VNS CHOICE: Managing Complex Care Needs for the Frail Elderly of New York City

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VNS CHOICE Organization

• Subsidiary of the Visiting Nurse Service of New York

• Licensed by New York State Department of Health as a Managed Care Organization

• Product Lines:
  
  • VNS CHOICE MLTC (Medicaid Managed Long Term Care)
    - Initiated operations January 1998
    - 6,100 members (April 2008)
  
  • VNS CHOICE Medicare
    - Initiated operations January 2007
    - Two Dual Eligible Special Needs Plans
    - 1,400 members (April 2008)
  
  • VNS CHOICE MLTC PLUS
    - Initiated operations May 2008
    - Integrated MA and MLTC benefit for dual eligible & nursing home eligible
OVERVIEW OF MANAGED LONG TERM CARE
VNS CHOICE MLTC Membership

• **Basic Criteria**
  – Age 65 or older
  – Resident of the service area (5 boroughs of NYC)
  – Medicaid eligible
  – Community physician must agree to work with VNS CHOICE

• **Clinical Requirements**
  – Nursing home eligible as determined by a standard New York State assessment tool
  – Long term care needs anticipated to continue for at least 120 days
  – Must satisfy New York home care health and safety standards at the time of enrollment
    • Cannot be disenrolled if needs change
MLTC Covered Services

- Care management
- Skilled home health care
  - Nursing
  - Rehabilitation therapies
  - Social Work
  - Nutrition
- HHA and PCW
- Outpatient rehab therapies
- Substitutes for home care services
  - Adult day services (social and medical models)
  - Home-delivered meals
  - Chore services
  - PERS
- Ambulatory health services
  - Dental
  - Optometry/eyeglasses
  - Audiology/hearing aids
  - Podiatry
- Scheduled transportation to health related appointments
- Respiratory therapy
- DME and supplies
- Environmental modifications
- Nursing home care

• Note: Physician and hospital services excluded from capitation; however, MLTC plan is responsible for care management of these services
MLTC Program Financing

• Capitated reimbursement
  – Medicaid capitation for long term care services and care coordination
  – Fixed per member per month premium

• Program is at full financial risk for all covered services

• Financing requires efficient utilization of resources
  – Focus on providing quality care and using resources effectively and efficiently
  – Use of substitute services where appropriate (adult day centers and meals on wheels services)
  – Emphasis on prevention, management of chronic illness and fostering independence
MLTC Interdisciplinary Team Model

- Regionally based care management teams including
  - Nurse Consultant
  - Social Worker
  - Nurse Practitioner
  - Rehabilitation Consultant
  - Nutritionist

- Care management across all settings
  - Community, hospital and nursing home

- Member-focused care planning
  - Member choice regarding services and scheduling
  - Family/caregiver involvement encouraged

- Communication and coordination with member, family, community providers, physicians and care team
  - Scheduled team meetings and informal discussions with care team members
Care Team Interventions

• Preventive screening initiatives for all members
  – Examples include: Influenza, Pneumococcal, diabetes, osteoporosis, and cancer

• Comprehensive falls prevention program
  – Proactive screening tool and team interventions

• Management of key chronic illnesses
  – For members with diabetes: HbA1c and ongoing blood glucose monitoring and education; focus on podiatry and vision care
  – For members with CHF: Consistent weight monitoring and education

• Drug utilization review for new medications
  – Interventions by Pharmacist Consultant regarding medications considered unsafe for the elderly

• Home safety modifications
  – Grab bars, wheelchair ramps, PERS
VNS CHOICE MEDICARE
Medicare Advantage
Special Needs Plan
What is a Special Needs Plan

• Special Needs Plans (SNPs) are Medicare Advantage plans that serve Medicare beneficiaries based on specific criteria:
  – Institutionalized in a Skilled Nursing Facility
  – Chronic condition(s)
  – Dually eligible (Medicare and Medicaid)

• VNS CHOICE Medicare is a SNP for dually eligibles

• SNPs cover all Medicare services
  – Part A (Hospital and other inpatient services)
  – Part B (Physicians and other outpatient services)
  – Part D (Prescription drug coverage)

• Care management is a critical component
  – Health assessments provided for all new enrollees
  – Care management programs for people identified with high needs
  – Care coordination for all when inpatient services are needed

• Value added services improve access
  – Preventive benefits, annual physical, 24-hour nurse-on-call
The Value of a SNP to VNSNY

- Retain Medicare patients
- Build new customer base
- Leverage and build upon relationships with providers
- Build upon VNSNY’s care/medical management competency
- Provides a more integrated care option for a nursing home eligible individual who lives at home
- Creates a referral channel for VNSNY Home Care and VNS CHOICE MLTC
VNSNY is Positioned to Offer SNP

- Medicare Advantage SNP fits conceptually with current VNSNY customer base
- Nursing resources
  - Increase value of assessment information
  - Provide office and field based care coordination
- Multicultural expertise
  - Valuable in a city like New York
- VNS CHOICE has been successful since 1998 in managing a risk product
  - Core managed care competencies in managing enrollment, capitated financing, claims payment, quality management, grievance and appeal, regulatory compliance
VNS CHOICE Offers Value for Enrolled Members

• Assistance in navigating complex health care system
  – Advocate for entitlements and benefits
  – Coordination with long term care services and programs

• Comprehensive disease/care management provided by nurses
  – Assessment of health status and needs upon enrollment
  – Outreach to ensure members know how to use a Medicare Advantage plan
  – Plan for improving self care management and medical management
  – Health education
  – Goal is to maintain/improve management of chronic diseases
Benefits Focus on Access to Care

• Plan features designed to improve access to care
  – Prescription drug coverage with extensive formulary and few requirements for prior authorizations
  – $0 Premiums and co-payments for most services
  – No referrals required to see specialists

• VNS CHOICE supplemental benefits include:
  – Transportation to medical appointments
  – Nurse Ambassador – In-home assessment and consultation, at the member’s request
  – Enhanced Vision Benefit
  – Zero dollar co-pay option for generic prescription drugs
  – International coverage for many services
2008 VNS CHOICE Medicare Products

• **VNS CHOICE Medicare - Option 1**
  – MA-PD, Dual Eligible SNP
  – $0 Co-payments for Generic prescription drugs
  – International coverage
  – Vision, Hearing, Transportation and other supplemental benefits

• **VNS CHOICE Medicare - Option 2**
  – MA-PD, Dual Eligible SNP
  – Wellness benefit that includes fitness club, acupuncture, massage therapy
  – International coverage
  – Dental care – services not covered by Medicaid in New York State
  – Vision, Hearing, Transportation and other supplemental benefits
VNS CHOICE Medicare Service Model

- **High touch**
  - Minimum of 5 member contacts in first 3 months

- **Low staffing ratios**
  - Personalized service
  - Consider members full care needs

- **Simple for members**
  - No confusing phone trees for members
  - Multi-cultural capabilities
  - Customized communications

- **Proactive outreach to providers**

- **Limited reliance on traditional Utilization Management methods**

- **Close collaboration with VNS CHOICE MLTC for dually enrolled members**
VNS CHOICE Care Management Strategies

- **Stratify members**
  - Appropriate levels of care and intervention at the right time

- **Involve members and their families**
  - Individualized care plans based on need and preference
  - Structured assessments

- **Collaborate with community physicians**
  - Physician participation in care planning process
  - Goal: A common and shared understanding of a member’s medical needs

- **Coordinate with community providers**
  - Assess provider’s ability to satisfy member needs
  - Appointments and transportation to community providers may be arranged by the program
VNS CHOICE

VNS CHOICE MLTC PLUS
An integrated plan combining a Medicare Advantage Special Needs Plan with Managed Long Term Care
MLTC PLUS: an integrated plan that covers both Medicare and Medicaid services for a nursing home eligible population

- An important policy goal of state and federal governments is to find more efficient ways to deliver care to dual eligibles
  - Reduce expenses for one of the most expensive subgroups of Medicare recipients
  - Reduce regulatory confusion and disconnects
- New York State an early adopter of integrated model of health plan that combines Medicare Advantage plan with Medicaid managed long term care
- CMS has permitted plans with state contracts to market to a segment of the dual eligible population

Enrollment beginning May 2008

- A pilot project: start small and build for the future
- Work with CMS and DOH to refine regulatory requirements, which can be inconsistent
VNS CHOICE MLTC Plus

- **Covered services**
  - All Medicare services (Part A, Part B, and prescription drug coverage)
  - All MLTC services
  - State defined Medicaid benefit, which then drives Medicare services

- **Two contracts (CMS and State DOH)**
  - Two capitation payments

- **Builds on care management strengths of MLTC and medical management of Medicare Advantage**

- **Uses provider network developed for MLTC and Medicare Advantage**
Lessons Learned

- **Commercial authorization rules do not fit**
  - Plan experience is a better guide
  - Access to needed services is critical
  - Gatekeeper approach hinders collaboration and reduces efficiency of staff

- **Network matters**
  - Members will not change providers, especially during a course of treatment

- **High touch, proactive and responsive service is critical**

- **Staff education is key**
  - Care management of long term care and medical management of acute and medical care are different skill sets
Questions?