



CHOICESM
Health Plans

Provider News

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Some of Our Online Forms are Changing Address

We're upgrading the security of a number of our online forms. This makes it necessary to move them to new locations, meaning they will have new URLs.

Unless you access these forms from saved bookmarks, these changes should not be noticeable to you. (They may look a little different). You will be able to access them online as usual from the [All Forms](#) page of the VNSNY CHOICE website.

If you access any of these forms from bookmarks, you should know that **beginning Monday, August 9**, those URLs will no longer work. Please remember to delete the bookmarks and access the forms directly from the VNSNY CHOICE website via the new form links below:

- [Provider Claim Dispute Form](#)
- [Demographic Update Form](#)
- [Join Our Network Form](#)
- [Delegated Monthly Roster Form](#)
- [HIV PCP Annual Attestation](#)

Beginning August 9, you can access these forms, as well as our other provider forms, from the VNSNY CHOICE website. Go to our forms page using the **green button** below.

Important Exception: If you are looking for the **Contract Approval/Credentialing Form**, please contact your Provider Relations representative for the new link.

If you need more information about these changes, please contact **Provider Relations** at **1-866-783-0222 (TTY: 711)**.

[Access Our Provider Forms](#)

Do You Have a CHOICE Total Patient Who Could Benefit from Hospice Care?

Members of CHOICE Total (HMO D-SNP) who meet the criteria for hospice care can now receive hospice services as part of their Total health plan whether the hospice provider is in or out of network. Network physicians treating Total patients in hospice care do not need to bill Medicare fee-for-service but can bill CHOICE directly for their services.

CHOICE Total has been designated a **CMS Innovation Center Value-Based Insurance Design (VBID) Model** participant for the Hospice Benefit component, as of January 1 of this year. The VBID model tests a broad array of service delivery approaches and contributes to the modernization of Medicare Advantage through increasing member choice and improving the quality of care for members.

If you have a CHOICE Total patient who is eligible for hospice care, please encourage them to take advantage of the CHOICE Total Hospice Benefit. Click on the button below to read the CHOICE Total Hospice Benefit FAQs.

[Learn more about the CHOICE Total Hospice Benefit](#)

Your Patients May Be Surveyed About Services You Provide

Some CHOICE Total and SelectHealth members will be mailed surveys this summer to measure their satisfaction with their health plans and provider services.

The **Medicare Health Outcomes Survey (HOS)**, conducted between now and November 1, measures how Medicare Advantage members, like those in CHOICE Total, assess their own physical and mental

health over a two-year period. CHOICE leverages the HOS findings to identify areas to improve the quality of our members' care, as well as pinpoint areas for provider education and engagement.

The **CAHPS Clinician & Group Survey (CG-CAHPS)**, being conducted now until August 18, asks patients from both **CHOICE Total** and **SelectHealth** to report on their experiences with primary and specialty care providers and staff. Survey results can be used to equip consumers with information they can use to choose physicians and other health care providers, physician practices, or medical groups. CHOICE uses the CG CAHPS data to assess our providers and network operation strategies.

Please encourage your patients to complete any surveys they may receive as their responses can help improve the overall quality of their health care.

As NYS Covid-19 Emergency Ends, Telehealth Rules Continue

After Governor Cuomo announced the end of the state's COVID-19 emergency in late June, the New York State Department of Health (NYS DOH) issued guidance explaining the **continued coverage by Medicaid of telehealth services for the duration of the federally declared Public Health Emergency.**

The guidance and accompanying regulation allow for all Medicaid providers authorized for in-person services to conduct visits via telehealth, as long as the telehealth services are appropriate to meet a patient's health care needs and are within the provider's scope of practice. Telehealth modalities can include telephone and other audio-only technologies.

Click on the **purple button** below to read the full guidance.

[Read the DOH Medicaid Telehealth Guidance](#)

Questions?

Contact VNSNY CHOICE Provider Relations
Call toll free: 1-866-783-0222 (TTY: 711)
Monday – Friday, 9 am – 5 pm

[Use the VNSNY CHOICE Provider Portal](#)

[Click here for our Provider Quick Reference Guides](#)

**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.

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