The mission of ArchCare is to foster and provide faith-based holistic care to frail and vulnerable people unable to fully care for themselves. Through shared commitment, ArchCare seeks to improve the quality of the lives of those individuals and their families.

- ArchCare’s Mission Statement

Contact Us:
Provider Relations - providerrelations@archcare.org
Claims Inquiry - claimsinquiry@archcare.org
ArchCare Community Life is a Managed Long Term Care Program that was established to coordinate health services for the chronically ill wishing to remain in their home and communities as long as possible. Member’s healthcare needs, both covered and non-covered, are coordinated by an assigned Care Manager in collaboration with Member’s Primary Care Provider and Archcare Community Life Participating Providers to work with the Archcare Community Life Care Management Team to coordinate all care. This will allow the Provider to service our Members with assistance in transportation to and from the appointments, as well as, receive the best quality of care and support from Care Teams.

What is managed long-term care and how does it work? Managed long-term care (MLTC) is a system that streamlines the delivery of long-term services to people who are chronically ill or disabled and who wish to stay in their homes and communities. These services, such as home care or adult day care, are provided through managed long-term care plans that are approved by the New York State Department of Health. The entire array of services to which an enrolled Member is entitled can be received through the MLTC plan the Member has chosen.

Enrollment in a MLTC plan is mandatory for those who:
- Are dual eligible (eligible for both Medicaid and Medicare) and over 21 years of age and need community based long-term care services for more than 120 days.
- Reside in the counties of NYC, Nassau, Suffolk or Westchester.

Enrollment in MLTC plan is voluntary for those who:
- Are dual eligible and are 18 through 21 years of age and need community based long term care services for more than 120 days and assessed as nursing home eligible.
- Are non-dual eligible and over 18 years of age and are assessed as nursing home eligible.
ArchCare Senior Life (ASL) PACE Overview

PACE stands for Program of All-Inclusive Care for the Elderly. It is a national program sponsored by the Federal government through Medicare and the State governments through Medicaid. It was developed for people 55 or older who either have Medicaid, Medicare and Medicaid (dual eligibles), or Medicare only and are willing to spend down their assets to qualify for Medicaid or pay privately; who were assessed as being eligible for nursing home placement according to the standards established by the State in which they reside; but with the appropriate services and care can continue to live safely in the community. In New York, nursing home eligibility is defined as having long term care needs of 120 days or more.

The model of care is built around an interdisciplinary team (IDT) which includes, a Primary Care Physician, nurse, social worker, physical therapist, occupational therapist, recreational therapist, dietician, center director, transportation coordinator, personal care worker and home care coordinator. Each Member is assessed twice a year by the team. Based on the assessments, Member problems are identified and the team builds an integrated care plan to resolve them.

The ArchCare Senior Life program provides all the benefits that Medicare and Medicaid provide to its Members at no cost if they have Medicaid or are dual eligible and at the discretion of the IDT can provide additional benefits when deemed necessary for the Member.

Archcare Senior Life regulations require that each Member is managed by an IDT, which includes the Primary Care Physician (PCP). The waiver allows the community based (CB)PCP to directly interact with the other Members of the IDT including a nurse, social worker, physical and occupational therapists, dietician and other non-physician care Providers.

Archcare Senior Life regulations provide specific guidelines with regard to CBPCP participation in the Archcare Senior Life program, Member assessments and physician orders. In addition, Archcare Senior Life has developed requirements that define communication and documentation issues necessary to insure high quality care for their Members.
ArchCare Advantage (AA) HMO SNP Overview

ArchCare Advantage is a HMO Special Needs Plan Program is a Coordinated Care plan (CCP) with a Medicare contract. ArchCare Advantage is a specialized Medicare Advantage Plan (a Medicare Advantage “Special Needs Plan”), which means its benefits are designed for people with special health care needs. ArchCare Advantage is designed specifically for people who live in an institution (like a nursing home) or who need a level of care that is usually provided in a nursing home.

Our plan includes access to a network of providers who specialize in treating patients who need this level of nursing care. As a member of the plan, you get specially tailored benefits and have all your care coordinated through our plan.

What is special needs plan and how does it work?

A special needs plan (SNP) is a Medicare Advantage (MA) CCP specifically designed to provide targeted care and limit enrollment to special needs individuals. A special needs individual could be any one of the following:

- An institutionalized individual,
- A dual eligible, or
- An individual with a severe or disabling chronic condition, as specified by CMS.

A SNP may be any type of MA CCP, including either a local or regional preferred provider organization (i.e., LPPO or RPPO) plan, a health maintenance organization (HMO) plan, or an HMO Point-of-Service (HMO-POS) plan.

ArchCare Advantage is committed to bringing people and resources together to better plan and delivers accessible, high quality, cost effective health care services. ArchCare Advantage has developed a network of area providers who are able to provide the services our Members may require while enrolled. The providers in the network have been selected and credentialed by ArchCare Advantage to assure our Members the best possible care. When an individual enrolls in ArchCare Advantage they are required to use providers in the ArchCare Advantage network and also obtain authorization from their Care Management Team.