGENCY
   □ b. Attestation of Service: Client is currently served by/ being transferred to BEHAVIORAL HEALTH PROVIDER AGENCY

Step: How do you know this is the correct person?
Client has been identified via the following:

- Service Provider attests to client identity
- Client provided 1 photo ID or 2 forms of non-photo ID

Identification 1: Select Document 1
Identification 2: Select Document 2

Submit and View client’s Clinical Summary | Submit and Quit | Quit and do not submit
Enable PHI Access Menu

Brief overview

- **Step 1: Search client and confirm match**
  - Search using identifiers: First Name, Last Name, Medicaid ID, Social Security Number, Date of Birth
  - Confirm client match

- **Step 2: Attest to right to access client data**
  - Client signed PSYCKES Consent Form or Health Home Patient Information Sharing Consent, DOH form 5055 (lead Health Home only)
  - Clinical emergency
  - Client is served at / being transferred to agency/hospital prior to billing and/or signed consent
Enable PHI Access Menu

Brief overview

- Step 3: Verify client identity
  - Provider attests to client’s identity
  - Verify client provided one form of ID

- Save and exit
  OR

Save and proceed to Clinical Summary
Clinical Summary

Impact of Entering Consent or Clinical Emergency

- The Clinical Summary
  - Any PSYCKES user at agency will be able to view Clinical Summary after consent entered
  - Heading contains demographic information, Managed Care Plan, Quality Indicator status
  - Current Care Coordination Contact Information
  - Integrated View of Services Overtime
  - Medications, Outpatient Services, Hospitalizations, Labs

- Show/Hide Enhanced PHI Toggle
  - After consent or clinical emergency is entered in the Enable PHI Access Menu, you will see an additional feature in the Clinical Summary to show and hide enhanced PHI
  - Enables HIV, Substance Use, Family Planning, Genetic, to be visible or hidden from view
**Clinical Summary header**

With consent: **toggle between show/hide enhanced PHI**

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**General**

<table>
<thead>
<tr>
<th>Name</th>
<th>Medicaid ID</th>
<th>Medicare</th>
</tr>
</thead>
<tbody>
<tr>
<td>Hdfaedf Gghbed</td>
<td>AFDFFH CADAFFF</td>
<td>No</td>
</tr>
</tbody>
</table>

**DOB**

01/01/19999 (999 Yrs)

**Address**

Edbbeea Edibja, Jacjddc Bdijabd, lcabjb Cbhbffe, Geddhc Jgdjhc

**Medicaid Aid Category**

MA-SAFETY NET

**Medicaid Eligibility Expires on**

03/31/2018

**Managed Care Plan**

Excellus BlueCross BlueShield (Mainstream)

**HARP Status**

HARP - Eligible Pending Enrollment (H9)

---

**Quality Flags** as of monthly QI report 7/1/2017  

<table>
<thead>
<tr>
<th>Indicator Set</th>
<th>BH QARR - DOH</th>
<th>BH QARR - Improvement Measure</th>
<th>General Medical Health</th>
<th>High Utilization - Inpt/ER</th>
<th>Treatment Engagement</th>
</tr>
</thead>
<tbody>
<tr>
<td></td>
<td>BH QARR - DOH</td>
<td>Adherence - Antipsychotic (Schiz)</td>
<td>No Metabolic Monitoring (LDL-C) on Antipsychotic</td>
<td>2+ ER - Medical</td>
<td>Adherence - Antipsychotic (Schiz)</td>
</tr>
<tr>
<td></td>
<td></td>
<td></td>
<td></td>
<td>4+ Inpatient/ER - Med</td>
<td></td>
</tr>
</tbody>
</table>

---

**Behavioral Health Diagnoses**  

Primary and Secondary Dx (most frequent first)

- Schizophrenia
- Unspecified/Other Anxiety Disorder
- Unspecified/Other Depressive Disorder

---
Clinical Summary header

Without consent: no option to show enhanced PHI

Adcddba Dcdljej
Clinical Summary as of 4/1/2017

This report does not contain clinical data with special protection - consent required.
OMH PHI

Summary Period
1 Yr  2 Yrs  All

General

Name
Adcddba Dcdljej

DOB
01/01/9999 (999 Yrs)

Address
Cdeqbd Gadcbbc, Fdefgac Caggebd, Icabiij Cbhfibe, Ccagedd Dcbdada

Medicaid ID
AFDDJDC FBDBDFD

Medicaid Aid Category
MA-SSI

Medicaid Eligibility Expires on
12/31/2017

Medicare
Yes

Managed Care Plan
No Managed Care (FFS Only)

HARP Status
Not Eligible
### Clinical Summary

**Outpatient Services – Behavioral Health and Medical**

Provider, dates, # of visits, diagnosis, procedures, practitioner

<table>
<thead>
<tr>
<th>Behavioral Health Services</th>
<th>Service Type</th>
<th>Provider</th>
<th>First Date Billed</th>
<th>Last Date Billed</th>
<th>Number of Visits</th>
<th>Most Recent Primary Diagnosis</th>
<th>Most Recent Procedures (Last 3 Months)</th>
<th>Practitioner</th>
</tr>
</thead>
<tbody>
<tr>
<td></td>
<td>Clinic - SU - Methadone Maintenance Treatment Program</td>
<td>PROMESA</td>
<td>9/6/2015</td>
<td>7/20/2017</td>
<td>158</td>
<td>Opioid dependence, uncomplicated</td>
<td>Alcohol And/Or Drug Services - Psytx Pt&amp;/Family 30 Minutes - Office/Outpatient Visit Est</td>
<td></td>
</tr>
<tr>
<td></td>
<td>Clinic - Medical Specialty</td>
<td>HOMETOWN HEALTH</td>
<td>4/17/2017</td>
<td>4/17/2017</td>
<td>1</td>
<td>Bipolar disorder, unspecified</td>
<td>Office/Outpatient Visit Est</td>
<td></td>
</tr>
<tr>
<td></td>
<td>Clinic - SU Specialty</td>
<td>BH AGENCY</td>
<td>10/31/2016</td>
<td>10/31/2016</td>
<td>1</td>
<td>Alcohol Dependence</td>
<td></td>
<td></td>
</tr>
</tbody>
</table>
**Hospital/ER Services – Integrated Behavioral/Medical**

Service type, provider, diagnosis, admission/discharge dates, length of stay, procedures

<table>
<thead>
<tr>
<th>Service Type</th>
<th>Provider</th>
<th>Admission</th>
<th>Discharge Date/Last Date Billed</th>
<th>Length of Stay</th>
<th>Most Recent Primary Diagnosis</th>
<th>Procedure(s) (Per Visit)</th>
</tr>
</thead>
<tbody>
<tr>
<td>ER - SU</td>
<td>NY HOSPITAL</td>
<td>6/30/2017</td>
<td>6/30/2017</td>
<td>1</td>
<td>Substance Use</td>
<td>Emergency Dept Visit</td>
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<tr>
<td>ER - Medical</td>
<td>BELLEVUE HOSPITAL CENTER</td>
<td>3/24/2017</td>
<td>3/25/2017</td>
<td>1</td>
<td>Headache</td>
<td></td>
</tr>
<tr>
<td>Inpatient - MH</td>
<td>JAMAICA HOSPITAL MED CTR</td>
<td>3/25/2017</td>
<td>3/25/2017</td>
<td>1</td>
<td>Major Depressive Disorder</td>
<td></td>
</tr>
<tr>
<td>ER - MH</td>
<td>BELLEVUE HOSPITAL CENTER</td>
<td>3/21/2017</td>
<td>3/22/2017</td>
<td>1</td>
<td>Mental Illness</td>
<td></td>
</tr>
<tr>
<td>ER - MH</td>
<td>NY HOSPITAL</td>
<td>3/18/2017</td>
<td>3/19/2017</td>
<td>1</td>
<td>Brief Psychotic Disorder</td>
<td>Analgesics Non-Opioid 1 Or 2, Comprehensive Metabolic Panel, Emergency Dept Visit</td>
</tr>
</tbody>
</table>
Clinical Summary

Upload Care Plans & Documents

<table>
<thead>
<tr>
<th>Date Document Created</th>
<th>Document Type</th>
<th>Provider Name</th>
<th>Document Created By</th>
<th>Role</th>
</tr>
</thead>
<tbody>
<tr>
<td>10/2/2016</td>
<td>Psychiatric Advance Directive</td>
<td>BEHAVIORAL HEALTH PROVIDER AGENCY</td>
<td>Jessica Marquez</td>
<td>Quality Improvement</td>
</tr>
<tr>
<td>10/2/2016</td>
<td>Relapse Prevention Plan</td>
<td>BEHAVIORAL HEALTH PROVIDER AGENCY</td>
<td>Jeremy Herring</td>
<td>Quality Improvement</td>
</tr>
</tbody>
</table>

- Any provider agency or hospital with access to PSYCKES will be able to view Care Plans & Documents after obtaining client’s consent or in the case of a clinical emergency.

- Agencies and hospitals that do not have the client sign the PSYCKES consent form or do not attest to a clinical emergency will not be able to open these documents.
Clinical Summary
Export data to PDF, Excel, CCD
To select section(s), click or “Shift”+click or “Ctrl”+click.
Clinical Summary

New York State Office of Mental Health - Confidential (Contains Protected Health Information)

Fafdedh Fcbbddeg
Clinical Summary as of 4/1/2017

General

<table>
<thead>
<tr>
<th>Name</th>
<th>Medicaid ID</th>
<th>Medicare</th>
</tr>
</thead>
<tbody>
<tr>
<td>Fafdedh Fcbbddeg</td>
<td>GBGEFAC ECBAFGC</td>
<td>No</td>
</tr>
<tr>
<td>DOB 01/01/9999</td>
<td>Medicaid Aid Category</td>
<td>Managed Care Plan</td>
</tr>
<tr>
<td>(999 Yrs)</td>
<td>SSI</td>
<td>Fidelis Care New York (HARP)</td>
</tr>
<tr>
<td>Address</td>
<td>Medicaid Eligibility Expires on</td>
<td>HARP Status</td>
</tr>
<tr>
<td>Bfdjbd Hhbaecf, Fdefgae Cagebd, Icabij Cbhffbe, Cdjbea Eiddaj</td>
<td></td>
<td>Enrolled with Tier 2 HCBS Eligibility (H3)</td>
</tr>
</tbody>
</table>

Current Care Coordination

- Health Home (Enrolled) - Status: Active, ONONDAGA CASE MGMT SVCS MH (Begin Date: 01-AUG-16). Main Contact: Referral - Tracy Marchese, 585-613-7642 tmarchese@hmuny.org, Nira Tobochnik, 585-613-7640 ntobochnik@hhuny.org
- Care Management (Enrolled): HUTCHINGS PSYCHIATRIC CENTER

- This information is updated weekly from DOH Health Home file.
Recipient Search – cohort search

Search for cohorts of recipients by service setting, age, quality flag, diagnosis, drug or drug class, etc.

Recipient Identifiers
- Medicaid ID
- SSN

Characteristics as of 06/12/2017
- Age Range
- Gender
- HARP Status
- AOT Status
- Population
- Managed Care (MC)
- MC Product Line
- Medicaid Restrictions
- Alerts & Incidents

Quality Flag as of 04/01/2017

Services: Specific Provider as of 04/01/2017
- Provider
- Region
- County
- Service Setting
- Service Utilization
- Number of Visits

HARP Status filter
AOT Status
Alerts & Incidents
Recipient Search – cohort search results

Sample search: clients on Seroquel

- Check Current PHI Access column to see if you have access to clients’ Clinical Summaries
- Click on recipient name to view Clinical Summary

<table>
<thead>
<tr>
<th>Name</th>
<th>Medicaid ID</th>
<th>Quality Flags</th>
<th>Managed Care Plan</th>
<th>Current PHI Access</th>
</tr>
</thead>
<tbody>
<tr>
<td>Fdaaeae Bfaefeac</td>
<td>01/01/9999</td>
<td>2+ ER-Medical, 2+ Inpt-Medical, 4+ Inpt/ER-Med</td>
<td>Total Care</td>
<td>No Access</td>
</tr>
<tr>
<td>Bhbaaje Bojdghd</td>
<td>01/01/9999</td>
<td>HARP No Health Home</td>
<td>All Data - Consent</td>
<td>No Consent</td>
</tr>
<tr>
<td>Afdagd Fbaechc</td>
<td>01/01/9999</td>
<td>Gbqdeia Badhbba</td>
<td>All Data - Consent</td>
<td>No Access</td>
</tr>
<tr>
<td>Bhdccfj Gfcahic</td>
<td>01/01/9999</td>
<td>Effjijc Jbhjcd</td>
<td>All Data - Consent</td>
<td>No Access</td>
</tr>
</tbody>
</table>

- QI flag, no consent; access to client data (no enhanced PHI)
- no QI flag, no consent; no access to client data
- no QI flag, consent; access to client data (including enhanced PHI)
Recipient Search – cohort search

Sample search: consented clients

Generate list of all consented clients by filtering for Current Access Status → Active Consent
Registrar: Manage PHI Access submenu
Registrar Tab

Registrar tab available for all PSYCKES users
Registrar Tab

Manage PHI Access submenu

- Enable PHI Access
  - Enable access to client’s clinical summary
  - Print PSYCKES Consent form

- Provider Details for Consent form
  - Enter contact information for agency that will pre-populate in PSYCKES Consent form

- Withdraw Consent
  - Register client’s withdrawal of consent
  - Print PSYCKES Withdrawal of Consent form

- Deactivate an attestation of service
1. Hover mouse over Registrar menu
2. Click Manage PHI Access submenu
3. Click Search & Enable PHI Access
Registrar: Enable PHI Access Menu

Step 1: Search for client

Enter recipient identifier(s), and click “Search”

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

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

<table>
<thead>
<tr>
<th>Name</th>
<th>Date of Birth</th>
<th>Address</th>
<th>Quality Flags</th>
<th>Managed Care Plan</th>
<th>Current PHI Access</th>
<th>Change PHI Access Level</th>
</tr>
</thead>
<tbody>
<tr>
<td>SMITH JANE F</td>
<td>08/21/1957</td>
<td>330 5TH AVE NEW YORK, NY 10001</td>
<td></td>
<td>No Access</td>
<td>No Access</td>
<td>Change PHI Access Level</td>
</tr>
<tr>
<td>SMITH JANE M</td>
<td>11/14/2013</td>
<td>123 ELM STREET BUFFALO, NY 10002</td>
<td></td>
<td>Fidelis Care New York</td>
<td>No Access</td>
<td>Change PHI Access Level</td>
</tr>
</tbody>
</table>
Registrar: Enable PHI Access Menu

Step 2: Attestation to right to access client data

Attestation for right to access client's Medicaid data (Select at least one option):

1. [ ] Client signed the PSYCKES Consent Form for BEHAVIORAL HEALTH PROVIDER AGENCY
   Note: For a lead Health Home only, the Health Home Patient Information Sharing Consent, DOH-5055 may be used.

2. In the absence of signed consent, you may get limited access to client's clinical data. Please check all that apply.
   [ ] a. Attestation of Clinical Emergency by BEHAVIORAL HEALTH PROVIDER AGENCY
   [ ] b. Attestation of Service: Client is currently served by/ being transferred to BEHAVIORAL HEALTH PROVIDER AGENCY

Step 3: Verify client identity

Client has been identified via the following:

[ ] Service Provider attests to client identity

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

Identification 1: [Select Document 1]

Identification 2: [Select Document 2]
Before printing the consent form, fill in the blanks in the form using the Manage PHI Access submenu.
Registrar: Manage PHI Access

Add / Edit Provider Details for Consent Form

BEHAVIORAL HEALTH PROVIDER AGENCY
Add/Edit Provider Details for consent form

Provider/Hospital to contact for improper use of PSYCKES PHI

<table>
<thead>
<tr>
<th>Contact Name/Title</th>
<th></th>
<th></th>
</tr>
</thead>
<tbody>
<tr>
<td>Phone Number</td>
<td>(555) 555-5555</td>
<td>Ext.</td>
</tr>
</tbody>
</table>

Provider/Hospital to contact for PSYCKES Withdrawal of Consent form

<table>
<thead>
<tr>
<th>Contact Name/Title</th>
<th></th>
<th></th>
</tr>
</thead>
<tbody>
<tr>
<td>Phone Number</td>
<td>(123) 456-7890</td>
<td>Ext.</td>
</tr>
</tbody>
</table>

Name/Title of Person to give form to

Submit
Enable PHI Access

Print PSYCKES Consent Form: English, Spanish

Search & Enable Access

- Print PSYCKES Consent Forms
  - English and Spanish
  - Consent and Withdrawal of Consent

Best practice: PSYCKES form pre-printed and available on hard copy
Registrar: Withdrawal of Consent
Withdrawal of Consent

- Clients have the right to withdraw consent
- Withdraw Consent form must be used and is available through the:
  - PSYCKES application >> Registrar Menu >> Manage PHI Access
  - PSYCKES public website
- After client signs the Withdraw Consent form, Manage PHI Access menu used to register client’s withdrawal of consent
  - Agency may still have access to client data if client is positive for a quality flag and agency bills Medicaid for them
- Attestation to service can also be de-activated
Registrar: Manage PHI Access

Withdraw Consent

Manage PHI Access

Enable PHI Access

Enable access to client’s Clinical Summary by attesting to one or more of the following:
- Client signed the PSYCKES Consent Form or, for a lead Health Home only, the Health Home Patient Information Sharing Consent, DOH-5055.
- Client data is needed due to clinical emergency.
- Client is served by/ being transferred to your provider agency.

Search & Enable Access

Provider Details for Consent Form

Use this function to add/edit name(s) and phone number(s) displayed in the consent form before printing.

Add/Edit Details

Withdraw Consent

Register client’s withdrawal of consent to disable access to client data. Client must sign the PSYCKES Withdrawal of Consent Form. 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.

Search & Withdraw Consent

Deactivate Attestation of Service

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.

Search & Deactivate Attestation
Registrar: Manage PHI Access – Withdraw Consent
Search by Medicaid ID #
Registrar: Manage PHI Access – Withdraw Consent

Verify Client ID and Withdraw

Register Client's Withdrawal of Consent

<table>
<thead>
<tr>
<th>Medicaid ID</th>
<th>Search</th>
<th>Clear</th>
</tr>
</thead>
<tbody>
<tr>
<td>XXXXXXXX</td>
<td></td>
<td></td>
</tr>
</tbody>
</table>

Results

<table>
<thead>
<tr>
<th>Name</th>
<th>DOB</th>
<th>Address</th>
<th>Medicaid ID</th>
<th>Withdraw</th>
</tr>
</thead>
<tbody>
<tr>
<td>SMITH JANE</td>
<td>01/27/1957</td>
<td>123 MAIN STREET NEW YORK, NY 10001</td>
<td>XXXXXXXX</td>
<td>Withdraw</td>
</tr>
</tbody>
</table>
Registrar: Manage PHI Access – Withdraw Consent

Consent Withdrawn

Register Client's Withdrawal of Consent

Medicaid ID

Search    Clear

Consent withdrawal for recipient XXXXXXXX
Usage Reports: PHI Access Module
Monitor consent activity

Summary of PHI Access Module usage during the selected date range

Total number of clients entered during the selected date range

<table>
<thead>
<tr>
<th>Signed Consents</th>
<th>Emergency</th>
<th>Attestation of Service</th>
<th>Total Clients Entered</th>
<th>Withdrawn Consents</th>
<th>Deactivated Attestation of Service</th>
</tr>
</thead>
<tbody>
<tr>
<td>2362 (91%)</td>
<td>218 (8%)</td>
<td>8 (0%)</td>
<td>2,588</td>
<td>2</td>
<td>0</td>
</tr>
</tbody>
</table>
### Usage Reports: PHI Access Module

#### Monitor consent activity

**Total number of clients entered during the selected date range**

<table>
<thead>
<tr>
<th>Signed Consents</th>
<th>Emergency</th>
<th>Attestation of Service</th>
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<td>8 (0%)</td>
<td>2,588</td>
<td>2</td>
<td>0</td>
</tr>
</tbody>
</table>

**PHI Access Module usage during the selected date range, by user**

<table>
<thead>
<tr>
<th>User Name</th>
<th>Setting</th>
<th>Role in Organization</th>
<th>Licensed Profession</th>
<th>Total Clients Entered</th>
<th>Attestation of Service</th>
<th>Total Signed + Emergency</th>
<th>Signed Consents (%)</th>
<th>Signed Consents (%)</th>
<th>Emergency (%)</th>
<th>2 Forms of ID (%)</th>
</tr>
</thead>
<tbody>
<tr>
<td>Last Name, First Name</td>
<td>Emergency Department/CPEP</td>
<td>Administrative Support</td>
<td></td>
<td>4</td>
<td>0</td>
<td>4 (100%)</td>
<td>0</td>
<td>0</td>
<td></td>
<td></td>
</tr>
<tr>
<td>Last Name, First Name</td>
<td>Local Government Unit; Medical - Inpatient, Medical - Outpatient, Medical - Residential, Mental Health - Inpatient; Mental Health - Outpatient, Mental Health - Residential, Substance Use - Inpatient, Substance Use - Outpatient, Substance Use - Residential</td>
<td>Administrative Support</td>
<td></td>
<td>17</td>
<td>0</td>
<td>17 (100%)</td>
<td>0</td>
<td>0</td>
<td></td>
<td></td>
</tr>
<tr>
<td>Last Name, First Name</td>
<td>SHO - Behavioral Health Organization, Mental Health - Inpatient, Mental Health - Outpatient</td>
<td>Leadership, Quality Management, SW, RN, NP, Other Clinician/Direct Service</td>
<td>Licensed Clinical Social Worker</td>
<td>52</td>
<td>1</td>
<td>51 (98%)</td>
<td>1 (2%)</td>
<td>0</td>
<td></td>
<td></td>
</tr>
<tr>
<td>Last Name, First Name</td>
<td>Mental Health - Outpatient</td>
<td>SW, RN, NP, Other Clinician/Direct Service</td>
<td></td>
<td>1</td>
<td>0</td>
<td>1 (100%)</td>
<td>0</td>
<td>0</td>
<td></td>
<td></td>
</tr>
<tr>
<td>Last Name, First Name</td>
<td>SHO - Behavioral Health Organization</td>
<td>SW, RN, NP, Other Clinician/Direct Service</td>
<td>Licensed Clinical Social Worker</td>
<td>1</td>
<td>0</td>
<td>1 (100%)</td>
<td>0</td>
<td>0</td>
<td></td>
<td></td>
</tr>
</tbody>
</table>
Implementation
Implementing PSYCKES Enable PHI Access

Menu

- Establish policies, procedures, and responsibilities
- Train staff on work flow and how to use PSYCKES
  - “PSYCKES Train the Trainer webinar”
- Inform clinical staff about value of implementation
  - Data with special protections in PSYCKES Clinical Summary to support clients’ treatment
- Customize PSYCKES Consent form with agency’s information
- Designate staff (clinic manager, PSYCKES point person) to use PSYCKES to monitor use:
  - Create a list of consented/un-consented clients
  - Use the "Usage Reports" available in PSYCKES to:
    • Track # of consent forms entered (aggregated and by user)
    • Track # of Clinical Summaries viewed
Establish Policies and Procedures for Enable PHI Access Menu

- How to identify potential PSYCKES clients
  - All Medicaid Enrollees

- When to obtain consent from clients
  - PSYCKES Consent form is pre-printed and accessible to staff
  - Include consent form in intake package for new clients
  - Front desk staff obtain consent before appointment for current clients
  - Discuss Consent form with client during time of treatment update (e.g., clinician is provided the form for use during treatment session)

- Who is responsible for obtaining and entering consent
  - Front desk clerical staff
  - Clinical staff providing treatment
  - Decide whether the person obtaining consent will also be the person, who attests in PSYCKES that consent was obtained
Establish Policies and Procedures for Enable PHI Access Menu

- How to provide the staff member entering consent with the client information needed to attest in PSYCKES consent was obtained
  - Medicaid ID or Social Security #
  - Consent or Clinical Emergency
  - Forms of ID obtained from client

- How to obtain client IDs and document client identity
  - Request client bring 2 forms of ID (acceptable forms listed in Enable PHI Access Menu, step 3), make copies of forms of ID, attach to consent form
  - Alternatively, follow agency’s established procedures for verifying identity

- Who will file PSYCKES Consent Form in the client’s medical record (paper chart or EMR)
Establish Policies and Procedures for Enable PHI Access Menu

- Identify staff authorized to certify a clinical emergency
- How will clients’ Clinical Summaries be viewed
  - Staff member who enters consent prints Clinical Summary and places it in client’s chart
  - Clinical Summary is attached to EMR
  - Treatment provider(s) login to PSYCKES to view Clinical Summary
- Who will register client’s withdrawal of consent if requested by client
- If a client declines consent when first asked, will they be asked again in the future; if so, how will this be tracked
- Include PSYCKES work flow and training when new staff come on board
Resources
PSYCKES Website
www.psyckes.org ~ Navigation bar at left

Office of Mental Health
Ann Marie T. Sullivan, M.D., Commissioner
Governor Andrew M. Cuomo

Message from the Commissioner | About OMH | OMH Facilities | Initiatives | Contact OMH | FAQ

PSYCKES Medicaid Home

PSYCKES
- PSYCKES Medicaid
- Log into PSYCKES
- MyPSYCKES

Initiatives
- Freestanding Mental Health Clinics
- Hospital Quality Collaborative
- Children’s Readmissions Collaborative
- Other Initiatives

Resources
- Quality Improvement Teams
- Clinicians
- Behavioral Health Inpatient Providers
- Consumers and Families

Comments or questions about the information on this page can be directed to the PSYCKES Team.
PSYCKES Website:
“Using PSYCKES” in All Sections

About PSYCKES

About PSYCKES | Data and Information Security | Training | Information in PSYCKES

PSYCKES Training

The Psychiatric Services and Clinical Knowledge Enhancement System (PSYCKES) user’s guides provide instructions on how to use each section of the PSYCKES-Medicaid application:

- Login Instructions for PSYCKES-Medicaid
- Registrar Menu - PHI Access Module User’s Guide
- Recipient Search User’s Guide
- Clinical Summary User’s Guide
- My QI Report - Quality Indicator Overview User’s Guide
- Statewide Report User’s Guide
- Provider Search User’s Guide
- Brief Instructions for Using PSYCKES in Clinical Settings - Concise step-by-step instructions for using Registrar Menu and Recipient Search to access the Clinical Summary.

Users can also learn more about using PSYCKES by attending live on-line training webinars (see calendar to register) or by watching recorded webinars which are available to view any time.

Comments or questions about the information on this page can be directed to the PSYCKES Team.
For Further Information

- PSYCKES website
  - www.psyckes.org

- PSYCKES Helpdesk (PSYCKES support)
  - 9:00AM – 5:00PM, Monday – Friday
  - PSYCKES-Help@omh.ny.gov

- ITS Helpdesk (PSYCKES login, SMS support)
  - State employees: call 844-891-1786 or email fixit@its.ny.gov
  - Non-State Employees: call 518-474-5554 then press '2' at the prompt or email healthhelp@its.ny.gov