

PROMISING PRACTICES IN HOME AND COMMUNITY-BASED SERVICES

New York State -- Providing Coordinated Services to Older Adults in their Homes

Issue: An Interdisciplinary Approach to Managed Long Term Care

Summary

The Visiting Nurse Service (VNS) of New York established VNS CHOICE, a managed long-term care program providing services to older adults with long-term care needs who wish to remain in their homes. In this program, care managers provide skilled home health services and work with both medical and long-term care service providers to coordinate a member's total medical care. The program's care management model uses an interdisciplinary team approach to meet the wide variety of needs that frail, chronically ill older adults often have. According to program staff, VNS CHOICE has reduced hospital and nursing home utilization and improved the appropriateness of medication utilization among members.

Introduction

Older adults with long-term care needs often require medical care to manage their chronic illnesses as well. In many cases, publicly funded long-term services, many of which are funded by Medicaid, are not effectively coordinated with acute health care services, which are predominantly funded by Medicare. VNS CHOICE, one of New York State's Medicaid Managed Long-Term Care (MLTC) plans, coordinates acute and long-term care services through a comprehensive care plan. VNS CHOICE members are assigned a single care manager who follows the member across all settings and sites of care. VNS CHOICE uses an interdisciplinary team approach whereby Social Workers, Rehabilitation Consultants, Nurse Practitioners, and Member Service Representatives support a single Nurse Consultant care manager to provide for a comprehensive and integrated assessment of members' care and service needs.

This report briefly describes the VNS CHOICE MLTC program. It highlights program services, operations, implementation, and impact. The information is based on written materials produced by the State of New York, media reports, interviews with staff involved with the implementation and oversight of the program, and the sponsoring agency's web site.

Background

VNS CHOICE is part of New York State's partially capitated MLTC program. Planning for the program began in the mid-1990s as an alternative to existing fee-for-service Medicaid services for people with disabilities and long-term care service needs. Currently, 15 MLTC plans serve more than 11,500 people. New York State finances the plans through a fixed monthly capitated payment for a defined set of services that includes nursing home stays, prescription drugs, certain ambulatory services, and a broad array of home and community-based services. Services not covered by the plan include physician and hospital services; the State pays Medicare co-payments and deductibles for these services on a fee-for-service basis. The model allows a variety of sponsoring organizations to establish MLTC plans and coordinate both covered long-term services and health care services not covered by the plan.

Older people who use long-term services often need medical care and other services.

VNS CHOICE offers an enhanced package of Medicaid-covered home and community-based services. For example, plans cover care coordination, social day care, and chore services as well as standard Medicaid benefits like home health and nursing home care. A MLTC enrollee may also be enrolled in a

Medicare Health Maintenance Organization (HMO), in which case care is coordinated across both plans. Enrollment in a MLTC plan is voluntary, and enrollees may disenroll at any time. Several Medicare HMOs and MLTC plans operate in the area served by VNS CHOICE, ensuring that enrollees have multiple options to consider.

Intervention

VNS CHOICE's care management model is unique among New York State's MLTC plans. VNS CHOICE care managers are part of an interdisciplinary team that includes a Nurse Practitioner, a Rehabilitation Consultant, two Social Workers, and four care managers called Nurse Consultants. Each team serves 160 - 200

Each team includes a Nurse Practitioner, a Rehabilitation Consultant, Social Workers, and Nurse Consultants.

members. Nurse Practitioners advise interdisciplinary team

members, provide geriatric assessments for clinically complex members, conduct staff education, confer with individual physicians, and function as primary care providers for a limited number of homebound members with advanced healthcare needs. Social Workers evaluate the psychosocial, environmental, and social service needs of members, and Rehabilitation Consultants make recommendations regarding the physical and functional difficulties that may limit independence for a member. In addition, VNS CHOICE consulting nutritionists are available to assess the changing nutritional needs of members and address nutritional deficiencies. The varied clinical specialties provided by members of the care team allow VNS CHOICE to address a wide variety of individual care needs that change and evolve as members remain enrolled in the program.

Nurse Consultants coordinate member and team communication. The Nurse Consultants work closely with the member, his or her family and physician, and interdisciplinary care team professionals to develop an individualized care plan. The Nurse Consultant regularly visits the member at home to monitor health status and provide comprehensive care as well as care management focused on the coordination of all long-term care and health related services. VNS CHOICE calls the Nurse Consultant a "care

manager for life" because he or she works with the member regardless of whether the individual is at home, in the hospital, or in a nursing home. As a result, Nurse Consultants have direct and regular contact with program members and direct support workers who provide most of the long-term services across all settings.

In May 2003, VNS CHOICE established a new Licensed Home Care Services Agency, VNS CHOICE Community Care. VNS CHOICE subcontracts with VNS CHOICE Community Care to provide enrollment, member services, care management and capitated home care services to its members. VNSNY Home Care, a related corporation, provides Medicare home care services required by VNS CHOICE members. VNS CHOICE health plan staff are responsible for administrative functions, including marketing, provider relations, claims handling, finance, quality management, staff development, and data management. Capitated services other than medical home care services (such as nursing home services, home-delivered meals, chore service, medical and social day care, and transportation) are provided through an extensive network of community providers. Ambulatory services (audiology, podiatry, dentistry, and optometry) are delivered through health plan subcontracts with preferred provider organizations. The pharmacy benefit is provided through a pharmacy benefit management subcontract.

To be eligible for VNS CHOICE, an individual must be at least 65 years old, Medicaid eligible, qualify for a nursing home level of care as determined by a standardized assessment, require long-term care services for at least four months, and live anywhere in New York City. Individuals can contact VNS CHOICE directly if they are interested in enrolling, or may be referred to VNS CHOICE by a family member, physician, or home care or other community services provider.

The program contacts each individual referred to VNS CHOICE. If the person meets the minimum eligibility criteria and is interested in learning about the program, a Nurse Consultant arranges a home visit. During this initial encounter, the Nurse Consultant introduces VNS CHOICE, evaluates the individual's needs to determine clinical eligibility, and provides written materials.

Membership usually becomes effective on the first day of the month after the application review process is completed. The entire process can take between eight to twelve weeks from referral to start of services.

Implementation

VNS CHOICE began enrolling members in January 1998 in one borough of New York City, Queens, and expanded to the entire city by June 2000. VNS CHOICE estimates that it has invested over \$1 million in start up and development costs.

As enrollment grew, VNS CHOICE refined its staffing model by adding additional resources to its interdisciplinary care teams to ensure that it could effectively meet member needs. VNS CHOICE added Rehabilitation Consultants to identify opportunities for maintenance as well as restorative rehabilitation, doubled the ratio of Social Workers to members, and introduced consulting nutritionists to address nutritional deficiencies common in an elderly population. VNS CHOICE also enhanced its staff development and training resources department to meet the ongoing need for staff education. Developing staff expertise has continued to be vital to service growth and ensured consistency in care management and clinical practice.

Key Questions:

Can the potential advantages of this model be adapted without a managed care approach?

The Nurse Consultants provide direct home health nursing and care management. What are the advantages and disadvantages of blending care management and home health care?

Impact

As of September 2004, VNS CHOICE had a membership of approximately 3,800 members. According to VNS CHOICE staff, the program's members are at least if not more impaired than the average person served through other MLTC plans and other home and community-based service programs in New York State. Direct comparison with a nursing home population is impeded by the lack of a common measure of impairment. Participant satisfaction with the plan has been consistently high, while voluntary disenrollment rates have remained fairly constant over the past five years.

Program staff report that hospital admission rates have declined for established members and long-term nursing home use is below projected rates. While long-term nursing home utilization has declined, short term nursing home admissions have increased. According to VNS CHOICE staff, the increase in short-term nursing home stays can be attributed to a larger number of admissions for rehabilitation or stabilization.

Contact Information

For more information about VNS CHOICE, please contact Holly Michaels Fisher, Executive Director, VNS CHOICE at (212) 609-5606 or hfisher@vnsny.org. Information about VNS CHOICE program is available on the Internet at http://www.vnsny.org/mh_ltcs_vnschoice.html.

The original report was written by Lisa Chevalier, MSW. The MEDSTAT Group revised the report, one of a series of reports by The MEDSTAT Group for the U.S. Centers for Medicare & Medicaid Services (CMS) highlighting promising practices in home and community-based services. The entire series will be available online at CMS' web site, <http://www.cms.gov>. This report is intended to share information about different approaches to offering home and community-based services. This report is not an endorsement of any practice.