

Using PSYCKES for Crisis Work

We will begin shortly...

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Michelle Hand Medical Informatics Office of Population Health & Evaluation August 22, 2023

Q&A via WebEx

- All phone lines are muted
- Access the "Q&A" box by clicking on the 3 horizontal dots in the lower right-hand corner
- Type questions using the "Q&A" feature
 - Submit to "all panelists" (default)
 - Please do not use Chat function for Q&A
- Note: slides and recording will be emailed to attendees after the webinar



Agenda

- PSYCKES overview
- Access to client-level data
- Crisis-related filters in Recipient Search
- My QI Report (crisis-related measures and filters)
- Review client-level details within the Clinical Summary
- *Live Demo!* PSYCKES mobile app
- Training and Technical Assistance

PSYCKES Overview



What is **PSYCKES**?

- A secure, HIPAA-compliant online platform for sharing Medicaid billing data and other state administrative data
- Designed to support data-driven clinical decisionmaking, care coordination and quality improvement
- Ongoing data updates
 - Clinical Summary updated weekly
 - Quality Indicator reports updated monthly



Who is Viewable in PSYCKES?

- Over 11 million NYS Medicaid enrollees (currently or previously enrolled)
 - Fee for service claims
 - Managed care encounter data
 - Dual-eligible (Medicare/Medicaid): Medicaid data only
- Behavioral Health Population, i.e., at least one of the following:
 - Psychiatric or substance use service,
 - Psychiatric or substance use diagnosis, OR
 - Psychotropic medication
- Provides all data general medical, behavioral health, residential

What Data is Available in PSYCKES?

- Clinical Summary provides up to 5 years of data, updated weekly
- All Medicaid billing data, across treatment settings
 - Medications, medical and behavioral health outpatient and inpatient services, ER, health home care coordination, housing and residential, lab, and more!
- Multiple other state administrative databases (0-7 day lag):
 - New York City Department of Homeless Services (NYC DHS)
 - Health Home enrollment & CMA provider (DOH MAPP)
 - Managed Care Plan & HARP status (MC Enrollment Table)
 - MC Plan assigned Primary Care Physician (Quarterly, DOH)
 - Assisted Outpatient Treatment provider contact (OMH TACT)
 - Assertive Community Treatment provider contact (OMH CAIRS)
 - Adult Housing/Residential program Information (OMH CAIRS)
 - Intensive Mobile Treatment (DOHMH)
 - AOT Referral Under Investigation (DOHMH)
 - State Psychiatric Center EMR
 - Suicide attempt (OMH NIMRS)
 - Safety plans, screenings, assessments entered in MyCHOIS



Quality Indicators "Flags"

- PSYCKES identifies clients flagged for quality concern in order to inform the treating provider and to support clinical review and quality improvement
- When a client has an applicable quality flag, the provider is allowed access to that individual's Clinical Summary
- Examples of current quality flags include:
 - High Utilization, e.g., 10+ ER MH, 4+ Inpatient/ER MH
 - Medication-Related, e.g., Discontinuation Antidepressant < 12 weeks (MDE), Psychotropics Four Plus
 - Acute Care Utilization, e.g., 2+ ER BH, Readmission
 - MH Performance Tracking Measures, e.g., No Follow Up After MH ED Visit – 7/30 Days, No Follow Up After MH Inpatient – 7/30 Days

What Types of Reports Are Available?

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

Access to Client-Level Data



Access to Client Data in PSYCKES

Clients are assigned to a provider agency/hospital in one of two ways:

- Automatically: Client had a billed service at the provider facility within the past 9 months or client is enrolled in facility's HH/CM program according to DOH MAPP
- Manually:
 - Signed consent
 - Verbal PSYCKES consent
 - Clinical Emergency (72 hours)
 - Attest client is served by/being transferred to facility prior to billing and/or signed consent



Access to Client Data

Without Signed Consent

- Certain data provided <u>without</u> consent...
 - Positive for an applicable quality concern flagged in PSYCKES
 - At least one billed service anywhere in agency/hospital in past 9 months
- Rationale: monitor quality and safety of Medicaid program
- Does <u>not</u> include Protected Health Information (PHI) with special protections:
 - Substance use information/treatment
 - HIV
 - Genetic testing
 - Reproductive / family planning



Access to Client Data

With Signed Consent / Clinical Emergency

- Expanded access
 - New clients who have not yet been linked to provider facility through Medicaid billing can be viewed
 - Clients who do not have any or applicable quality flags can be viewed
 - Includes information with special protections (substance use, HIV, genetic testing, family planning)
- Access to client-level data
 - With consent (3 years after last billed service)
 - With Verbal PSYCKES consent (9 months)
 - In clinical emergencies (limited duration, 72 hours)

Access to Client Data

Clinical Emergency

New York State Public Health Law Section 4900.3

"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.

Mental Health

Client Data for Providers: Comparison

Client data- agency link Type	Client data access type	Quality flag?	Any client data?	Data with special protection? (SUD, HIV, Family Planning, Genetic)	
matic	Billed	No	No, client name only		
Auto	9 months	Yes	Yes	No	While flag is active, up to 9 months after last service
	Attest client is being		No, client name only	No	9 months after last service
_	to agency	Yes	Yes	No	While flag is active, up to 9 months after last service
nua	Clinical emergency	n/a	Yes	Yes, all data	72 hours
Ma	Verbal PSYCKES Consent	n/a	Yes	No	9 months
	Consent	n/a	Yes	Yes, all data	3 years after last service

Two Ways to Enable PHI Access

Recipient Search: Recipient identifier search

My QI Report -	Statewide Reports	Recipient Search	Provider Search	Registrar -	Usage Reports 🚽	Utilization Repo	rts	
			Recipient	Search	Limit r	esults to 50	Search	Reset
Recipient Identifier	s				Search in	: 🔘 Full Database		REET CLINIC
Me	dicaid ID	SSN		First Name	Last Name	D	ОВ	
AB00000A							MM/DD/YYYY	

Registrar: Manage PHI Access submenu

My QI Report -	Statewide Reports	Recipient Search	Provider Search	Registrar -	Usage Reports 🗸	Utilization Reports	
			Manage PH	Manage PHI Ac	ccess		
Enable PHI Acces	Enable PHI Access Print PSYCKES Consent form: R English R Spanish C Other languages						
Enable access to client's Clinical Summary by attesting to one or more of the following: Client signed the PSYCKES Consent Form Client signed the Health Home Patient Information Sharing Consent Client signed the BHCC Patient Information Sharing Consent for specific BHCC(s) Client gave Verbal PSYCKES Consent 							

Client is served by/ being transferred to your provider agency

Search & Enable Access >

Step 1: Search for client

Enter one or more recipient identifier(s) and click "Search"

Recipient Identifiers			Search in: 🔘 Fu	ll Database 🔘 MAIN STR
Medicaid ID	SSN	First Name	Last Name	DOB
AB00000A				MM/DD/YYYY

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



Confirm client match and select "Enable Access" or "Update Access"; if no match, click "Modify Search"

My QI Report - S	Statewide Reports Recip	pient Search	Provider Search Reg	gistrar - Usag	e + Utilization I	Reports Adult Home			
✓ Modify Search			1 Recipi	ents Found	l			DF	X Excel
Medicaid ID	AB12345C								
Review recipients in	results carefully before a	ccessing Clinica	al Summary.			M	aximum Number of R	lows Display	/ed: 50
Name (Gender - Age)	Unique Identifiers	DOB	Address	Medicaio	Quality Flags	Medicaid Managed Care Plan	Current PHI Access		
DOE JANE F - 53	Medicaid ID: AB12345C	10/10/1970	12 MAIN ST #5 BROOKLYN, NY 12345	5		Healthfirst PHSP, Inc.	No Access	Enable Access I	



Step 2: Attest to why you're allowed to view the data

NEW YORK STATE OF OPPORTUNITY.	Office of Mental Healt	PHI Access for DOE JANE (F - 53), DOB 10/10/1970	×Se	ttings -	Log Off
My QI Report -	Statewide Reports	Why are you allowed to view this data? • About access level	Hor	me	
K Modify Search		The client signed consent			PDF Excel
Medicaid IE)	Client signed a PSYCKES Consent	I.		
Review recipients	in results carefully l	Client signed a BHCC Patient Information Sharing Consent			
		Client signed a DOH Health Home Patient Information Sharing Consent		Maximum Numb	er of Rows Displayed: 50
Name (Gender - Age)	Unique Identi	Provider attests to other reason for access	l Ca	re Current P Access	41
DOE JANE	Medicaid ID: AB	Client gave Verbal PSYCKES Consent	? In	ic. No Access	Enable
F - 53		✓ This is a clinical emergency			Access 🖬
		Client is currently served by or being transferred to my facility	I		
PSYCKES				Logg	ed in as: L0000MHH
		Cancel Next		MAI	N STREET CLINIC

Step 3: Confirm client identity and Enable

My QI Report -	Statewide Reports	Recipient Search	Provider Search	Registrar -	Usage -	Utilization Reports	Adult Home		
✓ Modify Search		PHI Access for D	00E JANE (F - 53)	, DOB 10/10/	1970		×		DF Excel
Medicaid II) in results carefully.	How do you k	now this is th	e correct p	erson?				
neview recipients	in results carefully	O Provider atte	sts to client identity	у			Μ	laximum Number of F	Rows Displayed: 50
Name (Gender - Age)	Unique Identi	Client provide	ed 1 photo ID or 2 f	orms of non-pr	noto ID		l Care	Current PHI Access	
DOE JANE F - 53	Medicaid ID: AB	Identification 1	U.S. Driver's Licer	nse	~		P, Inc.	No Access	Enable Access 🔒
		Identification 2	select		~		- 8		
		MAIN STREET CLINI	c will be given acces	ss to all available	data for 72 ł	nours.			
		Previous	Can	cel Enable	Enable a	and View Clinical Summa	ry		
PSYCKES		_	_	_		_		Logged in MAIN STI	as: L0000MHH REET CLINIC

Clinical Emergency Access

All available data (including data with special protections) for 72 hours

My QI Report -	Statewide Reports	Recipient Search	Provider Search Regis	rar - Usage-	Utiliza	Clinical emerg		
✓ Modify Search			1 Recipie	nts Found		access will dis as "All Data – Emergency" ir	play n the	DF Excel
Medicaid ID		AB12345C				'Current PHI A column	Access'	
Review recipients in	n results carefully be	fore accessing Clinic	cal Summary.			Ma	ax, um Number of	Rows Displayed: 50
Name (Gender - Age)	Unique Identifier	s DOB	Address	Medicaid Qual	ity Flags	Medicaid Managed Care Plan	Current PHI Access	
DOE JANE F - 53	Medicaid ID: AB123	45C 10/10/1970	12 MAIN ST #5 BROOKLYN, NY 12345			Healthfirst PHSP, Inc.	All Data - Emergency	Update Access 🗋



Recipient Search



Recipient Search Options

Individual Search

- Look up one person to view their Clinical Summary

Group Search

- Flexible search to identify cohort of individuals served in your agency/hospital who meet specified criteria, for example:
 - Social Determinants of Health (SDOH) domains or conditions
 - Alerts (e.g., suicide attempt, opioid overdose, etc.)
 - Those experiencing homelessness (any homelessness past year, shelter, unsheltered, outreach, etc.)
 - Crisis service utilization
 - High utilizers
- We have Advanced Views! Focus your search results using any of the following Advanced View categories:
 - Care Coordination, High Need/High Risk, Hospital Utilization, Outpatient Providers

My QI Report - Statewide Reports	Recipient Search Provider Search	Registrar - Usage- U	tilization Reports Adult Home	
Indiv	Reci	pient Search	Limit results to	50 V Search Reset
Recipient Identifiers		Se	earch in: 🔘 Full Database 🔵 N	IAIN STREET CLINIC
Medicaid ID AB00000A	SSN	First Name	Last Name	DOB MM/DD/YYYY
Characteristics as of 07/30/2023	e	Group Search		
Age Range Range Race Ethnicity	To Gender	Region County		✓
Special Populations		Social Determinants	of Health (SDOH)	Past 1 Year 🗸
Population High Need Population AOT Status Alerts Homelessness Alerts		 SDOH Conditions (report Problems related to uple Problems related to soc Problems related to phy Problems related to oth Problems related to me Problems related to life 	eed in billing) SDOH Condition	ons: Selected
Managed Care Plan & Medicaid				
Managed Care		Children	's Waiver Status	~

Social Determinants of Health (SDOH)

Past 1 Year 🛛 🗸

SDOH Conditions (reported in billing)	SDOH Conditions: Selected				
 Problems related to housing and economic circumstances Housing instability, housed, with risk of homelessness Inadequate housing Insufficient social insurance and welfare support Other problems related to housing and economic circumstances 					
—Material hardship —Transportation insecurity —Lack of adequate food —Extreme poverty	Select a domain category or expand the domain category to select a specific SDOH condition within that domain				
Children's Waiver Status	(up to 4 different SDOH filters can be selected at one time)				
HARP Status HARP HCBS Assessment Status					
HARP HCBS Assessment Besults					

Social Determinants of Health (SDOH)

Past 1 Year

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SDOH Conditions: Selected Problems related to housing and economic circumstar Transportation insecurity Extreme poverty Lack of adequate food



Characteristics as of 07/30/2023

Ang Damag		Alerts - Any below	Ъ	
Age Range		Suicide Attempt (Medicaid/NIMRS) past 1 year	~	
Deee		Suicide Attempt (Medicaid/ NIMRS)		
Race		Suicidal Ideations (Medicaid)	•	
-1.11		Self-Inflicted Harm/ Injury (Medicaid)		
Ethnicity		Self-Inflicted Poisoning (Medicaid)	\sim	
		Overdose - Opioid past 1 year		
		Overdose - Opioid (Intentional) past 1 year		
Special Populations		Overdose - Opioid (Unintentional) past 1 year		Social
		Overdose - Opioid past 3 years		
	Denulation	Overdose - Opioid (Intentional) past 3 years		SDOH
The 'Alerts'	Population	Overdose - Opioid (Unintentional) past 3 years		
dropdown		Diverdose Risk - Concurrent Opioid & Benzoulazepine		
contains filters	eed Population	Registry - Suicide Cale Fattiway - active at any agency		
for suicide	AOT Status	Registry - COVID-19 - active at any agency		
attempt suicide	AUT Status	OMH Unsuccessful Discharge		
attempt, suicide	A.L	own onsuccessful bischarge		
ideations, self-	Alerts	~	^	
harm/poisoning,				
opioid overdose,	ssness Alerts	▼		
etc.	1			

Managed Care Plan & Medicaid

Special Populations		Social Determinants of Health (SDOH)
Population		SDOH Conditions (reported in billing) SDOH
High Need Population	~	Problems related to upbringing
AOT Status	~	-Problems related to physical environmen
Alerts	~	+-Problems related to other psychosocial c
Homelessness Alerts	Shelter (DHS) or Outreach (DHS) or Behavioral H	 Problems related to medical facilities and Problems related to life management diff
	Homelessness: All Sources Any (DHS/Medicaid) Any past 1 year (DHS/Medicaid)	
Up to 4 homelessness options can be	Homelessness: NYC DHS Any (DHS)	Children's Waiver Status
selected in each search, creating an "or" logic	Shelter (DHS) Shelter past 1 year (DHS)	HARP Status
	Outreach (DHS) Outreach past 1 year (DHS)	HARP HCBS Assessment Results
Quality Flag as of 07/01/2023	 Behavioral Health Shelter past 1 year (DHS) Safe Haven or Stabilization Shelter past 1 year (DHS) 	Services: Specific Provider as of 07/01/2023
HARP Enrolled - Not Health Home Enroll HARP-Enrolled - No Assessment for HCE Eligible for Health Home Plus - Not Healt Eligible for Health Home Plus - No Health	Homelessness: Medicaid Any (Medicaid) Any past 1 year (Medicaid)	Provider MAIN STREET CLINIC Region
Eligible for Health Home Plus - No Health HH Enrolled, Eligible for Health Home Plu	Sheltered past 1 year (Medicaid)	Current Access

Managed Care Plan & Medicaid

Managed Care MC Product Line Medicaid Enrollment Status Medicaid Restrictions	* * *	HARP HCBS Assessment Status HARP HCBS Assessment Results
Quality Flag as of 07/01/2023	Definitions	Services: Specific Provider as of 07/01/2023
Preventable Hospitalization Summary POP : High User POP : Potential Clozapine Candidate 10+ ER - All Cause 10+ ER - MH 2+ ER - BH	Search for hosp quality flags, su ER - MH" or an	pital-related uch as "10+ y of the High
2+ ER - MH 2+ ER - Medical 2+ Inpatient - BH 2+ Inpatient - MH 2+ Inpatient - Medical 2+ Inpatient / 2+ ER - Summary	4 quality flags of selected in eac	can be Serv h search)
4+ Inpatient/ER - MH 4+ Inpatient/ER - BH 4+ Inpatient/ER - Med IClozanine Candidate with 4+ Inpatient/EB - MH		ial
Readmission (30d) from any Hosp: MH to MH Readmission (30d) from any Hosp: MH to All Caus Readmission (30d) from any Hosp: Medical to Mo	se dical	+-Outpatient - Medical Specialty

1

Crisis Service Settings

Sei	rvices by Any Provi	der as of 07/01/20:	23			Past 1 Year	~	
	Dravidar							
	Provider					In the 'Se	ervices by Anv	
	Region		~	Count	зу	Provider	' section, searc	h
						for crisis	service setting	
	Service Utilization			~	Number o		service setting	,3
						(up to 4 s	service settings	>
Se	ervice Setting:		Service Deta	il: Selected	d	can be se	elected in each	
	-Care Coordination				^	search).		
	-Crisis Service							
	CPEP Mobile Cris	sis				The resu	Its will display	
	CSIDD - Crisis Se	rvice - DD				clients li	nked to your	
	Crisis Interventio	on Service - Mobile Cr	isis Follow-up		$\langle \rangle$		receiving crisis	
	Crisis Interventio	on Service - Mobile Cr	isis Response			agency, i		
	Crisis Interventio	on Service - Telephoni	ic Follow-up			services		
	Crisis Interventio	on Service - Telephoni	ic Response			provider	' in NYS.	
	Crisis Residentia	I Services - Childrens	Crisis Residence	e (age 5-20))			
	Crisis Residentia	I Services - Intensive	Crisis Residence	(age 18-20	0)			
	Crisis Residentia	I Services - Intensive	Crisis Residence	(age 21+)				
	Crisis Residentia	I Services - Residenti	ial Crisis Support	(age 18-20))			
	Crisis Residentia	I Services - Residenti	ial Crisis Support	(age 21+)				
	Crisis Service - A	ny			-		NEW YORK STATE OF Office O	of

Contract of Mental Health

Service Utilization Filter

Services by Any Prov	ider as of 07/01/2023		Past 1 Year 🗸 🗸]
Provider				
Region		~	County	
Service Utilization		~	Number of Visits	
Service Setting:	Clinic MH - ALL ER - ALL		lected	
-Care Coordination	ER - BH Dx/Svc/CPEP ER - MH Dx/Svc/CPEP ER - Medical Dx/Svc		In the 'Services by Ar	
CPEP Mobile Cr CSIDD - Crisis S	is ER - SU Dx/Svc Inpatient - ALL	$\overline{}$	Provider' section, yo	u can
Crisis Interventi	c Inpatient - MH npatient - Medical		also search for high utilizers by using the	
-Crisis Interventi	Inpatient - SU on Service - Tel		"Service Utilization"	filter
Crisis Interventi	on Service - Tel al Services - Chi		which works in conju with "Number of Vis	inction its"
—Crisis Residenti —Crisis Residenti	al Services - Int al Services - Int		dropdown	
-Crisis Residenti	al Services - Re			
Crisis Service - /	Any +			 Office of Mental Health

Service Utilization Filter

Services by Any Provider as of 07/01/2023	Past 1 Year 🗸 🗸
Provider Region County	
Service Utilization ER - BH Dx/Svc/CPEP V Numb	per of Visits 1+ 🗸
Service Setting: -Care Coordination -Crisis Service -CPEP Mobile Crisis -CSIDD - Crisis Service - DD -Crisis Intervention Service - Mo -Crisis Intervention Service - Tel -Crisis Residential Services - Ch -Crisis Residential Services - Int -Crisis Residential Services - Int -Crisis Residential Services - Re -Crisis Service - Any	2+ 3+ 5+ 10+ 20+ sits" for 20+ ntient ear

My QI F	Report - Stat	ewide Reports	Recipient S	earch Pr	rovider Search	Registrar -	Usage -	Utilization Reports	Adult Home		
≮ Modify S	Search				125 Re	ecipients	Found] —	• View: Stand	Idard	✓ 🔂 📓 PDF Excel
	Alerts		Alerts - Any l	below							
AND	[Provider Specific] Provider	MAIN STREE	ET CLINIC			S	elect an			
AND	[Any Provider] Ser	vice Setting:	CPEP Mobile	e Crisis			Α	dvanced Vie	ew,		
							d	rill into a cli linical Sumr	ent's axim	num Numb	er of Rows Displayed: 50
I	Name 🔺	Medicaid ID ≑	DOB 🍦	Gender 🍦		Medicaid	Quality O	r export res	ults	l Care 🍦	Current PHI Access
QUNPUrRI	B QVJJRUm	WautMp6s MV2	MTEIM8yn0 T2r	TQ LQ ND2	2+ ER-BH, 2+ ER- Inpt/ER-BH, 4+ In	-MH, 2+ ER-Mec npt/ER-MH, Higl	dical, 2+ h MH Need, I	No Outpt Medical	cel		Quality Flag
QUZGTEbI	DSm SEFLSUq	Wa6qM9Av NrE	OCyrLpEvO DA	TQ LQ NDI	No Outpt Medica	ıl			HIP (EmblemHealt)	th)	Quality Flag
QUnGQVJ QQ	P Uq7FWUnB	VVMvNTarN rM	OSyoOCyoM DAq	R6 LQ MT6					MetroPlus Health F	Plan	No Access
QUnJ TVV	'GQVf0RUm	TbYqNDloO UQ	MTIIM9UIM TauNA	TQ LQ Mp6	10+ ER, 2+ ER-BH, 2+ ER-MH, 2+ ER-Medical, 2+ Inpt-BH, 4+ Inpt/ER-BH, 4+ Inpt/ER-Med, Adher-AD - Acute (DOH), Adher-AD - Recovery (DOH), HARP No Assessment for HCBS, HARP No Healt Home, High MH Need, No HbA1c-DM, Readmit 30d - BH to BH, Readmit 30d - Medical to All Cause				Healthfirst PHSP, Ir	nc.	Quality Flag
QUvERVJ1 UA	TTqu RqFSWQ	WVIuMTIvM qq	MTEIMpAIM TasN6	TQ LQ NTY	10+ ER, 2+ ER-BH Inpt/ER-BH, 4+ In Colorectal Screen mos, HHPlus No High MH Need, N Pharmacotherap	H, 2+ ER-MH, 2+ npt/ER-MH, 4+ I n Overdue (DOF HHPlus Service lo SUD Tx Enga vy (DOH), POP C	ER-Medical, npt/ER-Med, i), HHPlus No e > 3 mos, Hi ge (DOH), No loz Candidat	2+ Inpt-Medical, 4+ Cloz Candidate, o HHPlus Service > 12 HPlus Not HH Enrolled, o Utilization of e, POP High User	Healthfirst PHSP, Ir	nc.	PSYCKES Consent

My QI Report - Stat	tewide Reports	Recipient S	earch Pi	rovider Search	Registrar - Usa	ge - Utilization Report	ts Adult Home						
< Modify Search				125 Re	cipients Fou	ınd	O View: High Need,	/High Risk ✔					
Alerts		Alerts - Any	below										
AND [Provider Specific] Provider	MAIN STF		IC									
AND [Any Provider] Se	rvice Setting:	CPEP Mobil	e Crisis										
							Maximum Number	of Rows Displayed: 50					
Applicable data is displayed for recipients with quality flag or consent.													
Name	Medicaid ID 🔶	DOB 🔶	Gender 🔶	Medicaid Managed Care Plan	Current PHI Access	OMH Unsuccessful Dischar	ge 🜲 Transition Age Youth (TAY-BH) 🏶	OPWDD NYSTA R					
QUNPUrRB QVJJRUm	WautMp6s MV2	MTElM8ynO T2r	TQ LQ ND2	HIP (EmblemHealth)	Quality Flag								
QUZGTEbDSm SEFLSUq	Wa6qM9Av NrE	OCyrLpEvO DA	TQ LQ NDI	HIP (EmblemHealth)	Quality Flag	Yes							
QUnGQVJP Uq7FWUnB QQ	VVMvNTarN rM	OSyoOCyoM DAq	R6 LQ MT6	MetroPlus Health Plan	No Access								
QUnJ TVVGQVf0RUm	TbYqNDloO UQ	MTIIM9UIM TauNA	TQ LQ Mp6	Healthfirst PHSP, Inc.	Quality Flag								
QUvERVJTTqu RqFSWQ UA	WVIuMTIvM qq	MTEIMpAIM	TQ LQ NTY	Healthfirst PHSP, Inc.	PSYCKES Consent		Yes						
QVJBVUfP REbWSUvF	Scro	ll to tight	R6 LQ M9I	Healthfirst PHSP, Inc.	No Access								
QVJSSUvHVEzO REVMTqvURQ S6	to vi	ew	TQ LQ Mpi	Healthfirst PHSP, Inc.	PSYCKES Consent			Yes					
QVJUSUnFUm WUzKQUbSTm QQ	🖁 addi	tional	TQ LQ MpA	Healthfirst PHSP, Inc.	Health Home Consent								
QVNDRUvDSUy REVOTabT	w colu	mns	TQ LQ NTE	Healthfirst PHSP, Inc.	PSYCKES Consent	Yes							
QaVSTVVERVe REbHTaE TO	WaUvMpt MUQ	NSytLpEvN 96	R6 LQ NTU	Healthfirst PHSP. Inc.	Quality Flag			-					

My QI Report - Sta	tewide Reports	Recipient Search Prov	ider Search	Reg	istrar - Usage -	Utilization Rep	oorts Adult Hon	ne					
< Modify Search	✓ Modify Search 125 Recipients Found ♥View: High Need/High Risk ♥ Excel												
Alerts		Alerts - Any below											
AND [Provider Specifi	c] Provider	MAIN STREET CLINIC											
AND [Any Provider] Se	ervice Setting:	CPEP Mobile Crisis											
								Maximum Number	of Rows Displayed	d: 50			
Applicable data is displayed for recipients with quality flag or consent.													
				AC	т		Suicid	e Risk		7			
Name	START-Eligible 🍦	Health Home Plus-Eligible 🍦	AOT Status	4	AOT Expiration Date	Suicide Attempt (Medicaid/NIMRS) Past 1 year	Suicidal Ideations (Medicaid)	Self - Inflicted Harm / 🜲 Injury(Medicaid)	Self-Inflicted Poisoning (Medicaid)	÷			
QUNPUrRB QVJJRUm		Yes					Yes	Yes	Yes				
QUZGTEbDSm SEFLSUq			AOT-Active Court Order		5/17/2024		Yes						
QUnGQVJP Uq7FWUnB QQ													
QUnJ TVVGQVf0RUm						Yes	Yes		Yes				
QUvERVJTTqu RqFSWQ UA		Yes	AOT-Active Court Order		11/9/2023		Yes	Yes					
QVJBVUfP REbWSUvF				S +	croll to								
QVJSSUvHVEzO REVMTqvURQ S6		Yes		t	o view	s	Yes						
QVJUSUnFUm WUzKQUbSTm QQ		Yes		а	dditional	es	Yes						
QVNDRUvDSUy REVOTabT		Yes	AOT-Active Court Order	C	olumns		Yes	Yes					
QaVSTVVERVe REbHTaE TQ							Yes			+			

My QI	Report -	Statewide Reports	Recipient Search	Provider Search	Registrar -	Usage -	Utilization Reports	Adult Home		
< Modify	Search			125 R	ecipients	Found	•	O View:	High Need/High Risk 🗸	X Excel
	Alerts		Alerts - Any below							
AND	[Provider S	oecific] Provider	MAIN STREET C	LINIC						
AND	[Any Provid	er] Service Setting:	CPEP Mobile Crisis							
								Maximun	n Number of Rows Displa	yed: 50

Applicable data is displayed for recipients with quality flag or consent.

			Suicid	e Risk		Overdo	se Risk	PSYCKES Registeries		
Name	ration e	Suicide Attempt (Medicaid/NIMRS) Past 1 year	Suicidal Ideations (Medicaid)	Self - Inflicted Harm / 👙 Injury(Medicaid)	Self-Inflicted Poisoning (Medicaid)	Overdose - Opioid past 1 🍦 year	Overdose Risk - Concurrent Opioid & Benzodiazepine past 1 year	High Risk List Registry	Suicide Care Pathway	
QUNPUrRB QVJJRUm			Yes	Yes	Yes					
QUZGTEbDSm SEFLSUq			Yes				Yes			
QUnGQVJP Uq7FWUnB QQ										
QUnJ TVVGQVf0RUm		Yes	Yes		Yes					
QUvERVJTTqu RqFSWQ UA			Yes	Yes		Yes				
QVJBVUfP REbWSUvF										
QVJSSUvHVEzO REVMTqvURQ S6		Yes	Yes			Yes				
QVJUSUnFUm WUzKQUbSTm QQ		Yes	Yes							
QVNDRUvDSUy REVOTabT			Yes	Yes						
QaVSTVVERVe REbHTaE TQ			Yes				Yes			


My QI Report

My QI Report

- Tool for managing quality improvement efforts
- Updated on a monthly basis
- Eligible Population (denominator): clients served plus other parameters depending on quality indicator specifications
- Number with QI Flag (numerator): clients who meet criteria for the flag
- Compare prevalence rates for provider agency, region, state
- Filter report by: Program Type (e.g., Crisis Services), MC Plan, Age
- Drill down into list of recipients who meet criteria for flag
- Reports can be exported to Excel and PDF



Understanding My QI Report

- Attributing clients to agency QI reports:
 - Billing: Clients linked to provider agency if billed by agency in the past 9 months
 - This rule is used to automatically link clients to providers so that current clients are included in the report each month
- Period of observation for the quality indicator:
 - Assessed by a measure, varies for each measure
 - For example, the period of observation for the High Utilization quality indicator is 13 months
- QI Reports trending over time:
 - QI Trends Past Year show the prevalence rates of quality flags by provider over time



My QI Report - Statewide Reports	Recipient Search	Provider Search	Registrar 👻 Us	age - (Utilization Report	s Adult Home
		MAIN S Quality Indicat	TREET C	LINIC 01/2023	9	View: Standard PDF Excel
REGION: ALL COUNTY: ALL SITE: ALL PROG	RAM TYPE: ALL AGE: A	ALL MC PRODUCT LINE	E: ALL MANAGED CA	RE: ALL		Filters Reset
Indicator Set	of 07/01/2023)	Rup monthly on all avail	ehle dete er of run de	ta		
Indicator Set	Population	Eligible Population	# with QI Flag	* •	Regional %	Statewide & occ
BH QARR - Improvement Measure	All	419	162	38.7	36.6	Select from a
General Medical Health	All	1,488	390	26.2	12.1	variety of filters to apply to My OI
Health Home Care Management - Adult	Adult 18+	403	269	66.7	85.9	Report using the
High Utilization - Inpt/ER	All	1,488	524	35.2	21.5	"Filter" button
Polypharmacy	All	434	77	17.7	12	11.3
Preventable Hospitalization	Adult	1,160	41	3.5	0.9	0.8
Readmission Post-Discharge from any Hos	pital All	546	135	24.7	12.1	11.2 12.10 11.20
Readmission Post-Discharge from this Hospital	All	0	o	o	11.8	11.2
Treatment Engagement	Adult 18-64	312	83	26.6	35.8	35.9
Performance Tracking Indicators (a	s of 12/01/2022)	Run with intentional la	g of 6+ months to allo	w for comp	olete data	
Indicator Set	Population \$	Eligible Population	# with QI Flag (¢	Regional %	Statewide % 25% 50% 75% 100%
MH Performance Tracking Measure	All	422	236 5	5.9	51.3	52.6 51.90 52.6 51.30 52.60
SUD Performance Tracking Measure	Adol & Adult (13+)	224	204 9	01.1	82.6	78.9 (3110) 82.60 78.9
Vital Signs Dashboard - Adult	Adult	627	326	52	46	47.2 47.20

115

31.2

Vital Signs Dashboard - Child

Child & Adol

369

31.20 29.30 32.10

32.1

29.3

		Quality Indicato	r Overview As Of 07/	01/2023			U VIEW: Otandard		PDF Excel
REGION: ALL COUNTY: ALL SITE: ALL PROGRAM	QI Filters					×		Filters	Reset
Indicator Set	Site	ALL			~	·			
Quality Improvement Indicators (as of 0	Program Type	ALL			~	·]			
Indicator Set	Managed Care	ALL ACT - MH	Specialty II						75% 100%
BH QARR - Improvement Measure	MC Product Line	CFTSS - C Care Mana Care Mana	risis Intervention agement - Enrolled agement - Enrolled/	(Source: I (Outreach	DOH MAPP) 1 (Source: DOH	MAPP)			
General Medical Health	Age	Clinic - MH Clinic - Me	I Specialty dical Specialty			,			
Health Home Care Management - Adult	Region	Clinic - Un Clinic MH Crisis Inte	 ALL rvention Service - N 	Mobile Cri	sis Follow-up				66.70 85.90 86.00
High Utilization - Inpt/ER	County	Crisis Inte Crisis Inte Crisis Serv	rvention Service - N rvention Service - T vice - Any	Mobile Cri Telephonio	isis Response c Follow-up				
Polypharmacy		ER - BH Dy ER - Medic Health Ho	«/Svc/CPEP cal Dx/Svc me - Enrolled (Sour	rce: DOH I	MAPP)				
Preventable Hospitalization	Adult	Health Ho Health Ho Health Ho	me - Enrolled/Outre me and/or Care Ma me and/or Care Ma	each (Sou anagemer anagemer	irce: DOH MAP nt - Enrolled (So nt - Outreach/E	P) ource: D nrolled	OH MAPP and Medicaid) (Source: DOH MAPP and Med	licaid)	
Readmission Post-Discharge from any Hospital	All	546	135	24.7	۱	2.1	11.2		
Readmission Post-Discharge from this Hospital	All	0	0	0	۱	1.8	11.2		
Treatment Engagement	Adult 18-64	312	83	26.6	3	5.8	35.9	0 35.80 35.90	

PROGRAM TYPE: CRISIS SERVICE - ANY



Indicator Set

Quality Improvement Indicators (as of 07/01/2023) Run monthly on all available data as of run date

Indicator Set	Population \$	Eligible Population	# with QI Flag	% ¢	Regional %	Statewide %	25% 50% 75% 100%
BH QARR - Improvement Measure	All	59	24	40.7	42.9	43.7	40.70 42.90 43.70
General Medical Health	All	92	38	41.3	35.8	37.1	41.30 35.80 37.10
Health Home Care Management - Adult	Adult 18+	42	36	85.7	88.2	83.4	(85170) (88120) (83.40)
High Utilization - Inpt/ER	All	92	49	53.3	53.6	47.9	53.30 53.50 47.90
Polypharmacy	All	30	4	13.3	21.9	22.8	13.30 21.90 22.80
Preventable Hospitalization	Adult	92	1	1.1	1.3	0.9	1.10 1.30 0.90
Readmission Post-Discharge from any Hospital	All	56	13	23.2	23.7	22.9	23.20 23.70 22.90
Readmission Post-Discharge from this Hospital	All	0	0	0	16	17.9	0.00 16.00 17.90
Treatment Engagement	Adult 18-64	41	23	56.1	51	50.5	56.10 51.00 50.50

Performance Tracking Indicators (as of 12/01/2022) Run with intentional lag of 6+ months to allow for complete data

Indicator Set	Population \$	Eligible Population	# with QI Flag 🖗	* •	Regional %	Statewide %	25% 50% 75% 100%
MH Performance Tracking Measure	All	58	41	70.7	53.2	51.6	70.70 53.20 51.60
SUD Performance Tracking Measure	Adol & Adult (13+)	29	29	100	92.1	87.7	100109 92:10 87:70
Vital Signs Dashboard - Adult	Adult	74	46	62.2	59.9	56.8	62.20 59.90 56.80
Vital Signs Dashboard - Child	Child & Adol	1	1	100	43.3	44.9	43.30 44.90

My QI Report - Statewide Reports R	ecipient Search	Provider Search	Registrar - Usa	age -	Utilization Reports	Adult Home	
		Quality Indicate	TREET CL or Overview As Of 07/0	INIC 01/2023	0	0 View	Standard V DF Excel
PROGRAM TYPE: CRISIS SERVICE - ANY							Filters Reset
Indicator Set: High Utilization - Inpt/ER							
Indicator Set Indicator							
Indicator	Population \$	Eligible Population	# with QI Flag	%	Regional %	Statewide %	25% 50% 75% 100%
10+ ER - All Cause	All	92	5	5.4	9.1	7	5.40 9.10 7.00
10+ ER - MH	All	92	2	2.2	3.1	1.8	2.20 3.10 1.80
2+ ER - BH	All	92	21	22.8	30.4	25	22.80 30.40 25.00
2+ ER - Medical	All	92	24	26.1	30.3	29.1	26.10 30.30 29.10
2+ ER - MH	All	92	17	18.5	26.3	21.6	18.50 26.30 21.60
2+ Inpatient - BH	All	92	26	28.3	18	14.7	28.30 18.00 14.70
2+ Inpatient - Medical	All	92	5	5.4	5.1	3.7	5.40 5.10 3.70
2+ Inpatient - MH	All	92	23	25	14.5	11.5	25.00 14.50 11.50
4+ Inpatient/ER - MH	All	92	18	19.6	17	13.1	19.60 17.00 13.10
Clozapine Candidate with 4+ Inpatient/ER - MH	H 0-64	11	10	90.9	91.5	92.1	9090 91150 92410
POP : High User	18+	79	13	16.5	14.5	11.4	16.50 14.50 11.40
POP : Potential Clozapine Candidate	18+	9	8	88.9	93.4	94.4	83900 9330 9440
2+ Inpatient / 2+ ER - Summary	All	92	49	53.3	53.6	47.9	53.30 53.60 47.90

My QI Report	- Statewide	Reports	Recipient Sea	arch Prov	ider Searc	h Registrar -	Usage -	Utiliza	ntion Reports	Adult I	Home		
					MAII Quality In	N STREET C dicator Overview As (LINIC 0	3			O View: Standard	✓ DF	IN Excel
PROGRAM TYPE: C	RISIS SERVICE - /	ANY										Filters	Reset
Indicator Set: H	igh Utilization	- Inpt/E	R Indicator: 2+	Inpatient -	BH								
Indicator Set	Indicator	Site	HH/CM Site(s)) MCO	Attendi	ng Recipients	s New	QI Flag	Dropped QI F	Flag			
Red	cipient	¢	Medicaid ID 🍦	DOE	\$	Race & Ethni	icity 🔶		Quality Flags	\$	Most Recent BH Outpatient Attending	Clinical Sumn Last Viewe	nary d
RazSVFVORQ QV	JFUrRFTEE	U	E2oOTEvMra	MD2IMD6IN	1TarMm	Black		2+ ER-B Inpt-BH, Inpt/ER Screen HARP N HCBS, F	H, 2+ ER-MH, 2+ , 2+ Inpt-MH, 4+ -MH, Colorectal Overdue (DOH), lo Assessment fo ligh MH Need		Drill into a client'		Î
UqzSSUFOTm Ua	FNTqu	v	FEoM9UpMFe	MD6IMTalM	ITas0Q	Unknown		2+ ER-Medical, 2+ Inpt-BF 2+ Inpt-MH, 2AP, 4PP(A), HARP No Assessment for HCBS, High MH Need		8⊢ 0 ⁰ 0	or export to PD or Excel		
					UT 114			2+ Inpt- Adher-M Assessi HARP N HHPlus > 12 mo HHPlus	BH, 2+ Inpt-MH, IS, HARP No ment for HCBS, Io Health Home, No HHPlus Serv os, HHPlus No Service > 3 mos	ice	First Provious	1 Novt	▼ Last



Clinical Summary



What is a PSYCKES Clinical Summary?

- Summarizes up to 5 years of treatment history for a client
- Creates an integrated view from all databases available through PSYCKES
 - E.g., Homelessness information, Social Determinants of Health (SDOH), High Mental Health Need reason (if applicable), active quality flags, care coordination, IVOS (Integrated View of Services), AOT status, hospitalizations and/or crisis services, suicide risk (NIMRS), etc.
- Summarizes treatment episodes to support rapid review
- Episodes of care linked to detailed dates of service if needed (including diagnoses and procedures)
- Clinical Summary organized by sections like an EMR



Clinical Summary Viewing Options

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



Recipient Search	SMITH Clinical Summary	SMITH, JANE Clinical Summary as of 7/30/2023					
About included data sources	Brief Overview 1 Year S	ummary 5 Year Summary	This report does not contain clinical data with s protection - consent required.	special			
DOB: 2/1/1970 (53 Yrs) Address: 123 MAIN STREET, NEW YORK, NY 12345 Phone (Source: NYC DHS): (333) 432-6223	Medicaid ID: AB12345C Managed Care Plan: Amida MC Plan Assigned PCP: N/.	Medicare: No Care A	HARP Status: Not HARP Eligible (Current Medic excluding H1-H9) HARP HCBS Assessment Status: N/A Medicaid Eligibility Expires on: 11/30/2023	aid Enrollees			
Current Care Coordination							
Prescription Prior This client has been taking a prescription medication in the past 3 months that may require NYRx prior authorization: Gabapentin Authorization To obtain a prior authorization call (877) 309- 9493 or fax the appropriate Prior Authorization Form to (800) 268-2990. Standard PA Form: https://newyork.fhsc.com/downloads/providers/NYRx_PDP_PA_Fax_Standardized.pdf Other Specialized PA Forms: https://newyork.fhsc.com/providers/pa_forms.asp							
Health Home (Enrolled) COORDINATED Main Contact Member Refer Care Managen	COORDINATED BEHAVIORAL CARE INC (Begin Date: 01-JAN-22) • Status : Active Main Contact Referral: CBCHealthHome@cbcare.org Member Referral Number: 866-899-0152 Care Management (Enrolled) : ASSOC/REHAB CASE MGNT HOU MH						
Housing/Residential Program SRO Communi Program Conta	Housing/Residential Program SRO Community Residence, Convent Avenue Residence. ACMH, Inc. (Admission Date: 27-SEP-21, Discharge Date: 07-OCT-22 due to: Moved out of area) Program Contact Information : Chekesha Brown: (646)-506-3100 ext. 154						
NYC Dept of Homeless TRAVELER'S S Services Shelter: Most Recent P Shelter Director	AFE HAVEN (Single Adult) • MANHATTAN lacement Date: 07-APR-23 . r Contact: Bernadette Reed: 2123821789, BREE	D@URBANPATHWAYS.ORG					
Health Home Plus Eligibility This client is e	igible for Health Home Plus due to: 3+ Inpt MH	< 12 months, 4+ ER MH < 12 mor	nths				
High Mental Health Need due 1+ ER or Inpati to:	ent past 12 months with suicide attempt, suicid	e ideation, or self-harm diagnosi	s ; 1+ Inpt MH in past 12 months				
OPWDD NYSTART This client is p	otentially eligible for OPWDD NYSTART crisis se	rvices. Find a START team at: htt	tps://opwdd.ny.gov/crisis-services				
Alerts • all available	Most Recent						
10 Homelessness - NYC DHS Shelter	Current	FRANKLIN WOMEN'S SHELTER	R (Single Adult, Assessment)				
8 Suicidal Ideation (4 Inpatient, 4 ER, 3	Other) 11/4/2022	MAIMONIDES MEDICAL CENTE	ER- MMC EMER (ER - MH - Physician Group)				
3 Homelessness - reported in billing (2	Sheltered, 1 Unspecified) 11/1/2022	NEW YORK PRESBYTERIAN HO	OSPITAL (Homelessness Sheltered)				
Social Determinants of Health (SDOH) Pa	st Year - reported in billing						
Problems related to employment and unempl	oyment Unemployment, Unspecified						
Problems related to housing and economic ci	nd economic circumstances Sheltered Homelessness • In quate Housing						
Problems related to social environment	Problem Related To Social E	pment, Unspecified					

Active Quality Flags • as of monthly QI report 7/1/2023	Diagnoses Past Year				
High Mental Health Need 1+ ER or Inpatient past 12 months with suicide attempt, suicide ideation, or self-harm	Behavioral 5 Most Recent: Gender Dysphoria · Schizoaffective Disorder · Other Health (11) Mental Disorders · Schizophrenia · PTSD				
diagnosis 1+ Inpt MH in past 12 months	5 Most Frequent (# of services): Schizoaffective Disorder (55) • Gender				
High Utilization - Inpt/ER	Dysphoria (28) • Unspecified/Other Bipolar (4) • Adjustment Disorder (6) •				
10+ ER - All Cause • 10+ ER - MH • 2+ ER - BH • 2+ ER - MH • 2+ ER - Medical • 2+ Inpatient - BH • 2+ Inpatient - MH • 4+ Inpatient/EB - BH • 4+ Inpatient/EB - MH • 4+ Inpatient/EB -	Schizophrenia (o)				
Med • Clozapine Candidate with 4+ Inpatient/ER • MH	Medical (26) 5 Most Recent: Abdominal and pelvic pain • Other symptoms and signs				
MH Performance Tracking Measure (as of 12/01/2022)	examination without complaint, suspected or reported diagnosis				
Low Mood Stabilizer Medication Adherence - Bipolar	Symptoms and signs involving emotional state • Symptoms and signs				
Readmission Post-Discharge from any Hospital	involving appearance and behavior				
BH to BH • MH to MH	5 Most Frequent (# of services): Other symptoms and signs involving general sensations and perceptions (12) + Symptoms and signs involving				
Vital Signs Dashboard - Adult (as of 12/01/2022)	emotional state (11) · Contact with and (suspected) exposure to				
Hosp: MH to MH (adult)	communicable diseases (8) • Nausea and vomiting (1) • Encounter for				
	. immunization (2)				
Medications Past Year	Last Pick Up				
Gabapentin · Mood Stabilizer	7/18/2023 Dose: 100 MG, 3/day • Quantity: 90				
Aripiprazole (Abilify Maintena) • Antipsychotic	7/15/2023 Dose: 400 MG, .03/day • Quantity: 1				
Divalproex Sodium (Divalproex Sodium Er) • Mood Stabilizer	3/29/2023 Dose: 500 MG, 2/day • Quantity: 60				
Aripiprazole · Antipsychotic	2/21/2023 Dose: 10 MG, 1/day • Quantity: 15				
Docusate Sodium · Surfactant Laxatives	2/21/2023 Dose: 100 MG, 1/day • Quantity: 30				
Sertraline Hcl · Antidepressant	1/23/2023 Dose: 50 MG, 1/day • Quantity: 30				
Metronidazole · Vaginal Anti-infectives	12/19/2022 Dose: 0.75 %, 2.33/day • Quantity: 70				
Prazosin Hcl · Antiadrenergic Antihypertensives	11/7/2022 Dose: 2 MG, 1/day • Quantity: 14				
Nitrofurantoin Monohyd Macro • Urinary Anti-infectives	9/16/2022 Dose: 100 MG, 2/day • Quantity: 8				
Diazepam · Anxiolytic/Hypnotic	8/10/2022 Dose: 10 MG, 1/day • Quantity: 2				
Cephalexin · Cephalosporins - 1st Generation	8/10/2022 Dose: 500 MG, 3/day • Quantity: 15				
Oxycodone Hcl · Opioid Agonists	8/10/2022 Dose: 5 MG, 4/day • Quantity: 20				
Outpatient Providers Past Year Last Service Date & Type	All Hospital and Crisis Utilization • 5 Years				
COMMUNITY HEALTH PROJECT INC 7/13/2023 Clinic - Medical Specialty	ER Visits # Providers Last ER Visit				
MICHAEL CALLEN-AUDRE LRDE CHC 6/1/2023 Clinic - Medical Specialty	26 Medical 8 3/23/2023 at ST LUKES ROOSEVELT HSP CTR				
MEDS OOS PHYSICIAN & OTHE 3/16/2023 Prescriber - OOS	41 Mental Health 15 1/31/2023 at ST BARNABAS HOSPITAL				
SOUTH BEACH PC 3/1/2023 Clinic - MH State Psych Center (Source: State PC)	Inpatient Admissions # Providers Last Inpatient Admission				
COORDINATED BEHAVIORAL CARE 2/1/2023 Clinic - Medical Specialty	12 Mental Health 8 2/14/2023 at BRONXCARE HOSPITAL CENTER				
INC	2 Medical 3 2/3/2023 at BRONXCARE HOSPITAL CENTER				
ST BARNABAS HOSPITAL 1/31/2023 Clinic - Medical Specialty	Crisis Services # Providers Last Crisis Service				
MOUNT SINAI HOSPITAL 1/6/2023 Clinic - Medical Specialty	33 Crisis Residential 2 12/15/2022 at COMMUNITY ACCESS INC				
ICAHN SCHOOL OF MEDICINE AT 1/6/2023 Multi-Type Group					

Current Care Coordination & Alerts

- Current Care Coordination section displays status/contact information, if applicable to the client, including:
 - Homelessness
 - Health Home/Care Management Agency Outreach/Enrollment
 - Health Home Plus Eligibility
 - High Mental Health Need Reasons
 - Medicaid Eligibility Alert: New York State of Health (NYSoH) alert for Medicaid recertification
- Alerts (All available NIMRS & Medicaid data)
 - Suicidal ideations
 - Suicide attempt
 - Self-inflicted harm
 - Opioid overdose

- Homelessness
- OMH unsuccessful discharge



<	SMI Clinical Sur	TH, JANE	PDF Excel CCD
≡ Sections	Brief Overview 1 Year	Summary 5 Year Summary	This report does not contain clinical data with special protection - consent required.
General			
Name SMITH, JOHN	Medicaid ID AB12345C	Medicare No	HARP Status Not HARP Eligible (Current Medicaid Enrollees excluding H1-H9)
DOB 2/1/1970 (53 Yrs)	Medicaid Aid Category SSI	Managed Care Plan Amida Care	HARP HCBS Assessment Status N/A
Address 123 MAIN STREET, NEW YORK, NY 12345 Phone (Source: NYC DHS) (333) 432-6223	Medicaid Eligibility Expires on 11/30/2023	MC Plan Assigned PCP N/A	

Current Care Coordination

Prescription Prior Authorization: This client has been taking a prescription medication in the past 3 months that may require NYRx prior authorization: Gabapentin To obtain a prior authorization call (877) 309- 9493 or fax the appropriate Prior Authorization Form to (800) 268-2990. Standard PA Form: https://newyork.fhsc.com/downloads/providers/NYRx_PDP_PA_Fax_Standardized.pdf Other Specialized PA Forms: https://newyork.fhsc.com/providers/pa_forms.asp

Health Home (Enrolled) - Status : Active, COORDINATED BEHAVIORAL CARE INC (Begin Date: 01-JAN-22), Main Contact: Member Referral Number. 866-899-0152, CBCHealthHome@cbcare.org

Care Management (Enrolled) : ASSOC/REHAB CASE MGNT HOU MH

This information is updated weekly from DOH MAPP.

NYC Dept of Homeless Services Shelter. TRAVELER'S SAFE HAVEN (Single Adult)., MANHATTAN Most Recent Placement Date: 07-APR-23 . Shelter Director Contact: Bernadette Reed, 2123821789, BREED@URBANPATHWAYS.ORG.

This information is updated weekly from NYC DHS.

Housing/Residential Program: SRO Community Residence, Convent Avenue Residence, ACMH, Inc. (Admission Date: 27-SEP-21, Discharge Date: 07-OCT-22 due to: Moved out of area), Program Contact Information: Chekesha Brown, (646)-506-3100 ext. 154

This information is updated weekly from CAIRS.

Care Coordination Alert - This client is eligible for Health Home Plus due to: 3+ Inpt MH < 12 months; 4+ ER MH < 12 months

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

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

1. To find out about START eligibility and the model Click Here

2. To see if you have a START team in your area and access contact information Click Here

Alerts Incidents from NIMRS,	& Incid	dents		The "Alerts" se information on homelessness, screenings, and overdose	ction cor suicidal positive dopioid	ntains ity,	Table	Gra	ph
Alert Type	Number of Events/Meds/Positive Screens	First Date	Most Recent Date	Provider Name(s)	Program Name	Severity/Diagno:	sis/Meds/Results		
Homelessness - NYC DHS Shelter	15	5/4/2022	6/1/2023	PROSPECT PLACE	Single Adult				G
Homelessness - reported in billing	3	4/13/2023	4/15/2023	NEW YORK UNIVERSITY	Inpatient - Medical - Physician Group				G
Intentional Overdose - Opioid	4	11/26/2022	11/29/2022	LINCOLN MEDICAL/MENTAL HLTH	ER - SU	Poisoning by i intentional sel encounter	nethadone, f-harm, initial		Ō
Treatment for Suicidal Ideation	27	4/24/2009	8/12/2019	BRONXCARE HOSPITAL CENTER	Inpatient - Medical	Suicidal ideati	ons		Ū
Overdose - Opioid	2	8/19/2016	6/12/2017	ELMHURST HOSPITAL CENTER	Inpatient - SU	Poisoning by o accidental (un encounter	other opioids, intentional), initial		G



Social Determinants of Health (SDOH)

Social Determinants of Health (S	SDOH) reported in billing				
Personal risk factors, not elsewhere classified	Personal History Of Adult Physica	l And Sexual Abuse			
Problems related to education and literacy	Illiteracy And Low-Level Literacy	Click on a SDOH to drill-			
Problems related to employment and unemployment	Unemployment, Unspecified	in and view more details			
Problems related to housing and economic circumstances	Sheltered Homelessness • Inad	equate Housing • Homelessness • Other Problems Rel	lated To Housing And I	Economic Circum	istances
Services provided for the Inadequate Housing	selected Social Dete	minants of Health:		요 교 DF Excel	×

Date of Service	Service Type	Service Subtype	Provider Name	Primary, secondary, and quality flag-
11/13/2022	Inpatient-ER	ER - MH	NEW YORK PRESBYTERIAN HOSPITAL	Contact with and (suspected) exposure to COVID-19, Inadequate housing, Personal history of nonsuicidal self-harm, Personal history of physical and sexual abuse in childhood, Personal history of suicidal behavior, Post-traumatic stress disorder, unspecified.

Integrated View of Services Over Time



Hospital/ER/Crisis Services Section

Hospital/ER/Crisis Se	rvices 🕞 Details					Table Gra	aph
Service Type	Provider	Admission	Discharge Date/Last Date Billed	Length of Stay	Most Recent Primary Diagnosis	Procedure(s) (Per Visit)	
CPEP Mobile Crisis	BRONXCARE HOSPITAL CENTER	6/27/2023	6/27/2023	1	Schizophrenia, Unspecified	- Crisis Intervention Mental H	G
Inpatient - MH	BRONXCARE HOSPITAL CENTER	2/14/2023	2/22/2023	8	Schizoaffective Disorder, Unspecified	- Medication Management	G
Inpatient - Medical	BRONXCARE HOSPITAL CENTER	2/3/2023	2/14/2023	11	Covid-19	- Isolation	G
CSIDD - Crisis Service - DD	SUS SERVICES FOR THE UNDERSERVED	1/31/2023	1/31/2023	1	Autistic Disorder		G
ER - MH	MONTEFIORE MEDICAL CENTER	12/30/2022	12/30/2022	1	Adjustment Disorder, Unspecified	- Emergency Dept Visit Low Mdm	G
ER - MH - Physician Group	MONTEFIORE MEDICAL CENTER	12/30/2022	12/30/2022	1	Adjustment Disorder, Unspecified	- Sarscov2 & Inf A&B Amp Prb	G
Crisis Residential Services - Residential Crisis Support	COMMUNITY ACCESS INC	12/15/2022	12/15/2022	1	Schizoaffective Disorder, Unspecified	- Crisis Interven Waiver/Diem	G
Crisis Residential Services - Residential Crisis Support	COMMUNITY ACCESS INC	11/20/2022	11/20/2022	1	Schizoaffective Disorder, Unspecified	- Crisis Interven Waiver/Diem	G
ER - Medical - Physician Group	FPA HOSPITAL BASED	11/19/2022	11/19/2022	1	Viral Infection, Unspecified	- Emergency Dept Visit Mod Mdm	G
ER - Medical	ST LUKES ROOSEVELT HSP CTR	11/19/2022	11/19/2022	1	Viral Infection, Unspecified	- Emergency Dept Visit Low Mdm - Hopd Covid-19 Spec Collect - Sarscov & Inf Vir A&B Ag Ia	G
ER - MH - CPEP	ST LUKES ROOSEVELT HSP CTR	11/17/2022	11/17/2022	1	Adjustment Disorder With Mixed Disturbance Of Emotions And Conduct	- Psych Diagnostic Evaluation	G

Live Demo of the PSYCKES Mobile App!



How to Enable PHI Access

- Look up client in the "Search" page
- Confirm you found the correct match
- Mobile app will prompt you to "Enable PHI Access"
- Follow steps to attest to why your provider agency has the right to access PHI and that the client's identity has been confirmed



Search for client in the full PSYCKES database

- Enter Medicaid ID, SSN, or Last Name + First Name + DOB
- Confirm client found matches who you were looking for
 - If results do not match intended client, return to Search Results
 - If data matches intended client, tap "Enable PHI Access"





PHI Access Options

- New! E-sign PSYCKES consent
- Client signed (physical) consent
 - PSYCKES
 - BHCC
 - DOH Health Home
- Provider attests to other reason for access
 - Verbal PSYCKES Consent
 - Clinical emergency
 - Attest client is being served at / transferred to agency

9:25	.11 5G 7 4
	Cancel
PHI Access for Joh	ın Doe
e-sign PSYCKES con	isent
Review consent fo signature on the so	rm and get client's >
The client signed co	nsent
Client signed a PSYC	KES Consent
Client signed a BHCO Sharing Consent	C Patient Information
Client signed a DOH	Health Home Patient Consent
Provider attests to o for access	ther reason
Client gave Verbal PS	SYCKES Consent
This is a clinical eme	rgency
Cancel	Next



Work flow for e-signatures

- Read overview for next steps and tap "Next"
- Attest to client identity via one of the following:
 - Select "Provider attests to client identity," if you or someone at your agency has experience with the client and tap 'Next'
 - Select "Client presented 1 photo ID" or
 - Select "Client presented 2 forms of non photo ID"





Review PSYCKES Consent Form

 Once you've confirmed identity, you'll review the PSYCKES consent form with your client within the mobile app, tap "Next"





Client gives/denies PSYCKES consent

- Client is then prompted to give or deny consent
 - If the client gives their consent, they will be prompted to select who will provide the e-signature
 - If the client denies consent, client will be prompted to go back to access options

9:26I 5G 📧	9:26	I 5G 🌠	2:13	.11 5G 984
e-sign for John Doe Cancel	< e-sign for John Doe	Cancel	(X	
Your Choice	Who is signing?			
I give consent for MAIN STREETMEDICAL	 John Doe 		Consent wa Pass the device back	s denied a to your provider.
 health information that is in PSYCKES in connection with providing me any health care services. 	O Legal Representative			
I don't give consent for MAIN STREET MEDICAL CENTER to access my electronic health information that is in PSYCKES; however, I understand that my provider may be able to obtain my information even without my consent for certain limited purposes if specifically authorized by state and federal laws and regulations.				
Previous Next	Previous	Next	Back to Acces	ss Options

Providing e-signature

- Confirm to save client's consent form in the Plans & Documents section of the clinical summary
- You'll then be prompted to view the client's clinical summary

12:33I 5G 🕤	12:33	. 1 5G 5 3	12:33	.ıll 5G 📧
e-sign for John Doe Cancel	6		6	2
Signature of Patient	6			
	Confirm to save th Conse	e signed PSYCKES nt Form	You're Work with your p options for rece	e all set provider to discuss eiving your copy.
	Work with you options for re	Ir provider to discuss ceiving your copy.		
3cha				
× Signature Clear				
	Cancel	Confirm		
Previous Next			View Clinic	al Summary

iPad Exclusive Features



iPad Exclusive Features

- The iPad version of the mobile app was redesigned based off focus group findings
- The iPad utilizes the additional space allowed by displaying data in a table format for maximum comprehension
- Some other exclusive iPad features include:
 - Brief Overview
 - Services Over Time Graph
 - Service Type Cards and Filters



Brief Overview

The brief overview will now be pulled into the iPad iOS and will be the default screen a user lands on when they drill into a client's clinical summary. :

Jainfjt Imsw	9			< Back	ro	
Overview	> Overview f	or Jaixtzj Vfmajaj hary as of 04/02/2022	o V	Overview	>	Overview for Jaixtzj Vfmajap V Clinical Summary as of 04/02/2022
Alerts & Incidents	20			Alerts & Incidents	>	Outpatient Providers
Quality Flags	Gender from / YAgRdZL	Medicaid Mar Fide	naged Care Plan elis Care New York (Mainstream)	Quality Flags	>	Past Year Last Service Date & Type
Plans & Documents	Medicaid ID	мс	Plan Assigned PCP	Plans & Documents	>	
Screenings & Assessme	IGQTHNK EH	NOIXD NJA HAI	PP Status	Screenings & Assessme	ints	BRONXCARE HOSPITAL CENTER 07/11/2021 Clinic - Medical Specialty
Diagnoses	01/01/9999 (9	99 Yrs) SNI	P HARP Eligible Tier 2 HCBS (H4 with	Diagnoses	2	HARLEM HOSPITAL CENTER 05/27/2021 Clinic - Medical Specialty
Medications	> Dual-Eligible (Medicare)	(Medicaid & HAI	RP HCBS Assessment Status	Medications	>	
Services	Address from	Medicaid 09/	2 HCBS Eligibility (Reassess by 10/2022)	Services		All Hospital Utilization • 5 Years
Services Over Time	A PTwzxipAgg	00-200029		Services Over Time	6	ER Visits # Facilities Last Facility Stay
All Services	78			All Services	178	20 Mental Health 9 MONTEFIORE MEDICAL CENTER on 07/20/2021
Care Coordination	6 Current Care	Coordination		Care Coordination	16	18 Substance Use 10 JACOBI MEDICAL CENTER on 12/02/2021
Outpatient Behavioral Health	12 Health Home COMMUNITY	(Enrolled) HLTHCARE NETWORK /	AI	Outpatient Behavioral Health	12	47 Medical 14 MEDS OOS ER & OUTPATIENT on 12/11/2021
Outpatient Medical	Status : Active Begin Date: 01	-AUG-21	croll Down	Outpatient Medical	10	Inpatient # Facilities Last Facility Stay
Hospital & ER	Main Contact Allen Warnock 212-545-2444	Referral		Hospital & ER	110	16 Mental Health 6 METROPOLITAN HOSPITAL CENTER on 11/10/2021
Radiology	2 awarnock@chr Sidemia Down	nnyc.org		Radiology	2	5 Substance Use 5 MEDS OOS HOSPITAL on 12/12/2021
Laboratory & Pathology	 sdowe@chnnys 	c.org		Laboratory & Pathology	9	4 Medical 2 MONTEFIORE MEDICAL CENTER on 03/15/2021
Living Support & Residential	7 Member Refer	rral Number CC (246-4422)		Living Support & Residential	7	Safaty Diane Meet Record
Dental	Care Manager COMMUNITY	ment (Enrolled) HLTHCARE NETWORK /	a,i	Dental		1 Safety Plan 02/01/2021 BRONX PSYCHIATRIC CENTER
Vision	POP Potential	I Clozapine Candidate	on/referral due to sobizophrenia, bish	Vision		The sector sector and the sector sect

Office of Mental Health

Services Over Time Graph

- Displays the past 1 years' worth of client data in graph form
- The graph uses dots to represent distinct services/medication pickups and lines to represent continuous services (e.g., hospital inpatient stays)
- Users can "tap" the dots/lines within the graph to see hover over details like dates and provider names

Kzhafke Xnex						
Overview >	Services Over Time In Past Year					
Alerts & Incidents						
Quality Flags	at the second	1. T. T.	st à	r ar a	12	and all a
Plans & Documents	6	w y	y y	97 Q	4.0	2 4 4
Screenings &						
Diagnoses >	Suicide Attempt	*				
Medications >	Medication Behavioral Health		••		• • • •	
Services	Medication Medical 🛛 👄	* * **				
Services Over Time 🦛	Health Home - Enrolled (DCH MAPP)		_			
Ali Services 313	Health Home Plus (DOH MAPP)					
Care Coordination 16	Assisted Competitive Employment (Source:					
Outpatient 52 Behavioral Health 52	Stat Clinic - MH Specialty (100000		-		*****	
Outpatient Medical 3	ER Medical	** **				
Hospital & ER 160	ER Montal Health					
Radiology 2						
Laboratory 12	Inpatient Medical			UNIVER Date: 1/	SITY HSP SI 3/2022	INY HETH SC
Living Support & 6 Residential 6	Inpatient Mental Health Screenings & Assessments				•	K
Dental	50	1 J. J.	AT .	T AT A	N N S	0 0 0
Vision		* *	1 a	0.4	0. 8	highdanasan

Service Type Cards and Filters

- Certain service sections will have a gray "service types" card listed above the section's table including the unique Service Types as well as their distinct counts for that specific section
- Beneath the Service Type Card will be a table displaying the date, type, provider, and diagnoses/procedure.

🕻 Back 🚺 Pmexqqj W	/qq					
Overview	>	Hospital In Past 5 Y	& ER ears		C	Filter
Alerts & Incidents	2	-			-	
Quality Flags	5	ER Mental He	ea salth		# Visits	
Plans & Documents		ER Substanc	e Use		36	
Screenings & Assessi	vents	Inpatient Me	ntal Health		20	
Diagnoses	>	Inpatient Sub Inpatient Me	istance Use dical		17 2	
Medications	>	-				
Services		Date	Туре	Provider	Diagnosis	
Services Over Time		12/31/2021 - 01/02/2022	Inpatient Substance Use	HELIO HEALTH INC	Alcohol depe uncomplicate	ndence, id
All Services	167	12/29/2021	ER Substance Use	UNIVERSITY HSP SUNY HLTH SC	Alcohol abus intoxication,	e with
Care Coordination	2				uncomplicate	19
Outpatient Behavioral Health	18	12/28/2021	ER Medical	CROUSE HOSPITAL	Unspecified i Initial encour	injury of head, Nor
Outpatient Medical	1	12/23/2021	ER Medical	CROUSE HOSPITAL	Disorder of the supporting st unspecified	eeth and tructures,
Hospital & ER	86	12/23/2021 - 12/28/2021	Inpatient Substance Use	CONIFER PARK INC	Alcohol depe	ndence,
Radiology	8	1000000			Barrier and	
Laboratory & Pathology	3	12/22/2021 - 12/23/2021	ER Modical	CHOUSE HOSPITAL	supporting si unspecified	eeth and tructures,
Living Support & Residential		12/21/2021	ER Substance Use	UNIVERSITY HSP SUNY HLTH SC	Alcohol abus intoxication,	e with unspecified
Dental		12/17/2021 - 12/18/2021	Inpatient Mental Health	UNIVERSITY HSP SUNY HLTH SC	Alcohol depe withdrawal, u	indence with incomplicated
Vision		12/03/2021	ER Medical	ELLIS HOSPITAL	Dental caries	, unspecified



Service Type Cards and Filters (cont.)

 There are also filter options a user can select from. Once the filters are applied, the section's table will only display the services that were selected

< Back					
Overview	Heenitel	• ED	1		Filter
Alerta & Incidents	Filters for H	ospital & ER		101200	
	Services Types		#	Visits	la.
Quality Flags	ER Mental	Health		4	4
Plane & Documents	🛛 ER Substar	nce Use		36	0
Disgnoses	ER Medical	[20	7
Medications	Inpatient M	lental Health		7	
Services	Incetiont S	ubstance Lice		17	58
Services Over Time	Inpatient a	dustance use		- 16	plicated
All Services 1	Inpatient M	ledical		2	il abuse with ation,
Care Coordination					picated
Outpatient Behavioral Health					cified injury of head, shoounter
Dutpatient Medical					er of teeth and rting structures, cified
Hospital & ER					dependence, plicated
Radiology Laboratory 8 Pathology		Car	icel Apr	viv	er of teeth and rting structures, cified
Living Support & Residential	- IZZZ UZMZI	ER SUDStance US	SUNY HLTH SC	intoxic	al abuse with ation, unspecified
Dental	12/17/2021 - 12/18/2021	Inpotient Mental Health	UNIVERSITY HSP SUNY HLTH SC	Alcoho	d dependence with awal, uncomplicated
Vision	12/03/2021	ER Medical	ELLIS HOSPITAL	Dental	caries, unspecified

🕻 Back 🚺 Pmcxqqj W	/qq					
Overview	>	Hospital	& ER		Reset	2 Filter
Alerts & Incidents	2				_	
Quality Flags	>	Services Type ER Substance	es e Use		# Visits 36	
Plans & Documents		Inpatient Sub	stance Use		17	
Screenings & Assessr	ments	Date	Type	Provider	Diagnosis	
Xagnoses	>	12/31/2021 -	Inpatient	HELIO HEALTH INC	Alcohol der	pendence,
tedications	5	01/02/2022	Substance Use		uncomplica	ated
Services		12/29/2021	ER Substance Use	UNIVERSITY HSP SUNY HLTH SC	Alcohol abu intoxication	use with
services Over Time	*				uncomplica	sted
di Services	187	12/23/2021 - 12/26/2021	Inpatient Substance Use	CONIFER PARK INC	Alcohol deg uncomplica	pendence, sted
are Coordination	2	12/21/2021	ER Substance Use	UNIVERSITY HSP SUNY HLTH SC	Alcohol abu intexication	use with 1, unspecified
Sutpatient Iehavioral Health	18	11/30/2021 - 12/04/2021	Inpatient Substance Use	CONIFER PARK INC	Alcohol des uncomplica	pendence, sted
Outpatient Medical	1	11/28/2021	ER Substance Use	UNIVERSITY HSP	Alcohol de	pendence with
lospital & ER	86			SUNT HEIH SC	uncomplica	ated
tadiology	8	11/27/2021 - 11/28/2021	ER Substance Use	UNIVERSITY HSP SUNY HLTH SC	Alcohol dej intoxication uncomplica	pendence with V. sted
Laboratory & Pathology	3	1\v23/2021- 1\v26/2021	Inpatient Substance Use	FLACRA	Alcohol de uncomplica	pendence, ated
Living Support & Residential		11/04/2021 - 11/08/2021	Inpatient Substance Use	FLACRA	Alcohol der uncomplica	pendence, sted
Dental		10/31/2021	ER Substance Use	UNIVERSITY HSP	Alcohol abu	use with
Vision				SUNY HLTH SC	intexication uncomplica	t. ated

Training & Technical Assistance



PSYCKES Training

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

- The Self-Service Console is a way to manage your RSA token and PIN, for logging into secure OMH applications, including PSYCKES
- The console is accessed at: <u>mytoken.ny.gov</u>
- From within your Self-Service Console account, you can:
 - Set security questions
 - Reset your PINs
 - Activate tokens
 - Request a replacement token
- We recommend all users set up security questions in the console so that you can reset your own PIN if ever needed
- As of April 2022, the console must be used when new users need a token or existing users need a replacement token

Helpdesk Support

- PSYCKES Help (PSYCKES support)
 - 9:00AM 5:00PM, Monday Friday
 - PSYCKES-help@omh.ny.gov
- Help Desk (Token, Login & SMS support)
 - ITS (OMH Employee) Helpdesk:
 - 1-844-891-1786; <u>fixit@its.ny.gov</u>
 - Provider Partner (Non-OMH Employee) Helpdesk:
 - 518-474-5554, opt 2; healthhelp@its.ny.gov

