Data Resource- Updated 12/10/2018

Question(s)	Data Set	Who has Access	Examples of Questions that this might answer	How can this data be used?	Link	Pulls Data from…..	To Learn More/Additional Resources:	For more information
• What is the quality of services being delivered?	QARR	Public Access	* How is a each MCO doing on behavioral health quality indicators? * What is the trend in indicators from 2008 to 2014?	*Review reports to determine performance/outcomes related to behavioral health services.	https://health.data.ny.gov/Health/QARR-Behavioral-Health-Care-by-Payer/edwk-kh6k/data	QARR is largely based on measures of quality developed and published by the National Committee for Quality Assurance (NCQA) Healthcare Effectiveness Data and Information Set (HEDIS®). Managed care plans are required to submit quality performance data each year. Demographic information analyzed in this report includes members' sex, age, race/ethnicity, Medicaid aid category, cash assistance status, language spoken, behavioral health conditions including serious mental illness (SMI) and substance use disorder (SUD), and region of residence.	This dataset includes Medicaid managed care performance data from the Quality Assurance Reporting Requirements (QARR) by member demographic characteristics). It is reported by Managed Care Organizations.	https://health.data.ny.gov/Health/QARR-Behavioral-Health-Care-by-Payer/edwk-kh6k/data
• What is the need in the community?	The National Survey on Drug Use and Health (NSDUH)	Public Access	For each state: *What is the use of illicit drugs? *What is the rate of use of alcohol & tobacco products? * What is the rate & number of SUD * What is the rate and number of any mental illness, serious mental illness & major depressive episode * What is the rate of substance use treatment or mental health service for adults	Purpose: • Provide accurate data on the level and patterns of alcohol, tobacco and illegal substance use and misuse; • Track trends in the use of alcohol, tobacco and various types of drugs; • Assess the consequences of substance use and misuse; and • Identify those groups at high risk for substance use and misuse.	https://www.samhsa.gov/data/data-we-collect/nsduh-national-survey-drug-use-and-health	A nationwide study that provides up-to-date information on tobacco, alcohol, and drug use, mental health and other health-related issues in the United States. This national report summarizes key findings from the 2016 National Survey on Drug Use and Health (NSDUH) for indicators of substance use and mental health among people aged 12 years old or older in the civilian, noninstitutionalized population of the United States. Results are provided for the overall category of individuals aged 12 or older as well as by age subgroups. OASAS has posted this data for 2014-2016 by RPC region.	This data set is developed through survey data	https://nsduhweb.rti.gov/respweb/homepage.cfm https://www.samhsa.gov/data/sites/default/files/NSDUH-FFR1-2016/NSDUH-FFR1-2016.pdf for all categories of information collected and analyzed. https://www.samhsa.gov/data/sites/default/files/NSDUH-FFR1-2016/NSDUH-FFR1-2016.pdf for key indicators. https://www.samhsa.gov/data/sites/default/files/NSDUH-FFR1-2016/NSDUH-FFR1-2016.pdf https://www.samhsa.gov/data/sites/default/files/cbhsq-reports/NSDUHsubstateAgeGroupTabs2016/NSDUHsubstateAgeGroupTabs2016.xlsx.
• What is the need in the community?	NYS DOH Prevention Agenda (see data dashboard)	Public Access	*How does my county rank on health goals? * Are minorites experiencing premature deaths at a greater rate than the general population? * Are supermarkets accessable to residents? * What is the percentage of individuals who are obese? * What percentage of adolescents who report feeling hopelessness *What is the rate of falls for individuals over 65? *What is the age-adjusted suicide rate? * What opportunites are there to impact/improve health in my community? * Are there opportunites for health and behavioral health providers to collaborate?	* Gives views of public health outcomes that are already being tracked * How have the health outcomes changed overtime?	https://www.health.ny.gov/prevention/prevention_agenda/2013-2017/	Baseline data and the Prevention Agenda 2018 objectives • Preventing Chronic Diseases, Promote a Healthy and Safe Environment, Promoting Healthy Women, Infants and Children, Promote Mental Health and Prevent Substance Abuse o Percentage of adolescents reporting use of alcohol on at least one day for the past 30 days, P0ercentage of adults with poor mental health for 14 or more days in the last month, Percentage of adolescents reporting the use of non-medical use of painkillers , Percentage of adult binge drinking during the past month, Pcentage of cigarette smoking among adults who report poor mental health, Percentage of adolescents who felt sad or hopeless, Age-adjusted suicide death rate , Percentage of adolescents who attempted suicide one or more times in the past year • Prevent HIV/STDs, Vaccine-Preventable Disease and Health Care-Associated Infections	Various	https://www.health.ny.gov/prevention/prevention_agenda/2013-2017/

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• What is the need in the community?	Kids' Well-being Indicators Clearinghouse	Public Access	* What is the poverty level for children in my county? * What is the number of children who are receiving free or reduced lunch? *What are the leading causes of death by race? * What is the rate of self inflicted injuries for chlildren? *What is the high scholl graduation rate? * What is the susbpenion/expulsion/removal events rate? * What is the rate of violent crimes? * What is the rate of juvenile crimes and PINS petitions?	*Used by child serving entities for planning purposes	http://www.nyskwic.org/	KWIC uses the Touchstones framework that was established by the Council on Children and Families and its 12 member agencies. The framework is organized by six major life areas where each life area has a set of goals and objectives—representing expectations about the future, and a set of indicators–reflecting the status of children and families. The Life Areas include Economic Security, Physical and Emotional Health, Education, Civic Engagement, Family, Community, and Mental, Emotional and Behavioral Health Indicators (and is availlable by county)	Pulls from multiple data sets, including OASAS, OFA, OCFS, DCJS, SED, DOH, OMH, OPWDD, OPCA, CQCMD, OTDA	http://www.nyskwic.org/
• What is the need in the community?	BRFSS (Behavioral Risk Factor Surveillance System)	Public Access	For each county the percentage of adults: * With high cholesterol? * Living in a neighborhood suitable for walking & physical activity? * With poor mental health for 14 or more days in the past month? * With binge drinking over the past month? * Of cigarette smoking for adults with poor mental health	*Used to develop a prevention agenda	https://www.health.ny.gov/statistics/brfss/expanded/2013/county/	Provides local information on key public health issues- There are a total of 60 health indicators included in the report. OASAS has published data on binge drinking and poor mental health by county.	Sampling of the population in NYS	https://www.health.ny.gov/statistics/brfss/expanded/2013/county/
• What is the need in the community?	PAD (Program on Applied Demographics)	Public Access	* How many people live in my county? *What is the poverty rate in my county? * What is the age and race distribution in my county? * What is the median household income? *How many residents live in their own home? *How many residents rent? * What are the population trends?	*Used to understand county population overall and specific to those with behavioral health needs--for planning purposes * Can be used to demonstrate community-wide disparities	http://pad.human.cornell.edu/index.cfm https://factfinder.census.gov/faces/nav/jsf/pages/index.xhtml	Includes NY Census Data, Various demographic information by county	Census Data	http://pad.human.cornell.edu/index.cfm
• What services are being used to address the need?	County Portal- Patient Characteristics Survey	Listed Publicly on OMH website	For individuals served by OMH during the survey period for the State or Region * What is the percentage of persons served by age, gender, race or sexual orientation? * What was the level of employment, education, housing or criminal justice status during that period? * What were the disablities of individuals served? What were their co-occurring disorders?	*Who is bring served in my county?	https://www.omh.ny.gov/omhweb/tableau/pcs.html	Provides a snapshot of people served by New York State's public mental health system. View demographics, social determinants, clinical and functioning characteristics. Reports show service trends in specific geographic areas compared to nearby areas and the rest of New York State. Ability to run reports.	OMH Article 31 clinics, and other programs, both licensed and non-licensed, funded through OMH.	https://www.omh.ny.gov/omhweb/tableau/pcs.html
• What services are being used to address the need?	OMH -County Profiles Portal	Public Access	* What services were delivered by providers in my region? *What services were delivered to residents in my region? * How many people were served in each age group? * What was the inpatient average daily census and rate in my county or region? * What is the trend in inpatient stays in my county or region? *How much did the services cost?	*Used for county planning purposes (e.g. identify utilization, potential gaps in services and lengths of stay)	https://my.omh.ny.gov/bi/cp/saw.dll?PortalPages https://www.omh.ny.gov/omhweb/tableau/county-profiles.html	State, Regional and County Level Services Utilization Data. Mental Health Inpatient Utilization and capacity). Medicaid service utilization is available in total or by Medicaid supported services for both Fee-for-Service and Encounter (Managed care) data. Hospital Inpatient use is available by General Hospital, Private Hospital, State Psychiatric Center and Residential Treatment Facility.	Medicaid Claims are pulled from the NYS OMH Medicaid Claim & Encounter Data Mart. Hospitalization data is pulled from SPARCS, ICR, PCS, MHARS and CAIRS	https://my.omh.ny.gov/bi/cp/saw.dll?PortalPages https://www.omh.ny.gov/omhweb/tableau/county-profiles.html

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• What services are being used to address the need?	OMH - Residential Indicators Report	Public Access	* What is the occupancy by level of care for housing programs in my county or region? * How does my county's occupancy level in supported housing compare to the region or state? * Are there differences between providers regarding occupancy or length of stay? * Can we use data to identify barriers to movement among housing levels of care in order to improve access? * Are particular providers or levels of care admitting higher percentages of homeless individuals or psych center discharges?	* The RPI report presents information about adult residential programs funded through OMH. *It provides benchmarks and measures of program performance that users can reference in evaluating agencies' residential programs based on county, regional and statewide averages.	https://my.omh.ny.gov/analytics/saw.dll?PortalPages&PortalPath=%2Fshared%2FAdult%20Housing%2F_portal%2FAdult%20Housing&Page=RPI%20Reports	The Residential Program Indicators (RPI) report presents data from the Child and Adult Integrated Reporting System (CAIRS).	CAIRS is a secure and confidential HIPAA compliant information system developed and utilized by OMH to record, facilitate, monitor, and evaluate the process of managing and coordinating mental health services	https://my.omh.ny.gov/analytics/saw.dll?dashboard&PortalPath=%2Fshared%2FAdult%20Housing%2F_portal%2FAdult%20Housing&nquser=BI_Guest&nqpassword=Public123
• What services are being used to address the need?	OMH- County Level HARP/HCBS Data	Public Access on the OMH HCBS Dashboard	By Medicaid Managed Care Plan, how many individuals *Are HARP eligible? *Have been enrolled in a HARP? *Are enrolled in both a HARP & a Health Home? *Have completed an eligiblity assessment for Home and Community Based Services, have been found eligiblity for HCBS and have received a HSBS service	* Used to understand HARP enrollment and HCBS utilization trends look like in my region and statewide	https://www.omh.ny.gov/omhweb/bho/hcbs_county_level_data.pdf	Pulls from the Medicaid Data Warehouse	This data shows the Health and Recovery Plan (HARP) Eligible, HARP Enrolled, Health Home Enrolled, HCBS assessment and HCBS claims data breakout by County from Medicaid Data Warehouse (MDW). Individuals are counted only once.	https://www.omh.ny.gov/omhweb/bho/hcbs_access_dashboard.pdf
• What services are being used to address the need?	OASAS Data Resources	Public	Statewide: * What was the 2017 average daily enrollment in treatment programs *How may people were served for opioids annually from 2010-2017 *How many people over 55+ were admitted annually from 2010-2017 *What was the average daily enrollment by certified program in 2017? * How many certified programs are there in each category?	Client Data - OASAS collects information on admissions to certified treatment programs. Statistics on client demographics, substance use, county of residence, and primary referral source can be found under this topic. Provider Data - Data on the different programs OASAS oversees such as prevention programs, certified treatment programs, housing programs, and recovery programs.	https://www.oasas.ny.gov/ODR/index.cfm	Data on the different programs OASAS oversees such as prevention programs, certified treatment programs, housing programs, and recovery programs.	https://www.oasas.ny.gov/ODR/PD/CTP.cfm https://www.oasas.ny.gov/ODR/PD/prevention.cfm	https://www.oasas.ny.gov/index.cfm
• What services are being used to address the need? • Who is being served? • What was the quality of service being provided?	Department of Health Medicaid Statistics	Public	* HWhat was the Medicaid Enrollment by month? * How did the Health Care plans compare in 2017 and in 2017? * What were the Health Plan Service Use in 2017, 2016 and 2015? * Where participants satisfied with their services? * How did MCOs do regarding their quality incentives in 2017 and 2016	DOH provides managed care reports, medicaid enrollees and expenditures by county, medicaid managed care enrolment and medicaid quarterly reports	https://www.health.ny.gov/health_care/medicaid/statistics/	e-MedNY	Medicaid statistics include Managed Care Reports, Medicaid Enrolles and Expenditures by County, Monthly Medicaid Managed Care Enrollment and Medicaid Quarterly reports	https://www.health.ny.gov/

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• What services are being used to address the need? • What is the need in the community?	**Department of Health Opioid Data**	Public	*How many hospital opioid discharges, ER visits and/or overdose deaths were there statewide, by region and by county? *What was the breakdown of opiates i.e. heroin, prescription drugs etc. *What was the opiate anelgesic or benzodiazepine perscription rate? * What was the buprenorphine perscription rate?	*this opioid-related data is meant to support statewide prevention efforts and is valuable tool for planning and can help identify where communities are struggling, help tailor interventions, and show improvements.	https://www.health.ny.gov/statistics/opioid/	Various	NYSDOH is providing opioid overdose information (deaths, emergency department (ED) visits, and hospitalizations) by county in quarterly reports. The reported cases are based on the county of residence. Opioids include both prescription opioid pain relievers such as hydrocodone, oxycodone, and morphine, as well as heroin and opium.	https://www.health.ny.gov/statistics/opioid/#i_two
• What is the need in the community?	**Department of Health Suicide Data**	Public	* For the years 1995-2014, what were the deaths, hospitalizations and ER visits for suicide/self inflited injuries by year (statewide)? * For 2012-2014, what was the gender & age distribution of deaths, hospitalizations and ER visits for suicide/self inflicted injuries? * For 2012-2014, what were the costs of suicide/self incury?	* Gives information on the trends through 2014 in suicides and self-inflicted injuries	https://www.health.ny.gov/statistics/prevention/injury_prevention/suicide_selfinflicted.htm	Various	These charts and tables detail multi-year, statewide statistics for suicide and self-inflicted injuries among New York State residents. Data is presented in annual frequency and rate per 100,000 New York State residents	
• What is the need in the community? *What is the quality of services being delivered?	**Office of Temporary Disability Assistance**	Public	*By month and type of assistance, for each county or the state, how many cases and recipients were there, and what were the expenditures? * What was the breakdown of Federal Participation? * What is the level of Maintence of Effort? * What were the child support collections?	Temporary & Disability Assistance Statistics contain information concerning TANF, Safety Net, Supplemental Nutrition Assistance Program (SNAP), SSI, HEAP, and C	https://otda.ny.gov/resources/	OTDA reports	OTDA's functions include: Providing temporary cash assistance; providing assistance in paying for food; providing heating assistance; overseeing New York State's child support enforcement program; determining certain aspects of eligibility for Social Security Disability benefits; supervising homeless housing and services programs; and providing assistance to certain immigrant populations.	https://otda.ny.gov/about/
* What is the need in the community?	**Health Resources and Services Administration**	Public	*Where are there shortage areas by discipline i.e. Mental Health, Primary Care, Dental etc. *Where are there Medically Underserved Areas * What is the distance to a HRSA funded Health Center such as a FQHC? * How does my local FQHC(s) compare to other FQHCs in quality measures?	*Shortage designations can help planners ensure resources reach populatins with the greatest need. * Rural data is meant to increase access to care for underserved populations and build health care capacity in rural communities.	https://data.hrsa.gov/	Various	HRSA provides maps, data, reports, and dashboards to the public about HRSA's health care programs. The data integrates with external sources, such as the U.S. Census Bureau, providing information about HRSA's grants, loan and scholarship programs, health centers, and other public health programs and services.	https://data.hrsa.gov/data/fact-sheets

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• What are the trends in the NY State Health Workforce? • What is the estimated need?	**NY Health Workforce Data System**	Public	* What is the health care employment by setting, occupation and region? * What are the professions and occupations in greatest demand? * What are the most pressing health work force needs? * What is the access to care for Medicaid patients bu specific area? * What are the NYSDOH designated shortage areas?	The primary goal of the system is to provide policy makers, planners, and other interested parties with the best available, up-to-date information about the state's health workforce to inform decision making that supports a healthier New York.	http://www.chwsny.org/our-work/current-projects/	CHWS collects information from these professionals at license renewal as well as from secondary data sources, including Medicaid claims data.	The Center's New York Health Workforce Data System is designed to support ongoing monitoring of the state's health workforce. The system uses both primary and secondary data sources to provide critical information on the supply of and demand for health workers in the state.	
• What services are being used to address the need? • Who is being served?	**Statewide Planning and Research Cooperative System (SPARCS)**	SPARCS offers three levels of data access: public, limited, and identifiable. Public use data is openly available. Limited or identifiable data requires the submission of an application.	* What are the historical Preventable Preventable Complications (PPC) rates for the state and by region? *What are the highest PPCs? * How do the historical PPC rates vary by region? * What are the historcal all payor discharges and ER visits for children? * What are the all payor patient safety trends?	* Gives information on utilization of services for all payors, not just Medicaid	https://www.health.ny.gov/statistics/sparcs/reports/ https://www.health.ny.gov/statistics/sparcs/sb/	At the county level, the report describes the number of beds in each program type and provides data for each program type across a set of performance indicators. The county data are aggregated into separate State Psychiatric Center catchment area and regional summaries. Finally, the regional summaries are aggregated into a statewide summary for all programs. A separate statewide summary report of the State-operated non-specialty congregate programs is also included.	Claims Based Data	https://www.health.ny.gov/statistics/sparcs/training/docs/sparcs_dgc_manual.pdf https://www.health.ny.gov/health_care/managed_care/quality_strategy.htm
• What services are being used to address the need? • What is the quality of services being delivered?	PHIP data- Will Vary by PHIP	Anyone- Data/Reports are listed are often listed on the regional PHIP websites	* What is the Community Health Improvement Plan for my county? * What is the Community Health Assessment for my county? * What local data is available on areas local areas of interest such as cigarrette smoking and poverty?	*Used to understand are the demographic characteristics of my county or region? * Can be used to see how the various counties compare to one another on health outcomes	**Central Region:** http://www.healthecny.org/ **Long Island:** - https://www.lihealthcollab.org/population-health.aspx **Mohawk Valley:** http://www.mvphip.org/index.php?module=Tiles&controller=index&action=display&alias=exploredata **Finger Lakes:** https://www.commongroundhealth.org/data/region **Western Region:** http://www.k2hwny.org/ **Tug Hill Seaway:** http://www.ncnyhealthcompass.org/index.php **Southern Tier & Mid Hudson:** http://www.healthli	Can vary based on the PHIP- Data tends to focus around SDHs. Any agency/organization can approach a PHIP with a data request. The PHIP may have this data already or may be able to help collect this data for this agency.	Most PHIPS either collect their own data through various methods or through the HCI - The Healthy Communities Institute- https://www.conduent.com/community-population-health/	Outreach your local PHIP to learn more about what data they are collecting and/or may be able to provide. Individual Portals are listed below: **Capital Region:** http://www.hcdiny.org/index.php?module=Tiles&controller=index&action=display&alias=healthdata **Central Region:** http://www.healthecny.org/ **Long Island:** - https://www.lihealthcollab.org/population-health.aspx **Mohawk Valley:** http://www.mvphip.org/index.php?module=Tiles&controller=index&action=display&alias=exploredata **Finger Lakes:** https://www.commongroundhealth.org/data/region **Western Region:** http://www.k2hwny.org/ **Tug Hill Seaway:** http://www.ncnyhealthcompa

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• What are the needs in the community? • What services are being used to address the need?	**OASAS- County Planning System**	LGU, Various State Partners	* What are the primary and secondary substances at admission to the OASAS certified levels of care? * What does the NYSDUH data look like for my region? * What is the Local Government Plan for my county? * What was the historical trend of inpatient Substance Use Disorder Medicaid spending * What is the trend in opiate deaths? * Is my county providing evidence based Substance Use Disorder prevention? And if so, which prevention programs?	* Provides access to resources maintained by the three Behavioral Health disabilities		•2019 LSPs •Multiple links to OASAS, OMH and OPWDD data resources. OASAS inlcudes primary substance at admission by county of residence and service type,admissions by type and county, National Survey on Drug Use and Health, Expanded Behavioral Risk Factor Survelliance Survey Binge Drinking and Poor Mental Health, Opioid-Related Data, OASAS Trended Medicaid Recipient Profiles, OASAS Detailed Recipient Profiles, and Participants in OASAS Funded Preveniton Service Approaches. OMH provides links to data books, statistics and reports, the planning web site and the OMH County MH portal. OPWDD provides demographic and some enrollment data.	OMH, OASAS, OPWDD	https://cps.oasas.ny.gov/cps/
• What is the need in the community? • What services are being used to address the need? • What is the quality of services being delivered?	**CLMHD BH Portal/Tableau**	LGUs, State Partners	* How is my region performing on specific mental health performance indicactors for either adults or children? * How do the PSYCKES indicators trend over time? Are we improving? * How do you describe homelessness in my County * What are the admissions to SUD programs in my county by level of care? By primary diagnosis? * What is the Medicaid utilization of OMH services in my county or region? What was the inpatient census? * What enrollment information is OPWDD making available for my county? * What is the average detention population in my county? What is the length of stay?	* Provides views of services provided for individuals served by the Office of Mental Health with several tools for visualization	https://tableau.ccsi.org/#/signin?externalRedirect=%2Fviews%2FCLMHDLandingPage_2018%2FLandingPage%3FiframeSizedToWindow%3Dtrue%26:embed%3Dy%26:showAppBanner%3Dfalse%26:display_count%3Dno%26:showVizHome%3Dno&site=	Overall this is a tool to help the DCSs develop their annual LSPs and to identify service gaps. This portal includes many data sets including: PSYCKES, BH QARR indicators, OASAS Admissions, Estimated Need data, Use of Inpatient Care, Homeless Population data, Continuity of Care, Engagement in Care , Continuity of Medication data, County Health Rankings. This portal also includes links to other helpful data state agency data sets	Pulls from multiple data sets, including PSYCKES, CPS, Housing and Urban Development (HUD), and the Department of Criminal Justice Services.	Each RPC Team member will have access to this portal. A training will be held in early November on how to use this data set.
• What services are being used to address the need?	**Managed Care Companies**	MCOs/ Submit Data to State Agencies	* Which services are being denied by MCOs * What services are being provided to enrollees? *Is there adequate network coverage * What are the cost profiles for various cohorts?	*Can be used to understand the access to services and the services actually provided by MCOs	Various	Authorization and denial data for MH Services (OMH clinic, PROS, Partial Hospitalization, OMH Article 31 services)- SUD services (SUD OP clinics, OP Rehab, OASAS Article 28/32 OP clinic services) and HCBS services- MCOs also have access to PSYCKES and RHIO data as well. DOH manages this data.	Claims Based Data	

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• What services are being used to address the need?	**RHIO Data (May vary by RHIO)**	Active network participants (PH/behavioral health providers, MCOs, etc.) who have been granted access to the RHIO

Participants must sign a participation agreement (PA) With the RHIO

Participant can sign a PA with their local RHIO but can in fact sign a PA with any RHIO statewide - including more than one RHIO if beneficial

Need patient to consent to | * What diagnoses has an individual received?
* Has an individual been hospitalized recently i.e. last night?
* What is on the discharge summary such as linkages that were put in place
* Are there quality difference between providers or managed care organizations?
* Who are the individuals meeting high need criteria?
* Are particular providers serving more high-need individuals? | * Provides client specific data, regardless of payment source, on the services received. | Various | •Lab Reports
•Radiology reports and images
•Hospital d/c summaries
•Clinical Documents and Reports Admission, Discharge and Transfer (ADT) notifications
•ED Reports
•Patient Demographics
Free Services include:
Patient Record Lookup (PRL): Allows participants to retrieve individual patient records from across NYS after receiving patient consent.
Alerts (Clinical Event Notifications): Allows participants to receive real-time updates about patients (ex: patient enters or discharged from a hospital, subscribing provider can receive notification.)
Direct Secure Messaging: Similar to secure email, allows participants to send Protected Health Information to a known individual or organizational entity with a Direct Secure Message account.
Consent Management: Tracks/verifies patient consent to share & access records, per NYS/Federal law as well as other requirements defined by HIPAA.
Clinical Viewers: Allows participants to view | The RHIO's community health information exchange (HIE) contains patient information from major health care organizations, including hospital systems, reference labs, radiology centers, and payers in the local region. Through the RHIO providers can view, print, or forward clinical information from any participating health organization even if they did not order or get copied on a test or procedure. | Contact your regional RHIO to learn more please visit:

https://www.nyacp.org/i4a/pages/Index.cfm?pageID=3760 |
| • What services are being used to address the need? | **Medicaid Data Warehouse** | State Agencies | * How much Medicaid has been spent on a particular level of care during a particular time period?
* What is the breakdown of Medicaid payments on inpatient by age, race/ethnicity/gender by provider or county of residence | *For any county or region, by provider or person, how much was spend in inpatient, clinic, ACT, licensed residential etc. services last year, is it more than the year before, what is the trend? Are more persons being served? (note does it matter- the new OMH portal tracks FFS and encounter data)* | Internal to the State Agencies | Information captured on a claim form (ex: demographic info, diagnosis). | An internal resource at OMH and OASAS, some of this information is made available by the state agencies through the OMH data portal for example | N/A |
| • What services are being used to address the need? | **OASAS- LOCATDR** | Designed for substance use disorder treatment providers and referral sources working with individuals who experience substance use disorders | *What SUD level of care is appropriate for my client? | * Used to determine the appropriate level of SUD treatment | https://extapps.oasas.ny.gov. | Determines appropriate LOC for client- The data collected through the LOCADTR is analyzed to assess provider and system level performance, inform needs assessments, and inform the relationship between Level of Care determinations and client outcomes. All personal health information collected is protected and never re-disclosed. | LOCATDR- Data entered by the treating professionals | https://www.oasas.ny.gov/treatment/health/locadtr/documents/LOCADTRManual.pdf |

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• What services are being used to address the need? • What is the quality of services provided?	PSYCKES	•Providers with one or more OMH licensed programs or programs with OMH oversight • Providers with one or more OASAS licensed programs •DOH Health Home Programs and DOH Care Management Programs •Federally Qualified Health Centers •Medicaid Managed Care Organizations	* Search by individual, provider, MCO, gender etc. * What diagnoses are most prevalent in my area? * Who are the providers serving particular individuals? * Are individuals enrolled in a Health Home? * How do providers compare on various quality indicators * Does the individual meet high need criteria?	* Provides client specific data and summary data based on specified criteria for allowed users	https://psyckesmedicaid.omh.ny.gov/cleartrust/ct_logon.jsp?CTAuthMode=SECURID&language=en	Will vary depending on level of access: • A portfolio of quality indicator reports at the state, region, county, agency, site, program, and client level to review performance indicators. •Identify individuals who could benefit from clinical review, and inform treatment planning. •The information includes all adjudicated (paid) Medicaid FFS claims and encounter data for Medicaid managed care, including mental health and non-mental health services across treatment settings. •The application includes several sets of quality measures focused on utilization, care coordination, and medications. PSYCKES users are able to view aggregate quality data at the state, region, county, and provider level. •The Clinical Summary provides an overview of medications and services provided across all treatment settings. •Data is available on diagnoses, outpatient services, and hospital and emergency room admissions. • Data is available on pharmacy orders for both psychotropic and non-psychotropic medications, laboratory test orders, and dental and vision services. Users can drill down to the level of individual order or service claim.	•NYS Medicaid claims database: •NYS State Operated Psychiatric Center (PC) health information database: •Department of Health (DOH) Health Home and Care Management database: •OMH Child and Adult Integrated Reporting System (CAIRS) database •OMH Tracking for AOT Cases and Treatment (TACT) database. •New York State Incident Management and Reporting System (NIMRS) database:	https://www.omh.ny.gov/omhweb/psyckes_medicaid/about/
• What services are being used to address the need? • What is the quality of services being delivered?	National Council for Behavioral Health - Care Transitions Network Data Sets	Providers enrolled in Care Transitions Network can access this data	* Did we make progress on key clinical and financial indicators? * Are there opportunities, using data, to improve care and reduce re-hospitalizations for people with serious mental illness.	*Participants can use this resource to support improvments in quality and transition to value based payment	https://www.thenationalcouncil.org/care-transitions-network-people-serious-mental-illness/	All data sets are dervised from Medicaid claims data. Care Transitions Network provides enrolled organizations two main data reports: 1. Quarerly clinical quality performance on 13 clinical quality measures, populated into an online dashboard platform based on organization TIN and NPI 2. Medicaid financial/utilization reports that provide total cost of care for organization patient population, both within and outside of the organization, broken down by service line and inclusive of PMPM calculations and benchmark comparisons across similar providers	This data is all pulled from Medicaid claims	https://www.thenationalcouncil.org/care-transitions-network-people-serious-mental-illness/
• What services are being used to address the need? • What is the quality of services being delivered?	DSRIP/PPS	PPS and its partners/DOH	*How much revenue did the DSRIP distribute and to what providers? * How much was spent on the individual DSRIP projects? * What is the status of each project?	* Supports improvement in specified measures * Supports the transition to value based payments	Various - check each DSRIP PPS	•Access to the New York State Data analysis, reported on the New York State Medicaid Analytics Performance Portal (MAPP). These are predefined reports developed by NYS DOH. •Access to defined views of Medicaid claims data through Salient Interactive Miner (SIM), another tool made available to PPSs through NYS. •PPS can use data from Salient to identify opportunities for improving particular measures.	MAPP and Salient	May vary based on the PPS-Please outreach your local PPS to learn about the specific data they are collecting DSRIP Performance Data- https://www.health.ny.gov/health_care/medicaid/redesign/dsrip/performance_data/
• What services are being used to address the need? • What is the quality of services being delivered?	Salient	ACOs, DSRIP, DSS	* How is my regions doing with respect to DSRIP performance goals? * Who are the providers serving individuals who have had inpatient admissions? * Are individuals having outpatient visits after hospital discharge?	* Used for system monitoring * Used to identify specified cohorts	Various	Measures various performance and risk measures to help look at shared savings Help providers identify their natural networks. Measures and captures the PPS performance measures. Can provide data for agencies looking to contract with risk bearing contracts- See link for additional data workbooks broken down by RPC region (Examples: Hospital Inpatient Prevention Quality Indicators, Medicaid Inpatient Admissions and Emergency Room Visits)	DOH	https://www.health.ny.gov/health_care/medicaid/redesign/dsrip/performance_data/salient_performance_data.htm

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• What services are being used to address the need? • What is the quality of services being delivered?	**Medicaid Analytics Performance Portal (MAPP)**	MCOs, Health Homes, CMAs, DSRIP (LGU, SPOA, LDSS referral portal access)	* Is an individual enrolled in a health home? And if so, which one? * Has a health home referral been submitted for an individual? * Is an individual in outreach/engagement?	* Used for performance monitoring and tracking care for individuals	https://www.health.ny.gov/health_care/medicaid/program/medicaid_health_homes/mapp/index.htm	The Medicaid Analytics Performance Portal (MAPP) Health Home Tracking System (HHTS) is a performance management system that will provide tools to the Health Home network to support providing care management for the Health Home population. The HHTS is housed within MAPP, which also supports the Delivery System Reform Incentive Payment (DSRIP) program performance management technology needs.	Medicaid claims and encounter data	https://www.health.ny.gov/health_care/medicaid/program/medicaid_health_homes/mapp/index.htm