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VNSNY TODAY

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Tony Dawson Talks Quality Improvement and How Simple Changes Can Have a Big Impact
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VNSNY CHOICE's managed long-term Medicaid plan, CHOICE MLTC, also earned four stars in the annual ratings, which are calculated by the New York State Department of Health (DOH) based on statewide comparisons that take into account the plans' own quality and outcomes data along with DOH survey information, including Member Satisfaction ratings.

"Given that most plans offered in New York City received three stars, we're proud of how all three plans are performing," notes Dr. Hany Abdelaal, President of VNSNY CHOICE. "I would also add that our fourth product, the CHOICE SelectHealth Special Needs Plan for HIV-positive individuals—which is not part of the Stars ratings system— has one of New York's best records for viral load suppression."

Dr. Abdelaal credits the strong quality scores in part to CHOICE's retooling of its operations over the past two years, which has included an upgrading of its authorization and provider support processes as well as the expansion of its Member Call Center. "We've been very focused on ensuring that all our groups are functioning smoothly and that we have consistently good communication with our providers and members," he says. "These most recent quality ratings are the result of a great ongoing team effort, in which the plan member always comes first."

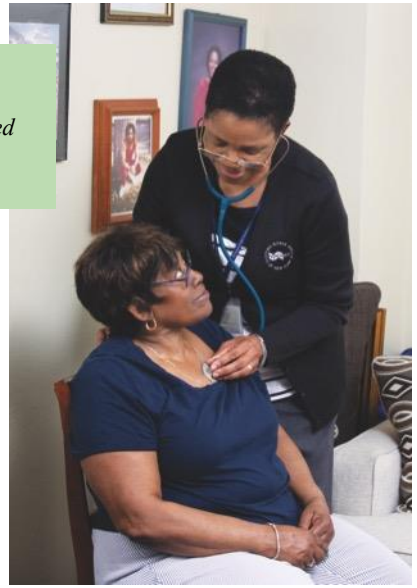
VNSNY Launches New Care Management Organization

With new CMO, VNSNY takes a major step toward reducing ER and hospital visits for high-risk populations

VNSNY has added a new business unit—a Care Management Organization (CMO) that will work with insurers to provide their high-risk members with enhanced care management services in a home-based setting. Following approval from the New York State Department of Health, the new program officially launched on May 6th.

All contracts with insurers will be value-based, with the CMO's reimbursement rates hinging on its ability to keep plan members' hospitalization rates low and meet other quality metrics. The new business unit is currently contracted with VNSNY CHOICE Health Plans to manage members of its two integrated Medicare-Medicaid plans, CHOICE Total and CHOICE FIDA Complete. "We've already enrolled a substantial number of CHOICE members in the short time our CMO has been operational, and we're actively exploring arrangements with other integrated Medicare-Medicaid plans in our service area as well," says Rose Madden-Baer, VNSNY's Senior Vice President for Population Health and Clinical Support Services.

To be eligible for the CMO, plan members must be identified as having at least seven common comorbidities, such as congestive heart failure, COPD, diabetes and hypertension. Those found to qualify through a review of their records will receive enhanced support from the CMO team for 12 months and then be reevaluated. In addition, the CMO will target a smaller group of members to receive post-acute care management for a period of 60 days following discharge from the hospital.



VNSNY's new Care Management Organization provides high-risk health plan members with enhanced services aimed at preventing hospitalizations.

Both groups will have access to a wide range of CMO services, including an initial assessment by a visiting nurse; ongoing support services such as medication reviews, telephone check-ins and "virtual visits" as well as remote monitoring; referrals for in-home behavioral health and other skilled services as well as community-based supportive services as needed; and home visits by a nurse practitioner if an urgent health issue arises. Members suffering from advanced disease processes may also be referred to the CMO's Advanced Illness Management (AIM) program [see Advanced Illness article, page 6].

"Our new CMO structure integrates all the different population health capabilities that VNSNY has been developing over the past several years," says Madden-Baer. "We're offering insurers what they need most—a cost-effective way of keeping their high-risk plan members out of the ER and the hospital, by bringing a full menu of care management services directly into the member's home."

An Interview with VNSNY's New VP For Quality and Customer Experience

Tony Dawson Talks Quality Improvement and How Simple Changes Can Have a Big Impact

Tony Dawson, RN, MSN, joined VNSNY in early May. Most recently, Dawson served as Chief Clinical and Chief Operating Officer for Surgical Solutions, a surgical support company. He previously spent 17 years at New York–Presbyterian Hospital in a variety of leadership positions, including quality and patient safety.

Let's start with the quality side of your job. What do you see as VNSNY's key challenges and opportunities in this area?

My passion is both quality assurance and performance improvement. I'm fascinated with performance improvement—the idea of continually evaluating and refining what we're doing and making it better. There is an enormous amount of work on this going on right now across VNSNY. I think we have an excellent opportunity to integrate these improvement efforts so that everyone at VNSNY is speaking the same language in terms of performance improvement methodology and metrics—including how we measure improvements and, more importantly, how do we sustain those improvements over time.

What are the key differences between home care and the hospitals where you've worked?

The big difference is that VNSNY's staff works in a much less controlled environment than a hospital setting. A big part of our job here is to provide the appropriate tools and training to help staff succeed in the home care setting. Our biggest focus always has to be on the health of our patients, and keeping them home and out of the hospital as much as we can. We also have to understand our customers' needs—the hospitals who refer to us, as well as the physicians, skilled nursing facilities and LHCSAs that we work with. Hospitals want patients discharged faster and they don't want them readmitted or back in their emergency room two days later. So, we need to constantly strive to support them in those efforts.

Is it fair to say that today's home care organizations function more like hospitals in this regard?

Absolutely. Patients are being discharged from the hospital sooner and are coming home with complex medical and surgical needs. Complicated issues that were once treated only in the hospital are now being treated in the home. So again, we need to give our staff the tools they need to do provide exceptional care at home. Emerging technologies are going to have a huge impact in this regard, including advances in remote patient monitoring and the use of virtual visits.

Shifting to patient experience, what are your goals there?

I've learned from past experience that relatively simple things can have a huge impact on patient satisfaction—such as being consistent in how we communicate with our patients and members and how we strive to deliver exceptional service at all times, both in person and on the phone. This also applies to how we interact with our own colleagues here at VNSNY. So, we'll be doing a lot of work on improving patient satisfaction, customer experience and customer service.

Among other things, you're an expert in the lean six-sigma method for improving healthcare systems. Will you be applying these skills at VNSNY?

Six-sigma projects can be very involved, and I don't believe you need that approach for every single project. What we need is a process for getting where we want to go—for measuring and analyzing what we're doing, and then figuring out how we improve it. There's lots of great work going on at VNSNY with extraordinary staff and inherent organizational commitment. We need to continue that work and keep the momentum going. If we can give our patients an amazing experience while also enabling them to live independently and safely at home, then we'll be right where we want to be.

VNSNY CHOICE MLTC Gains Over 5,300 New Plan Members

Spring is a time for growth, and on April 1st, VNSNY CHOICE's Managed Long Term Care (MLTC) plan did just that, enrolling 5,359 new members—all of them former enrollees in the MLTC plan administered by Independence Care System (ICS). The shift occurred as ICS exited the managed long-term care marketplace to focus on providing care management services to Medicaid recipients with disabilities.

While they had several MLTC options to choose from, most ICS MLTC members elected to move their coverage to VNSNY CHOICE MLTC. Of this group, the large majority were automatically enrolled in CHOICE on the day that the ICS plan ended, reflecting the New York State Department of Health's designation of CHOICE MLTC as the default option for former ICS MLTC members.

With this enrollment jump, VNSNY CHOICE MLTC's total membership now stands at over 18,000, making it the third-largest MLTC plan—and the largest not-for-profit MLTC—in New York. "This is a milestone for us in terms of both growth and visibility," says Dr. Hany Abdelaal, President of VNSNY CHOICE. "Being selected by DOH is a real vote of confidence in our ability to support the managed long-term care needs of these former ICS members."

"The transition of ICS members to CHOICE has gone very smoothly, thanks to everyone's hard work preparing for the shift," notes VNSNY CHOICE Senior Vice President Lori Ferguson. These preparations included bringing over 125 former ICS network providers into the CHOICE MLTC network. "With these remaining ICS providers now on board, all former ICS members are assured full continuity of care," adds Ferguson.

On April 1st, 5,359 new members transitioned seamlessly to VNSNY CHOICE MLTC from the former Independence Care System MLTC plan. With these new enrollees, CHOICE now has New York's third-largest MLTC plan. Above*: A VNSNY CHOICE MLTC member.*

To support its expanded membership, VNSNY CHOICE has hired 80 new employees, including nearly 20 former ICS staffers. ICS's new care management business has also been contracted to help coordinate the care of members with disabilities who have transitioned to CHOICE MLTC. "We're excited to be working with ICS in their new capacity," says Ferguson. "It's one more way we're ensuring that there are no gaps in care for any ICS members who made the switch to CHOICE."

VNSNY's Care Management Program for Advanced Illness Earns Accolade from CMS

When April Feld, Director of Population Health Management at VNSNY, made a presentation on VNSNY's Advanced Illness Management (AIM) program at the Home Care Association of New York State's annual conference last month, she wasn't expecting the VNSNY Population Health team to receive an award from the Centers for Medicare and Medicaid Services (CMS). Yet that's exactly what happened.

"Following the panel, I was approached by Dennis Wagner, Director of CMS's Quality Improvement and Innovation Group, who had delivered the keynote address for our session," recalls Feld. After congratulating VNSNY on its AIM initiative, Wagner handed Feld a Quality Improvement and Innovation Group Challenge Coin, an award given by CMS to exceptionally innovative healthcare programs.

"The award is clearly an honor," says Rose Madden-Baer, who heads VNSNY's Population Health division. "But more importantly, it's additional confirmation that our AIM model works." Too often, adds Madden-Baer, individuals who are approaching the end of life but haven't yet entered hospice care find themselves experiencing one medical crisis after another. "This results in frequent hospitalizations that negatively impact their quality of life while doing little to improve their overall health status," she explains.

To better address the needs of this population, VNSNY's newly launched Care Management arm [see CMO Launch article on p. 3] is collaborating with VNSNY CHOICE Health Plans and VNSNY Home Care to implement the AIM program. Using specialized algorithms, the AIM team regularly reviews VNSNY's medical records to identify those patients and plan members with the highest mortality risk. The team then uses evidence-based care management interventions to manage the symptoms and challenges for these individuals more proactively and, where appropriate, will initiate conversations with the patients, their families and their medical providers about shifting to end-of-life hospice care.

April Feld, VNSNY's Director of Population Health Management, displays the CMS Quality Improvement and Innovation Group Challenge Coin. CMS awarded the coin to VNSNY for its innovative approach to caring for individuals with advanced illness.

"The goals of AIM are to ensure that these very ill patients and plan members receive the right level of care, while also 'normalizing' discussions around end-of-life planning," says Madden-Baer. Although AIM works with people at an especially vulnerable time in their lives, she adds, "The positive comments we're hearing reflect the high level of empathy and effective support that AIM participants and their family members are experiencing."

At the same time, she notes, "From a quality and cost perspective, this innovative model is helping our partnering providers and insurers successfully implement their value-based care models and achieve their performance goals. In other words, this approach not only supports our very ill patients and members, but is also beneficial for our customers and partners involved in their care."

VNSNY Researcher Receives NYS Home Care Association's Top Award

VNSNY nurses, home health aide and Population Health head are also honored by area institutions

Earlier this spring, the Home Care Association of New York State (HCA-NYS) presented Penny Feldman, PhD, director emerita of the VNSNY Center for Home Care Policy & Research, with its highest accolade—the Ruth F. Wilson Award, given to an individual whose work has had a dramatic effect on the field of home care.

"This award reflects Penny's ground-breaking career as a home care researcher and policy advocate. We're pleased and excited to have her contributions recognized by such an outstanding organization," says Marki Flannery, VNSNY's President and CEO.

During her two decades as the head of VNSNY's Research Center, Dr. Feldman, who helped launch the Center in 1993, pioneered the use of data analytics and quality measures in home health care; designed and tested numerous interventions to improve home care delivery and outcomes; and worked with government officials at the state and national level to enhance the quality and scope of home and community-based health care.

HCA-NYS also honored VNSNY home health aide Geraldine Singleton with a Caring Award. Singleton, who has served as a Partners in Care HHA for over three decades, received the award for a career that exemplifies empathetic home care.

In addition, the Federation of Nurses chapter of the United Federation of Teachers (UFT) singled out VNSNY nurses Nicola Toney, Shawne Browne-Delaney and Ruth Caballero at its annual Nurse Recognition Day ceremony for their contributions to the nursing profession.

Penny Feldman

And finally, Rose Madden-Baer, VNSNY's Senior Vice President for Population Health and Clinical Support Services, was selected as one of this year's recipients of the United Hospital Fund (UHF) 2019 Excellence in Health Care Award for outstanding achievement in quality improvement. In naming Madden-Baer as one of their 2019 award winners, the UHF cited her work coordinating VNSNY's shift to value-based care, as well as her leadership in reducing hospitalizations and costs related to heart failure patients as part of VNSNY's participation in Medicare's 90-Day Bundled Payments initiative.

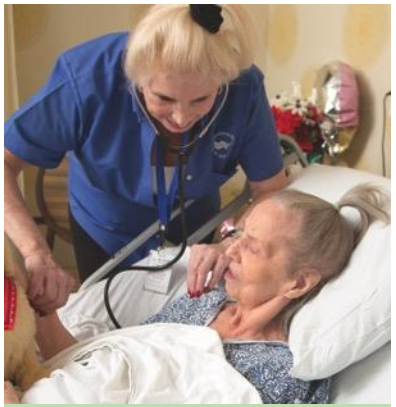
VNSNY Hospice Continues to Expand Its New York City Presence

VNSNY Hospice and Palliative Care is continuing to see steady growth in its home-based hospice services across New York City's five boroughs. Earlier this spring, the hospice program's average monthly patient census surpassed 1,300 for the first time, recording all-time highs in both April and May. To care for this expanding population, VNSNY Hospice has added 32 new staff members since the start of the year.

"To a large degree, our growth trajectory is the direct result of our successful ongoing efforts to educate New York-area healthcare providers and community members about the immense benefits that hospice offers people at the end of life, in terms of both quality of life and their ability to stay connected with their loved ones," says Rosemary Baughn, Senior Vice President, VNSNY Hospice. Baughn also credits VNSNY Hospice's increased outreach to nursing homes and assisted living facilities.

In another sign of its robust New York City presence, VNSNY Hospice has made VNSNY's services available to patients from Compassionate Care Hospice's Brooklyn and Bronx offices, which are closing on June 30. "We're gratified to be able to assist during this process," notes Baughn.

In other developments, VNSNY Hospice recently became accredited by the National Institute for Jewish Hospice (NIJH). "We'll be using the training tools provided by the NIJH to educate our staff on cultural sensitivity as it relates to Jewish law," says Baughn. "This will help ensure that our hospice teams are providing the highest level of care for our Jewish patients and their families."



With more patients in its care than ever before, VNSNY Hospice has added over 30 new staff members since the start of the year.

$2.2M Grant Helps Improve the Ability of Partners in Care HHAs to Monitor Their Clients' Health

Partners in Care, VNSNY's licensed home care services agency, has been awarded a $2.2 million grant from the New York State Dormitory Authority and Department of Health to develop and implement new technologies for the agency's home health aides (HHAs) and nurses. One key focus of the grant is the rollout of Sandata Mobile Connect, an app for smartphone and tablet that improves the ability of HHAs to monitor their clients' health.

"In today's home care environment, HHAs play an essential role in keeping people stable and healthy in their homes," says Jennifer Brullo, Senior Vice President and head of Partners in Care. "The Mobile Connect app helps enhance the pathways for our aides to communicate their observations."

An updated version of a mobile visit verification app that Partners in Care piloted several years ago, Mobile Connect contains several important added features, such as the ability to send a digital alert if an HHA observes a significant change in their client's health status. Other new features include a plan of care summary that lets HHAs see which client-related tasks need to be done when; customized checklists of diagnosis-specific health questions that HHAs can use to monitor their clients' signs and symptoms; and a decision support tool that enables HHAs to access workflows and health information.

An updated smartphone app lets Partners in Care HHAs send a digital alert if they observe a significant change in a client's health status.

The grant funding will support other technological upgrades as well. "We're working to create risk algorithms that will help us manage our value-based purchasing contracts and improve patient outcomes, and we're adding risk stratification and clinical pathway functions to Point of Care, our nurses' clinical support tool," Brullo notes. "The grant will also help fund technology training for our HHAs. In the near future, we want 100 percent of our HHAs to be using the Mobile Connect app. This grant is going to be extremely helpful in getting us where we want to be."