

Long Term Care Options

An Overview of the Programs Serving Your Community

Managed Long-Term Care (MLTC) provides coordinated health and long-term care services to consumers who are chronically ill or have disabilities and need health and long-term care services, such as home attendant or adult day care in order to stay in their homes and communities for as long as possible. There are three Managed Long-Term care models in New York State:

PACE (Program for All Inclusive Care for the Elderly) provides a comprehensive health care plan for those ages 55 and older which are otherwise eligible for nursing home admission. Both Medicaid and Medicare pay for PACE services. PACE members are required to use PACE doctors. PACE is responsible for arranging all primary, in-patient hospital and long-term care services that are required by a PACE member. To be eligible consumers must require nursing home level of care.

Managed Long Term Care Plans (Partial Medicaid Plan) provide long-term care services for those ages 21 and older such as home health care, nursing, and personal care. Additionally, the MLTC plans provide ambulatory services that are medically necessary such as dental and medical equipment. MLTC members will continue to get medical services from their primary doctor and in-patient hospital stays by using their Medicaid/Medicare card(s).

Medicaid Advantage Plus Plans provides consumers who are Medicaid and Medicare eligible to enroll in the same health plan for most of their Medicare and Medicaid benefits. Dual eligible consumers enroll in the same plan's Medicare Advantage and Medicaid Advantage Plus Plan products. The benefit of these programs is the coordination of services under one service provider. Medicaid Advantage Plus Plans cover both acute and long-term care. To be eligible for the Medicaid Advantage Plus Plan the consumer must be eligible for nursing home level of care.

For further assistance with PACE, MLTC, or Medicaid Advantage Plus Plans, contact New York Medicaid Choice at 1-888-401-6582 or www.nymedicaidchoice.com

Consumer Directed Personal Assistance Program (CDPAP) enables Medicaid consumers who are medically eligible for home care services to have greater flexibility and freedom in choosing their caregivers. This program provides services to chronically ill or physically disabled individuals who have a medical need for help with activities of daily living and/or skilled nursing services.

Consumers must be able and willing to make informed choices regarding their plan of care or have a legal guardian, designated relative, or other adult able and willing to help make informed choices on behalf of the consumer. The consumer or the person acting on the consumer's behalf (such as the parent of a disabled or chronically ill child) assumes full responsibility for hiring, training, supervising, arranging back-up coverage when necessary, coordinating other services, keeping payroll records, and if necessary terminating the employment of person providing services.

Individuals who are interested in CDPAP services can apply for this service from their Managed Care plan, Managed Long Term Care Plan, or CASA office.

Nursing Home Transition and Diversion Waiver (NHTD) is a Medicaid waiver program which provides community based services to individuals 18

years of age or older who require nursing home level of care. The NHTD provides a community-based alternative to nursing home care. The program affords the consumer to receive an individualized comprehensive service plan that is delivered in the community rather than in an institution. The consumer is able to be in control of their lives and manage their care. Services available include but are not limited to service coordination, assistive technology, counseling, community transitional services, environmental modifications, congregate and home delivered meals, long-term care, respite services, day programs. For a consumer to apply for this program they must be Medicaid eligible and apply directly to the agency who administers the program in New York City.

For further assistance, contact the Regional Resource Development Center which is VNA of Staten Island who will assist with the application process, call 718-816-3555.

Traumatic Brain Injury (TBI) is a Medicaid waiver program for consumers who are between 18 and 64 years of age, and were injured after the age of 18. The consumer must be diagnosed with a traumatic brain injury or a related condition and eligible for nursing home level of care. The goal of this program is to afford eligible consumers access coordinated Medicaid services needed to assist them to live in the community and achieve maximum independence. This program works with consumers and their families to develop a comprehensive plan of care to prevent unnecessary admissions into nursing homes and to help consumers leave nursing homes and live in the community. For consumers who are currently placed in a nursing home and choose to reside in the community, the service coordinator will work with the consumer to obtain a living arrangement that can meet his/her needs. Consumers enrolled in the TBI program receive all regular Medicaid services, and may have access to rent subsidies, housing supports, furniture grants, and coordinated counseling.

For further assistance, contact the Traumatic Brain Injury regional office under VNA of Staten Island, (718) 816-3528.