



Aetna Better Health of Illinois

Managed Long Term Supports and Services (MLTSS)

Eligibility for MLTSS

The Managed Long Term Supports and Services (MLTSS) program is available to dual eligible individuals receiving full Medicare and Medicaid benefits who are *not* members of the Medicare-Medicaid Alignment Initiative (MMAI) and live in a nursing facility or receive one of the following Home and Community Based Services (HCBS) waivers:

- Persons with Disabilities
- Persons with Brain Injury
- Persons who are Elderly
- Persons with HIV/AIDS
- Supportive Living Facility

Eligibility for HCBS waivers are determined by your Determination of Need (DON) score. You must have a DON score of 29 or higher. A care manager from a State of Illinois agency will conduct the DON in your home. Aetna Better Health of Illinois will work with the State for your annual reassessment, or whenever there is a change in your condition or needs.

MLTSS Services

Some services are covered by Medicaid, Medicare, and Aetna Better Health of Illinois. We are your long term support & services provider. For medical and prescription drug coverage, please contact your Medicare or Medicare Advantage Plan, Medicaid, or your Prescription Drug (Medicare Part-D) plan. We will also work with you to help coordinate your care. You will have a care coordinator who will help you navigate the health system, find a primary care provider (PCP), show you how to obtain pharmacy

benefits, access Medicaid covered services, and even help you file complaints with the Ombudsman & SHIP counselors if needed. You must qualify for Home and Community Based Services (HCBS) waivers to be eligible for certain services, and each waiver has its own set of eligible services.

Services listed below are covered by Aetna Better Health of Illinois through the MLTSS program:

- Behavioral Health Services, including:
 - Mental health assessment and/or psychological evaluation
 - Medication management
 - Family, group, & individual therapy
 - Community based services
- Nursing Care Services
- Nursing Facility Services
- Substance Use Services
- Non-Emergency Transportation Services
- HCBS Waiver Services

Covered Home and Community Based Services (Waiver clients only)

Here is a list of some of the medical services and benefits that Aetna Better Health of Illinois covers for members who are in a Home and Community Based Service waiver.

Department on Aging (DoA), Persons who are Elderly:

- Adult Day Service
- Adult Day Service Transportation
- Homemaker
- Personal Emergency Response System (PERS)

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Department of Rehabilitative Services (DRS), Persons with Disabilities, HIV/AIDS:

- Adult Day Service
- Adult Day Service Transportation
- Environmental Accessibility Adaptations-Home
- Home Health Aide
- Nursing, Intermittent
- Skilled Nursing (RN and LPN)
- Occupational Therapy
- Home Health Aide
- Physical Therapy
- Speech Therapy
- Homemaker
- Home Delivered Meals
- Personal Assistant
- Personal Emergency Response System (PERS)
- Respite
- Specialized Medical Equipment and Supplies

Department of Rehabilitative Services (DRS), Persons with Brain Injury:

- Adult Day Service
- Adult Day Service Transportation
- Environmental Accessibility Adaptations-Home
- Supported Employment
- Home Health Aide
- Nursing, Intermittent
- Skilled Nursing (RN and LPN)
- Occupational Therapy
- Physical Therapy
- Speech Therapy
- Prevocational Services
- Habilitation-Day
- Homemaker
- Home Delivered Meals
- Personal Assistant
- Personal Emergency Response System (PERS)
- Respite

- Specialized Medical Equipment and Supplies
- Behavioral Services (MA and PHD)

HealthCare and Family Services (HFS), Supportive Living Facility:

- Assisted Living

Non-Covered Services

Here is a list of some of the medical services and benefits that Aetna Better Health of Illinois' MLTSS plan does not cover:

- Services that are experimental or investigational in nature
- Services that are provided by an out-of-network provider and not authorized by Aetna Better Health
- Services that are provided without a required referral or required prior authorization
- Elective cosmetic surgery
- Infertility care
- Any services that is not medically necessary
- Audiology services
- Chiropractor services
- Dental services
- Diagnostic and therapeutic radiology
- Early Periodic Screening, Diagnosis and Treatment (EPSDT) services
- Family planning services
- Laboratory and x-ray services
- Medical equipment and supplies
- Pharmacy services
- Podiatry services
- Transplants
- Vision services

This is not a full list of non-covered services.

For more information on services, contact Member Services at **1-844-316-7562 (TTY: 711)**. Hours are 8:30 AM – 5 PM, Monday through Friday.

[AetnaBetterHealth.com/Illinois-Medicaid](https://www.aetnabetterhealth.com/illinois-medicaid)

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