

Simply Healthcare Plans, Inc. — A comprehensive plan

What does that mean?

Simply Healthcare Plans, Inc. (Simply) provides services to members enrolled in Statewide Medicaid Managed Care Managed Medical Assistance and Statewide Medicaid Managed Care Long-Term Care (SMMC LTC).



What is SMMC LTC?

SMMC LTC offers a range of long-term services and supports for seniors and persons with disabilities. These benefits help members live independently in their homes for as long as possible and can prevent or delay nursing home admission.

What services does SMMC LTC cover?

SMMC LTC services help members who live at home or make payments toward residence in an assisted living facility (ALF). For members who reside at home, services can include personal care, adult day care, home-delivered meals, personal emergency response, respite care, home modification, homemaker services, nursing services for medication help, and medical equipment and supplies (including incontinence supplies).



Important SMMC LTC highlights for Simply members:

- Simply has 16 years of experience managing SMMC LTC benefits.
- Members enrolled in SMMC LTC can still keep their Medicare benefits.
- Every member is assigned a field case manager who develops a care plan and authorizes SMMC LTC services. Ongoing phone and face-to-face contacts with this case manager ensure the member's needs are being met by the services in place.
- Members can live alone, with family, in an ALF or in a nursing home.
- A \$5,000 benefit is offered to help members transition from nursing home to a community setting.
- Four 1-way community transportation trips are offered to support a member's integration in the community.
- Caregivers are offered a one-year Amazon Prime membership to have supplies delivered for the member.
- Simply assists members with maintaining Medicaid recertification.
- There is no member cost for SMMC LTC services except when residing in a facility such as an ALF or nursing facility.





Eligibility

Age:

Eligible members are 18 and older. If a member is under 65, the member is required to be eligible for Medicaid by reason of disability.



Clinical eligibility:

Members must meet nursing home level of care requirements. These members may:

- Require some help with five or more activities of daily living (ADLs).
- Require some help with four ADLs plus supervision or administration of medication.
- Require total help with two or more ADLs.
- Have a diagnosis of degenerative disease or chronic condition requiring daily nursing service.



Financial eligibility:

Members will be financially eligible to enroll if their:

- Individual monthly income does not exceed \$2,382, as determined by the Department of Children and Families or Social Security.
- Assets do not exceed \$2,000 (not including home and car).

How members apply:

Call the Department of Elder Affairs hotline at **1-800-963-5337** to reach your local Area Agency on Aging.

For more information, call Choice Counseling at **1-877-711-3662**.

<https://provider.simplyhealthcareplans.com>

Simply Healthcare Plans, Inc. is a Managed Care Plan with a Florida Medicaid contract. SFLPEC-2543-21