Partners in Care Rolls Out Online Certification for New Home Health Aides

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“Because ESPRIT’s nurse practitioners are licensed to prescribe medications and lab tests, it always had a unique role,” VNSNY’s Vice President of ESPRIT, Scott Boles, said. “Now that role is taking on increased importance.”

“We’re expanding ESPRIT’s operations in several areas,” he said. “VNSNY’s Vice President for Clinical Strategy and Development, Jon Nicoll, who is overseeing the expansion of the new CMO, said that ESPRIT’s operations will be integrated into a new CMO,” he said. “In addition, Jon Nicoll, who manages the CMO and ESPRIT’s operations together with VNSNY’s new EVP for Clinical Strategy and Development, Jon Nicoll, who is overseeing the expansion of the new CMO, said that ESPRIT’s operations will be integrated into a new CMO.”

An Interview with VNSNY’s New EVP and Chief Financial Officer

Keith Patterson talks about VNSNY’s plans for growth

In late January of this year, Keith Patterson joined VNSNY as Executive Vice President and Chief Financial Officer, filling an executive role vacated when he became VNSNY’s President and CEO in February 2019. With a background that includes executive roles at several large organizations, including VNSNY, Patterson’s experience in both strategic and operational roles, as well as his leadership and management experience, will be instrumental in driving the organization forward.

Welcome to VNSNY! Several months into your role, what are your impressions so far?

“I’m truly enjoying it here. There’s a tremendous sense of commitment that runs throughout VNSNY, starting at the top. VNSNY’s Board of Directors is thoughtful and engaged, and our leadership team truly reflects and embodies our mission. Gaining Continued on page 4
Partners in Care Rolls Out Online Certification for New Home Health Aides

After nearly a year of intense planning and preparation, Partners in Care, VNSNY’s licensed home care services agency, has received the go-ahead from New York State to provide online certification training to its incoming home health aides (HHAs). The first program of its kind to be approved by the state, Partners in Care is now a model for other New York agencies looking to implement online HHA certification.

“Since we launched our online certification training in March, it’s been a great success—but it required a huge amount of work,” says Tony Dawson, VNSNY’s Vice President and Chief Quality Officer, Provider Services. “Besides designing new curriculum components, we had to prepare our instructors to teach on Zoom for eight hours a day, and we had to make sure our home health aide trainees had the technology they needed to take the course.”

To develop its curriculum, Partners in Care teamed with CareAcademy, a company that specializes in online training of healthcare workers. The certification course includes 14 full days of virtual training plus four days of in-person sessions. Classes are instructor-led and interactive, with a strong focus on student engagement—a key priority for state regulators.

“There had been talk previously about creating an online HHA certification program, but the pandemic convinced New York State to move forward,” says Jim Rolla, Senior Vice President of Partners in Care.

At the same time, the state’s approval process was rigorous. “The NYS Department of Health worked closely with us every step of the way,” recalls Kennya DiLegge, Associate Director of Education and Quality. “They wanted to be sure the online training allowed our HHAs to master and demonstrate all the necessary skills, from bathing clients to using a Hoyer lift.”

Partners in Care also spent months researching the right technology partner, ultimately choosing CareAcademy for its ease of use. The result has been a resounding success, with the first online training group achieving a 90% completion rate.

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Partners in Care Rolls Out Online Certification for New Home Health Aides

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For Brooklyn resident and HHA trainee Christopher Robinson, doing the online training from home—as opposed to traveling into Manhattan each day—saved both time and money. “Given the circumstances, it was a great thing to offer these classes online, and to provide access to a healthcare career during the pandemic,” says Robinson. He also praised the class itself. “The instructor was very patient and positive,” he notes.

Partners in Care still provides in-person certification training for recruits who prefer it, but they will continue to offer online HHA certification for the foreseeable future, even after the pandemic is over. Later this year, the content will be offered in Spanish and Chinese.

Since the program’s launch, adds Rolla, Partners in Care has been contacted by numerous other New York agencies seeking advice on their own online certification proposals. “Seeing our success has encouraged other agencies to apply,” he says. “In an environment where everyone is predicting future shortages in the nation’s HHA workforce, online training is a great recruiting tool. It really is the wave of the future, and we’re helping to lead the way.”
VNSNY Expands ESPRIT Home-Based Medical Practice

A decade after it was established, ESPRIT, VNSNY’s in-house medical practice, is expanding in size and ramping up its activities, as its clinicians partner with VNSNY’s recently launched care management organization (CMO) to provide targeted medical services to the CMO’s clients.

“Because ESPRIT’s nurse practitioners are licensed to prescribe medications and lab tests, it’s always had a unique role at VNSNY,” says Leslie Rottenberg, Associate Vice President of ESPRIT. “Now that role is taking on increased importance.”

“We’re expanding ESPRIT’s operations in several areas,” adds June Stanley, VNSNY’s Vice President for Clinical Strategy and Development. “One involves conducting in-home assessments of plan members for insurers we’re contracted with. ESPRIT will do about a thousand assessments this year.”

In addition, notes Stanley, who manages the CMO and ESPRIT’s operations together with Joan Cassano, Vice President for Population Health and Care Management, “ESPRIT’s nurse practitioners do home or virtual visits for our CMO clients who are in need of urgent care. And finally, ESPRIT just launched a new home-based palliative care program for people with advanced illness.”

The palliative care program is offered to seriously ill patients who require intensive symptom management, but are either unwilling or not yet eligible to be enrolled in hospice care. Participants receive home-based and telephonic support from an interdisciplinary care team, which interacts closely with the client and their family as well as the client’s primary care physician and other specialists.

To accommodate its expansion, ESPRIT recently added several more nurse practitioners and brought in a new associate director of clinical management, Carolyn Sage, who joined VNSNY from UnitedHealthcare’s Optum division. ESPRIT’s NPs work under a CMO care manager, who coordinates their activities with those of the CMO’s clinical staff, which includes social workers, dieticians, nurses, rehab therapists and a pharmacist.

Faruk Ali, a nurse practitioner with ESPRIT’s palliative care program, reports that this additional care available from the CMO’s interdisciplinary teams lets him treat patients more effectively. “The program is really designed to provide the fullest extent of palliative care,” he says.

Besides ensuring that patients’ symptoms are being managed, the ESPRIT team offers a backstop that can prevent unwanted trips to the emergency department. “If a patient is short of breath or in pain, instead of calling 911, we can send in one of our NPs,” says Rose Madden-Baer, Senior Vice President for Population Health and Clinical Support Services, who heads VNSNY’s CMO. “We’re like a brick-and-mortar urgent care practice, except we come right to your home.”
An Interview with VNSNY’s New EVP and Chief Financial Officer

Welcome to VNSNY! Several months into your new role, what are your impressions so far?
I’m truly enjoying it here. There’s a tremendous sense of commitment that runs throughout VNSNY, starting at the top. VNSNY’s Board is thoughtful and engaged, and our leadership team truly reflects and emphasizes our mission. Going forward, the organization is in a strong position to execute on our growth plans. Over the past several years, under the leadership first of Marki Flannery, our former CEO, and now Dan Savitt, our current CEO, VNSNY has laid a solid foundation to build upon, and I’m excited to be part of the next chapter.

How well would you say VNSNY has weathered the pandemic?
The VNSNY team persevered through unprecedented times, caring for our patients, plan members and clients through the darkest days of the pandemic. Despite the disruption, the organization has maintained stability from an operational perspective—essentially shifting to remote work overnight, establishing updated clinical protocols and compliance measures, setting up a vaccination clinic that provided 18,000 COVID vaccine shots in less than four months, and now shifting to defining the VNSNY workplace of the future. While our Provider Services business experienced volume reductions due to the pandemic, we have begun to see improvements and anticipate a return to ‘normalcy’ as vaccination rates tick up.

How would you describe VNSNY’s direction, post-COVID?
As I said, we’re pursuing a robust growth agenda. Simply put, we want to bring our services to more people. Home health care is a growing area right now, and it’s attracting increased investment. With a long-standing history of serving these vulnerable populations, our expertise and capabilities have us well-positioned to provide care to patients where they are—in their homes and communities. At the same time, our focus on clinical quality and proven outcome measures positions us well to serve more people, as care settings shift to address the needs of patients in the most effective way possible.

Which parts of the business is VNSNY looking to grow?
We are looking to expand all of our businesses. In addition to launching new offerings, we are establishing strategic partnerships across the healthcare system to help serve our patient population. Our care management organization, which is led by clinicians—NPs, RNs and LCSWs as well as other disciplines—will help drive growth across the enterprise, supporting the health of our patients and members in a variety of ways. We’re also launching a new management services organization that will sell health and administrative services to other health plans and risk-bearing providers—including, potentially, organizations outside New York State. For example, we’ll be able to manage hospice benefits for Medicare Advantage plans that include hospice care in their coverage.

What is VNSNY’s vision for CHOICE Health Plans going forward?
In addition to providing the expertise for the new management services business I just mentioned, CHOICE will continue to focus on our three existing Medicaid plans, which together have over 27,000 members. But we’re also looking to expand our offerings. CHOICE has strengthened its infrastructure in recent years in a way that’s allowing us to expand our Medicare footprint. So next year should be an exciting one for CHOICE.

How did VNSNY do in the New York State budget, and what challenges remain?
After facing the possibility of significant cuts, the final New York State budget largely supported VNSNY and the patients and members we serve. Significant “wins” included restoring the managed care quality incentive payments that reward quality plans like ours, and a long awaited—and retroactive—CHHA reimbursement rate increase to account for minimum wage increases. But adequate premiums for our MLTC and MAP plans remain a challenge, and we continue to press for funding to support our vital frontline workforce.

Keith Patterson talks about VNSNY’s plans for growth

In late January of this year, Keith Patterson joined VNSNY as Executive Vice President and Chief Financial Officer, taking over from Dan Savitt when he became VNSNY’s President and on February 1st. With a background that includes senior finance leadership positions at UnitedHealthcare/Optum and Aetna, Patterson has extensive experience in both managed care and provider services.
VNSNY Hospice Oncology Program Provides Specialized Care for Cancer Patients

As part of its continuing focus on providing hospice patients with the best possible quality of life, VNSNY Hospice has launched a specialized support program for hospice patients with terminal cancer. The new hospice oncology program, now being piloted with a major New York City academic medical center, builds on VNSNY Hospice’s experience implementing similar programs for patients with congestive heart failure and COPD.

“People with terminal cancer are among the most complex of all hospice patients,” says Linda Megan, VNSNY’s Vice President for Hospice Access. “They are younger on average, their symptoms are tougher to manage, they frequently have more difficulty accepting their situation, and they end up back in the hospital more often.”

As a result of these factors, family caregivers of cancer patients also tend to experience high stress levels, adds Megan. “So the aim of our program is to provide cancer patients and their families with another layer of support.”

One major issue for cancer patients entering hospice involves navigating the shift from curative treatments to palliative care. “This shift has actually gotten harder in recent years, as cancer treatments have advanced,” notes Dana Tarcatu, MD, Regional Medical Director for VNSNY Hospice and one of the program’s clinical leads. “Suddenly, the patient has to switch from hoping for a cure or at least a remission to accepting a terminal prognosis. This requires a big adjustment.”

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To help in this adjustment, VNSNY Hospice’s oncology program focuses on developing a customized, holistic plan of care for each patient in coordination with the oncologists who were treating the patient before they entered hospice.

“There’s a misperception that the patient’s relationship with their primary oncology team is abruptly severed when they enter hospice,” says Megan. “Instead, we make a point of maintaining that relationship, and letting the patient’s oncologists help guide us in how we manage symptoms and establish goals of care.”

In addition to aggressive symptom management, which includes educating and collaborating with the patient’s main hospice team, the hospice oncology program also helps assess the practical, emotional and spiritual needs of cancer patients and their families.

“Important considerations include whether or not the family can follow through with the plan of care, if more help is needed at home, whether there are conflicting goals of care, and how the family is coping overall,” says Jennifer Clark, NP, the program’s other clinical lead, who is a Clinical Specialist with VNSNY Hospice.

After the current pilot is completed, VNSNY Hospice plans to expand its oncology program to additional locations and hospital partners. “Our program goals include reducing the rate of hospitalizations for the targeted patient population, achieving an associated rise in hospice lengths of stay, and seeing an increase in our referrals from community partners for oncology patients,” says Dr. Tarcatu. “But ultimately, this is really about improving each cancer patient’s experience at the end of life.”
VNSNY Clinicians Use New Smartphone App to Enhance Patient Care

This spring, VNSNY Home Care and Hospice clinicians gained a dynamic new clinical support tool—a smartphone app that allows frontline staff to create and quickly and securely transmit customized forms and documents, and also helps them track wound healing through a special camera feature. Following a pilot last fall, the app, developed by Forcura, is now being used by all VNSNY Home Care and Hospice clinical staff.

“One useful feature of the app is that it lets me compose and send faxes, which is very helpful for alerting physicians about starts of care or other issues,” says VNSNY Home Care nurse Debbie Starace, who participated in the pilot. “For example, I recently had a patient whose medication had been temporarily discontinued by his doctor, and I needed to know when he could resume taking it.”

When Starace phoned the physician’s office to ask, she was routed to voicemail. She left a message, but wanted to follow up in writing “because you never know when a voice message will be picked up.” To do this, Starace simply typed her query into the app’s fax template, then hit “send.” The fax was transmitted to VNSNY’s office staff, who immediately forwarded it to the patient’s physician. Within hours, the doctor’s office got back to her with an answer.

Another function that’s making life easier for Starace and her fellow nurses—and enhancing patient care—is the app’s ability to measure the dimensions of a patient’s wound, based on photos taken with the clinician’s phone. “The app is made to be used with standardized green dots that provide a size reference,” explains Starace. “When you place the dot beside the wound and snap a photo, the app uses the dot to calculate the wound’s length and width.” The photo and related data are stored in the patient’s EMR, where they can be compared with prior and subsequent photos to see how the wound is healing.

“The app’s wound documentation feature has been very useful when our field nurses need to consult with our wound-ostomy nurses, as well as for specialized initiatives like the sternal incision program we’re planning on implementing,” says Lisa Felszer, Vice President of Home Care Operations.

Other benefits of the new platform include a secure communication channel with partnering organizations that also employ the app; its seamless interface with VNSNY’s EMR platform; and the support provided by the developer, which has included working with VNSNY to customize the app’s templates and the related dashboards used by VNSNY’s office staff.
VNSNY CHOICE Pulls Out All the Stops to Vaccinate Its Plan Members

As a group, the 27,000-plus Medicaid recipients enrolled in VNSNY CHOICE Health Plans are among the New Yorkers at highest risk from COVID-19. So when COVID vaccines became available, the CHOICE staff immediately began pulling out all the stops to set up its plan members with vaccinations.

“We’ve been calling thousands of our plan members, to see if they’re interested in getting the vaccine,” says Kelly Cavin, Vice President for Clinical Operations at CHOICE, who works with CHOICE MLTC and Medicaid Advantage Plus (MAP) plan members. “For members who are mobile and want to get vaccinated, we then help them schedule vaccine appointments through the state’s system, or link them to local clinics.”

During these calls, CHOICE staff have also been identifying plan members who are homebound, and assisting those who are interested to enroll in New York City’s homebound vaccination program. That program, which VNSNY clinicians are helping to administer, is now well underway.

CHOICE has been taking a somewhat different approach with members of CHOICE SelectHealth, a special needs plan for individuals who are HIV-positive, identify as transgender, or live in the city’s homeless shelter system. “Many of our SelectHealth members get care through specialized providers, so we’ve been phoning those members who have co-morbidities that place them at high risk, and connecting them with these providers to get vaccinated,” says Jaime McDonald, Director of Care and Utilization Management for SelectHealth.

As part of its outreach, SelectHealth was also able to schedule over 100 of its members for vaccinations at VNSNY’s on-site vaccine clinic, which has provided the Moderna vaccine to thousands of VNSNY’s own staff members as well.

To date, approximately half of all CHOICE members reached by phone have either elected to get the COVID vaccine or indicated they’d already gotten it. The other half of the plan members contacted said they aren’t yet ready to get the vaccine, but the teams continue to encourage this group to reconsider.

“We’re actually getting call-backs from members who tell us that they’ve changed their mind, and now would like to get the vaccine,” notes Cavin. “And as more people get the vaccine, we expect that trend to continue.”
New VNSNY Products Offer Family Caregivers Advice and a Helping Hand

The demands of caring for an aging parent or spouse just got easier, thanks to two new caregiver support programs being offered by VNSNY. Both programs are available to family caregivers who have loved ones residing in New York City’s five boroughs as well as Westchester, Nassau and Suffolk Counties.

VNSNY’s Geriatric Care Management program provides family caregivers with the hands-on services of a registered nurse or social worker, who stands ready to help with any and all aspects of care coordination—from paying bills and filing insurance claims to researching home care options.

“Our dedicated care managers can take your loved one to their doctor’s appointments or even go shopping with them,” explains Jim Rolla, Senior Vice President of VNSNY’s Partners in Care division, which administers the private-pay program. Clients pay a one-time fee for a comprehensive needs assessment, and are then charged by the hour for whatever level of support services they require.

“Picture a parent living on his own here in New York, while his daughter is on the West Coast,” says Rolla. “Besides the daily support of a home health aide, the daughter knows her dad also requires help with things like paying bills, dealing with Medicare, and personal needs like getting a haircut. Our program can assist her dad in all of those areas.”

In addition, VNSNY is now offering a lower-cost Virtual Care Adviser product for caregivers who need expert advice without the hands-on help. In this private-pay program, which charges an affordable monthly fee, professional social workers provide help and advise in real time via instant messaging and video conferencing. “An adviser’s guidance could range from help navigating the healthcare system to dealing with an immediate issue like, ‘My mother has dementia and is acting out—what should I do?’” says Rolla.

Other family members and friends can participate as well, notes Liz Solomon, Director of Marketing at VNSNY. “You could have one sibling in New York, another in Wisconsin and a third in California, and they can all utilize the service.”

“Unfortunately, caregiving often conflicts with the rest of people’s lives,” says Catherine Callaway, VNSNY’s Vice President of Marketing and Development. “Here at VNSNY, we understand what a strong need there is for this type of caregiver support. We also wanted to offer more than one type of service, so that caregivers can decide what’s right for them. Both programs are customized for the needs of each individual client.”

“Having this kind of help often makes the difference between a parent staying at home or having to move into a long-term care facility,” adds Rolla. “It’s really like hiring a surrogate family member.”