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NEWS FROM THE VISITING NURSE SERVICE OF NEW YORK

## VNSNY Home Care Receives 4-Star Quality Rating from CMS



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The CMS Star Ratings, which are shared with the public on Medicare's Home Health Compare website, measure a home health agency's performance based on how well it provides patient care in nine areas. These include process measures such as educating patients on their medications and ensuring they get

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VNSNY Home Care's recent 4-Star rating from CMS reflects the consistently high quality of care it has provided during the COVID-19 pandemic.

## VNSNY Expands Its Health Services to Asian Americans with Two New Community Centers

Building on its long history of supporting the health and social welfare of diverse and often vulnerable populations, VNSNY is planning to open two new storefront community centers this summer in the Asian American communities of Flushing, Queens and Sunset Park, Brooklyn, and has also launched an organization-wide Cultural Market Development (CMD) team. The new team will engage with consumers, healthcare providers and community groups to offer the full array of VNSNY's healthcare services to high-need communities of various cultural backgrounds, while also enhancing the experience of VNSNY's current patients and health plan members and their caregivers.

Led by Teresa Lin, VNSNY's Vice President for Cultural Market Development, the CMD team's initial focus will be on

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- VNSNY Launches Health Plan Services
- VNSNY's New Online Tool Quickens Response Time for Home Care Service Requests



## Addressing Mental Health Disparities in New York and Beyond

Jessica Fear, VNSNY's new Senior Vice President for Behavioral Health, on how VNSNY is improving access to mental health care by offering behavioral health products to health plans

VNSNY's Community Mental Health Services recently changed its name to VNSNY Behavioral Health. What's behind that change?

As part of VNSNY's growth strategy, we're now creating innovative programs that we'll be offering to health insurers

for their plan members with mental health and/or substance use treatment needs. The term "behavioral health" encompasses both of those arenas, so our name change more accurately reflects this new, broader scope. At the same time, I want to stress that we'll

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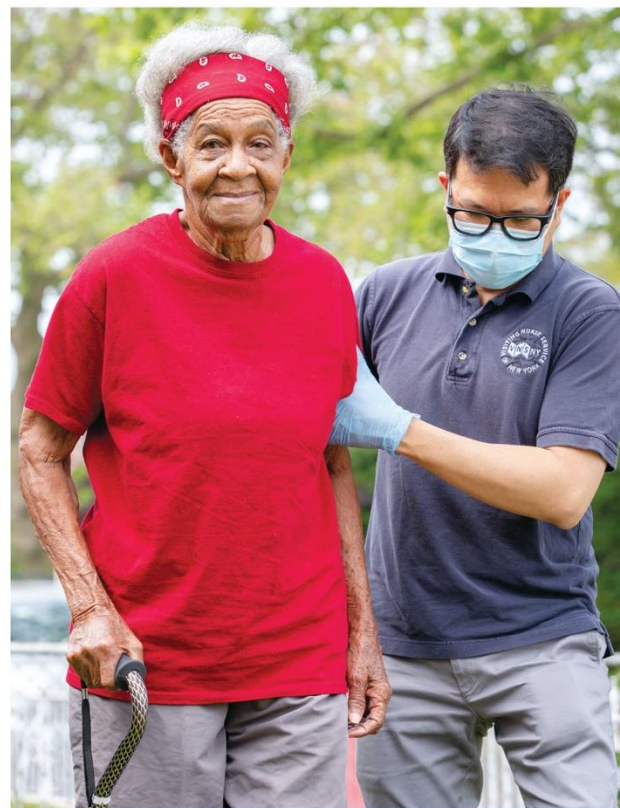


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The CMS Star Ratings, which are shared with the public on Medicare's Home Health Compare website, measure a home health agency's performance based on how well it provides patient care in nine areas. These include process measures such as educating patients on their medications and ensuring they get their annual flu vaccine, as well as outcomes measures such as improvement in mobility, self-bathing and shortness of breath, and prevention of acute hospitalizations.

"To achieve 4 Stars—where 3 Stars represents a nationwide average standard of good care, and 4 Stars means we're scoring significantly above that average performance of other agencies—requires an outstanding group effort," notes Jennifer Brullo, Senior Vice President, Patient Care Services, who oversees VNSNY Home Care.

"These tremendous results have been made possible because our talented and dedicated clinical field staff, along with our committed management team, focus on quality, collaboration and placing the patient at the center of everything they do," adds Andria Castellanos, Executive Vice President and Chief of Provider Services. "We are proud of these results, but we don't want to just maintain this 4-Star rating. We have the talent and dedication to be a 5-Star best-in-class provider, and that's what we're striving for."



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# VNSNY Expands Its Health Services to Asian Americans with Two New Community Centers

Building on its long history of supporting the health and social welfare of diverse and often vulnerable populations, VNSNY is planning to open two new storefront community centers this summer in the Asian American communities of Flushing, Queens and Sunset Park, Brooklyn, and has also launched an organization-wide Cultural Market Development (CMD) team. The new team will engage with consumers, healthcare providers and community groups to offer the full array of VNSNY's healthcare services to high-need communities of various cultural backgrounds, while also enhancing the experience of VNSNY's current patients and health plan members and their caregivers.

Led by Teresa Lin, VNSNY's Vice President for Cultural Market Development, the CMD team's initial focus will be on New York City's Chinese American community. VNSNY already has a long-standing presence in Manhattan's Chinatown district, including its storefront Chinatown Community Center on Mott Street as well as the Neighborhood Naturally Occurring Retirement Community (NNORC) health and wellness program it administers for older Chinatown residents.

"We want to build on the work that we've been doing in Chinatown for over 22 years, and extend it to other parts of the city," says Lin. Like the Mott Street center, the Flushing and Sunset Park community centers will be open seven days a week, offering ready access to a full range of VNSNY programs and services and serving as a one-stop source for health information and community resources.

"Because many seniors in the Chinese community have limited English," says Lin, "it's often easier for them to walk to our community centers, where staff have the requisite language skills and cultural competencies to answer their questions and connect them to our own VNSNY services as well as other community support."

Another focus of the centers will involve partnering with local community-based organizations. Each center has space to host workshops on health and wellness; seminars on topics of interest to the elderly Chinese community like housing and food stamps; and meetings of local medical and community groups.

VNSNY will also be implementing other health and wellness programs geared to the unique needs of New York's Chinese American population, says David Rosales, Executive Vice President and

Chief Strategy Officer at VNSNY. "This is not something we're starting from scratch," Rosales explains. "We're drawing on our decades of investment in tailored approaches to different cultural groups in the New York City region, and the deep connections to those communities that we've developed over the years."

Looking ahead, Rosales adds, "Our work with the Chinese community will serve as a blueprint for similar approaches that we'll be taking with other diverse populations in New York, which are now in the planning stage."



*VNSNY's new Cultural Market Development team is expanding the organization's outreach to high-need communities of various cultural backgrounds. Above: The VNSNY Chinatown Community Center, which provides health and wellness services to neighborhood residents.*

# Addressing Mental Health Disparities in New York and Beyond

*Jessica Fear, VNSNY's new Senior Vice President for Behavioral Health, on how VNSNY is improving access to mental health care by offering behavioral health products to health plans*

## **VNSNY's Community Mental Health Services recently changed its name to VNSNY Behavioral Health. What's behind that change?**

As part of VNSNY's growth strategy, we're now creating innovative programs that we'll be offering to health insurers for their plan members with mental health and/or substance use treatment needs. The term "behavioral health" encompasses both of those arenas, so our name change more accurately reflects this new, broader scope. At the same time, I want to stress that we'll be continuing to provide our community-based safety-net programs for adults and children who are in crisis, or who have ongoing behavioral health issues and need help accessing care.

## **Can you give some examples of these new programs?**

One of them is specifically designed for people who've just gone through inpatient treatment for a substance use disorder. About 50 percent of these individuals end up back in a treatment facility within 30 days after discharge. Our goal is to break this cycle by ensuring they're connected with the outpatient treatment and other support services they need once they're discharged. We'll then continue to stay in touch with these clients for at least six months, to help keep their recovery on track. The program launches in the second half of this year. We think it has tremendous potential to help people struggling with substance use disorders achieve recovery and stability in the community.

## **Sounds very promising! What else is in the pipeline?**

Another new program will identify homebound seniors with untreated psychiatric conditions and bring care directly into their homes. These are people who would ordinarily lack any access to mental health treatment, so this program could be a game-changer for them. We're also partnering with VNSNY's Care Management Organization (CMO) on an innovative integrated care model. The CMO nurses will screen insurance plan members under their care for

behavioral health conditions like depression or substance use. If they find a problem that needs to be addressed, we'll come in and immediately connect that member with care. With this model, we're truly treating the whole person. People will get better care and be healthier, and we'll be helping insurers save money.

## **Can you explain that last part, about saving money?**

The evidence clearly shows—and managed care plans understand—that individuals with untreated behavioral health conditions are much more likely to be high utilizers of medical care, which drives

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## Addressing Mental Health Disparities in New York and Beyond

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up insurers' costs. Medicare and Medicaid plans also recognize this, and have been progressively bringing the full range of behavioral health services under their umbrella of covered services.

**So, ensuring their members get effective behavioral health care is a financial plus for insurers?**

Absolutely. It's a win for everyone. That growing economic realization—together with the effects of the pandemic, which raised everyone's awareness about mental health issues and also moved virtual behavioral health treatment into the mainstream—has significantly changed things. The importance of treating the mind as well as the body is finally gaining a central place in health care. This is a change that we in the behavioral health field have been promoting for a long time, and I'm excited to see it's finally happening.



# Advanced HHA Training Yields Significantly Higher Scores on Value-Based Payment Measures

A recently published VNSNY research study that examined health outcomes of members in managed long-term care (MLTC) plans found that when plan members received care from home health aides (HHAs) with advanced training, they scored significantly better on four key value-based payment measures compared to a control group. The improvements were seen most consistently in higher-need members—those who required HHA services for seven or more hours per day.

The study, published in the January 2022 issue of *Health Services Research*, looked at over 19,000 pairs of baseline and follow-up health assessments conducted on 13,320 MLTC plan members. More than one-quarter of those members received care from HHAs who had received enhanced training through the New York State MLTC Workforce Investment Organization (WIO) initiative, while the other members were cared for by HHAs who did not receive targeted WIO training.

WIO training focuses on teaching HHAs methods for improving patient outcomes as measured by various value-based payment metrics that the state uses to determine payment amounts to health plans and plan-contracted home health aide agencies. VNSNY researchers observed significant links between WIO training and better outcomes in four of these metrics: annual flu vaccinations, prevention of uncontrolled pain, improvement or stabilization in pain intensity, and improvement or stabilization in shortness of breath.

“Ours was the first study to show a clear connection between HHA training and value-based quality outcomes,” says Mei-Chia Fong, Evaluation Scientist with VNSNY’s Business Intelligence & Analytics team, who was the lead author on the study. “We also found that overall, it was the frail, largely homebound plan members who benefited most from being attended

to by HHAs with advanced training.”

This is important, adds VNSNY’s Vice President for Data Science and study co-author Carlin Brickner, because “it suggests that HHAs caring for these high-need members should be prioritized for such enhanced training—which of course takes time and money to implement. While more research needs to be done, our study indicates that training HHAs around value-based quality measures not only helps improve the health of frail plan members, but could also benefit health plans financially.”



*The positive impact from advanced HHA training was seen most consistently in higher-need MLTC plan members—those who required HHA services for seven or more hours per day.*



# By Easing Hospice Access for Patients, New VNSNY Liaison Changes the Landscape for Physicians

In his role as Clinical Hospice Liaison—a newly established position at VNSNY—Jesse Sloan is changing the hospice landscape for area physicians, by making it easier than ever for them to connect their terminally ill patients with VNSNY’s home-based hospice services.

A registered nurse with a background in Nursing Informatics, Sloan does this in a number of ways, including:

- educating physicians and staff on hospice eligibility requirements and how the hospice intake process operates;
- making sure physician practices are aware of which hospice services are covered by insurance, as well as the different levels of end-of-life care;
- working to gather the correct demographic and clinical information needed to process a hospice admission, including imaging, lab results, and progress notes;
- using this data to circle back with providers regarding best practice guidelines for hospice; and
- working together with the physician’s office and family to meet goals of care and achieve the best possible outcomes for the patient.

Sloan also works with VNSNY’s Business Development team to identify and reach out to new providers, including physicians who may not be accessing hospice care for their patients as effectively as they could be. “Many care providers don’t realize patients can benefit significantly from beginning hospice care earlier than most people think,” he says. “I try to make the intake process a smooth experience for everyone involved, so we can start care as soon as possible where it’s appropriate.”

Once a patient is admitted to hospice care, Sloan will confer with the patient and their family regarding goals of care, order durable medical equipment for patients who need it, and keep the referring practice

updated on the patient’s condition. If desired, he will also help arrange for the referring doctor to continue as the patient’s attending physician in collaboration with a hospice doctor.

Sloan’s outreach and follow-up not only benefits the patients being admitted to hospice care, but also aligns physician groups with the healthcare industry’s growing understanding of the value of home-based hospice and palliative care services.

“The relationship between physicians and hospice care has changed dramatically in the last few years,” notes Sadi Benzaquen, VNSNY’s Director for Hospice and Palliative Outreach. “Today, the Centers for Medicare and Medicaid Services is encouraging doctors to take a more active role in keeping patients at home and out of the hospital at the end of life, and is rewarding them when they do.”

“Our goal is to have a close relationship with the physician community,” adds Linda Megan, Vice President for Hospice Access at VNSNY. “That’s why we’re so excited to have Jesse as a dedicated hospice liaison who understands the needs of the patients, their families, and their doctors.”



*By ensuring a smooth intake process, VNSNY Clinical Hospice Liaison Jesse Sloan (pictured above) is making it easier for physicians to connect their terminally patients with home-based hospice care.*



## VNSNY Launches Health Plan Services, Expanding Lillian Wald's Mission to Other Parts of the Country

VNSNY CHOICE continues to grow its health plan offerings—two new CHOICE Medicare Advantage plans, EasyCare and EasyCare Plus, have been in full operation since January 1st. In addition, last December, hundreds of CHOICE employees transitioned to VNSNY's new Management Services Organization (MSO). The MSO, which also officially launched at the start of this year, provides business-to-business administrative support for health plans and provider groups, including VNSNY CHOICE.

"We've built a great health plan brand over the years," notes Dr. Hany Abdelaal, President of CHOICE. "Now, with so many employees working in support of CHOICE yet not actually part of the CHOICE organizational structure, we felt we needed a new entity that covered both parts of our operations."

That entity is named VNSNY Health Plan Services. Besides CHOICE Health Plans and the MSO, notes Dr. Abdelaal, the new

division encompasses a number of other support functions, such as compliance, marketing and IT, that have been integrated into VNSNY's central operations over the past several years.

"Our new Health Plan Services structure will still deliver the same high-quality managed care for CHOICE members that we're known for," stresses Dr. Abdelaal. "At the same time, locating our health plan administrative support services within the MSO is allowing us to provide those essential services to other managed care plans in states outside New York."

The bottom line, Dr. Abdelaal adds, is that thousands more people across the U.S. will now be able to benefit from VNSNY's many years of experience managing the care of Medicare and Medicaid populations with complex needs. "This means that not only are we growing our organization through the adoption of our larger Health Plan Services framework—we're expanding our mission, as well."

# VNSNY's New Online Tool Quickens Response Time for Home Care Service Requests

When VNSNY Home Care's Intake team gets a new request for home care clinical services in a specific New York neighborhood, they can now instantly determine which nurses and rehabilitation therapists are available in that geographical area to take the assignment. They're able to do this thanks to the Service Location Capacity (SLC) tool, a new web-based system developed by VNSNY that lets Intake team members type in a potential patient or client's address and zip code and immediately see clinician availability by specialty for that area.

"As soon we get a referral request, we can now confirm to our clients and referrers right away that a clinician is available for a start-of-care visit," says Mir Mahmood, Vice President, Intake and Business Development Operations. By eliminating the need to make time-consuming inquiries about staffing

capacity, he adds, the SLC tool has elevated the experience of VNSNY Home Care patients and of hospitals, doctors, and other referral sources.

"When you see something you like on Amazon, your next question is 'When can I get it?' Amazon tells you that on the spot," notes Mahmood. "With the SLC tool, we now have that capability too. Even if it means saying 'no' to a request at times, clients no longer have to wait for us to get back to them, which is a big improvement."

Because the SLC tool is web-based, VNSNY staff working out of hospitals or doctors' offices can access it from anywhere on their desktop computers. The tool, which was developed by VNSNY's Business Intelligence & Analytics group, is currently being adapted for VNSNY's home health aide and hospice operations as well.

