

Dear Provider:

The New York State Office of Mental Health is pleased to offer behavioral health inpatient providers (Article 28, 31, and 32) access to the Psychiatric Services and Clinical Knowledge Enhancement System (PSYCKES). PSYCKES is a HIPAA-compliant, web-based portfolio of tools designed to support quality improvement and clinical decision-making in the New York State Medicaid population. The application contains information on over 3.7 million Medicaid enrollees who had a behavioral health service, diagnosis, or psychotropic medication prescription in the past five years. For more details, please see the enclosed document, "What is PSYCKES?"

PSYCKES offers providers access to Medicaid data to support clinical evaluation, treatment planning, coordination of care, and quality improvement. Using PSYCKES has numerous benefits.

- User-friendly summaries provide up to 5 years of individual client data across all treatment settings including medications, behavioral and medical inpatient services, and behavioral and medical outpatient services.
- Quality reports summarize data on a number of quality concerns including high utilization of medical and/or behavioral health emergency and inpatient services, re-hospitalizations, and preventable hospitalizations. A number of medication related measures have also been developed. Quality reports are linked to individual clients with quality flags to focus quality improvement efforts.
- Clients designated as "high need" by OMH for the Behavioral Health Organizations (BHOs) will be identified in PSYCKES.
- BHOs will have access to PSYCKES; providers with access will be able to view the same information that is available to BHOs in a common platform.

This packet contains several documents regarding implementation of PSYCKES. Documents requesting information or signatures from providers should be returned as indicated in the "Protocol for PSYCKES Access."

- **Protocol for PSYCKES Access (Behavioral Health Inpatient Providers):** This document outlines all necessary steps for obtaining access to PSYCKES.
- **PSYCKES Provider Contact Form:** Please identify key personnel to be involved in implementing PSYCKES.
- **Confidentiality Agreement:** This confidentiality agreement is required in order for OMH to grant your institution access to Medicaid data and the protected health information contained in PSYCKES.
- **What is PSYCKES?** This is a one-page fact sheet about the PSYCKES application.
- **PSYCKES Webinars:** This includes descriptions and registration information for technical assistance Webinars about PSYCKES access, implementation, and use.

We look forward to working with your institution on this important initiative. If you have any questions, please contact PSYCKES-Help at psyckes-help@omh.ny.gov

Sincerely,



Molly Finnerty, MD
Director, Bureau of Evidence Based Services & Implementation Science
NYS Office of Mental Health

Protocol for PSYCKES Access – Behavioral Health Inpatient Providers

Step 1: Complete and return required documentation to PSYCKES Team

- a) Provider completes “PSYCKES Provider Contact Form” and faxes or e-mails it to PSYCKES-Help (fax 212-740-7379; e-mail psyckes-help@omh.ny.gov).

Hospitals participating in the Greater New York Hospital Association PSYCKES Quality Collaborative have already signed the Confidentiality Agreement. If your hospital is participating in the Quality Collaborative, please skip to Step 3 (if new/additional Security Managers are needed) or Step 4 (to begin enrolling users).

- b) Provider CEO signs the OMH “Confidentiality Agreement” in which the institution acknowledges that PSYCKES provides access to Medicaid claims data and protected health information, and agrees to comply with all New York State and Federal privacy laws and regulations. Agreements will be countersigned by the OMH PSYCKES Director, and a copy will be returned to the provider for its records.

- Scan signed copy and e-mail to psyckes-help@omh.ny.gov

OR

- Fax signed copy to 212-740-7379

OR

- Mail 2 hard copies to:

Attn: Dr. Molly Finnerty
PSYCKES NYPI
1051 Riverside Dr., Unit 100, New York, NY 10032

Step 2. Complete registration in OMH Security Management System (SMS)

Access to all secure OMH applications, including PSYCKES, is managed through an on-line SMS (for more information, see http://www.omh.ny.gov/omhweb/sms/reference_manual.html). If your institution participates in the Patient Characteristics Survey (PCS), it is already registered in SMS. Please skip to Step 3 (if new/additional Security Managers are needed) or Step 4 (to begin enrolling users).

- a) OMH e-mails instructions to the CEO on how to electronically sign a Confidentiality and Non-Disclosure Agreement (CNDA). (This is separate from the PSYCKES-specific Confidentiality Agreement referenced in step 1b above.)
- b) The CEO follows instructions provided in the e-mail to electronically sign the CNDA.

Step 3. Designate one or more Security Manager

Institutions that have existing Security Managers in SMS, but wish to designate additional staff as Security Managers to support the PSYCKES implementation, should contact the OMH Helpdesk at helpdesk@omh.ny.gov to request that OMH re-send the e-mail described in step 3a below.

Protocol for PSYCKES Access – Behavioral Health Inpatient Providers

- a) OMH e-mails the CEO with information and self-registration link needed to assign one or more SMS Security Managers.
- b) CEO forwards e-mail to person or persons who are to become Security Managers.
- c) Staff follow instructions in e-mail for online self-registration process as Security Manager.
- d) OMH sends the Security Manager an e-mail notification and a token (if needed; staff with existing OMH tokens will be able to use the same device).
- e) The Security Manager follows instructions provided with the token to activate it.

Step 4. Security Manager enrolls PSYCKES users

- a) Provider determines
 - i. Staff requiring PSYCKES access, and whether or not they already have an OMH-issued user ID (for example, staff with access to NIMRS)
 - ii. Staff who will be responsible for using the PSYCKES Consent Module to attest to the institution's right to view client-level data.
- b) For staff who do not have an OMH-issued user ID, the Security Manager creates an account in SMS.
 - i. Creation of user account triggers a token request.
 - ii. OMH mails a token to the Security Manager.
 - iii. When the token is received, the Security Manager activates the token.
 - iv. Security Manager delivers the token to the user.
- c) Once the user account is created, or for staff with existing user IDs, the Security Manager uses SMS to grant access to PSYCKES by selecting the "PSYCKES-Medicaid Access" option.
- d) For those staff who will be responsible for attesting to the right of the institution to view client-level data, the Security Manager uses SMS to grant access to the PSYCKES Consent module by selecting the "Registrar" option.

The Security Manager should not select the "PsyckesM Consumer Peer" option for any staff.

Step 5. Security Manager revokes PSYCKES access for staff no longer requiring access

- a) If the individual no longer requires PSYCKES access but still uses other OMH applications (such as NIMRS or PCS), the Security Manager disables PSYCKES Medicaid access in SMS. The individual keeps the token.
- b) If the person no longer needs access to any OMH application, or has left the institution, the Security Manager disables the user's account in SMS and mails the token back to OMH.

PSYCKES Provider Contact Form

Provider/Hospital

Name: _____
Address: _____

If provider is part of a larger system or network, please specify:

Name: _____
Address: _____

Chief Executive Officer or Executive Director

Name : _____
Title: _____
Address: _____
Telephone #: _____ Email Address: _____

Director of Utilization Review/Director of Quality Management

Name : _____
Title: _____
Address: _____
Telephone #: _____ Email Address: _____

PSYCKES Point Persons

Providers will need to develop policies and procedures for implementing PSYCKES, e.g. for staff training, obtaining and documenting client consent, and protecting health information. OMH strongly encourages providers to designate as PSYCKES Point Persons individuals with institutional expertise and leadership responsibilities aligned with this requirement.

Name : _____
Title: _____
Address: _____
Telephone #: _____ Email Address: _____

Name : _____
Title: _____
Address: _____
Telephone #: _____ Email Address: _____

Please add additional contacts on a separate sheet, if needed.

This form was completed by

Name : _____
Title: _____
Telephone #: _____ Email Address: _____

NEW YORK STATE MENTAL HYGIENE LAW SECTION 33.13 (d)
CONFIDENTIALITY AGREEMENT
-between-
THE NEW YORK STATE OFFICE OF MENTAL HEALTH
-and-

THIS AGREEMENT, is entered into the ____ day of _____, 20 __, by and between the New York State Office of Mental Health (OMH) and _____, hereinafter referred to as “PROVIDER.”

WHEREAS, New York State Mental Hygiene Law Section 33.13 evidences the Legislature’s intent to facilitate the flow of patient information within the provider network, in order to assure continuity and appropriateness of care; and

WHEREAS subdivision (d) of such section permits entities and persons responsible for the provision of services for current or former patients (i.e., individuals concerning whom clinical information is maintained or possessed by OMH or a licensed facility, ward, wing or unit) may share with each other information necessary to such provision of services, provided there is some nexus, or link, with OMH through licensure, a local or unified services plan, an agreement, or consistent with standards established by the Commissioner for purposes of implementing Kendra’s Law, and the patient’s consent/authorization to such information-sharing is not legally mandatory; and

WHEREAS, PROVIDER is licensed by the Department of Health pursuant to Article 28 of the Public Health Law,

WHEREAS, PROVIDER is an enrolled provider in the Medicaid program, i.e., that program of medical assistance for needy persons established under Title XI of Article 5 of the Social Services Law and pursuant to Title XIX of the Federal Social Security Act, (“Medicaid”) and furnishes items or services for which payment is claimed or reported under the Medicaid program or which offers to furnish such items or services; and

WHEREAS, PROVIDER is a provider of health and/or mental health services, some of which are billable under the Medicaid program; and

WHEREAS, the OMH is a “covered entity” for purposes of 45 C.F.R. Parts 160, 164 (the HIPAA Privacy Rules) and is therefore bound by the provisions of these rules; and

WHEREAS the HIPAA Privacy Rules permit disclosures of individually identifying health information, or protected health information (“PHI”) for treatment purposes without requiring patient consent or authorization; and

WHEREAS because New York State Mental Hygiene Law Section 33.13, specifically subdivision (d) of such section, is more stringent than HIPAA with respect to disclosing information for treatment purposes without patient consent/authorization, an

agreement is necessary before information can be shared by OMH with PROVIDER for treatment purposes without such consent/authorization; and

WHEREAS, OMH has developed and seeks to implement the Psychiatric Services and Clinical Knowledge Enhancement System, (“PSYCKES”) a web-based tool for sharing certain state administrative health data (which includes PHI) for treatment purposes, including improving clinical decision making in mental health services; and

WHEREAS, OMH and PROVIDER seek to support quality improvement, safety, and improved clinical decision making in mental health services; monitor access to and utilization of Medicaid services and establish utilization controls; promote cost effective mental health services; and coordinate management of high cost recipients, high risk recipients and underserved or sub-optimally treated recipient populations with control agencies and providers; and

WHEREAS, OMH wishes to ensure that all PHI received or created from, for or on behalf of OMH is in accordance with all applicable state and federal laws, including, without limitation, New York State Mental Hygiene Law Sections 33.13 and 33.16 and the HIPAA Privacy Rules, and associated OMH policies and procedures;

NOW, THEREFORE, the parties hereto hereby agree as follows:

1. Nature of the Services to be Provided:

(a) PROVIDER is a provider of mental health treatment services and general health care services. Use of the data that includes PHI will be limited to the purposes directly related to identifying and serving the needs of PROVIDER patients, and shall include:

- (i) supporting clinical decision making including evaluation and planning of treatment services;
- (ii) supporting patient engagement in appropriate care;
- (iii) identifying patients served by PROVIDER that have quality concerns;
- (iv) supporting coordination of care between Providers;
- (v) supporting coordination of care between PROVIDER and OMH and/or the local governmental unit; and
- (vi) supporting patient education.

(b) For purposes of this Agreement, the term “PROVIDER patients” shall mean any individual who is or has been:

- (i) served by PROVIDER as evidenced by an adjudicated claim;
- (ii) seeking services from PROVIDER; or

(iii) referred to PROVIDER by means of Local Governmental Units (LGU's), as defined in Article 41 of the New York State Mental Hygiene Law, and Single Point of Access agencies that coordinate care with OMH at the local level.

2. Nature and Extent of Patient Information to be Disclosed

OMH will grant the PROVIDER access to aggregate, de-identified data on the performance of all Providers in New York State on quality measures, and protected health information pertaining to PROVIDER patients that is available in PSYCKES, including:

(a) Confidential health information (excluding HIV, family planning, substance abuse, and genetic disorders related data) for PROVIDER patients with quality and safety concerns.

(b) Confidential health information (including HIV, family planning, substance abuse, and genetic disorders related data) for all admitted patients of PROVIDER who sign a PSYCKES Consent Form permitting PROVIDER access. PROVIDER shall review the PSYCKES Consent Forms with its patients, and shall retain a copy of the signed forms.

(c) Confidential health information (including HIV, family planning, substance abuse, and genetic disorders related data) for any PROVIDER patient who is medically incapacitated in a medical or psychiatric emergency.

3. Privacy Requirements and Security Procedures and Protocols

(a) PROVIDER will comply with all privacy requirements and security procedures and protocols of OMH with respect to access to PSYCKES, including but not limited to the execution of a Confidentiality and Nondisclosure Agreement and Computer Application Sharing Form, and/or Data Exchange Agreement (as applicable).

(b) Only staff of PROVIDER who require the data to perform the functions of this Agreement will be given access to the data. Such staff shall be trained by PROVIDER as to the confidential nature of the data, and its proper handling, and each such staff person shall sign an agreement agreeing to use or handle such data accordingly, and agreeing to meet any other appropriate City, State or Federal privacy and security requirements to access, use or disclose confidential data.

(c) PROVIDER and staff of PROVIDER shall ensure that any confidential health information shall remain confidential and shall only be stored, accessed, used or disclosed in accordance with applicable provisions of State and Federal law. Under the Mental Hygiene Law, further disclosure of such confidential mental health information is strictly limited to those circumstances in which consent of the patient is obtained, a court order is issued, or the recipient of the disclosed information is otherwise authorized to receive such information under Mental Hygiene Law section 33.13.

(d) PROVIDER and OMH will from time to time conduct audits of consent forms, and of PROVIDER's PSYCKES use logs to monitor adherence to procedures and compliance with applicable laws and rules.

4. Additional Provisions Specific to Use of Medicaid data:

(a) Medicaid data made available by OMH in PSYCKES to PROVIDER shall be used in a manner which supports the administration of the Medicaid program, consistent with the requirements of New York State Social Services Law §§ 367-b and 369, and federal Social Security Act § 1902(a)(7).

(b) For purposes of this Agreement, "Medicaid data" shall mean and include claims, managed care encounters, and recipient eligibility and demographic data.

(c) For purposes of this Agreement, "Medicaid recipient" shall mean an individual who is or has been Medicaid eligible and has received services during that period of eligibility.

(d) Medicaid data made available by OMH in PSYCKES shall be used by PROVIDER to improve the quality, safety and efficiency of services by:

(i) supporting the conduct of PROVIDER and OMH quality improvement programs, and utilization management programs;

(ii) reviewing performance on quality and efficiency measures relative to other Providers;

(iii) tracking performance on quality and efficiency measures over time;

(iv) supporting reporting requirements of OMH and local governmental units;

(v) monitoring Medicaid recipient outcomes; and

(vi) providing Medicaid recipients with a summary of their clinical health information.

(e) Consistent with federal regulations at 42 CFR 431.306(b), OMH and PROVIDER shall have policies and procedures to protect the security and confidentiality of the data, comparable in scope and method with those of the Department of Health.

(f) To the extent Medicaid data available from PSYCKES contains confidential HIV related information, as defined by New York State Public Health Law §2780(7), such data can only be used for a purpose directly connected with the administration of the Medicaid program and consistent with the limitations of New York State Public Health Law § 2782 relating to persons to whom or entities to which confidential HIV related information may be disclosed. Such a purpose may include supervision, monitoring, administration or provision of Medicaid care, services and supplies.

(g) To the extent Medicaid data available from PSYCKES includes individually identifying alcohol and drug abuse patient records which are subject to the provisions of 42 CFR Part 2, such information shall only be used or disclosed in accordance with such regulations.

Authorization

Provider Authorized Signatory: I agree to the terms and have legal authority to commit the Provider to them.	Name	Date
	Signature	
OMH Data Owner	Name	Date
	Signature	

WHAT IS PSYCKES?

The Psychiatric Services and Clinical Knowledge Enhancement System (PSYCKES) is a HIPAA-compliant, web-based portfolio of tools designed to support quality improvement and clinical decision-making in the New York State (NYS) Medicaid behavioral health population. Data in PSYCKES comes from Medicaid fee-for-service and managed care claims, and includes over 3.7 million individuals with a current or past behavioral health service, diagnosis, or psychotropic medication. PSYCKES includes both clinical summaries of individual client data and quality reports that aggregate data at all levels of the mental health system. Since 2008, PSYCKES has been implemented in over 330 mental health clinics statewide, as well as in emergency room settings and ACT teams. All reports in PSYCKES can be exported to Excel or PDF format. For more information, visit the PSYCKES website at www.psyckes.org.

HOW CAN PSYCKES BE USED IN BEHAVIORAL HEALTH INPATIENT SETTINGS?

For clinical decisionmaking: User-friendly clinical summaries provide up to 5 years of individual client data across all treatment settings including diagnoses, medications, behavioral/medical inpatient and outpatient services, laboratory/X-ray tests, dental and vision services, and living support/transportation. Information is presented in table and graph form to support quick review of service utilization patterns. Users can drill down to review individual service claims, for example to assess trends in medication dosages and fills. This information can fill critical information needs at intake, during treatment, and at discharge to support clinical review, treatment planning, care coordination, and discharge planning.

For quality improvement: Quality reports summarize data on a number of quality concerns including high utilization of medical and/or behavioral health emergency and inpatient services, re-hospitalizations, and preventable hospitalizations. Quality reports are linked to individual clients with quality flags to focus quality improvement efforts.

- **High Utilization of ER/Inpatient Services** – PSYCKES identifies individuals with 4 or more emergency room visits or inpatient hospital stays in the previous 12 months, including 4 or more behavioral health ER/inpatient services, 4 or more medical ER/inpatient services, and 4 or more ER/inpatient services of any kind.
- **Readmission** – PSYCKES identifies individuals with a psychiatric readmission within 7 days of discharge and within 30 days of discharge.
- **Preventable Hospitalizations** – These indicators are based on Prevention Quality Indicators developed by the Agency for Healthcare Research and Quality, which are intended to identify population rates of hospitalizations for conditions that should be preventable with adequate outpatient care. The PSYCKES Preventable Hospitalization indicators identify individuals who are hospitalized due to asthma, diabetes, or dehydration.

Medication-related measures include flags for people on polypharmacy, on high doses of psychotropic medications, and who have an existing cardiometabolic condition and are on an antipsychotic classified as high risk for metabolic disturbance.

IS CONSENT REQUIRED TO VIEW CLIENT-LEVEL DATA?

Providers are able to view certain client-level data without consent for individuals with a quality flag who have been served at that institution. Access to client-level data for individuals without a quality flag, for individuals with no Medicaid billing history at the provider, and for all Federally protected data (including substance abuse, HIV, family planning and genetic disorders related data) is available only with the individual's consent or in the case of a clinical emergency.

PSYCKES WEBINARS FOR BEHAVIORAL HEALTH INPATIENT PROVIDERS

Staff can register for the webinars by clicking on the webinar links below.

Introduction to PSYCKES for Behavioral Health Inpatient Providers

This webinar is designed for those who did not attend a NYS BHO Regional Forum or were unable to stay for the afternoon PSYCKES presentation. The webinar provides an overview of the Psychiatric Services and Clinical Knowledge Enhancement System for Medicaid (PSYCKES Medicaid), a HIPAA-compliant, web-based portfolio of tools designed to support quality improvement and clinical decision-making in the New York State (NYS) Medicaid population. The webinar will:

- review the client-level data available in PSYCKES and its uses for treatment planning and care coordination
- describe the quality reports available in PSYCKES, focusing on measures associated with utilization of inpatient and emergency room services
- provide an overview of client consent procedures required to obtain specific types of protected health data
- describe the steps required to obtain access to PSYCKES.

Schedule:

Thurs. 11/17, 11:00am to 12:00pm, <https://www1.gotomeeting.com/register/795789049>

Fri. 11/18, 1:00pm to 2:00pm, <https://www1.gotomeeting.com/register/373591408>

Tues. 11/22, 2:00pm to 3:00pm, <https://www1.gotomeeting.com/register/706655760>

PSYCKES Access and Implementation

The webinar is designed for staff who will be responsible for managing implementation of PSYCKES in behavioral health inpatient settings. It will review:

- steps required for institutions to obtain authorization for access to PSYCKES
- procedures for granting staff access to PSYCKES using the OMH on-line Security Management system
- best practices for implementing PSYCKES in inpatient settings
- procedures required to document authorization to view client level data (consent or clinical emergency).

Schedule:

Thurs. 12/1, 10:00am to 11:00am, <https://www1.gotomeeting.com/register/537727384>

Tues. 12/6, 3:00pm to 4:00pm, <https://www1.gotomeeting.com/register/924431825>

Thurs.12/8, 11:00am to 12:00pm, <https://www1.gotomeeting.com/register/963344032>

Tues. 12/20, 11:00am to 12:00pm, <https://www1.gotomeeting.com/register/927843017>

Fri. 1/6, 1:00pm to 2:00pm, <https://www1.gotomeeting.com/register/417599729>

Tues.1/17, 2:00pm to 3:00pm, <https://www1.gotomeeting.com/register/319968041>

Mon.1/30, 2:00pm to 3:00pm, <https://www1.gotomeeting.com/register/606365128>

Using PSYCKES to Support Clinical Review and Care Coordination

The webinar is designed for staff who will be using PSYCKES for clinical decisionmaking, care coordination, and quality management, including physicians, nurse practitioners, social workers, and quality assurance staff. The webinar will:

- provide an overview of reports and functions available in PSYCKES
- demonstrate how individual clinical summaries can support treatment planning, case review, care coordination, and discharge planning
- review quality indicator reports that track high utilization of emergency room and inpatient services, psychiatric re-admissions, and preventable hospitalizations
- review options for obtaining access to client-level data, and procedures required to document steps required to document authorization to view client level data (consent or clinical emergency) using the Consent Module in PSYCKES.

Schedule

Fri. 12/16, 1:00pm to 2:00pm, <https://www1.gotomeeting.com/register/245905608>

Thurs.12/22, 10:00am to 11am, <https://www1.gotomeeting.com/register/763954513>

Tues.12/27, 2:00 pm to 3pm, <https://www1.gotomeeting.com/register/205353568>

Mon.1/ 9, 1:00pm to 2:00pm, <https://www1.gotomeeting.com/register/921675377>

Tues.1/24, 11:00am to 12:00pm, <https://www1.gotomeeting.com/register/976018760>