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**CHOICE**<sup>SM</sup>  
Health Plans

**Provider News**

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## VNSNY CHOICE Gets a New Name!

We are excited to share that beginning **October 1**, VNSNY CHOICE will become **VNS Health Health Plans!**

### Why the change, and why now?

The name of the organization we belong to has changed, and now we're changing our name, too. And on January 1, 2023, all of our plans will include **VNS Health** in their names.

We're offering our three **Medicare Advantage** plans under their new names for the **2023 Medicare Annual Enrollment Period**, which opens October 15. You can learn more about them when we launch our new website ([vnshealthplans.org](https://vnshealthplans.org)) on October 1.

### How does our new name impact providers like you?

It should have minimal impact on you. How our health plans work with providers is staying the same.

- Continue to **follow your usual processes** for claims, authorizations, payments, referrals, and other transactions.
- Access our new website beginning Saturday, October 1, at **vnshealthplans.org**. You can use your current bookmarks. You'll be automatically redirected to the new site, where you will find everything you usually get from our current site. Once there, just update your bookmarks to the new URLs.

### How can I learn more?

Look for an email next week from **VNS Health (formerly VNSNY CHOICE) Provider News** for more information about our name change and other exciting news about the health plans from VNS Health.

You can also visit [vnsnychoice.org/vnsny-is-now-vns-health/](https://vnsnychoice.org/vnsny-is-now-vns-health/).

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## Required Training for SelectHealth Providers

In order to ensure the cultural competence of provider networks, the New York State Department of Health (DOH) requires providers from HIV Special Needs plans, including **SelectHealth from VNS Health**, to take an annual cultural competency training. This training is online, free, and offers several provider-specific programs to choose from and must be completed and attested to by Monday, October 31.

When you've finished the training, please use the form on our website to attest that you have completed it. You may also use the form to attest on behalf of a provider group. **Please note that you must attest to completing the training for SelectHealth, even if you have already attested to it for another plan.**

**Please complete this training and sign the attestation form by October 31.**



[Click here to complete the required training.](#)

[Click here to sign the attestation form.](#)

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## **New Authorization Process for CHOICE Total PT/OT Visits**

**VNSNY CHOICE Total (HMO D-SNP)** has put in place the following **updated authorization process** for requests from our in-network\* providers for outpatient physical therapy (PT) and/or occupational therapy (OT) visits:

- If approved, the Authorization team will allow **one evaluation visit plus five therapy visits** for a total of six visits for the therapy requested. We will fax an authorization letter to inform the provider when approved.
- **If more than six visits are requested**, a separate case will be created to evaluate the balance of the request for medical necessity. We will request clinical information to help with the evaluation, which will be done by a **clinician**.
- **If supporting clinical information is not yet available** to evaluate further therapy, the provider will be given the option to **withdraw the request for additional visits** until the required clinical information can be provided. Once the new request with supporting clinical information is received, **a new case for additional visit requests will be created**.

Please make authorization or cancelation requests using the following contacts:

- **Phone:** 1-866-791-2215
- **Fax:** 1-866-791-2214

If you have questions, please contact Provider Services at the number below.

\*Requests from out-of-network providers will be reviewed by the Clinical team.

## Medicare Webinar: Surveys and the Provider Role

Wednesday, October 26, at 12 noon

This webinar offers the following:

- Understanding the use of member healthcare surveys and the provider's role in driving member satisfaction.
- A refresher on Risk Adjustment and documentation standards.
- Best practices for closing gaps in care at year's end.

**Who should attend?** Providers and office staff working with members of our Total, EasyCare Plus, and EasyCare Medicare plans including:

- Primary care physicians and specialists
- Health information management and quality professionals
- Billers and office managers

[Register at this link](#) up to 11 am on October 26 to attend.

**For additional questions please contact:**

[Provider\\_Education@vnsny.org](mailto:Provider_Education@vnsny.org)

[Learn More and Register for Our Medicare Provider Webinars](#)

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## Tip Sheets for Improving Quality Performance and Patient Satisfaction

Through October, some Medicare consumers (including, possibly, your patients) may receive the Centers for Medicare and Medicaid Services (CMS) **Health Outcome Survey** (HOS). HOS asks about the Medicare consumer's mental and physical health, physical activity, incontinence, and fall risk and prevention strategies. The survey is used by CMS to assess health plan

performance in the Star Ratings Program.

**The results of the survey affect our quality scores and reputation, which can drive enrollment and lead to more patients for you.**

We have created **useful tip sheets** that you can share with your staff to help them understand the kinds of questions patients are asked about provider services on surveys like HOS and the **Consumer Assessment of Healthcare Providers & Systems (CAHPS)** survey:

- [HOS Survey Questions Talking Points](#) shares actual questions from HOS relevant to the Medicare STAR Ratings Program and suggests talking points your practice may leverage to address the health topics included in the survey.
- [Improving Patient Experience and Quality of Care](#) highlights CAHPS survey questions and gives tips on actions to meet quality standards.
- [CAHPS and Health Outcomes Survey Checklist](#) helps you track the annual quality measures and how to discuss them with patients.

Understanding these surveys can help your practice improve patient satisfaction generally. Download, print, and share these handy tools with your staff. And please encourage your patients to complete these surveys if they receive them.

If you or your patient have questions about the survey, please call our Member Services toll free 1-866-783-1444, 8 am – 8 pm, Monday through Friday. (TTY users please call 711.)

## Questions?

Contact VNSNY CHOICE Provider Services

Call toll free: 1-866-783-0222

TTY for the hearing impaired: 711

Monday – Friday, 9 am – 5 pm



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Use the VNSNY CHOICE Provider Portal

Click here for our Provider Quick Reference Guides

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## Thank you for being part of the VNSNY CHOICE Provider network!

We want to make this publication useful to you. Please let us know what you think! Write to us at [CHOICEProviderNews@vnsny.org](mailto:CHOICEProviderNews@vnsny.org).

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