

YOUR MEMBER HANDBOOK HAS BEEN CHANGED TO INCLUDE UPDATED ELIGIBILITY CRITERIA FOR NEW MEMBERS AND EXISTING MEMBERS WHO LEAVE AND RE-ENROLL IN A MANAGED LONG-TERM CARE (MLTC) PLAN

For new enrollees, starting **September 1, 2025**, the MLTC Program eligibility criteria to join a Medicaid Advantage Plus (MAP) plan requires an individual to be assessed as in need of community based long term services and supports (CBLTSS) for more than 120 days and the following Minimum Need:

- at least limited assistance with physical maneuvering with more than two activities of daily living (ADLs); or
- individuals with a Dementia or Alzheimer's diagnosis, assessed as needing at least supervision with more than one ADL

If you enrolled in any MLTC Plan prior to September 1, 2025, you will not be subject to the new Minimum Needs Requirements at reassessment as long as you remain continuously enrolled in any MLTC plan. If you leave the MLTC program and want to rejoin, you will need to meet the eligibility criteria that is in place for MLTC enrollment at the time you rejoin.

If you have any questions, please call VNS Health Total (HMO D-SNP) at 1-866-783-1444 (TTY: 711).

Your Care Team
1-866-783-1444 (TTY: 711)
7 days a week, 8 am – 8 pm (Oct. – Mar.)
Weekdays, 8 am – 8 pm (Apr. – Sept.)