

# Managing MA Hospice Benefits in Louisiana, Arkansas, and Mississippi

On January 1st, in a step that dramatically increases the geographic scope of its business-to-business services, VNS Health began managing hospice benefits for Medicare Advantage (MA) members of a health insurer that offers MA plans in Louisiana, Arkansas, and Mississippi. The collaboration includes a third partner, a nationwide palliative and hospice care provider, who will deliver palliative care and hospice services to MA plan members in their homes as part of the joint effort.

VNS Health will help administer the 2023 Medicare hospice benefit for several thousand MA plan members in the three states. “This is exciting news for our organization,” notes Dan Savitt, President and CEO of VNS Health. “It demonstrates our ability to take what we do so well here in New York and extend that expertise to support health plans and their members throughout the country.”

Since January 2021, VNS Health has been a participant in the Hospice Benefit Component of the Medicare Advantage Value-Based Insurance Design (VBID) Model—an array of MA health plan innovations currently being tested by the Centers for Medicare & Medicaid Services (CMS). The VBID Hospice Benefit Component lets participating MA plans include hospice care in their own benefit packages, rather than requiring plan members to switch from their MA plans to traditional Medicare in order to enroll in hospice.

“This model represents a major shift in Medicare policy, and our hope is that it will make palliative care and hospice services more accessible to MA plan members,” explains David Rosales, Executive Vice President and Chief Strategy Officer for VNS Health.

VNS Health is now drawing on its own experience with the VBID model to provide administrative support to its health insurer partner, who recently joined the VBID demonstration as well. This support includes helping the insurer meet CMS reporting requirements; using analytics to assist in identifying members who could benefit from palliative or end-of-life care; and helping design outcome measurements.