



How do I join MLTC?

A step-by-step guide to enrolling in MLTC by the Independent Consumer Advocacy Network



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How to use this brochure

This brochure explains the steps to enroll in Managed Long Term Care (MLTC).

To learn more about MLTC, read our brochure **“What is MLTC?”** available online at icannys.org/icanlibrary/what-is-mltc, or call 844-614-8800 to speak to someone who can help.



If there's anything you don't understand or want more information about, you can always call ICAN at **(844) 614-8800**.

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What is Managed Long Term Care (MLTC)?

MLTC stands for **Managed Long Term Care**.

Long term care means services that help you with your daily activities. Examples are home care attendants, day care programs, and services that help you with daily activities while you remain in your home. You might need long term care services if you need another person to help you clean your home, get dressed, or take a shower.

Many New Yorkers who need long term care get it through Medicaid. And most people with Medicaid must get their long term care through an MLTC program.

The “M” in MLTC stands for managed. MLTC is a type of health insurance called managed care. You must join a plan offered by a private health insurance company to get Medicaid to pay for your long term care. Medicaid pays these companies to provide long term care to their members.

Health insurance pays for medical care like doctors, hospitals and drugs.



But most health insurance doesn't pay for long term care.



To learn more about long term care services, read our brochure **“What is MLTC?”** available online at icannys.org/icanlibrary/what-is-mltc, or call 844-614-8800.

How do I join an MLTC plan?

If you don't have Medicare, then you don't need to join MLTC. Just call your Medicaid plan to request long term care services.

Some people with Medicaid but not Medicare may be eligible to enroll in MLTC to receive services not covered by their Medicaid plan. Call ICAN at 844-614-8800 if this applies to you.

But if you have Medicare, there are five steps to choosing and joining an MLTC plan:

1. Apply for Medicaid.

You can only join an MLTC plan if you have Medicaid health insurance. First, apply for Community Medicaid through your local Department of Social Services.¹

You will need to fill out an application form and provide copies of documents.

1. You can find your Department of Social Services on this website: http://www.health.ny.gov/health_care/medicaid/ldss.htm



You will need to provide identification and some other documents. It can take up to 45 days to get a decision.

If you have an urgent need for Medicaid home care, you can ask for **immediate need**. This means you may be able to get a faster decision.

Applying for Medicaid can be complicated. There are programs in most counties who can help you complete and submit the Medicaid application.

To find help with applying for Medicaid in your county, visit this website: https://www.health.ny.gov/health_care/medicaid/fe_abd.htm.

You can also contact your Local Department of Social Services (LDSS) to apply for Medicaid. Call **800-541-2831** to find the contact information for your LDSS.

2.

NY Independent Assessor Program

The next step is to contact the **NY Independent Assessor Program (NYIAP)**. NYIAP is a company that works for Medicaid. They assess people with Medicaid to find out whether they may be eligible to enroll in MLTC. You will have to be assessed by NYIAP before you can enroll in an MLTC or MAP plan. If you want to enroll in a PACE plan, you can enroll directly without going through NYIAP.



Here are the steps to get assessed by NYIAP:

- ❑ **Call NYIAP at 855-222-8350.** They are open Monday–Friday 8:30am–8:00pm, and Saturday 10:00am–6:00pm.
- ❑ **NYIAP will schedule two appointments with you.** They can be held by a video call² or in-person. You can have a family member or friend join you for these appointments.
- ❑ **Community Health Assessment (CHA).** This is the first NYIAP appointment. A nurse will ask a long list of questions to find out about your medical condition and what you need help with.
- ❑ **Clinical Appointment (CA).** This is the second NYIAP appointment. A doctor or nurse practitioner will ask you a shorter list of questions to find out if you have a stable medical condition and are self-directing.
- ❑ **Outcome Notice.** A few days after the second appointment, NYIAP will mail you a notice informing you whether or not you are approved for MLTC enrollment and if you have a stable medical condition.

2. For the video call, you will need to have a computer, smartphone, or tablet that has a camera and microphone, and a connection to the internet.

If your NYIAP outcome notice says “You may qualify to receive long term services and support through a Managed Long Term Care (MLTC) plan,” that means you can proceed to Step 3 and choose a plan.

It is possible that NYIAP will send you an Outcome Notice that says you are not eligible to enroll in MLTC or get home care. You have the right to **appeal** that decision. You can do this by requesting a **Fair Hearing**. This means you can tell a judge why you think the decision was wrong. If the judge agrees with you, they can make NYIAP change their decision.

Call ICAN at **844-614-8800** for help with appeals or Fair Hearings.

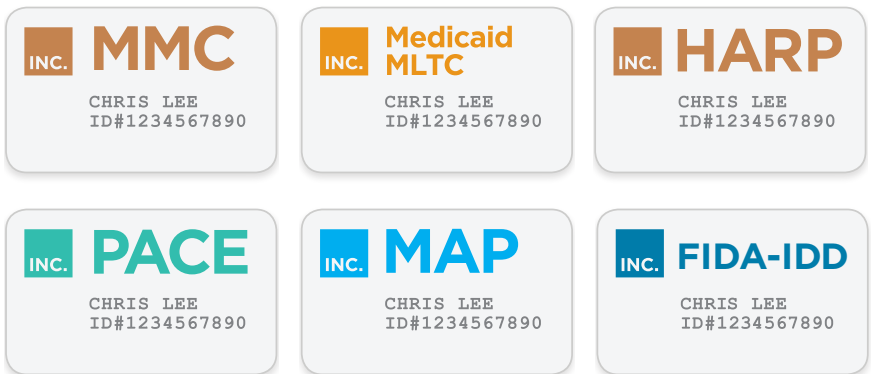
See our brochure on **“Appeals in Medicaid Managed Care Plans”** to learn more.

3. What type of plan?

Once you've been approved by NYIAP, you are ready to join a plan.

But first you need to choose what type of plan you want. You can use our **“What is MLTC?”** brochure to help you decide which type of plan is right for you.

Some types of plans are not available in all counties. Call ICAN at **844-614-8800** to get the latest list of plans in your county.



To learn more about your plan choices, see our **“What is MLTC?”** brochure, available online at icannys.org/icanlibrary/what-is-mltc, or call 844-614-8800.

What kinds of MLTC plans are available?

There are six different kinds of Medicaid health insurance that include long term care. Which kind is right for you depends on whether you also have Medicare.

If you have Medicaid but not Medicare, then you are probably in either a **Mainstream Medicaid Managed Care plan (MMC)** or **Health And Recovery Plan (HARP)**. You can get long term care services through your MMC or HARP. You do not need to enroll in MLTC. The rest of this brochure does not apply to you. Call ICAN if you need help getting long term care through your plan (see p.18).

If you have Medicare and Medicaid, then you can choose whether to get all of your services through the same plan, or to have an MLTC plan that's separate from your Medicare.

If you want to keep your Medicare and Medicaid separate, you can join a **Medicaid MLTC plan**.

If you want to have one plan that includes all of your medical care and long term care, you can choose from three kinds of plan: **PACE, MAP, or FIDA-IDD.**³

Each kind of plan may cover different services. But all plans of the same kind must cover the same services.

3. FIDA-IDD is only for people who have intellectual or developmental disabilities. To learn more about this option, see our brochure "A Plan For Me: FIDA-IDD," available at <https://icannys.org/icanlibrary/a-plan-for-me-fida-idd/>

4. Choose your plan.

Once you have been approved for Medicaid and for MLTC, you must call a plan to find out if it is right for you. Here are some questions you should ask to help you decide:

- How many hours of home attendant services will I get?
- What other services would be given to me?
- Will I be able to keep the aide who is helping me now?
- Can I direct my own care?⁴
- Will I be able to get care in my own home, or only in a nursing home?
- Will my dentist, podiatrist, audiologist and optometrist be covered?
- Will my doctors, hospitals, and drugs be covered? (Only for PACE, MAP, and FIDA-IDD)

To answer these questions, the plan will need to meet with you.

4. MLTC includes a service called Consumer Directed Personal Assistance Program (CDPAP), where you can choose your own aides instead of using a home care agency.

You can have friends or family with you during this meeting. You can ask questions and tell the nurse anything you want about your needs. Be sure to ask what services and how many hours the plan would approve. If you like this plan, you can join right away.

You do not need to join the first plan that meets with you. You can call another plan and ask them to do an assessment. You should pick the plan that will give you the services you need and that you like the best.



5. Enroll.

Once you have chosen the plan that best fits your needs, you may enroll by signing an enrollment form provided by the plan. If you are unable to sign, an authorized representative can sign this form for you.

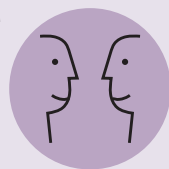
If you enroll by the 20th of the month, your services will begin on the 1st of the next month. If you enroll after the 20th, your services will not start until the following month.

The entire process, from applying for Medicaid to enrolling in a plan, will probably take about 3 months.

If you need home care services more quickly, you may be able to get them approved by your Local Department of Social Services instead of MLTC. This is called **immediate need home care**. If approved, these services are only temporary. Within a few months, you will need to join MLTC. Call ICAN to learn more about this option.

This can be a complex process, so please **call ICAN for help: (844) 614-8800.**

You can also call the enrollment broker, **NY Medicaid Choice, at (888) 401-6582.**



How do I get services through my MLTC plan?

Once you are enrolled in MLTC, you will be assigned a **care manager**.

Your care manager will call you every month to make sure you are getting the services you need. They will visit you in your home every six months.

If you want a new service, or want more of an existing service, you should call your care manager. This is called a **service authorization**.

When you ask for a service authorization, your MLTC plan must send you a written notice of their decision within 14 days.⁵



5. As fast as your condition requires, or within 3 days of receiving all necessary information, but no more than 14 days.

Solving problems with your MLTC plan



Your care manager should be able to help you solve most problems you might have with your care.

But if you don't like a decision your MLTC plan makes, you can ask for a different decision. This is called an **appeal**.

If your MLTC plan takes an **action** regarding your services, you have the right to a **written notice** and to appeal that action.

There are several different ways to appeal, depending on what kind of plan you have and what the issue is.

The rules about MLTC appeals are complex. If your MLTC plan has made a decision about your care that you disagree with, **call ICAN**.

ICAN can help you decide whether to appeal, and we can even refer you to legal aid in some cases.

You also have the right to complain about your care management or the quality of care you receive. This is called a **grievance**.

ICAN can help you.

We can:

- **Answer your questions** about Managed Long Term Care plans.
- **Give you advice** about your plan options.
- **Help you enroll** in an MLTC plan.
- **Identify and solve problems** with your plan.
- **Help you understand your rights.**
- **Help you file complaints** and/or grievances if you are upset with a plan's action.
- **Help you appeal an action you disagree with.**

Call **844-614-8800**.

If you are hearing or speech impaired, you can use the NY Relay service by dialing **711**.

Email **ICAN@cssny.org**.





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