

## Medicaid Managed Long Term Services and Supports (MLTSS)

### **What is MLTSS?**

Managed Long Term Services and Supports (MLTSS) refers to the delivery of long-term services and supports through New Jersey Medicaid's NJ FamilyCare managed care program. MLTSS is designed to expand home and community-based services, promote community inclusion and ensure quality and efficiency.

MLTSS uses NJ FamilyCare managed care organizations (also known as HMOs or health plans) to coordinate ALL services. Currently, NJ FamilyCare members have their acute and primary health care services and their home and community based services coordinated by different care management agencies. MLTSS provides comprehensive services and supports, whether at home, in an assisted living facility, in community residential services, or in a nursing home.

### **What does MLTSS cover?**

Effective July 1, 2014, Managed Long Term Services and Supports (MLTSS) includes:

- Personal Care;
- Respite;
- Care Management;
- Home and Vehicle Modifications;
- Home Delivered Meals;
- Personal Emergency Response Systems;
- Mental Health and Addiction Services;
- Assisted Living;
- Community Residential Services;
- Nursing Home Care.

### **Who is covered in MLTSS on July 1, 2014?**

Beginning July 1, 2014, participants in the Medicaid waiver programs listed below will be automatically enrolled in the Managed Long Term Services and Supports (MLTSS) program through their current Medicaid managed care organization (MCO), also known as a health plan:

- Global Options for Long-Term Care (GO);
- AIDS Community Care Alternatives Program (ACCAP);
- Community Resources for People with Disabilities (CRPD); or,
- Traumatic Brain Injury (TBI) Waiver.

Any individuals with Medicaid entering a nursing home for the first time will have their acute and primary health care managed by the NJ FamilyCare MCOs with MLTSS or the Program of All-Inclusive Care for the Elderly (PACE) program. Individuals on MLTSS also will have their acute and primary health care services and nursing home care managed by a NJ FamilyCare MCO.

Current custodial nursing home residents on Medicaid will remain in a fee-for-service environment. Medicaid beneficiaries living in Special Care Nursing Facilities (SCNFs) as of July 1, 2014 will remain in the fee-for-service environment for two years.

Any individual who is newly eligible for Medicaid and living in a nursing home after July 1, 2014 will have his/her care managed by a NJ FamilyCare MCO through the MLTSS program. Individuals who enter a SCNF

after July 1, 2014 will have their acute and primary health care services and their nursing home care managed by a NJ FamilyCare MCO through the MLTSS program.

### **How to qualify for MLTSS?**

Beginning July 1, 2014, participants in the Medicaid waiver programs listed above will be automatically enrolled in the Managed Long Term Services and Supports (MLTSS) program through their current NJ FamilyCare managed care organization (MCO), also known as a health plan.

However, a person also can qualify for Managed Long Term Services and Supports (MLTSS) by meeting these established Medicaid requirements:

- **Financial Requirements** - These include monthly income, as well as total liquid assets. For more detailed information on Medicaid financial eligibility, [click here](#).  
Note that for children applying for MLTSS, and who meet the nursing home level of care, parental income and resources are not counted in determining financial eligibility.
- **Clinical Requirements** - A person meets the qualifications for nursing home level of care, which means that the person requires assistance with activities of daily living such as bathing, toileting and mobility.
- **Age and/or Disability Requirements** - These involve age requirements whereby one must be 65 years or older; and/or disability requirements whereby one must be under 65 years of age and determined to be blind or disabled by the Social Security Administration or the State of New Jersey.

### **How to apply for MLTSS?**

Beginning July 1, 2014, participants in the Medicaid waiver programs listed below will be automatically enrolled in the Managed Long Term Services and Supports (MLTSS) program through their current Medicaid managed care organization (MCO), also known as a health plan:

- Global Options for Long-Term Care (GO);
- AIDS Community Care Alternatives Program (ACCAP);
- Community Resources for People with Disabilities (CRPD); or,
- Traumatic Brain Injury (TBI) Waiver.

However, Medicaid waiver program participants that want to change their managed care organization will receive information about how to do this prior to and after July 1, 2014.

To apply for Medicaid MLTSS, contact your local [County Welfare Agency \(Board of Social Services\)](#)

or your local [County Area Agency on Aging \(AAA\)](#) - Aging and Disability Resource Connection (ADRC).

If you are applying on behalf of your child or an individual under 21 years of age, you can do so by contacting your local [County Welfare Agency \(Board of Social Services\)](#) or the Division of Disabilities Services (DDS) at 1-888-285-3036 (press 2 after prompt and then press 1 after next prompt) to speak with an Information and Referral Specialist.

There is another option known as the Program of All-Inclusive Care for the Elderly (PACE) program. To be eligible to enroll, you must live in the PACE provider service area. There currently are four PACE organizations in seven counties. [Click here](#).

Information can be accessed at:

<http://www.state.nj.us/humanservices/dmahs/home/mltss.html>