Integrated Program Monitoring and Evaluation System (IPMES)
IPMES

- IPMES provides OASAS, County/Local Governmental Units and providers with a management tool to monitor, evaluate and improve program performance.
- IPMES Reports are provided for all OASAS-certified treatment programs, funded and non-funded.
IPMES Evaluation Periods

IPMES is based on provider reported data for a 12-month evaluation period.

Evaluation Periods are as follows:

- January 1 – December 31 (Upstate, Nassau and Suffolk Counties programs)*
- July 1 – June 30 (NYC programs)
- April 1 – March 31 (OASAS Addiction Treatment Centers).

*Some Upstate, Nassau and Suffolk County programs may be funded on a NYC fiscal year; therefore, data is based on the NYC Evaluation Period.
IPMES Comparison Groups

- A Comparison Group is a set of programs with similar characteristics based on one or more of the following:
  - program service type
  - patient population served
  - provider’s administrative region
  - program’s geographic location
  - funding status
  - treatment cycle.

- Comparison Group statistics are provided to compare the program’s performance to that of similar programs.

- A comparison group’s 25\textsuperscript{th} percentile value (where no minimum standard may exist) on the IPMES Report is based on the data reported by all of the programs within that group for the evaluation period. These values will fluctuate from year to year.
Flagging on IPMES

The OASAS Integrated Program Monitoring and Evaluation System (IPMES) is designed to monitor treatment program performance and identify areas in which programs appear to be operating below expectations compared to minimum standards and that of similar programs. It applies to both funded and non-funded OASAS-certified treatment programs.

When a program is flagged on IPMES, programs are required to enter a Program Action Report (PAR) into the online IPMES/Workscope system (WPR). The PAR indicates why a program has been flagged, whether the flagging is actually reflective of program problems, and the steps, if any, the program must take to rectify any problems identified.

For more detailed information on both IPMES and Workscopes, please refer to the IPMES/Workscopes User’s Manual, 18th Edition, revised April 2015.
Flagging

- Programs are automatically “Flagged on IPMES” if any PAS-48N Monthly Service Delivery reports (MSDs) are missing for the evaluation period.

  OR

- a non-Crisis program is “Flagged on IPMES” if performance on three or more indices are below the established or “fixed” minimum standard (or below the 25th percentile where no established minimum standard exists).
- a Crisis program is “Flagged on IPMES” if the performance of one or more indices are below the established minimum standard (or below the 25th percentile where no established minimum standard exists).
- Non-crisis programs that have one or two deficiencies are “Not Flagged on IPMES” but still need to respond with an explanation and corrective action.
- Programs are not flagged during their first year of operation.
Demonstration Indices

• are not flagged;
• are tested over a period of one or more years before the decision is made whether or not to make the index a permanent part of IPMES;
• may or may not become permanent IPMES performance indices as determined by the Measures Development Committee, based on analysis of data;
• must be ‘meaningful and manageable’.
IPMES Deficiencies: PARs and DRRs

- Program Action Report (PAR)
  - programs that are flagged on IPMES are now required to do a PAR online. PARs are automatically created based on the IPMES Report performance.

- Deficiency Response Report (DRR)
  - programs are required to submit a DRR even if not “Flagged on IPMES” (i.e., if a non-crisis program falls below the minimum standard on one or two indices).

See PAR Guidelines for instructions on submitting PARs.
Accessing IPMES/Workscope

• In order to gain access to the IPMES/Workscope System, you must first fill out the OASAS External User Access Request Form (IRM-15) and request Workscope Objective Attainment – data entry.

• Once the Provider Help Desk establishes account and permissions, you will be able to login to the IPMES/Workscope system at:
  https://apps.oasas.ny.gov/portal/page/portal/OASAS_APPS/Home
Click Login

OASAS Systems are unavailable Tuesdays from 7 a.m. to 8 a.m. for routine maintenance.
Read the User Agreement, then enter your user name and password, then click “Login”.

Unauthorized use of this site is prohibited and may subject you to civil and criminal prosecution. Use of, or access to, the Site shall constitute acceptance of, and agreement to be bound by, the terms referenced below. If you do not wish to be bound by these terms, do not access the Site.

User Agreement:

- I agree to access and use this site solely in accordance with my normal course of business and in connection with the purpose for which my access has been approved.
- I agree to employ reasonable security practices (e.g., periodic changing protected passwords, log off when not in use, not sharing my access password, etc.), as needed.
- I agree to abide by all federal and state laws and regulations in the use of this site, including as applicable, Title 42 of the Code of Federal Regulations, 42 CFR Part 2, the Health Insurance Portability and Accountability Act of 1996 (HIPAA) 45 CFR Pts. 160 and 164, the Federal Driver’s Privacy Protection Act (DPPA), 18 USC § 2721; and the NYS Information Security Breach and Notification Act, Chapter 442 and 491 of the Laws of 2005, codified in § 200 of the State Technology Law (STL) and § 899-as of the General Business Law (GBL).
- I acknowledge that some of the information which may come into my possession or knowledge in connection with my use may be confidential or proprietary information.
  - I agree to comply with all requirements set forth within the aforementioned sections of law governing the use and redisclosure of information obtained through my access to OASAS systems.
  - I also agree that I will not share with any unauthorized person information obtained from these systems.
- I recognize that noncompliance with this user agreement will result in a termination of access and may subject me to civil and/or criminal penalties.

Enter your user name and password to login

User Name:
Password:

Login  Cancel

Forgot Password for non-OASAS external users ONLY
Office of Alcoholism and Substance Abuse Services, New York State. All Rights Reserved

OASAS Applications
Login

New York State
Office of Alcoholism & Substance Abuse Services
Addiction Services for Prevention, Treatment, Recovery

OASAS
Improving Lives.
In order to have the ability to run an IPMES Report, users must disable pop-up blockers and use a compatible internet browser: Internet Explorer 8 or 9, 10 (in compatibility mode) or Mozilla Firefox.
Running the IPMES Report

Leaving the ‘Program’ box empty will result in the generation of an IPMES Report for each program operated by this provider. If you want to run the report for only one program, fill in the Program number.

Select the Evaluation Period you wish to run. Evaluation Period is based on the fiscal year your program is on (NYC, Calendar Year (usually upstate), or OASAS ATCs). Selecting an invalid period will result in no data being displayed.

Note: Leaving the ‘Exclude Formula Details’ box unchecked, will result in the generation of supporting documentation (formulas and notes) for each program.

Click Run (either button)
IPMES Report

There are five report sections within the IPMES Report:

1. The Cover Sheet
2. IPMES Program Performance Report
3. IPMES Demographic Impact Measures
4. IPMES Performance Profile
5. IPMES Demographic Indices
“No” means that formula details will not be excluded and will be displayed at the end of the reports.

IPMES Reports are based on data as of the date the data are extracted, not the date the report is run.

The IPMES Report will show both the Evaluation (or fiscal) period and the date the data was “frozen” for extraction.

OASAS generally allows providers additional time to complete reports or correct data through the end of the Evaluation period.

If IPMES reports for all of the provider’s programs are produced, each program will be listed on the cover sheet.

Evaluation Period

New York State Office of Alcoholism and Substance Abuse Services
IPMES Report
Calendar Year 2013 IPMES Performance as of 03/03/2014

Report Options
Provider: 
Program(s): 
Evaluation Period: Calendar Year 2013
Exclude Formulas: No

“No” means that formula details will not be excluded and will be displayed at the end of the reports.
The program was noted as deficient on just one index (Client/Direct Care Staff Ratio) so the note “Not flagged on IPMES” is shown by default. The program must still provide an explanation and correct action, called a Deficiency Response Report (DRR). DRRs are not subject to the County and OASAS approval process.
IPMES Program Performance Report
Flagged for Missing MSD(s)

<table>
<thead>
<tr>
<th>Provider: 12345 - Sample Provider</th>
<th>Program Manager: B</th>
</tr>
</thead>
<tbody>
<tr>
<td>Program: 6789 - Sample Program</td>
<td>County of Location:</td>
</tr>
<tr>
<td>Comparison Group: Intns Res - Woman</td>
<td>Anytown, NY</td>
</tr>
<tr>
<td>Program Type: Residential Services</td>
<td>Average Monthly Capacity: 178</td>
</tr>
<tr>
<td>Service: Intensive Residential</td>
<td>Average Daily Census: 90.21</td>
</tr>
<tr>
<td>Program Code: 3560 - Intensive Residential</td>
<td></td>
</tr>
</tbody>
</table>

**Flagged on IPMES**
**Flagged for missing MSD(s)**

<table>
<thead>
<tr>
<th>Index</th>
<th>Below Std</th>
<th>Performance</th>
<th>Minimum Standard</th>
<th>25th Percentile</th>
<th>40th Percentile</th>
<th>Median</th>
<th>75th Percentile</th>
<th>Target</th>
</tr>
</thead>
<tbody>
<tr>
<td>Utilization Rate</td>
<td>[X]</td>
<td>51</td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td>90</td>
</tr>
<tr>
<td>% of Targeted Units of Service Delivered</td>
<td>NF</td>
<td>62</td>
<td>[8]</td>
<td></td>
<td></td>
<td></td>
<td></td>
<td>90.750</td>
</tr>
<tr>
<td>Units of Service per FTE Direct Care Staff</td>
<td>[ ]</td>
<td>3,823</td>
<td>[1.7]</td>
<td></td>
<td></td>
<td></td>
<td></td>
<td>1,300</td>
</tr>
<tr>
<td>Client/Direct Care Staff Ratio</td>
<td>[ ]</td>
<td>9.60</td>
<td>D1</td>
<td></td>
<td></td>
<td></td>
<td></td>
<td>622</td>
</tr>
<tr>
<td>Discontinued Use (%)</td>
<td>[ ]</td>
<td>92</td>
<td>7</td>
<td></td>
<td></td>
<td></td>
<td></td>
<td>85</td>
</tr>
<tr>
<td>1 Month Retention Rate (%)</td>
<td>[ ]</td>
<td>90</td>
<td>7</td>
<td></td>
<td></td>
<td></td>
<td></td>
<td>90</td>
</tr>
<tr>
<td>3 Month Retention Rate (%)</td>
<td>[ ]</td>
<td>87</td>
<td>7</td>
<td></td>
<td></td>
<td></td>
<td></td>
<td>90</td>
</tr>
<tr>
<td>6 Month Retention Rate (%)</td>
<td>[ ]</td>
<td>80</td>
<td>6</td>
<td></td>
<td></td>
<td></td>
<td></td>
<td>60</td>
</tr>
<tr>
<td>1 Year Retention Rate (%)</td>
<td>[ ]</td>
<td>74</td>
<td>3</td>
<td></td>
<td></td>
<td></td>
<td></td>
<td>45</td>
</tr>
<tr>
<td>% Completing Program or Referred</td>
<td>[ ]</td>
<td>76</td>
<td>4</td>
<td></td>
<td></td>
<td></td>
<td></td>
<td>50</td>
</tr>
<tr>
<td>% Program Completers Admitted to Ambulatory</td>
<td>[ ]</td>
<td>62</td>
<td>3</td>
<td></td>
<td></td>
<td></td>
<td></td>
<td>45</td>
</tr>
<tr>
<td>% Reduction in 6-Month Arrests (Demo)</td>
<td>NF</td>
<td>96</td>
<td>[9]</td>
<td></td>
<td></td>
<td></td>
<td></td>
<td>95</td>
</tr>
<tr>
<td>Counseling Sessions per FTE Counselor per Week (Demo)</td>
<td>NF</td>
<td>7 [1]</td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td>11</td>
</tr>
<tr>
<td>Patient to Primary Counselor Ratio (Demo)</td>
<td>NF</td>
<td>20</td>
<td>[1]</td>
<td></td>
<td></td>
<td></td>
<td></td>
<td>10</td>
</tr>
</tbody>
</table>

This program was **"Flagged on IPMES"** for missing one or more Monthly Service Delivery reports (MSDs). The program was noted as deficient on just one performance index (Utilization Rate). However, missing an MSD may be indicative of missing admissions and discharge data, and causes all other scores to be suspect, resulting in the program being **Flagged on IPMES automatically**.
This non-Crisis program was deficient on three or more IPMES indices ([marked [X]]), so "Flagged on IPMES" is displayed. Had the program been deficient on fewer than 3 IPMES indices, "Not Flagged on IPMES" would be displayed.

Both Flagged on IPMES and Not Flagged on IPMES but deficient create a need for explanation and corrective action.

<table>
<thead>
<tr>
<th>Index</th>
<th>Below Std.</th>
<th>Performance</th>
<th>Minimum Standard</th>
<th>25th Percentile</th>
<th>40th Percentile</th>
<th>Median</th>
<th>75th Percentile</th>
<th>Target</th>
</tr>
</thead>
<tbody>
<tr>
<td>Targeted Units of Service Delivered</td>
<td>NF</td>
<td>*</td>
<td>[81]</td>
<td>81</td>
<td>88</td>
<td>89</td>
<td>98</td>
<td>--</td>
</tr>
<tr>
<td>UOS per FTE Direct Care Staff</td>
<td>NF</td>
<td>1,890</td>
<td>1,000</td>
<td>1,308</td>
<td>1,467</td>
<td>1,626</td>
<td>1,968</td>
<td>NA</td>
</tr>
<tr>
<td>Client to Direct Care Staff Ratio</td>
<td>[X]</td>
<td>17.09</td>
<td>DNA</td>
<td>17.73</td>
<td>19.93</td>
<td>21.09</td>
<td>25.19</td>
<td>NA</td>
</tr>
<tr>
<td>% Discontinued Use</td>
<td>[X]</td>
<td>49</td>
<td>25</td>
<td>52</td>
<td>57</td>
<td>60</td>
<td>69</td>
<td>NA</td>
</tr>
<tr>
<td>% Maintained or Improved Employment Status</td>
<td>[X]</td>
<td>34</td>
<td>35</td>
<td>35</td>
<td>44</td>
<td>46</td>
<td>57</td>
<td>NA</td>
</tr>
<tr>
<td>1-Month Retention Rate (%)</td>
<td>[X]</td>
<td>79</td>
<td>75</td>
<td>72</td>
<td>75</td>
<td>77</td>
<td>81</td>
<td>NA</td>
</tr>
<tr>
<td>3-Month Retention Rate (%)</td>
<td>[X]</td>
<td>89</td>
<td>65</td>
<td>65</td>
<td>68</td>
<td>69</td>
<td>74</td>
<td>NA</td>
</tr>
<tr>
<td>6-Month Retention Rate (%)</td>
<td>[X]</td>
<td>39</td>
<td>40</td>
<td>44</td>
<td>48</td>
<td>50</td>
<td>57</td>
<td>NA</td>
</tr>
<tr>
<td>% Completing Program or Referred</td>
<td>[X]</td>
<td>47</td>
<td>35</td>
<td>36</td>
<td>40</td>
<td>42</td>
<td>50</td>
<td>NA</td>
</tr>
<tr>
<td>Indiv &amp; Group Crisis Sessions/FTE Counselor/Week (Demo)</td>
<td>NF</td>
<td>18</td>
<td>[10]</td>
<td>10</td>
<td>12</td>
<td>13</td>
<td>16</td>
<td>NA</td>
</tr>
<tr>
<td>Group to Individual Counseling Ratio (Demo)</td>
<td>NF</td>
<td>6.1</td>
<td>[1.4]</td>
<td>1.4</td>
<td>1.8</td>
<td>2.2</td>
<td>4.5</td>
<td>NA</td>
</tr>
<tr>
<td>Patient to Primary Counselor Ratio (Demo)</td>
<td>NF</td>
<td>33</td>
<td>[20]</td>
<td>20</td>
<td>24</td>
<td>25</td>
<td>30</td>
<td>NA</td>
</tr>
</tbody>
</table>
## Demographic Performance Impact Measures

### Average Client Dysfunction

<table>
<thead>
<tr>
<th></th>
<th>This Program</th>
<th>Minimum Standard</th>
<th>Lowest</th>
<th>25th Percentile</th>
<th>50th Percentile</th>
<th>75th Percentile</th>
<th>Highest</th>
</tr>
</thead>
<tbody>
<tr>
<td></td>
<td>2.8</td>
<td>DNA*</td>
<td>2.5</td>
<td>3.1</td>
<td>3.3</td>
<td>4.2</td>
<td>5.3</td>
</tr>
</tbody>
</table>

### Evaluation Period

<table>
<thead>
<tr>
<th></th>
<th>04-05</th>
<th>05-06</th>
<th>06-07</th>
<th>07-08</th>
<th>08-09</th>
<th>09-10</th>
</tr>
</thead>
<tbody>
<tr>
<td>This Program (Line)</td>
<td>2.4</td>
<td>2.2</td>
<td>2.1</td>
<td>2.3</td>
<td>2.9</td>
<td>2.8</td>
</tr>
<tr>
<td>Comp Group Median (Bars)</td>
<td>3.2</td>
<td>2.9</td>
<td>3.3</td>
<td>3.6</td>
<td>3.6</td>
<td>3.3</td>
</tr>
</tbody>
</table>

* DNA = Does Not Apply

6 years of data shown (for a NYC Evaluation Period program)
6 years of data shown (for a NYC Evaluation Period program)

This graph indicates the program was deficient on 1-Month Retention Rate. The graphs indicate “Flagged” when an index is deficient; however, the program may only be required to do a Deficiency Response (in this case the IPMES Report would indicate “Not Flagged on IPMES.”)

The program’s performance over the 6-year period stayed slightly below the 25th percentile, except for 2007-08.
IPMES Demographic Indices

Current report year data

This graph would indicate that this program’s population overall had a higher Criminal Justice involvement than others in its comparison group, while slightly dropping over a 6-year period.
Formula Details

At the end of each IPMES Report is a listing of each mandatory objective for the comparison group and the formula, numerator, denominator and additional notes/explanation of the calculations.

**Index: Targeted Units of Service Delivered**

**Formula:** \(100 \times \text{(Visits delivered / Visits targeted to be delivered)}\)

**Numerator Source:** PAS-48N (Visits)

**Denominator Source:** Program's targeted Units of Service (based on Visits) as entered in Workscope/Program Action Report (WPR) system.

**Notes:** 1. UOS = (Total Brief Assessment Services/2) + Total Normative Assessment Services + Total Extended Assessment Services + Treatment Visits less than 30 minutes + Treatment Visits 30-59 minutes + Treatment Visits Treatment 60-119 minutes + Treatment Visits 120-179 minutes + Treatment Visits 180 minutes or longer + (Medication Administration & Observation Services/6)/Previous Note Expired 2011 - Visits Delivered = (Assessment Visits) + (Brief Visits/2) + (Medication Only Visits/6) + (30 Min to <2 Hr Visits) + (2 Hr to <4 Hr Visits) + (4 Hr or Longer Visits) 2. Medication Only Visits: applies to Methadone Outpatient programs only 3. Includes Primary Clients and Significant Others

**Index: UOS per FTE Direct Care Staff**

**Formula:** \(\frac{(\text{Sum of the monthly Units of Service delivered} \times 12 \text{ months/3 months})}{(\text{Sum of the monthly end of month primary counselor FTEs on payroll} + \text{Sum of the monthly end of month non-primary counselor FTEs on payroll} + \text{Sum of the monthly other direct care FTEs on payroll})/3 \text{ months}}\)

**Numerator Source:** PAS-48N (Visits)

**Denominator Source:** PAS-48N (Visits)

**Notes:** 1. Other Direct Care staff includes Qualified Health Professionals as well as other staff who provide direct clinical services but are not primary counselors. Administrative and support staff are not direct care staff 2. Includes Primary Clients and Significant Others
More Helpful Information

Please refer to these other helpful guides posted after logging in at:

https://apps.oasas.ny.gov/portal/page/portal/OASAS_APPS/Home
# Who Should You Call?

<table>
<thead>
<tr>
<th>Issue</th>
<th>Contact Information</th>
</tr>
</thead>
</table>
| Interpreting IPMES, Workscope/Program Action Reports (WPR), Client Data System (CDS), Inquiry Reports, Monthly Service Delivery (MSD) | Treatment Data Management and Analysis Unit  
DataMgmt@OASAS.ny.gov  
Or (518) 457-9555 |
| Technical assistance with computer navigation in CDS, MSD, Provider Directory System (PDS) | Provider Help Desk  
(518) 485-2379 |
| Glitches or errors in OASAS applications                              | Provider Help Desk  
(518) 485-2379 |
| Questions about implications of performance or corrective action steps | Your OASAS Program Manager |
| Contact Information in the PDS Directory System or questions about Program Profile and Service Inventory (PPSI) | Treatment Data Management and Analysis Unit  
DataMgmt@OASAS.ny.gov  
Or (518) 457-9555 |