## Medicaid Long-Term Care Managed Care (MLTCMC) Program

The Medicaid Long-Term Care Managed Care Program (LTCMC) is a Medicaid program administered by the Agency for Health Care Administration (AHCA). LTCMC provides long-term-care services to the elderly or disabled population ages 18 and up. AHCA contracts with managed care plans, such as Humana, to operate the program and coordinate services for recipients. The purpose of the program is to ensure Floridians remain independent while maintaining a continuity of care. Services may be provided in the home, community or a nursing home depending on a person's needs. The program was implemented in stages beginning <a href="December, 2018">December, 2018</a> and became statewide in February, 2019.

If eligible, recipients may choose a managed care plan for enrollment. Different plans are available based on the region where the member lives. Only Humana Long-Term Care Plan is statewide. Plans also may have expanded benefits offered to recipients enrolled in their plan. To find out more about benefits, please contact the state's enrollment broker at 1-877-711-3662.

Once enrolled in a plan, recipients have a care manager who works with them to develop a plan of care to meet their needs. This plan of care outlines what services recipients need to remain safe and healthy. The care manager keeps in regular contact with recipients and providers to ensure recipients' safety and health are maintained. Whenever needs change, the care manager works with the recipient and his or her caregivers to rework the plan of care to meet these changes.

The program is funded by Medicaid and most services do not include a cost to recipients. Below you will find a list of services covered by the LTCMC program:

Adult day health care	Medical equipment and supplies
Adult companion care	Intermittent and skilled nursing
Caregiver training	Assistive care services
Homemaker	Personal emergency response system
Nursing facility	Behavioral management
Assisted living	Care coordination/case management
Personal care	Medication administration
Attendant care	Home accessibility adaptation
Respite care	Nutritional assessment/ risk reduction
Home-delivered meals	Medication management
Hospice	Transportation, non-emergency
Occupational, physical, respiratory and speech therapies	

Individuals are eligible for the program if they meet financial eligibility requirements for Medicaid and meet minimum admission standards for nursing facility care. To learn more about eligibility requirements please contact the enrollment broker at 1-877-711-3662. You may also ask the enrollment broker about expanded benefits offered by plans.