



Quick Reference Contact List

FSSA Executive Office 317-233-4454

Eligibility for programs / Division of Family Resources 800-403-0864

Adult Protective Services state hotline 800-992-6978

Suicide prevention 800-273-TALK (8255)

To report fraud 800-403-0864 or reportfraud@fssa.in.gov

To report issues with group homes, assisted living, etc. 800-545-7763 or bqis.help@fssa.in.gov

To report child care issues 877-511-1144

To report child abuse (Department of Child Services) 800-800-5556

Office of Communications and Media 317-234-0197

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www.fssa.in.gov

Introduction

The Indiana Family and Social Services Administration was established to consolidate and better integrate the delivery of human services by state government. FSSA is dedicated to helping Hoosiers live productive, safe and healthy lives. This guide is designed to help providers and community- and faith-based organizations connect those who are in need with services we provide. It contains information about programs provided and administered by FSSA and a few other state agencies, and gives direction on how Hoosiers qualify to receive assistance from a variety of programs. With greater understanding and awareness of the services FSSA provides, providers, advocates and faith- and humanitarian-based organizations can better employ these services to help rescue Hoosiers in crisis and improve the quality of life for all in our state.

FSSA is a health care and social service agency. Listed on the next page are the six care divisions in FSSA that administer services to over 1.5 million Hoosiers and a brief description of the division's role.





Division of Aging: Supports the development of alternatives to nursing home care and coordinates services through the INconnect Alliance statewide network.

Division of Disability and Rehabilitative Services: Manages the delivery of services to children and adults with intellectual and developmental disabilities.

Office of Early Childhood and Out-of-School Learning: Oversees early care, education and out-of-school time programs.

Division of Family Resources: Receives applications and determines eligibility for Medicaid, Supplemental Nutrition Assistance Program, Temporary Assistance for Needy Families and Refugee Cash Assistance.

Office of Medicaid Policy and Planning: Administers health coverage programs, including the Healthy Indiana Plan and other Indiana Medicaid programs.

Division of Mental Health and Addiction: Collaborates with a network of mental health care providers. DMHA operates six psychiatric hospitals and funds addiction prevention and treatment programs.







Using this guide

This guide has been organized into nine general areas of need to help you locate services. A description of specific services, eligibility and how to apply to receive assistance can be found in areas of need.

General Areas of Need:

- · Early Care & Education
- Employment
- Financial Services
- Food / Nutrition
- Health Coverage
- Home- & Community-Based Services for the Aged, Blind and Disabled
- Mental Health / Addictions
- Transportation
- Housing

Refugee Services

Indiana Refugee Services provides assistance and services to refugees, asylees, certain Amerasian immigrants, Cuban and Haitian entrants, and victims of human trafficking (referred to collectively as "refugees"). Indiana Refugee Services monitors program planning and provision of services and provides technical assistance to ensure compliance with federal and state regulations governing the delivery of refugee assistance and services, including cash and medical assistance.

Indiana Refugee Services ensures that refugees are provided assistance and services through state-administered programs that enable them to become employed, economically self-sufficient and integrated members of society as soon as possible after their arrival in the United States.

Inquiries about the Indiana Refugee Services program can be directed to 855-673-0193. ext. 5831 or 5838.

If you encounter any terms or program names you do not understand, refer to the Indiana Family and Social Services Administration glossary of terms at the end of this guide or at www.in.gov/fssa/4999.htm.

The information in this guide is correct as of April 1, 2019. For the most up-to-date information, refer to **www.fssa.in.gov**.

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- Child Care Finder
- Child Care Resource and Referral
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- Paths to QUALITY™
- First Steps*
- On My Way Pre-K
- Head Start and Early Head Start



Employment

- Blind and Visually Impaired Services
- Indiana Manpower Placement and Comprehensive Training
- Randolph-Sheppard Business Enterprise Program
- Vocational Rehabilitation Services
- Vocational Rehabilitation Pre-employment Transition Services
- WorkOne Career Centers



Financial Services

- Homeownership Programs
- Individual Development Account Program
- Temporary Assistance for Needy Families
- Burial Assistance Program



Food / Nutrition

- Community and Home Options to Institutional Care for the Elderly and Disabled
- Older Americans Act Programs
- Supplemental Nutrition Assistance Program
- Women, Infants and Children

^{*} For programs that appear in multiple area-of-need sections, an asterisk (*) indicates the section with the main information for that program. Other sections where the program is listed will include a reference to the page with the main information.

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Health Coverage

- Healthy Indiana Plan
- Hoosier Healthwise
- Hoosier Care Connect
- Traditional Medicaid
- Medicare Savings Program
- Hoosier Rx
- Federal Health Insurance Marketplace



Home- & Community-Based Services for the Aged, Blind and Disabled

- Adult Protective Services
- Aged and Disabled Medicaid Waiver*
- Caregiver Support Services
- Community and Home Options to Institutional Care for the Elderly and Disabled*
- Community Integration and Habilitation Waiver
- Deaf and Hard of Hearing Services
- Family Caregiver Program
- Family Supports Waiver
- First Steps
- INconnect Alliance
- Independent Living Services Program
- Money Follows the Person*
- Older Americans Act Programs*
- Older Independent Blind Program
- Supervised Group Living Residential Services
- Traumatic Brain Injury Medicaid Waiver*

^{*} For programs that appear in multiple area-of-need sections, an asterisk (*) indicates the section with the main information for that program. Other sections where the program is listed will include a reference to the page with the main information.

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Mental Health / Addictions

- Addiction Recovery
- Adult Mental Health Habilitation Services
- Behavioral & Primary Healthcare Coordination
- Child Mental Health Wraparound
- Community Mental Health Centers
- Problem Gambling
- Suicide Prevention



Transportation Benefits

- Indiana Health Coverage Programs
- Aged and Disabled Waiver
- Community and Home Options to Institutional Care for the Elderly and Disabled
- Older Americans Act Programs
- Traumatic Brain Injury Medicaid Waiver



Housing

- Indiana Foreclosure Prevention Network
- Housing Choice Vouchers
- Low-Income Home Energy Assistance Program
- Neighborhood Assistance Program
- Weatherization Assistance Program
- Residential Care Assistance Program

^{*} For programs that appear in multiple area-of-need sections, an asterisk (*) indicates the section with the main information for that program. Other sections where the program is listed will include a reference to the page with the main information.

Early Care & Education



Early Care & Education

■ Child Care Finder

Child Care Finder is an innovative website to help Hoosier families find child care and early education providers throughout the state. Families can search licensed providers, registered ministries and exempt providers by numerous important parameters, including location, type of provider, hours, licensing status and whether or not the provider participates in Paths to QUALITYTM. They can also find inspection reports and any validated complaints or enforcement/actions for each provider they search.

Visit www.childcarefinder.in.gov for more information.

■ Child Care Resource and Referral

Choosing child care is one of the most important decisions families make, but all too often they must rely on word-of-mouth. Local Child Care Resource and Referral agencies help parents take the guesswork out of choosing care by providing:

- Referrals to local child care providers
- Information on state licensing requirements
- Information on availability of child care subsidies

Child Care Resource and Referrals provide guidance by phone, in person, and in other ways, such as via the internet, that are tailored to each individual family.

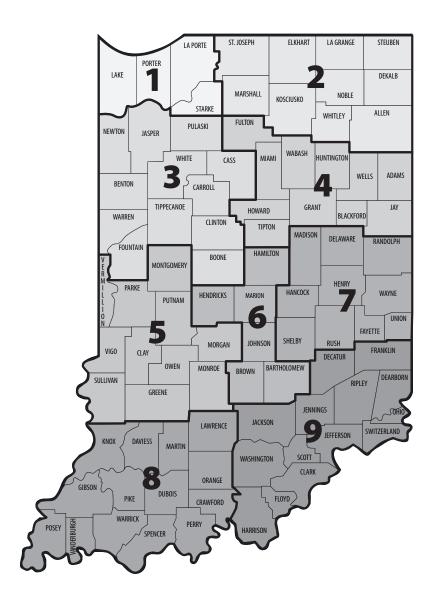
Child Care Resource and Referrals support families to raise healthy children by:

- Talking with parents one-on-one
- Understanding the delicate balance of family life, particularly for low-income families
- Understanding that finding high-quality child care is just a first step to raising happy, healthy children
- By offering workshops, hotlines and newsletters
- Reaching out to parents with trusted, local information that enables them to make informed choices

Visit https://partnershipsforearlylearners.org/about/your-child-care-resource-referral-agency/ to find more information about your local Child Care Resource and Referral agency.



Child Care Resource and Referral Agencies







Child Care Resource and Referral Agencies

Region 1 Early Learning Connections, Geminus CCR&R

8400 Louisiana St. Merrillville, IN 46410 Phone: 219-685-1500 Toll Free: 844-685-1500

ccrr.geminus.org/ccrr-index.html

Region 2 Early Childhood Alliance

3320 Fairfield Ave. Fort Wayne, IN 46807 Phone: 260-745-2501 Toll Free: 800-423-1498 Fax: 260-744-3473 www.ecalliance.org

Region 3 Child Care Resource Network

817 Woodmere Drive Lafayette, IN 47905 Phone: 765-742-7105 Toll Free: 800-932-3302

www.thechildcareresourcenetwork.org

Region 4 Bona Vista Programs / Child Care Solutions

P.O. Box 2496, 123 N. Buckeye Kokomo, IN 46904 Phone: 765-452-8870 Toll Free: 800-493-3231 Fax: 765-868-4699 bvchildcaresolutions.org

Region 5

Chances and Services for Youth Booker T. Washington Community

Center, 2nd Fl. 1101 S. 13th St. Terre Haute, IN 47802 Phone: 812-232-3952

Toll Free: 800-886-3952 Fax: 812-232-1731 www.casyonline.org

Region 6 Child Care Answers

1776 N. Meridian St., Ste. A Indianapolis, IN 46202 Phone: 317-636-5727 Toll Free: 800-272-2937 Fax: 317-687-6248 www.childcareanswers.com

Region 7 Huffer Memorial Children's Center

3413 W. Fox Ridge Lane Muncie, IN 47304 Phone: 765-284-0887 Toll Free: 800-554-9331 Fax: 765-289-0430 huffermcc.org

Region 8 4C of Southern Indiana

414 S.E. Fourth St., Ste. 102 Evansville, IN 47713 Phone: 812-423-4008 Toll Free: 866-200-5909 Fax: 812-423-3399 www.child-care.org

Region 9 Southeastern Indiana Economic Opportunity Corp. P.O. Box 240

110 Importing St. Aurora, IN 47001 Phone: 812-926-1585 Toll Free: 800-755-8558 Fax: 812-926-4475 www.sieoc.org



The Child Care and Development Fund helps low-income families obtain child care so they can work, attend training or continue their education. The purpose of CCDF is to provide low-income families with the financial resources to locate and afford quality child care as well as increase the availability of these programs.

How does someone qualify for the Child Care and Development Fund?

To qualify for the Child Care and Development Fund, applicants must meet certain nonfinancial and financial requirements. Nonfinancial requirements include state residency, working or going to school, citizenship of the child receiving CCDF assistance and choosing a CCDF-eligible provider. Financial criteria include gross monthly income limits.

How does someone know if a child is eligible to receive Child Care and Development Fund benefits?

- The applicant's child must be a U.S. citizen or qualified alien.
- The child may qualify up to age 13.
- Children with special needs may qualify up to the age of 18 years old.

What are the income limits?

Eligibility for the Child Care and Development Fund is based on the total gross monthly income of the household. Gross monthly income is total income before taxes or any deductions. To be eligible, a family's income must be at or below 127% of the federal poverty level. Once on the CCDF program, a family's gross income cannot exceed 85% of the state median income to remain eligible.

Child Care and Development Fund Income Limits

Household Size	Gross Monthly Income Limits
1	\$1,322.00
2	\$1,790.00
3	\$2,257.00
4	\$2,725.00
5	\$3,193.00
6	\$3,661.00
7	\$4,129.00
2019 federal poverty levels at 127%	

The information in this guide is correct as of April 1, 2019. For the most up-to-date information, refer to www.fssa.in.gov.





Who is a Child Care and Development Fund-eligible provider?

A Child Care and Development Fund-eligible provider is defined as a provider, either licensed or exempt from being licensed by law, who has met all applicable CCDF provider eligibility standards and has completed the application process.

Eligible providers may include:

- · Licensed facilities and homes
- · Unlicensed registered day care ministries
- Legally license-exempt child care facilities and homes
- Legally license-exempt relative care (grandparent, great grandparent, aunt and/or uncle of the eligible child)
- · Legally license-exempt in-home care

How does someone apply for Child Care and Development Fund benefits?

Applicants must visit a local Child Care and Development Fund intake office. A map of intake offices and contact information are found on pages 16–17.

Who counts in the Child Care and Development Fund applicant's household (family)?

A Child Care and Development Fund household is one or more custodial adults and children related by blood or law, or other person standing in loco parentis, which means "in place of a parent," residing in the same CCDF household. Where custodial adults over the age of 18 (other than spouses or biological parents of the children needing services) reside together, each is considered a separate CCDF household. Wards of the local office of the Department of Child Services, foster children on Title IV-E, are the legal responsibility of DCS and not the CCDF household in which the child has been placed.

What is a copayment or copay?

A copayment or "copay" is a weekly fee for child care based on the amount of the Child Care and Development Fund household's income that exceeds the federal poverty guidelines and the year of CCDF participation. If the household's countable income exceeds the federal poverty level, the individual will have a copay payable directly to the child care provider.

How does an applicant find a Child Care and Development Fund-eligible provider?

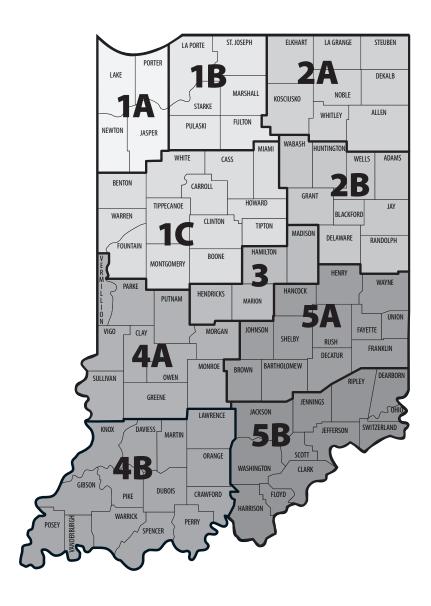
For help finding a Child Care and Development Fund-eligible provider, contact the Brighter Futures Indiana Call Center at **800-299-1627** for a free child care referral, or contact your local Child Care Resource and Referral Agency.

What happens at the applicant's interview appointment?

The Child Care and Development Fund intake agent will ask questions about the persons living in the applicant's home, income and other pertinent information needed to determine eligibility. The applicant will be given or mailed a form listing all needed information to bring to the appointment. Applicants will be notified during the appointment if they are eligible.



Child Care and Development Fund intake agent regions







Child Care and Development Fund intake offices

Region 1A Geminus Corporation

NWICCDF@geminus.org Darnitha Woods 219-757-1957 888-757-1957 Fax: 219-738-5283

Region 1B

Brightpoint childcare@mybrightpoint.org Lesa Cassel 800-589-2264

Fax: 844-510-5775

Region 1C Children's Bureau Inc.

Iroy@childrensbureau.org Laura Roy 765-838-3805 855-228-4024

Fax: 765-838-3816

Region 2A Brightpoint

childcare@mybrightpoint.org Lesa Cassel 260-423-3546 800-589-2264

Fax: 844-510-5775

Region 2B Children's Bureau Inc.

denyart@childrensbureau.org Debi Enyart 765-381-0210 866-800-8115

Fax: 765-381-0212

Region 3 Children's Bureau Inc.

amassey@childrensbureau.org Andrea Massey 317-545-5281 866-287-2420 Fax: 317-545-1069

Region 4A Chances and Services for Youth

dpayne@casyonline.org Danielle Payne 812-232-3952 800-886-3952 Fax: 812-232-1731

Region 4B 4 C's of Southern IN

smarchand@child-care.org Shanon Marchand 812-423-4008 866-200-5909 Fax: 866-503-5970

Region 5A Children's Bureau Inc.

adonges@childrensbureau.org Ashlee Donges 317-535-3326 866-494-5330 Fax: 317-535-3615

Region 5B

River Valley Resources Inc.

leslie@rivervalleyresources.com Leslie Abbott 812-273-9270 855-591-7848

Fax: 812-265-2664



■ Paths to QUALITY™

Research shows that high-quality early childhood, preschool and school-age programs prepare children for future success in school, work and life. Children's experiences play a significant role in the way their brains develop, and the way a child's brain develops plays a significant role in the future success of the child. High quality early care and education programs are essential not only to Hoosier children, but also to their families and to the communities in which they live.

Paths to QUALITY™ is Indiana's statewide rating system for early care and education programs. It is a free resource to help families make informed decisions and to help early care and education providers improve the quality of their programs. There are four levels of quality that can be achieved by participating providers. Each level builds on the foundation of the previous one, resulting in significant quality improvements at each stage and in national accreditation at the highest level. The system validates child care programs for ongoing efforts to achieve higher standards of quality and provides incentives and awards for success. The four levels address:

- Level 1: Health and safety needs of children met.
- Level 2: Environment supports children's learning.
- Level 3: Planned curriculum guides child development and school readiness.
- Level 4: National accreditation (the highest indicator of quality) is achieved.

For more information about Paths to QUALITY™, visit http://www.in.gov/fssa/2554.htm.

■ First Steps

Mission: To partner with Hoosier families whose young children are experiencing developmental delays and connect them with services that help them promote their child's development. **Vision:** All infants and toddlers have the right to live, love, play, learn and participate in their community. First Steps is Indiana's early intervention program that provides services to infants and toddlers from birth until their third birthday who are experiencing developmental delays or disabilities. First Steps is a family centered program that provides services in the child's natural environment and within the natural routines of each child and their family. First Steps unites families with a local network of professionals from education, health and social service agencies to support parents in promoting the development of their child(ren).

Who is eligible for First Steps services?

First Steps is for families with children from birth until their third birthday who have:

Developmental delay: A child must have a delay of 25% in one area or 20% in two or more of the following areas of development:

- Cognitive development
- Communication development
- Physical development

(including vision and hearing)

- Social/emotional development
- Adaptive/self-help development





Or have a diagnosed physical or medical condition that has a high probability of resulting in a developmental delay:

- Chromosomal abnormalities or genetic disorder
- Neurological disorder
- Congenital malformation
- Sensory impairment (including vision and hearing)
- Severe toxic exposure (including prenatal exposure)
- Neurological abnormality in the newborn period
- Low birth weight of less than or equal to 1,500 grams

Are there fees associated with being enrolled in the program?

First Steps does not have asset/resource limits. Some services may have fees associated. Program assessment, evaluation and service coordination are delivered at no fee to the family. Cost participation fees for other services are based on family income. Fees may also be waived or reduced based on private insurance recovery.

What services are available through the program?

Early intervention services are specifically designed to support the family in addressing the developmental needs of the family. Services are provided within the natural routines and environments of the child and family and involve the primary caregiver. Services that may be offered through the program are:

- Assistive technology
- Audiology
- Family education
- Health*
- Nursing*
- Nutrition

- Occupational therapy
- Physical therapy
- Psychological
- Service coordination
- Social work
- Special instruction/ developmental therapy
- Speech language pathology
- Transportation**
- Vision

If you encounter any terms or program names you do not understand, refer to the FSSA glossary of terms at the end of this guide or at www.in.gov/fssa/4999.htm.

How does someone refer a child for First Steps?

- Anyone can make a referral to First Steps.
- A map of First Steps clusters and System Point of Entry contact information can be found found at www.firststeps.in.gov.
- To make a referral, contact the local First Steps System Point of Entry for more information. Visit www.firststeps.in.gov or call 800-545-7763 to be connected with a First Steps office in your area.

^{*}For determination of eligibility or service planning only

^{**}Transportation is offered only when needed to access early intervention services

First Steps clusters







First Steps local offices

Cluster A

11045 Broadway St., Ste. F Crown Point, IN 46307 Phone: 219-662-7790 FAX: 219-662-7510 Toll Free: 1-800-387-7837

www.indianafirststeps.org

Cluster B

700 E. Beardsley Ave. Elkhart, IN 46514 Phone: 574-293-2813 FAX: 574-293-2300 Toll Free: 1-866-725-2398 www.indianafirststeps.org

Cluster C

201 E. Rudisill Blvd., #108 Fort Wayne, IN 46806 Phone: 260-207-5799 Toll Free: 1-877-494-5115 Fax: 260-478-4850 or 1-877-494-5116 www.indianafirststeps.org

Cluster D

620 Morland Drive Lafayette, IN 47905 Phone 765-420-1404 Fax 765-420-1406 Toll Free: 1-877-811-1644 www.indianafirststeps.org

Cluster F

4130 S. Seventh St. Terre Haute, IN 47802 Phone: 812-917-2950 Toll Free: 1-877-860-0413 Fax: 812-917-2862 www.firststepsbrs.org

Cluster G

1776 N. Meridian St., Suite 300 Indianapolis, IN 46202 Phone: 317-257-2229 Fax: 317-205-2592 Toll Free: 1-866-212-1434 www.cibaby.org

Cluster H

1320 E. 53rd St. Anderson, IN, 46103 Phone: 812-314-2982 Toll Free: 1-866-644-2454 Fax: 812-373-3620 www.firststepssoutheast.org

Cluster I

P.O. Box 547 Corydon, IN 47112 Phone: 812-738-1975 Toll Free: 1-800-674-2285 Fax: 1-877-674-2285 www.firststepsbrs.org

Cluster J

1531 13th St., G 900 Columbus, IN 47201 Phone: 812-314-2982 Toll Free: 1-866-644-2454 Fax: 812-373-3620 www.firststepssoutheast.org



■ On My Way Pre-K

On My Way Pre-K is Indiana's first state-funded pre-kindergarten program. On My Way Pre-K provides grants to eligible children for qualified early education services delivered via high-quality providers that are enrolled as approved On My Way Pre-K providers.

How does an applicant know if a child qualifies for an On My Way Pre-K grant?

To qualify for the On My Way Pre-K grant, an applicant's child must be 4 years old, but not yet 5 years old by August 1 of the grant year and must be entering kindergarten during the following school year. The child must be a resident of one of the chosen pilot counties (Allen, Bartholomew, DeKalb, Delaware, Elkhart, Floyd, Grant, Harrison, Howard, Jackson, Kosciusko, Lake, Madison, Marion, Marshall, Monroe, St. Joseph, Tippecanoe, Vanderburgh and Vigo) and meet eligibility requirements.

What are the income limits?

To be eligible for the On My Way Pre-K grant, a family's gross monthly income must fall below 127% of the federal poverty level. Gross monthly income is total income before taxes or deductions.

On My Way Pre-K income limits	
Household Size	Monthly
1	\$1,322.00
2	\$1,790.00
3	\$2,257.00
4	\$2,725.00
5	\$3,193.00
6	\$3,661.00
7	\$4,129.00
2019 federal poverty levels at 127%	

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What is an On My Way Pre-K provider?

Families receiving a grant may choose from any approved On My Way Pre-K program enrolled with the Office of Early Childhood and Out-of-School Learning. On My Way Pre-K programs have demonstrated a commitment to high-quality early education and can be found in public and private schools, Head Start centers, licensed centers, licensed child care homes and faith-based registered ministries. All programs must also meet Child Care and Development Fund Eligibility requirements.

- Community-based programs including Head Start, licensed centers, licensed family homes and registered ministries must be rated at Level 3 or Level 4 on Paths to QUALITY.
- Public schools including charter schools must be rated Level 3 or Level 4 on Paths to QUALITY for Public Schools.
- Private or nonpublic schools must be accredited by a regionally or nationally approved state board of education accrediting body.

How does someone qualify?

All families must meet financial need, residency and age requirements, and be working or attending an education or job training program to complete a family application. Once a grant is awarded, families must then verify eligibility by completing an appointment with a local intake agent and by choosing an eligible provider.

How does an applicant apply for an On My Way Pre-K grant for their child?

- Applicants can go online at www.onmywayprek.org during the enrollment period each year.
- Visit local intake agencies located within the pilot pilot counties (Allen, Bartholomew, DeKalb, Delaware, Elkhart, Floyd, Grant, Harrison, Howard, Jackson, Kosciusko, Lake, Madison, Marion, Marshall, Monroe, St. Joseph, Tippecanoe, Vanderburgh and Vigo).

Who counts in my household (family) income?

A household is considered one or more custodial adults and the child receiving the grant residing in the same household. Income requirements are waived for foster children of licensed foster parents.

How does someone find an eligible provider?

For help finding an approved On My Way Pre-K-eligible provider, applicants can contact Early Learning Indiana toll free at **800-299-1627**. Eligible providers are also listed online at **www.onmywayprek.org**.



Does an applicant have to be working or have a service need to be eligible?

Yes, applicants need to working or attending an educational or job training program to be eligible for an On My Way Pre-K grant.

What happens at the interview appointment?

The intake agent will ask questions about the individuals living in the applicant's home, income and other pertinent information needed to determine eligibility. The applicant will be given or mailed a form listing all needed information to bring to the appointment. Applicants will be notified during the appointment if they are eligible.

On My Way Pre-K intake agencies are the same as Child Care Development Fund agencies and can be found beginning on pages 16–17.

■ Head Start and Early Head Start

Head Start is a federal program that promotes the school readiness of children under age 5 from low-income families by enhancing their cognitive, social and emotional development. Head Start programs provide a learning environment that supports children's growth in many areas such as language, literacy and social and emotional development. Head Start emphasizes the role of parents as their child's first and most important teacher. These programs help build relationships with families that support family well-being and many other important areas.

Early Head Start programs serve infants, toddlers and pregnant women and their families who have incomes below the federal poverty level. Early Head Start programs were established in recognition of the mounting evidence that the earliest years matter a great deal to a child's growth and development. For more information on Head Start and Early Head Start grantees in your community, please visit https://www.in.gov/fssa/carefinder/2679.htm.

Who is served by Head Start and Early Head Start?

- Children with disabilities; regardless of income, 10% of a program's seats are reserved for children with disabilities.
- Children from families whose income is below the Federal Poverty Level
- Children from homeless families
- Children from families who receive public assistance such as Temporary Assistance for Needy Families or Supplemental Security Income
- Children in foster care, regardless of income
- Early Head Start services are also available for pregnant women with incomes below the Federal Poverty Level

Employment



Employment

■ Blind and Visually Impaired Services

Indiana Blind and Visually Impaired Services provides statewide assistance and services to enable the achievement of vocational and personal independence by the citizens of Indiana with blindness and visual impairment. BVIS is a program within the Bureau of Rehabilitation Services that encompasses the Randolph-Sheppard Business Enterprise Program, the Older Independent Blind Program and the Blind Registry. Individuals may be referred by Vocational Rehabilitation Services or can be self-referred. For additional information about blind services resources in Indiana, please go to www.bvis.in.gov, send an email to BVIS@fssa.in.gov, or contact the Blind and Visually Impaired Services program manager at 800-545-7763.

■ Indiana Manpower Placement and Comprehensive Training

Indiana Manpower and Comprehensive Training provides services designed to help recipients of Supplemental Nutrition Assistance Program and Temporary Assistance for Needy Families achieve economic self-sufficiency through:

Education
 Job search

Training
 Job placement activities

Indiana Manpower Placement and Comprehensive Training contracts with a service provider to implement job search, job development and placement activities in every county in Indiana. IMPACT services are a component of Indiana's Welfare-to-Work program.

How does someone qualify for Indiana Manpower Placement and Comprehensive Training?

A person may be eligible for Indiana Manpower Placement and Comprehensive Training if he or she is currently receiving Supplemental Nutrition Assistance Program benefits or applying for and/or receiving Temporary Assistance for Needy Families benefits. The Division of Family Resources local offices in each of Indiana's 92 counties have the responsibility for determining eligibility for IMPACT services for SNAP and TANF recipients.

How does someone apply for Indiana Manpower Placement and Comprehensive Training?

Indiana Manpower Placement and Comprehensive Training services are dependent upon the client being a recipient of Supplemental Nutrition Assistance Program benefits or an applicant for/recipient of Temporary Assistance for Needy Families benefits. In some circumstances, clients are automatically scheduled for an IMPACT appointment. Individuals who are SNAP recipients may volunteer for IMPACT services at any time by notifying a Division of Family Resources local office in person, or via telephone at **1-800-403-0864**.



Indiana Manpower Placement and Comprehensive Training offices

This information is correct as of April 1, 2019. For up-to-date information, refer to www.dfrbenefits.in.gov.

Allen County

201 E. Rudisill, Ste. 302 Fort Wayne, IN 46806

Bartholomew County

2330 Poshard Ave. Columbus, IN 47203

Benton County

307 E. 6th St. Fowler, IN 47944

Cass County

1 Cass City Center, Ste. 301 Logansport, IN 46947

Clark County

285 Quartermaster Court Jeffersonville, IN 47130

Daviess County

900 W. National Highway, Ste. 4 Washington, IN 47501

DeKalb County

1390 S. Grandstaff Drive Auburn, IN 46706

Delaware County

1107 S. Tillotson, Ste. 2 Muncie, IN 47304

Dubois County

125 37th St., Ste. A Jasper, IN 47546

Elkhart County

1416 Cassopolis St. Elkhart. IN 46514

Fayette County

1501 N. Eastern Ave. Connersville, IN 47331

Floyd County

824 University Woods Drive, Ste. 11 New Albany, IN 47150

Fulton County

1519 S. Main St. Rochester, IN 46975

Grant County

830 N. Miller Ave. Marion, IN 46952

Hamilton County

942 N. 10th St., Ste. 200 Noblesville, IN 46060

Hancock County

1290 N. State St., Ste. A Greenfield, IN 46140

Howard County

114 W. Jackson St. Kokomo, IN 46901

Jackson County

320 Dupont Drive Seymour, IN 47274

Jasper County

841 S. College Ave. Rensselaer, IN 47978

Johnson County

1774 E. Jefferson St. Franklin, IN 46131-7227

Knox County

2335 N. Sixth St. Vincennes, IN 47591

Kosciusko County

2307 E. Center St., Ste. E Warsaw, IN 46580





LaGrange County 826 N. Detroit St. LaGrange, IN 46761

Lake County

Lake: Hammond Office 5255 Hohman Ave. Hammond. IN 46320

Lake: Hobart Office 1871 E. 37th Ave. Hobart, IN 46342

Lake: Crown Point Office 1865 E. Summit St. Crown Point. IN 46307

Lake: East Chicago Office 2200 Broadway St. East Chicago, IN 46312

Lake: Gary Office 110 W. Ridge Road Gary, IN 46408

LaPorte County 1551 S. Woodland Ave. Michigan City, IN 46360

Madison County 222 E. 10th St., Ste. E Anderson. IN 46016

Marion County

Marion County: North 2620 Kessler Blvd. E Drive, Ste. 100 Indianapolis. IN 46220

Marion County: East 1213 N. Arlington Ave. Indianapolis, IN 46219

Marion County: West 5610 Crawfordsville Road, Ste. 500 Indianapolis, IN 46224

Marion County: South 3834 Madison Ave. Indianapolis, IN 46227

Marion County: Central 3400 Lafayette Road. Ste. 100 Indianapolis, IN 46222 Marshall County 510 W. Adams St., Ste. 210 Plymouth, IN 46563

Monroe County 1787 W. Third St. Bloomington, IN 47404

Montgomery County 1621 Eastway Drive Crawfordsville, IN 47933

Newton County 4117 S. 240 W., Ste. 200 B Morocco, IN 47963

Noble County 774 Trail Ridge Road, Ste. C Albion, IN 46701

Porter County 2602 Chicago St. Valparaiso, IN 46383

Pulaski County 710 N. Plymouth Drive Winamac, IN 46996

Putnam County 1020 Ave. F, Ste. A Greencastle, IN 46135

Randolph County 221 N. Main St. Winchester, IN 47394

Ripley County 888 S. Adams Versailles, IN 47042

St. Joseph County Commerce Center 401 E. Colfax Ave., Ste. 375 South Bend, IN 46617

Starke County 1921 S. Heaton Knox, IN 46534

Spencer County 201 Elm St. Rockport, IN 47635



Tippecanoe County 823 Park East Blvd., Ste. A Lafayette, IN 47905

Vanderburgh County 711 John St., Ste. C Evansville, IN 47713

Vigo County 1800 Ft. Harrison Road, Ste. 12 Terre Haute. IN 47803 **Wayne County** 50 S. Second St. Richmond, IN 47374-4212

Wells County 915 N. Main St., Ste. 102 Bluffton, IN 46714

■ Randolph-Sheppard Business Enterprise Program

The Indiana Randolph-Sheppard Business Enterprise Program provides entrepreneurial opportunities for individuals receiving Vocational Rehabilitation Services who are legally blind. Blind entrepreneurs manage a wide variety of food service operations including cafeterias, coffee shops, vending machine locations and highway area vending sites. Through this program, individuals who are blind receive training and opportunities to become productive, tax-paying citizens and independent business owners. The Randolph-Sheppard Business Enterprise Program is for individuals who are consumers of Vocational Rehabilitation Services and meet a specific set of eligibility criteria.

For more information regarding resources for the Business Enterprise Program, including the eligibility criteria, Frequently Asked Questions and Candidate 101 Guide, please visit the webpage at www.in.gov/fssa/ddrs or contact the Blind and Visually Impaired Services program manager at 800-545-7763.

■ Vocational Rehabilitation Services

Indiana Vocational Rehabilitation Service is a program within the Bureau of Rehabilitation Services that helps people with disabilities prepare for, obtain and retain employment. Individuals in the program work closely with a VR counselor. Through active participation in their rehabilitation, people with disabilities achieve a greater level of independence in their workplace and living environments.

How does someone qualify for Vocational Rehabilitation Services?

An applicant is eligible if it is determined that each of the following pertains:

- He or she has a physical or mental impairment;
- The physical or mental impairment constitutes or results in a substantial impediment to employment;





- The individual requires vocational rehabilitation services to prepare for, enter, engage in or retain employment consistent with his or her abilities, capacities, career interests and informed choices; and
- The individual can benefit from VR services in terms of an employment outcome.

How are Vocational Rehabilitation Services financed?

There is no charge for Vocational Rehabilitation Services; however, some services require VR to explore other funding options. For some post-second-ary expenses, for example, students and their parents/guardians are first required to file a Free Application for Federal Student Aid. Students will use any federal student aid they may be eligible for to help pay for certain costs (e.g., tuition and books).

What are the income/asset/resource limits?

Vocational Rehabilitation Services does not have any income/asset/resource limits.

What services are available?

Vocational Rehabilitation Services may include, but are not limited to, the following:

- Vocational counseling and guidance
- Transition services for students with disabilities to help make the transition from school to work
- Job placement assistance, including supported employment
- Training for a job, including vocational school, college/university and on-the-job training
- Assistive technology, including devices like speech-to-text software
- Physical and mental restoration services
- Rehabilitation technology (e.g. vehicle modifications)
- Personal assistance services
- Establishing a small business operation as an employment outcome

How does someone apply for Vocational Rehabilitation Services?

Applicants should contact or visit a Vocational Rehabilitation Services office to discuss the application and eligibility process using the information on the following pages, or call Vocational Rehabilitation Services at **800-545-7763**.

Applicants may view a short video titled "Working with Indiana Vocational Rehabilitation Services" at **www.vrs.in.gov** that outlines VR and how to apply.

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What are Pre-employment Transition Services?

Vocational Rehabilitation also serves students with disabilities through Pre-Employment Transition Services. A student with a disability is defined as a student in secondary school between the ages of 14 through the school year in which the student becomes 22, who are eligible for, and receiving, special education or related services under Part B of the Individuals with Disabilities Education Act, or is an individual with a disability for purposes of Section 504 of the Rehabilitation Act. These services supplement what the school provides and increase access to career planning, work experience and job readiness training to support seamless movement from high school to employment or post-secondary education and training. Students with disabilities between the ages of 14–22 who are enrolled in post-secondary training may also be eligible to access Pre-Employment Transition Services.

Pre-ETS includes the following activities:

- Job exploration counseling
- Work-based learning experiences
- Counseling on post-secondary opportunities
- · Workplace readiness training
- Instruction in self-advocacy

More information can be found at https://www.in.gov/fssa/ddrs/5474.htm.

Vocational Rehabilitation offices

Areas 1 & 2

Counties: Lake & Newton

110 W. Ridge Road Gary, IN 46408-2709 Phone: 219-981-5326 Toll Free: 877-847-9891

(V/VRS/711)

Toll Free Fax: 855-450-3567

Area 3

Counties: Jasper, LaPorte, Porter, Pulaski & Starke 2602 Chicago St., Suite 200 Valparaiso, IN 46383 Phone: 219-462-0521 Toll Free: 877-847-9888

(V/VRS/711)

Toll Free Fax: 855-450-3568

Area 4

Counties: Marshall & St. Joseph

Commerce Center 401 E. Colfax Ave., Suite 270

South Bend, IN 46601 Phone: 574-232-4861 Toll Free: 877-282-0964

(V/VRS/711)

Toll Free Fax: 855-450-3569

Area 5

Counties: Elkhart & Kosciusko 1659 Mishawaka St., Suite A

Elkhart, IN 46514-1812 Phone: 574-262-2086 Toll Free: 877-847-9897

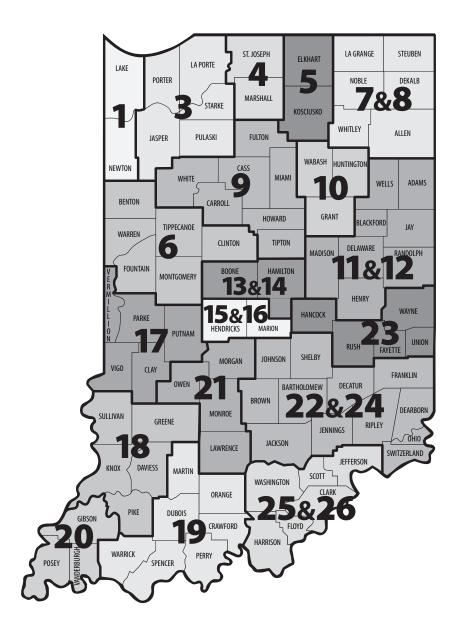
(V/VRS/711)

Toll Free Fax: 855-450-3570





Vocational Rehabilitation offices





Area 6

Counties: Benton, Clinton, Fountain, Montgomery, Tippecanoe & Warren

615 N. 18th St., Suite 103 Lafayette, IN 47904-3413 Phone: 765-449-4278 Toll Free: 877-847-9892

(V/VRS/711)

Toll Free Fax: 855-450-3575

Areas 7 & 8 - Fort Wayne Counties: Allen, DeKalb, LaGrange, Noble, Steuben & Whitley

201 E. Rudisill Blvd., Suite 300 Fort Wayne, IN 46806-1756 Phone: 260-424-1595 Toll Free: 877-715-5292

(V/VRS/711)

Toll Free Fax: 855-450-3571

Area 9

Counties: Carroll, Cass, Fulton, Howard, Miami, Tipton & White

1914 S. Dixon Road Kokomo, IN 46902-7302 Phone: 765-455-5020 Toll Free: 877-715-5294

(V/VRS/711)

Toll Free Fax: 855-450-3576

Area 10

Counties: Grant, Huntington & Wabash

840 N. Miller Avenue, Suite C Marion, IN 46952-2338 Phone: 765-662-9961 Toll Free: 877-876-2866

(V/VRS/711)

Toll Free Fax: 855-450-3572

Area 11 & 12 Counties: Adams, Blackford, Delaware, Henry, Jay, Madison,

Randolph & Wells

201 E. Charles St., Suite 130 Muncie, IN 47305-2434 Toll Free: 877-847-9890

(V/VRS/711)

Toll Free Fax: 855-450-3573

Areas 13 & 14 - Indianapolis

Northeast & Central Counties: Boone, Hamilton & Marion [ZIP codes 46205, 46208, 46216, 46218, 46219, 46220, 46226, 46228, 46229, 46235, 49236,46240, 46250, 46256, 46260, 46268 46278, 46280 and 46290]

2620 Kessler Blvd. East Drive,

Suite 105

Indianapolis, IN 46220-2890 Phone: 317-205-0100 Toll Free: 877-715-5296

(V/VRS/711)

Toll Free Fax: 855-442-0002

Areas 15 & 16 - Indianapolis West & South

Counties: Hendricks, & Marion [ZIP codes 46201, 46202, 46203, 46204, 46214, 46217, 46221, 46222, 46225, 46227, 46231, 46234, 46237, 46239, 46241, 46254, 46259 & 46107 (Beech Grove)] 6640 Parkdale Place, Suite L Indianapolis, IN 46254 Phone: 317-270-1005 Toll Free: 877-876-2864

(V/VRS/711)

Toll Free Fax: 855-344-0001





Area 17

Counties: Clay, Parke, Putnam, Vermillion & Vigo

30 N. Eighth St., P.O. Box 10217 Terre Haute, IN 47801-0217 Phone: 812-232-7864 Toll Free: 877-715-3170

(V/VRS/711)

Toll Free Fax: 855-455-4256

Area 18

Counties: Daviess, Greene, Knox, Pike & Sullivan

1600 Willow St., Suite B Vincennes, IN 47591-4264 Phone: 812-882-7208 Toll Free: 877-847-9898

(V/VRS/711)

Toll Free Fax: 855-442-0001

Area 19

Counties: Crawford, Dubois, Martin, Orange, Perry, Spencer & Warrick

125 E. 37th St., Suite A Jasper, IN 47546 Phone: 812-827-5179 Toll Free: 877-847-9896

(V/VRS/711)

Toll Free Fax: 855-455-4257

Area 20

Counties: Gibson, Posey & Vanderburgh

700 E. Walnut St. Evansville, IN 47713-2561 Phone: 812-425-1367 Toll Free: 877-715-5299

(V/VRS/711)

Toll Free Fax: 855-455-4258

Area 21

Counties: Lawrence, Monroe, Morgan & Owen

1531 S. Curry Pike, Suite 300 Bloomington, IN 47403 Phone: 812-332-7331 Toll Free: 877-847-9893

(V/VRS/711)

Toll Free Fax: 855-455-4260

Area 22 & 24

Counties: Bartholomew, Brown, Dearborn, Decatur, Franklin, Jackson, Jennings, Johnson, Ohio, Ripley, Shelby & Switzerland

1248 Washington St. Columbus, IN 47201-5722 Phone: 812-376-9935 Toll Free: 877-396-3271

(V/VRS/711)

Toll Free Fax: 855-455-4261

Area 23

Counties: Fayette, Hancock, Rush, Union & Wayne

52 S. Second St. Richmond, IN 47374-4212 Phone: 765-966-0932 Toll Free: 877-715-3171

(V/VRS/711)

Toll Free Fax: 855-450-3574

Areas 25

Counties: Clark, Floyd, Harrison, Jefferson, Scott & Washington

1452 Vaxter St.

Clarksville, IN 47129-7721 Phone: 812-288-8261 Toll Free: 877-228-1967

(V/VRS/711)

Toll Free Fax: 855-455-4259



■ WorkOne Career Centers

In addition to services provided by the Indiana Family and Social Services Administration, the Indiana Department of Workforce Development offers a variety of services through our WorkOne Career Centers to Hoosiers looking to get back in the workforce, change jobs or need additional training. WorkOne Career Center staff can help you find a new or better job, choose a career or access training, including a High School Equivalency, to get you the skills needed to succeed in today's economy. Find your nearest WorkOne Career Center at IndianaCareerReady.com/WorkOne or call 800-891-6499.

IndianaCareerReady.com

Your single source that provides the tools needed to prepare and find high-demand and high-wage jobs needed in Indiana now and in the future.

IndianaCareerConnect.com

Indiana's largest source of job openings that match your skills and experience.

Indiana High School Equivalency

The Indiana High School Equivalency (formerly GED) is an alternative for earning a high school diploma. Workers who have a high school diploma or HSE earn over \$10,000 more per year than those who do not. **IN.gov/dwd/HSE.htm**

INDemand Jobs

This tool uses a demand indicator to rank all jobs in Indiana based on future growth and wages. Whether searching for your first job, changing jobs or re-entering the workforce, **IndianaCareerReady.com/INDemandJobs** will help direct your career search.

IN Reality

This interactive tool allows Hoosiers to explore career choices based on earning potential. **Hoosierdata.IN.gov/inreality**

Indiana Career Explorer

Indiana Career Explorer is an online tool that provides all the resources you will need to explore careers or find a new career and college options. IndianaCareerExplorer.com

Next Level Jobs

For jobseekers, Next Level Jobs provides free training to Hoosiers for some of the state's most in-demand, high-paying jobs in rapidly growing industries. Tuition-free certificates can be earned in these sectors: Advanced Manufacturing, Building & Construction, IT & Business Services, Health & Life Sciences and Transportation & Logistics. Enroll now at **NextLevelJobs.org**.

Veteran Services

Services provided to Hoosier veterans at WorkOne Career Centers include direct job placement, resume, training and interview coaching. IN.gov/dwd/2424.htm

Financial Services



Financial Services

■ Homeownership programs

The Indiana Housing and Community Development Authority is proud to make the process of buying a home a reality for thousands of Hoosier families. We offer programs that assist Hoosiers with making down payments, getting low interest rate loans and offering a tax credit. In every county across Indiana, there are lenders on hand to help with all the programs we offer. An overview of the current programs may be found here: www.in.gov/ihcda/homeownership/2371.htm.

Who is the program for?

Residents of Indiana who are seeking to purchase a home.

How does someone qualify for the program?

Basic program guidelines may be found here: https://www.in.gov/ihcda/homeownership/2371.htm.

How does someone apply/enroll in the program?

Contact a participating lender to begin the process: https://ihcdaonline.com/AuthorityOnline/participatinglenders/participatinglenders.aspx.

■ Individual Development Account program

Indiana's Individual Development Account program is a matched saving opportunity. Every dollar a participant saves is matched, at a minimum for \$3 for every \$1 saved to help them reach their goals, including homeownership, higher education and small-business start-up through matched-savings incentives and financial education. Participants in the program are eligible to receive up to \$4,500 in state and federal match funds towards one of the eligible asset goals mentioned above. Qualified participants set savings goals and make regular savings deposits. More information on the Individual Development Account may be found on our website at http://www.in.gov/ihcda/2403.htm.

Who is the program for?

The Individual Development Account program is for Hoosiers with low-to-moderate income.

How does someone qualify for the program?

To qualify for the Individual Development Account program, applicants must meet income and eligibility requirements.



How does someone apply/enroll in the program?

To apply/enroll in the Individual Development Account program, contact the program administrator for your county, as noted here: https://www.in.gov/ihcda/files/2016-17%20IDA%20Administrators.pdf.

■ Burial Assistance Program

The Burial Assistance Program was established by the state of Indiana to assist with burial costs for those who are eligible in specific categories of Medicaid.

Who is the program for?

Burial assistance is available to those that were Medicaid recipients for the aged, blind and disabled at the time of their death or had applied for benefits prior to death and are later found categorically eligible for burial assistance.

How does someone apply/enroll in the program?

Funeral homes and cemetery representatives file all appropriate documentation within 90 days from date of recipient's death to the state's burial claims office. All approved assistance funds are paid directly to the funeral homes' and cemeteries' vendor accounts.

Where should inquiries and claim submissions be sent?

Phone: 317-234-1412Fax: 317-234-5075

• Email: Indianaburialclaims@fssa.in.gov

More information can be found at https://www.in.gov/fssa/dfr/5447.htm





■ Temporary Assistance for Needy Families

Temporary Assistance for Needy Families is a program that provides cash assistance and services to assist families with children under age 18. The underlying goal of the TANF program is to help recipient families achieve or return to economic self-sufficiency.

How does someone qualify for Temporary Assistance for Needy Families?

To qualify for Temporary Assistance for Needy Families, children under the age of 18 and their specified relative (e.g., their parent, grandparent, aunt or uncle) with whom they are living must meet certain nonfinancial and financial requirements. Nonfinancial requirements include state residency, citizenship status, child support participation and Indiana Manpower Placement and Comprehensive Training work registration.

Financial criteria include income limits and an asset test. A family may not possess assets valued in excess of \$1,000 at the time application for assistance is made. The family's home and surrounding lot, household goods and personal belongings are not counted as assets in determining Temporary Assistance for Needy Families eligibility.

What are the income limits?

Temporary Assistance for Needy Families has two income limits, gross income and net income. Gross income is total income before taxes or deductions. Net income is determined by subtracting certain allowable deductions from the gross income. Below is a chart of income limits and maximum allotments, or they can be found at **www.dfrbenefits.in.gov**. Mouse over "TANF (Cash Assistance)" on the left hand side of the page, and then click on "About TANF" for the most current income limits.

What are the responsibilities of the applicant or recipient of Temporary Assistance for Needy Families cash assistance?

The applicant or recipient must provide accurate and complete information regarding the child(ren), parent(s) and all other household members whose income and needs will be assessed in order to determine eligibility.

- Individuals must provide Social Security numbers, meet state residency, citizenship status, employment and child support assignment requirements.
- Some adult Temporary Assistance for Needy Families recipients must participate in Indiana Manpower Placement and Comprehensive Training, Indiana's employment and training program. They are required to attend applicant job search orientation and complete 20 days of applicant job search activities.
- The applicant or recipient must report any changes in circumstances within 10 days of the date the changes occurred.

Temporary Assistance for Needy Families monthly income limits and maximum allotment

Household Size	Gross Monthly Income Limit	Net Monthly Income Limit	Parent and/ or Caretaker Maximum TANF Allotment	Children Only Maximum TANF Allotment
1	\$286.75	\$139.50	\$139.00	\$139.00
2	\$471.75	\$229.50	\$229.00	\$198.00
3	\$592.00	\$288.00	\$288.00	\$256.00
4	\$712.25	\$346.50	\$346.00	\$315.00
5	\$832.50	\$405.00	\$405.00	\$373.00
6	\$952.75	\$463.50	\$463.00	\$432.00
7	\$1,073.00	\$522.00	\$522.00	\$490.00
8	\$1,193.25	\$580.50	\$580.00	\$549.00
Each Additional Member	+120.25	+58.50		

The information in this guide is correct as of April 1, 2019. For the most up-to-date information, refer to www.fssa.in.gov.





How does someone apply for or manage their current Temporary Assistance for Needy Families benefits?

- Applicants may apply online at www.fssabenefits.in.gov.
- Applicants may call or fax 800-403-0864.
- Visit a local Division of Family Resources office. They can locate a DFR office at www.dfrbenefits.in.gov or by calling 800-403-0864.

Addresses of the Division of Family Resources offices are listed below.

Division of Family Resources offices

This information is correct as of April 1, 2019. For up-to-date information, refer to www.dfrbenefits.in.gov.

Adams County

1145 Bollman St. Decatur, IN 46733-2115

Allen County

201 E. Rudisill Blvd. Suite 302 Fort Wayne, IN 46806-1756

Bartholomew County

2330 Poshard Drive Columbus, IN 47203-1845

Benton County

305 E. Sixth St. Fowler, IN 47944-1417

Blackford County

2005 N. Walnut St. Hartford City, IN 47348

Boone County

362 N. Mt. Zion Road Lebanon, IN 46052-8330

Brown County

121 Locust Lane Nashville, IN 47448-0010

Carroll County

901 Prince William Road Suite F Delphi, IN 46923-1758

Cass County

1 Cass City Center Suite 301 Logansport, IN 46947-3141

Clark County

285 Quartermaster Court Jeffersonville, IN 47130

Clay County

1017 E. National Ave. Brazil. IN 47834-2713

Clinton County

51 W. Washington St. Frankfort, IN 46041-1923

Crawford County

4030 E. Goodman Ridge Road Suite C Marengo, IN 47140-8706

Daviess County

900 W. National Highway Suite 4 Washington, IN 47501-3341



Dearborn County

230 Mary Ave. Suite 100 Greendale, IN 47025-2123

Decatur County

1023 E. Freeland Road, Greensburg, IN 47240

DeKalb County

1390 S. Grandstaff Auburn, IN 46706-1660

Delaware County

1107 S. Tillotson Ave. Suite 2 Muncie, IN 47304-4517

Dubois County

125 37th St. Suite A Jasper, IN 47546

Elkhart County

225 E. Jackson Blvd. Elkhart, IN 46516-3543

Fayette County

1501 N. Eastern Ave. Connersville, IN 47331-2154

Floyd County

824 University Woods Drive Suite 11 New Albany, IN 47150-2426

Fountain County

304 N. Sterling Ave. Suite A Veedersburg, IN 47987-8550

Franklin County

12050 Saint Mary's Road Suite A Brookville, IN 47012-9513

Fulton County

1519 Main St. Rochester, IN 46975-2619

Gibson County

104 E. Spruce St. Princeton, IN 47670-1424

Grant County

830 N. Miller Ave. Marion, IN 46952-2338

Greene County

104 County Road 70 E. Suite D Bloomfield, IN 47424-8738

Hamilton County

1101 S. 10th St. Noblesville, IN 46060-3560

Hancock County

1290 N. State St. Suite A Greenfield, IN 46140-1055

Harrison County

2201 Concord Ave. NW Suite 120 Corydon, IN 47112-2060

Hendricks County

2471 E. Main St. Plainfield, IN 46168-2715

Henry County

517 New York Ave. New Castle, IN 47362-4912

Howard County

114 W. Jackson St. Kokomo, IN 46901-4529

Huntington County

1175 Etna Ave. Huntington, IN 46750-1346





Jackson County

320 Dupont Drive Seymour, IN 47274

Jasper County

841 S. College Ave. Rensselaer, IN 47978

Jay County

1043 W. Votaw St. Portland, IN 47371-1251

Jefferson County

493 W. Hutchinson Lane Suite A Madison, IN 47250-7830

Jennings County

1171 N. State St. North Vernon, IN 47265-7476

Johnson County

1774 E. Jefferson St. Franklin, IN 46131-7227

Knox County

2335 N. Sixth St. Vincennes, IN 47591-3157

Kosciusko County

2307 E. Center St. Suite E Warsaw. IN 46580-3907

LaGrange County

826 N. Detroit St. LaGrange, IN 46761-1112

Lake County

Lake: Gary Office

661 Broadway Gary, IN 46402-2407 (Office for ZIP codes 46401, 46402, 46403 and 46404)

Lake: Crown Point Office

1865 E. Summit St. Crown Point, IN 46307-2768 (Office for ZIP codes 46303, 46307, 46308, 46311, 46341, 46355, 46356, 46373, 46375, 46376 and 46377)

Lake: East Chicago Office

2200 Broadway St. East Chicago, IN 46312 (Office for ZIP codes 46312, 46319, 46322 and 46394)

Lake: Glen Park Office

110 W. Ridge Road Gary, IN 46409-2709 (Office for ZIP codes 46406, 46407, 46408 and 46409)

Lake: Hammond Office

5255 Hohman Ave. Hammond, IN 46320-1721 (Office for ZIP codes 46320, 46321, 46323, 46324, 46325 and 46327)

Lake: Hobart Office

1871 East 37th Ave. Hobart, IN 46342-2579 (Office for ZIP codes 46342, 46405, 46410 and 46411)

La Porte County

1551 S. Woodland Ave. Michigan City, IN 46360-7124

Lawrence County

1212 I St. Suite 3 Bedford, IN 47421-2955

Madison County

222 E. 10th St. Suite E Anderson, IN 46016-1734



Marion County

Marion: North

2620 Kessler Blvd. E. Drive, Ste. 100 Indianapolis, IN 46220-2891 (Office for ZIP codes 46216, 46220, 46226, 46235, 46236, 46240, 46250, 46256, 46260, 46268 and 46278)

Marion: West

5610 Crawfordsville Road Suite 500 Indianapolis, IN 46224-3715

(Office for ZIP codes 46113, 46214, 46217, 46221, 46224, 46225, 46231, 46241, 46234 and 46254)

Marion: Central

3400 Lafayette Road Suite 100 Indianapolis, IN 46222 (Office for ZIP codes 46202, 46204, 46205, 46208, 46222 and 46228)

Marion: East

1213 N. Arlington Ave. Indianapolis, IN 46219-3202 (Office for ZIP codes 46201, 46218, 46219, 46229, 46239 and 46259)

Marion: South

3826 Madison Ave. Indianapolis, IN 46227 (Office for ZIP codes 46107, 46203, 46227 and 46237)

Marshall County

510 W. Adams St. Suite 210 Plymouth, IN 46563-1785

Martin County

125 Cooper St., Loogootee, IN 47533

Miami County

14 S. Wabash St. Peru, IN 46970-2209

Monroe County

1531 S. Curry Pike Suite 300 Bloomington, IN 47403

Montgomery County

1621 Eastway Drive Crawfordsville, IN 47933

Morgan County

1328 Morton Ave. Martinsville, IN 46151

Newton County

4117 S. 240 W. Suite 200B Morocco, IN 47963-8196

Noble County

774 Trail Ridge Road Suite C Albion, IN 46701-1536

Ohio County

308 N. High St. Suite B Rising Sun, IN 47040-1075

Orange County

326 N. Gospel St. Suite B Paoli, IN 47454-1655

Owen County

450 E. Franklin St. Suite B Spencer, IN 47460-1824

Parke County

823 N. Lincoln Road, Rockville, IN 47872





Perry County

8735 State Road 37 Suite A Tell City, IN 47586-8349

Pike County

2105 E. Main St. Suite B Petersburg, IN 47567-8870

Porter County

2602 Chicago St. Valparaiso, IN 46383-5956

Posey County

1809 N. Main St. Suite B Mount Vernon, IN 47620-1209

Pulaski County

710 N. Plymouth Road Winamac, IN 46996-7641

Putnam County

1020 Ave. F Suite A Greencastle, IN 46135-1895

Randolph County

221 N. Main St. Winchester, IN 47394-1626

Ripley County

888 S. Adams St. Versailles, IN 47042-9420

Rush County

148 E. U.S. Highway 52 Rushville, IN 46173-7901

St. Joseph County

St. Joseph: South Bend Office

Commerce Center 401 E. Colfax Ave Suite 375 South Bend, IN 46617-2737 (Office for ZIP codes 46536, 46552, 46554, 46574, 46595, 46601, 46613, 46614, 46615, 46616, 46617, 46619, 46624, 46626, 46628 and 46634)

St. Joseph: Mishawaka Office

102 N. Center St. Suite 500 Mishawaka, IN 46544-1232 (Office for ZIP codes 46530, 46544, 46545, 46646, 46556, 46561, 46635,

46637, 46660, 46680 and 46699)

Scott County

1048 W. Community Way Scottsburg, IN 47170-7768

Shelby County

2565 Parkway Drive Suite 2 Shelbyville, IN 46176-8202

Spencer County

201 Elm St. Rockport, IN 47635-1409

Starke County

1921 S. Heaton St. Knox. IN 46534-2325

Steuben County

202 E. Harcourt Road Suite V Angola, IN 46703-7198

Sullivan County

124 S. State St. Sullivan, IN 47882-1841



Switzerland County

1035 W. Main St. Suite 3 Vevay, IN 47043-9125

Tippecanoe County

823 Park East Blvd. Suite A Lafayette, IN 47905-0811

Tipton County

701 E. Jefferson St. Suite 2 Tipton, IN 46072-1460

Union County

303A N. Main St. Liberty, IN 47353-1013

Vanderburgh County

711 John St. Suite C Evansville, IN 47713-2754

Vermillion County

121 N. Main St. Clinton, IN 47842-2426

Vigo County

1800 Fort Harrison Road Suite 17 Terre Haute, IN 47804-1413

Wabash County

403 S. Cass St. Wabash, IN 46992-3200

Warren County

20 B W. Second St. Williamsport, IN 47993-1118

Warrick County

911 W. Main St. Boonville, IN 47601-1567

Washington County

709 Anson St. Salem. IN 47167-2237

Wayne County

50 S. Second St. Richmond, IN 47374-4212

Wells County

915 N. Main St. Suite 102 Bluffton, IN 46714-1328

White County

1011 N. Sixth St. Monticello, IN 47960-1590

Whitley County

543 N. Line St. Suite B Columbia City, IN 46725-1258

Food / Nutrition



Food / Nutrition

■ Community and Home Options to Institutional Care for the Elderly and Disabled

The Community and Home Options to Institutional Care for the Elderly and Disabled program provides home- and community-based services to assist individuals in maintaining their independence in their own home or community for as long as is safely possible. More details about services available under this program are found on page 76.

■ Older Americans Act programs

The Older Americans Act provides community-based services and opportunities for older individuals and their families. Older Americans Act programs generally only require that recipients be over the age of 60. More details about services available under this program are found on page 90.

■ Supplemental Nutrition Assistance Program

The Supplemental Nutrition Assistance Program, previously known as "food stamps," provides food assistance to low-income individuals. It is a federal aid program administered by the Food and Nutrition Service of the U.S. Department of Agriculture; however, benefits are distributed at the state level. SNAP helps low-income individuals and families buy the food they need for good health. Interested parties apply for benefits by completing a state application form online, in-person or via mail. Benefits are provided on an electronic card that is used like a debit card and accepted at most grocery stores.

How does someone qualify for the Supplemental Nutrition Assistance Program?

To qualify for the Supplemental Nutrition Assistance Program, applicants must meet certain nonfinancial and financial requirements. Nonfinancial criteria include state residency and citizenship status. Financial criteria include income and asset limits.

What are the income limits?

The Supplemental Nutrition Assistance Program has two income limits, gross income and net income. Gross income is total income before taxes or deductions. Net income is determined by subtracting certain allowable deductions from the gross income. For specific dollar figures, see the chart of monthly income limits and maximum monthly allotments on the following page.



Supplemental Nutrition Assistance Program monthly income limits and maximum allotment

Assistance Group Size	Gross Monthly Income Limit	Net Monthly Income Limit	Maximum SNAP Allotment
1	\$1,316	\$1,012	\$192
2	\$1,784	\$1,372	\$353
3	\$2,252	\$1,732	\$505
4	\$2,720	\$2,092	\$642
5	\$3,188	\$2,452	\$762
6	\$3,656	\$2,812	\$914
7	\$4,124	\$3,172	\$1,011
8	\$4,592	\$3,532	\$1,155
Each Additional Member	+ \$468	+ \$360	+\$144

The information in this guide is correct as of April 1, 2019. For the most up-to-date information, refer to www.fssa.in.gov.

What are the asset/resource limits?

The asset/resource limits are \$5,000 per household. Assets include bank accounts, cash, real estate, personal property, vehicles, etc. The household's home and surrounding lot, household goods, personal belongings and life insurance policies are not counted as assets in determining SNAP eligibility.

What can a participant buy with Supplemental Nutrition Assistance Program benefits?

Supplemental Nutrition Assistance Program benefits can be used like cash to buy food items at any store, supermarket or co-op approved by the USDA. Items that can be purchased with SNAP are determined by the USDA, not the state of Indiana. SNAP can be used to purchase any foods meant for human consumption, as well as seeds and plants that produce food.

Will Supplemental Nutrition Assistance Program benefits provide all of an applicant's household's food needs?

Supplemental Nutrition Assistance Program benefits are not intended to purchase all of a household's meals for the month. The assistance group's budget is compared against the Thrifty Food Plan to determine the final benefit amount. Assistance groups do not necessarily qualify for the maximum SNAP benefit for their group size. Benefits are intended to supplement





the household's other income to help purchase healthy meals during the month. Eligible households are issued SNAP monthly based on the Thrifty Food Plan, which is a model diet plan established by the National Academy of Sciences and supported by the U.S. Department of Agriculture.

How does someone apply for or manage their current SNAP benefits?

- Applicants can apply online at www.fssabenefits.in.gov.
- Applicants can call or fax 800-403-0864.
- Applicants can visit a local Division of Family Resources office or find a local DFR office at http://www.in.gov/fssa/dfr/2999.htm.

How long does it take to get benefits?

The Division of Family Resources office has 30 days to make a decision on an applicant's case. However, if the person meets certain criteria he or she may be determined to be eligible for expedited service, which means the applicant will receive benefits within seven days of applying.

Can a recipient get expedited Supplemental Nutrition Assistance Program benefits today?

When an application is turned in, it is reviewed for expedited service. It is important for applicants to complete the expedited questions on the application so that they can be considered for this service.

To qualify for expedited benefits an applicant must:

- Have less than \$150 in gross monthly income and liquid resources (cash/ checking/savings) of \$100 or less in the month of the application.
- Have monthly rent/mortgage and utilities that cost more than the applicant's gross monthly income and liquid resources.

If applicants qualify for expedited benefits, they will receive them by the seventh day after applying. Benefits are NEVER received the same day as the application.

What does an applicant have to provide when he or she applies?

Applicants will be asked to provide their name, address and signature. At the interview, the dates of birth and Social Security numbers for all persons living in their household must be provided. In addition, they will need to verify the income received by each household member. There may also be other information requested depending on each household's specific situation.



What happens at the interview appointment?

The worker will ask questions about the persons living in the home, income, resources and other information needed to determine eligibility. Applicants will be given or mailed a form listing all needed information with a deadline date. They must get the information to the local office or document center before the deadline date. They will be mailed a notice regarding eligibility after the case has been processed and eligibility has been determined. The notice lists appeal rights should the applicant disagree with the decision.

Can someone receive Supplemental Nutrition Assistance Program benefits if he or she is getting unemployment?

Yes. Individuals who receive unemployment benefits may still qualify for Supplemental Nutrition Assistance Program benefits.

Can someone receive Supplemental Nutrition Assistance Program benefits if he or she gets Supplemental Security Income, disability related Medicaid or other disability or insurance benefits?

Applicants must pass a net income test to qualify for Supplemental Nutrition Assistance Program benefits. Receiving Supplemental Security Income, disability-related Medicaid or other disability or insurance benefits does not hinder someone from receiving SNAP benefits as long as the net income test is passed.

Why can't applicants get Supplemental Nutrition Assistance Program benefits if they have a felony drug conviction?

Any individual who has been convicted of a felony under federal or state law, and this felony includes the possession, use or distribution of a controlled substance, will be ineligible to receive benefits. Ineligibility under this provision is limited to convictions based on behavior that occurred after Aug. 22, 1996.

How does someone spend Supplemental Nutrition Assistance Program benefits?

Once it is determined that applicants are eligible for Supplemental Nutrition Assistance Program benefits, a "Hoosier Works" card is sent to the mailing address provided. Applicants should normally receive the card within three to five days. If an applicant has previously received SNAP benefits under his or her name, he or she will not be mailed a new Hoosier Works card. The benefits will be put on the old card. If the old card is lost or damaged, applicants will need to call 877-768-5098 to obtain a new card. The card is utilized like a debit card.





■ Women, Infants and Children

The Indiana State Department of Health offers a nutrition program called Women, Infants and Children, which is nationally recognized as an effective means for improving access to nutritious foods and promoting healthier eating and lifestyles. The Indiana WIC program operates a statewide network of more than 140 clinics that offer services in every county and provides:

- Supplemental healthy foods designed by qualified nutritionists
- Health screening and assessment to identify nutritional needs and risks for clients
- Breastfeeding promotion and support
- Nutrition education and counseling
- · Referrals to other Indiana health, family and social services

For more information, including eligibility requirements and how to apply, refer to **www.wic.in.gov**, call **800-522-0874**, email **inwic@isdh.in.gov** or contact the Indiana Women, Infants and Children program clinic nearest you. You also can follow the Indiana WIC program on Twitter **@IndianaWIC**.



Health Coverage



Health Coverage

Indiana offers several health coverage options to qualified low-income individuals and families, individuals with disabilities and the elderly with limited financial resources. Each program is designed to meet the medical needs of that specific group of individuals. Each program uses a different set of measures to determine if a person qualifies for that program.

How does someone qualify for Indiana Health Coverage Programs?

To qualify, applicants must meet four main eligibility criteria:

Income/Household Size

This applies to both earned income (example: wages from a job) and unearned income (example: Social Security Disability payments). Income limits that are adjusted to account for the number of household members. Visit the "Am I Eligible" page by visiting http://www.in.gov/medicaid/members/57.htm. You may also check for current income limits or see if you qualify online at the Division of Family Resources Benefits Portal by visiting https://fssabenefits.in.gov/CitizenPortal/application.do and additional information may also be found on the Indiana Medicaid website, at http://www.in.gov/medicaid/.

Age

Certain programs are designed for people in specific age groups.

Financial resources/assets

Different programs count different resources/assets. Resources/assets are not counted for the following groups: children, pregnant women, members with only family planning services, former foster children up to age 25 and Healthy Indiana Plan members.

Medical Needs

Specific medical needs may determine eligibility and which program can best serve your needs.

How does someone apply for or manage Indiana Health Coverage Programs?

- To learn about the different programs, applicants can visit www.indianamedicaid.com.
- Applicants can apply online at www.dfrbenefits.in.gov.
- Applicants can call or fax 1-800-403-0864.
- Applicants can visit a local Division of Family Resources office. A
 directory of DFR offices is found on pages 43–48 of this guide or online
 at www.dfrbenefits.in.gov.



What information does an applicant need to know/take with them to apply for Indiana Health Coverage Programs?

Applicants will need the following information for each person in the household:

- Names and dates of birth
- Social Security numbers
- Income from jobs or training
- Benefits each person gets now (or received within the past three months), such as Social Security, Supplemental Security Income, veteran's benefits or child support
- Amount of money in each person's checking account, savings accounts or other resources
- Any other health coverage and/or medical benefits each person currently has

How long will it take someone to get coverage?

Depending on the program applicants apply for, it may take approximately 45–90 days from the date the application is submitted to find out eligibility.

How long does someone keep his or her benefits?

Eligibility for any Indiana Health Coverage Program will typically need to be renewed each year. If eligibility cannot be renewed through the automated process, recipients will be contacted by mail when it is time for enrollment renewal. It is important for recipients to respond to all mail they receive regarding coverage. If enrollment occurs on time, there will be no break in program services. If recipients do not re-enroll, there may be a break in coverage or even lost coverage.

If a recipient has a change of address, phone number, income or resources, it is critical that he or she promptly informs the local Division of Family Resources office by calling 800-403-0864.

Can someone have Medicare and Medicaid at the same time?

Yes. A person can be eligible for both Medicaid and Medicare and receive benefits from both programs at the same time.

■ Healthy Indiana Plan

The Healthy Indiana Plan is an affordable health insurance program from the state of Indiana for uninsured adult Hoosiers. The Healthy Indiana Plan pays for medical expenses and provides incentives for members to be more health conscious. The Healthy Indiana Plan provides coverage for qualified low-income Hoosiers ages 19 to 64, who are interested in participating in a low-cost, consumer-driven health care program.





The Healthy Indiana Plan uses a proven, consumer-driven approach that was pioneered in Indiana. The program continues to build upon the framework and successes of the original Healthy Indiana Plan that started in 2008.

The Healthy Indiana Plan has two coverage options, HIP Plus and HIP Basic.

HIP Plus

The preferred plan selection for all members is HIP Plus, which offers the best value for members. HIP Plus has comprehensive benefits including vision, dental and chiropractic services. The member pays an affordable monthly POWER Account contribution based on income. The amount is between \$1 and \$20 per month. There is no copayment required for receiving services with one exception: using the emergency room where there is no true emergency.

HIP Basic

HIP Basic is the fallback option for members with household income less than or equal to 100% of the federal poverty level who do not make their POWER Account contributions. The benefits are reduced. The essential health benefits are covered but not vision, dental or chiropractic services. The member is also required to make a copayment each time he or she receives a health care service, such as going to the doctor, filling a prescription or staying in the hospital. These payments may range from \$4 to \$8 per doctor visit or prescription filled and may be as high as \$75 per hospital stay. HIP Basic can be much more expensive than HIP Plus.

How does someone qualify for the Healthy Indiana Plan?

To qualify for the Healthy Indiana Plan, applicants must be between the ages of 19–64 and meet the following eligibility requirements:

- Hoosiers incomes in 2019 up to \$17,443 annually for an individual, \$23,615 for a couple or \$35,960 for a family of four are generally eligible to participate in HIP. You can find up-to-date income limits under "Am I Eligible" at www.hip.in.gov.
- Individuals who are not eligible for Medicare or other Medicaid categories.

What are the responsibilities of a Healthy Indiana Plan member?

In the Healthy Indiana Plan program, the first \$2,500 of medical expenses for covered benefits are paid with a special savings account called a Personal Wellness and Responsibility Account. The state will pay most of this amount, but each member is also required to make a monthly contribution toward their health coverage into their POWER Account. The member contribution is based on income and will be between \$1 and \$20, but may be higher for members that smoke. The minimum contribution is \$1 per month.



Healthy Indiana Plan monthly income limits

Household Size	Monthly Income Limit For HIP Basic Eligibility	Monthly Income Limit For HIP Plus Eligibility*
1	\$1,041	\$1,455
2	\$1,410	\$1,969
3	\$1,778	\$2,484
4	\$2,146	\$2,997
5	\$2,515	\$3,512
6	\$2,883	\$4,026
7	\$3,251	\$4,541
8	\$3,620	\$5,055
For Each Additional Person, Add:	\$368	\$514

^{*133% + 5%} income disregard, income limit for HIP program. Eligibility threshold is not rounded.

The information in this guide is correct as of April 1, 2019. For the most up-to-date information, refer to www.hip.in.gov.

Managing the POWER Account and seeking preventive care can reduce the member's future costs. If the applicant's annual health care expenses are less than \$2,500 per year, he or she may reduce the monthly payment for the next year. Members can also have their monthly payment reduced even more if they complete preventive health services. If their annual health care expenses are more than \$2,500, the first \$2,500 is covered by their POWER Account, and additional health services are fully covered at no additional cost to the members.

What are the Healthy Indiana Plan health plans?

There are four managed care entities (health plans) that manage the benefits and POWER Accounts of Healthy Indiana Plan members. They are Anthem Blue Cross and Blue Shield, CareSource Indiana, Managed Health Services and MDwise.

What are the benefits of HIP Plus?

The HIP Plus program provides comprehensive benefits including vision, dental and chiropractic services for a low, predictable monthly cost. With HIP Plus, members won't have to pay every time they visit a doctor or fill a prescription. HIP Plus allows members to make a monthly contribution to their POWER





Account based on their income. If both the member and spouse are enrolled in HIP Plus, the monthly contribution amount will be split between the two. The only other cost for health care in HIP Plus is a payment of \$8 if members visit the Emergency Room when they *do not* have an emergency health condition.

Can the member receive help paying for the required contribution?

Yes, in the Healthy Indiana Plan, third parties such as employers, nonprofits and friends or family can contribute any amount up to the full contribution amount. In addition, the health plans may implement a rewards program that allows members to "earn" additional dollars in their POWER Accounts. Total contributions may not exceed the members' required contribution to their POWER Accounts.

How does someone find a provider? Can he or she keep the same doctor?

Healthy Indiana Plan members should call their health plan (Anthem, Care-Source, MDwise or MHS) or go online to research which providers are in that health plan's network. Members can also call **877-GET-HIP-9** and ask.

Members new to HIP will want to make sure they choose a health plan that includes their doctor. They can call **877-GET-HIP-9** to discuss options.

■ Hoosier Healthwise

Hoosier Healthwise is the state of Indiana's health care program for children and some pregnant women with low income. Based on family income, children up to age 19 may be eligible for coverage. Hoosier Healthwise covers medical care like doctor visits, prescription medicine, mental health care, dental care, hospitalizations, surgeries, family planning and transportation to medical appointments at little or no cost to the member or the member's family.

How does someone qualify for Hoosier Healthwise?

To qualify for Hoosier Healthwise, applicants must meet the following eligibility criteria:

Income/Household Size

Income limits are adjusted to account for the number of household members. Types of income include earned (example: wages from a job), unearned income (example: Social Security Disability payments) and countable income (e.g., taxable income plus certain Social Security Income and lump sum income. Supplemental Security Income, veterans benefits and child support are not counted). Visit the "Am I Eligible" guide at www.indianamedicaid.com (first click "members") for current income limits.

Age

Eligibility criteria can be based on age. Certain programs are designed for people in specific age groups.



How do applicants know if they are eligible?

The Eligibility Guide, found under the "Apply for Coverage" tab at **in.gov/medicaid/members**, is a resource tool that can provide eligibility information to assist individuals in understanding if they are more likely or less likely to qualify for any Medicaid benefits. It is not a final determination. The only way to know eligibility is to apply.

What is covered by Hoosier Healthwise?

Hoosier Healthwise provides standard benefits including coverage for medical expenses such as doctor visits, hospital care, therapies, medications, prescriptions and medical equipment. The benefits also include preventive care, such as well baby and well child care and regular check ups, and mental health and substance abuse treatment. Hoosier Healthwise also has benefits for children with special health care needs like asthma or diabetes. Various health plans may offer additional services.

How does someone choose a health plan and a health care provider?

When applicants enroll in Hoosier Healthwise, they will select a health plan. Each health plan has a network of health care providers including primary care doctors, specialists, home health care providers, pharmacies, therapists etc. It is important for applicants to know which health plans their doctor or doctors participate in. For most health care services, applicants must use the health care providers who are in their health plan. Members are assigned a primary medical provider to manage their health care.

The health plan choices are:

- Anthem
- CareSource
- Managed Health Services
- MDwise

Services that do not need a doctor's referral:

- Dental care
- Podiatry care (foot care)
- · Chiropractic care
- Vision/eye care (except surgery)
- Mental health services

- Substance abuse services
- Transportation services
- Family planning services
- Immunizations

If members need any other special service or need to see another type of medical professional, they need to talk with their doctor to get a referral. Some services will require their doctor or other specialty provider to request a prior authorization before the service can be delivered. It is up to the provider to request the prior authorization.





■ Hoosier Care Connect

Hoosier Care Connect is a coordinated care program primarily serving Hoosiers age 65 and over, or with blindness or a disability who live in the community and are not eligible for Medicare or for home- and community-based waiver services. Children who are wards of the state, are in the Adoption Assistance Program, as well as those who are current and former foster children can opt into Hoosier Care Connect rather than receive traditional Medicaid. In Hoosier Care Connect, a person enrolls with a health plan that provides most of their Medicaid-covered benefits. A health plan, also called a managed care entity, is a group of doctors, pharmacies and hospitals that work together to help an individual get the health services he or she needs.

What is covered by Hoosier Care Connect?

Hoosier Care Connect provides standard benefits including coverage for medical expenses such as doctor visits, hospital care, therapies, medications, prescriptions and medical equipment. The benefits also include preventative care, such as regular check-ups, and mental health and substance abuse treatment. Hoosier Care Connect also has benefits for members with certain health care conditions like heart disease, asthma, diabetes or a disabling condition. Various health plans may offer additional services.

Services that do not need a doctor's referral:

- Dental care
- Podiatry care (foot care)
- Chiropractic care
- Vision/eye care (except surgery)
- Mental health services
- Substance abuse services
- Transportation services

If members need any other special service or need to see another type of medical professional, they need to talk with their doctor to get a referral. Some services will require their doctor or other specialty provider to request prior authorization before the service can be delivered. It is up to the provider to request the prior authorization.

How does someone choose a health plan and a health care provider?

When applicants enroll in Hoosier Care Connect, they will select a health plan. Each health plan has a network of health care providers including primary care doctors, specialists, home health providers, pharmacies, therapists, etc.

It is important for applicants to know which health plans their doctor or doctors participate in. For most health care services, applicants must use the health care providers who are in their health plan.



The health plan choices are:

- Anthem
- Managed Health Services

How do applicants know if they are eligible?

The Eligibility Guide, found under the "Apply for Coverage" tab at **in.gov/medicaid/members**, is a resource tool that can provide eligibility information to assist individuals in knowing if they are more likely or less likely to qualify for any Medicaid benefits. It is not a final determination. The only way to know eligibility is to apply.

■ Traditional Medicaid

Some Medicaid enrollees are served through a fee-for-service delivery system where health care providers are paid for each service (like an office visit, test or procedure).

Traditional Medicaid is mostly limited to those in long-term care facilities, those dually enrolled in Medicare and Medicaid, and individuals receiving home- and community-based services waivers.

■ Medicare Savings Program

The Medicare Savings Program is a Medicaid program that helps support Medicare out-of-pocket expenses for individuals. There are different categories within the Medicare Savings Program, and benefits vary. All categories offer payment for Medicare Part B premiums, and the most generous category also covers Medicare Part A and B deductibles, copayments and coinsurance for eligible beneficiaries. For more information call toll-free at **800-452-4800**.

■ HoosierRx

Indiana's state pharmaceutical assistance program, HoosierRx, can help pay the monthly Part D premium, up to \$70 per month, for members enrolled in a Medicare Part D plan working with HoosierRx.

Who qualifies for HoosierRx?

To qualify for the HoosierRx program, an individual must be an Indiana resident, 65 years old or older, have a yearly income of \$18,975 or less for a single person, or \$25,605 or less for a married couple living together. The individual(s) must have applied for the "Medicare Extra Help" through Social Security to pay for their Medicare Part D plan and have received either a "Notice of Award" or "Notice of Denial" from Social Security regarding the "Medicare Extra Help." The Social Security "Notice of Denial" must state that





resources are above the limit established by law. The Social Security "Notice of Award" must state that a person is receiving partial extra help subsidy to help pay for the Medicare Part D premium. A person receiving the full extra help subsidy is not eligible for HoosierRx. The information in this guide is correct as of April 1, 2019. For the most up-to-date information, refer to **www.fssa.in.gov**.

How does someone apply for HoosierRx?

A person who thinks they meet the eligibility requirements above should call a HoosierRx representative at **866-267-4679** or visit the HoosierRx website at **www.in.gov/fssa/ompp/2669.htm**.

Companies offering prescription drug plans working with HoosierRx include:

- AARP/UnitedHealthcare
- CIGNA
- EnvisionRx
- First Health
- Indiana University Health Plans (with Part D coverage)
- SilverScript
- WellCare

■ Federal Health Insurance Marketplace

If a person's income is too high to qualify for Medicaid or the Healthy Indiana Plan, he or she may be able to find health insurance through the federal Health Insurance Marketplace. Depending on income and household size, he or she may qualify for a tax credit that can help pay the cost of the health insurance.

Applicants may receive more information about the federal Health Insurance Marketplace by:

- Calling 800-318-2596
- Visiting www.healthcare.gov



Home- & Community-Based Services for the Aged, Blind and Disabled



Home- & Community-Based Services for the Aged, Blind and Disabled

The Indiana Family and Social Services Administration administers various programs, including waiver programs, which help people facing permanent or temporary life challenges at various stages of life. The goal of many of these programs is to allow individuals who meet criteria to receive services within their homes and communities as opposed to being institutionalized. These programs and waivers are described in this section.

■ Adult Protective Services

The Adult Protective Services program was established to investigate reports and provide intervention and protection to vulnerable adults who are victims of battery, neglect or exploitation. The program serves Indiana residents 18 years of age or older who are physically or mentally incapacitated and reported as battered, neglected or exploited.

APS field investigators are county employees and operate out of the offices of county prosecutors throughout the state. If the APS unit has reason to believe an individual is an endangered adult, it will investigate the complaint or ensure the complaint is investigated by law enforcement or another agency.

Who is considered an endangered adult?

An endangered adult is defined as an individual who is:

- At least 18 years old
- Incapacitated by any of the following:
 - > Mental illness
 - > Developmental/Intellectual disability
 - > Dementia
 - > Habitual drunkenness
 - > Excessive drug use

> Other physical or mental incapacity preventing the person from managing or directing the management of his or her property or providing or directing the provision of self care

and

- Harmed or threatened with harm as a result of any of the following:
 - > Battery
 - > Neglect

> Exploitation of the individual's personal services or property

What is battery, neglect or exploitation?

All persons are required by law to report all cases of suspected battery, neglect or exploitation to either the nearest APS office or to law enforcement.

- Battery: Intentionally touching a person in a rude, insolent or angry manner
- Neglect/Self-Neglect: The intentional withholding of essential care or service or the inability of an individual to care for himself or herself; abandonment and confinement of an individual is also considered neglect.
- Exploitation: The intentional misuse of a person's property, person or services for financial gain



What should I do if I suspect an adult is endangered?

All persons are required by law to report all cases of suspected battery, neglect or exploitation of a vulnerable adult. A report may be made by calling the APS statewide toll-free number at **800-992-6978**, calling the nearest APS office or law enforcement agency or by submitting an online report.

Local offices and contact information can be found on the following pages.

Adult Protective Services offices

UNIT 1

2900 W. 93rd Ave. Crown Point, IN 46307 219-755-3863 219-755-3865 FAX

UNIT 1A

Courthouse Square 809 State St. LaPorte, IN 46350 219-326-6808, ext. 2348 219-324-9394 FAX

UNIT 2

533 N. Niles Ave. South Bend, IN 46617 800-626-8320 574-235-5092 574-235-9734 FAX

UNIT 3

Keystone Building, 1st Floor 602 S. Calhoun St. Fort Wayne, IN 46802 260-449-7989 260-449-4618 FAX

UNIT 4

County Building 301 Main St. Lafayette, IN 47901 765-420-1587

UNIT 5

200 Court Park Logansport, IN 46947 574-753-5808 574-735-3205 FAX

UNIT 6

Madison County Government Center 16 E. Ninth St., Box 5 Anderson, IN 46016 765-641-9570

UNIT 7

Vigo County Courthouse 33 S. Third St. Terre Haute, IN 47807 812-462-3286

UNIT 8

251 E. Ohio St. Indianapolis, IN 46204 317-327-1403

UNIT 8B

Shelby County Courthouse 407 S. Harrison St. Shelbyville, IN 46176 317-392-6495 888-387-2352

UNIT 10

501 N. Morton St., Ste. 215 Bloomington, IN 47404 812-349-2665

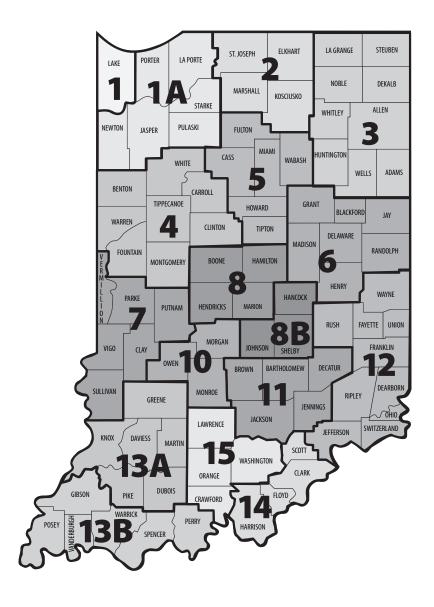
UNIT 11

234 Washington St. Columbus, IN 47201 812-379-1670





Adult Protective Services unit service areas





UNIT 12

Courthouse, First Floor 215 W. High St. Lawrenceburg, IN 47205 812-537-8862

UNIT 13A

200 E. Walnut Washington, IN 47501 812-254-8681

UNIT 13B

Civic Center, Room 329 1 N.W. M.L. King Jr. Blvd. Evansville, IN 47708 812-435-5190

UNIT 14

County Government Building 501 E. Court Ave.
Jeffersonville, IN 47130
812-285-6364

UNIT 15

County Government Bldg., Suite 202 806 Martinsburg Road Salem, IN 47167 812-883-5998 812-883-3983 FAX

■ Aged and Disabled Medicaid Waiver

The Aged and Disabled Waiver provides an alternative to nursing facility admission for adults and persons of all ages with a disability. The waiver is designed to provide services for people who would otherwise require care in a nursing facility. Waiver services can be used to help people remain in their own homes, as well as help people living in nursing facilities return to community settings such as their own homes, apartments, assisted living or adult family care settings.

How does someone qualify for the Aged and Disabled waiver program?

To qualify for the Aged and Disabled waiver, applicants must qualify for full coverage Medicaid and have needs that would otherwise require nursing facility level of care.

What are the income limits?

Applicants should refer to current Medicaid income limits. However, a special income limit is applied to Aged and Disabled waiver recipients when Medicaid eligibility is determined.

- Financial eligibility
 - > 300% of Supplemental Security Income,
 - > Parental income and resources disregarded for children under 18, and
 - > Spousal impoverishment protections similar to those for nursing homes

Visit the "Am I Eligible" guide at **www.indianamedicaid.com** (click on "Members" first) for current income limits.

What are the asset/resource limits?

The resource standard is \$2,000 for a single individual and \$3,000 for a married





couple. However, for certain married couples, if one spouse is receiving a homeand community-based services waiver and the other spouse is not and continues to live in the community, then spousal impoverishment provisions apply in which there are additional resource protections for the community spouse.

How does someone apply for the Aged and Disabled waiver?

If you are interested in learning more about the Aged and Disabled waiver, contact your local INconnect Alliance member at **800-713-9023**. A complete listing of INconnect Alliance members is also available on pages 84–86, or you can visit the INconnect Alliance website at **www.INconnectAlliance.org**.

What services are available?

Case management services are provided to every Aged and Disabled waiver recipient. Other services available under the Aged and Disabled waiver include:

- Adult day services
- · Adult family care
- Assisted living
- Attendant care
- Environmental modifications
- Health care coordination
- Homemaker
- Home delivered meals

- Nutritional supplements
- Personal emergency response systems
- Respite
- Specialized medical equipment
- Structured family care
- Transportation
- Vehicle modifications

If you encounter any terms or program names you do not understand, refer to the Indiana Family and Social Services Administration glossary of terms at the end of this guide or at www.in.gov/fssa/4999.htm.

■ Caregiver Support Services

Caregiver Support Services provide temporary assistance to families caring for eligible persons with intellectual and developmental disabilities who are residing with the family or legal guardian.

Caregiver supports provide brief relief periods for the primary caregiver. These supports can be provided in the home of the caregiver and/or person or in a non-private residential setting.

Caregiver Support Services are provided on an hourly basis. The program is designed to serve the greatest number of eligible families within the available funds.

Who is eligible to receive Caregiver Support Services?

To be eligible for Caregiver Support Services, an individual being cared for must reside in the family home or with a legal guardian. He or she must have a developmental disability and meet level of care criteria including that

the disability manifested before the individual was 22 years old and is likely to continue indefinitely. The individual must also demonstrate substantial functional limitations in at least three areas of major life activities including self-care, understanding and using language, learning, mobility, self-direction, capacity for independent living and/or economic self-sufficiency. The eligible person cannot also be receiving services through any other funded programs, including but not limited to:

- Bureau of Developmental Disabilities Services State Line Funding services
- Medicaid waiver services
- Vocational Rehabilitation Services
- · Department of Child Services
- Community and Home Options to Institutional Care for the Elderly and Disabled
- First Steps
- Division of Mental Health and Addiction
- Residential services through the Indiana Department of Education
- Children's Special Healthcare Services

How does someone apply for Caregiver Support Services?

Applications for Caregiver Support Services may be made online, by mail or in-person. To apply online, find the application on the Division of Disability and Rehabilitative Services website: **www.fssa.in.gov/ddrs** by clicking on "Developmental Disability."

To apply by mail or in-person, please call or visit your local Bureau of Developmental Disabilities Services district office and request an application. A list of the local BDDS offices can be found on pages 79–80.

■ Community and Home Options to Institutional Care for the Elderly and Disabled

The Community and Home Options to Institutional Care for the Elderly and Disabled program is administered through Indiana's 16 Area Agencies on Aging. The CHOICE program provides home- and community-based services to assist individuals in maintaining their independence in their own homes or communities for as long as is safely possible.

How does one qualify for the Community and Home Options to Institutional Care for the Elderly and Disabled program?

Community and Home Options to Institutional Care for the Elderly and Disabled applicants must be at least 60 years of age or be any age and have a disability due to a mental or physical impairment. Applicants must also be found to be at risk of losing their independence, usually indicated by difficul-





ties with activities of daily living, such as bathing, dressing, walking, transferring or medications set-ups, etc.

Community and Home Options to Institutional Care for the Elderly and Disabled funds may not be used if other funding such as Medicare or Medicaid is available to meet the individual's needs.

What are the income limits?

There are no income limits for the Community and Home Options to Institutional Care for the Elderly and Disabled program. However, there is a cost-sharing formula, and applicants with higher incomes may be asked to pay for a portion of their services.

What are the asset/resource limits?

An individual may have up to \$250,000 in countable assets. However, there is an asset-based cost-sharing formula, and applicants may be asked to pay for a portion of their services.

The resource standard for a single individual is \$2,000 and for a married couple it is \$3,000. However, for certain married couples, if one spouse is receiving a home- and community-based services waiver and the other spouse is not and continues to live in the community, then spousal impover-ishment provisions apply in which there are additional resource protections for the community spouse.

How does someone apply for the Community and Home Options to Institutional Care for the Elderly and Disabled program?

If you are interested in learning more about the Community and Home Options to Institutional Care for the Elderly and Disabled program, contact your local INconnect Alliance member at 800-713-9023. A complete listing of INconnect Alliance members is available on pages 84–86, or you can visit the INconnect Alliance website at **www.INconnectAlliance.org**.

What services are available?

Services available under the Community and Home Options to Institutional Care for the Elderly and Disabled program include:

- Adult day services
- Attendant care
- Case management
- Environmental modification
- Handy chore
- Homemaker

- Home-delivered meals
- Home health aide
- Personal emergency response systems
- Pest control
- Respite
- Skilled nursing

- Specialized medical equipment
- Transportation
- Vehicle modifications



■ Community Integration and Habilitation waiver

The Community Integration and Habilitation waiver is a needs-based waiver administered by the Bureau of Developmental Disabilities Services.

How does someone qualify for the Community Integration and Habilitation waiver?

To qualify for the Community Integration and Habilitation waiver, an eligible individual must meet at least one of the following emergency placement criteria:

- Loss of primary caregiver
- Caregiver is over the age of 80
- Evidence of abuse or neglect in current institutional or home placement
- Other health and safety risk as reviewed and approved by the division director OR be approved for at least one of the following Federal priority criteria known as reserved waiver capacity categories:
 - > Eligible individual transitioning to the community from a nursing facility, extensive support needs or state operated facility
 - Eligible individual determined to no longer need/receive active treatment in supervised group living
- > Eligible individual transitioning from 100% state-funded services
- > Eligible individual aging out of Department of Education, Department of Child Services or SGL
- > Eligible individual requesting to leave a large private intermediate care facility for individuals with intellectual disabilities

How does someone apply for a Community Integration and Habilitation waiver?

If you or someone you know thinks they may qualify for the Community Integration and Habilitation waiver, please contact your local Bureau of Developmental Disabilities district office and they will be able to assist you. A complete list and contact information for the district offices is available on page 79.

What services are available on the Community Integration and Habilitation waiver?

- Adult day services
- Behavioral support services
- Case management
- Community transition
- Community-based habilitation – group
- Community-based habilitation – individual
- Electronic monitoring
- Environmental modifications
- Extended services
- Facility-based habilitation – group
- Facility-based habilitation individual
- Facility-based support services





- Family and caregiver training
- Intensive behavioral intervention (age 21 and over)
- Music therapy
- Occupational therapy (age 21 and over)
- Personal emergency response system
- Physical therapy (age 21 and over)

- Prevocational services
- Psychological therapy (age 21 and over)
- Recreational therapy
- · Rent and food for unrelated live-in caregiver
- Residential habilitation and support
- · Residential habilitation and supports - daily
- Respite

- Specialized medical equipment and supplies
- Speech/language therapy (age 21 and over)
- Structured family caregiving
- Transportation Levels 1, 2, and 3
- Wellness coordination
- Workplace assistance

If you encounter any terms or program names you do not understand, refer to the Indiana Family and Social Services Administration glossary of terms at the end of this guide or at www.in.gov/fssa/4999.htm.

Bureau of Developmental Disabilities Services district offices

District 1

110 W. Ridge Road Gary, IN 46408-2709 Phone: 219-981-5313

Toll Free: 877-218-3053 (V/VRS/711) Toll Free Fax: 855-455-4265

District 2

401 E. Colfax Ave., Ste. 270 South Bend. IN 46617-2737 Phone: 574-232-1412

Toll Free: 877-218-3059 (V/VRS/711) Toll Free Fax: 855-455-4266

District 3

201 E. Rudisill Blvd., Ste. 300 Fort Wayne, IN 46806-1756

Phone: 260-423-2571

Toll Free: 877-218-3061 (V/VRS/711) Toll Free Fax: 855-525-9370

District 4

30 N. Eighth St., P.O. Box 10217 Terre Haute, IN 47801-0217 Phone: 812-232-3603

Toll Free: 877-218-3096 (V/VRS/711) Toll Free Fax: 855-525-9374

District 5

2620 Kessler Blvd. E. Dr., Ste. 105 Indianapolis, IN 46220-2890

Phone: 317-205-0101

Toll Free: 877-218-3530 (V/VRS/711) Toll Free Fax: 855-525-9373

District 6

201 E. Charles St., Ste. 130 Muncie. IN 47305-2434 Phone: 765-288-6516

Toll Free: 877-218-3531 (V/VRS/711) Toll Free Fax: 855-525-9372

District 7

700 E. Walnut St. Evansville, IN 47713-2561 Phone: 812-423-8449

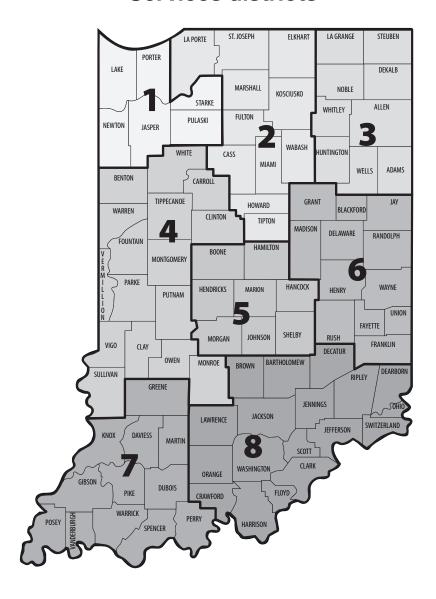
Toll Free: 877-218-3528 (V/VRS/711) Toll Free Fax: 855-525-9375

District 8

1452 Vaxter Ave. Clarksville, IN 47129-7721 Phone: 812-283-1040

Toll Free: 877-218-3529 (V/VRS/711) Toll Free Fax: 855-525-9376

Bureau of Developmental Disabilities Services districts







■ Deaf & Hard of Hearing Services

Deaf & Hard of Hearing Services is a program within the Bureau of Rehabilitation Services. DHHS provides assistance, consultation and education on resources to individuals and their families regarding the needs and rights of individuals who are deaf or hard of hearing, as defined in the Americans with Disabilities Act and various other laws. DHHS provides grant funding to local community agencies throughout the state to provide case management services through the Increasing Independence Program. Fluent American Sign Language case managers provide community support services to individuals who are deaf or hard of hearing to ensure improved independence. DHHS staff also provide community education and advocacy throughout the state. Additionally, DHHS provides oversight of the Indiana Interpreters Certification, Interpreter Continuing Education Credits, interpreter grievance process, and Board of Interpreter standards. DHHS also manages the state employee discount hearing aid program.

For more information about Deaf & Hard of Hearing Services, interested parties can email **dhhshelp@fssa.in.gov** or write to the address below:

Deaf & Hard of Hearing Services

402 W. Washington St., MS 23 IGCS – W453 Indianapolis, IN 46204

■ Family Caregiver Program

The Family Caregiver Program, part of the Older Americans Act, acknowledges and encourages the role caregivers play in the nation's home- and community-based services system. These services are provided through Indiana's 16 Area Agencies on Aging. The Family Caregiver Program can provide services to individuals caring for loved ones 60 years of age and older or to older relatives (not parents) age 55 and older caring for a child or older relatives (including parents) age 55 and older caring for an individual with a disability between the ages of 18 and 59. Additionally, the program can support adult family members or other informal caregivers age 18 and older providing care to individuals of any age with Alzheimer's disease and related disorders. However, funding is extremely limited so services are not always available in every area of the state to cover all service options for eligible individuals who are in need of assistance.

What are the income limits?

There are no income limits for the Family Caregiver Program. Participants are asked to make voluntary contributions, as they are able.

What are the asset/resource limits?

There are no asset/resource limits for the Family Caregiver Program. Participants are asked to make voluntary contributions as they are able.



What services are available?

Services available under the Family Caregiver Program include:

- Individual counseling/training/support groups: Services or activities that assist the caregiver in the areas of health, nutrition, financial literacy, decision-making and problem solving. These can include counseling provided by a licensed professional or support groups that allow caregivers to discuss their attitudes, feelings and problems with other individual(s) to achieve greater understanding of their situation, role and problems that arise with caregiving. It can also include training and education for the caregiver to assist them in acquiring knowledge and skills that allow them to provide better care.
- Respite: Providing the caregivers temporary, short-term breaks from their caregiving responsibilities.
- Supplemental services: Home- and community-based services provided, on a limited basis, to complement the care provided by caregivers can include home modifications, assistive technologies, emergency response systems and incontinence supplies.
- Access assistance: One-on-one contacts to provide outreach and information to caregivers on available long-term services and supports can include case management services.
- Information services: Generally consisting of trainings for groups of caregivers and presentations on long-term services and supports.

How does someone apply for the Family Caregiver program?

If you are interested in learning more about the Family Caregiver program, contact your local INconnect member at **800-713-9023**. A complete listing of INconnect Alliance members is available on pages 84–86, or you can visit the INconnect Alliance website at **www.INconnectAlliance.org**.

■ Family Supports waiver

What are the eligibility criteria for the Family Supports waiver and how does someone apply?

To be eligible for a Family Supports waiver, an individual must have a developmental disability and meet level of care criteria. Level of care criteria includes the individual's qualifying disability manifested before the age of 22 and is likely to continue indefinitely. An individual must also demonstrate substantial functional limitations in at least three areas of major life activities which include: self-care, understanding and using language, learning, mobility, self-direction, capacity for independent living and/or economic self-sufficiency.

Prospective applicants can contact their local Bureau of Developmental Disabilities Services office to ask questions and to request an application packet. The completed packet and all pertinent documents should then be returned to their BDDS office. A list of the local BDDS offices can be found on page 79.





What happens after the packet and application are turned in?

An intake specialist from the applicant's local Bureau of Developmental Disabilities Services office will contact him or her to complete the assessment to determine developmental disability eligibility and preliminary level of care using the information provided.

Applicants can also be referred to Vocational Rehabilitation Services if they express interest in finding employment or need help keeping their current employment. The Division of Disability and Rehabilitative Services also strongly encourages applicants to apply for Medicaid at the same time they are applying for waiver services.

When will waiver services begin?

Once it has been determined that an individual meets the criteria for a developmental disability, the individual will be placed on the appropriate Family Supports waiver waiting lists.

Each year, the Division of Disability and Rehabilitative Services receives a certain number of waivers from the U.S. Centers for Medicare and Medicaid Services based upon the funds available. Unfortunately, the demand for a waiver outpaces the supply and necessitates a waiting list. The state makes every effort to reduce the size of the waiting list. Once a waiver becomes available, an individual will be offered a waiver slot if he or she meets the level of care and confirms the desire for services.

What services are available through the Family Supports waiver?

The Family Supports waiver is administered by the Bureau of Developmental Disabilities Services and provides services to individuals with developmental disabilities that are designed to enable the to live as independently as possible in their home or community setting appropriate to their needs.

Available services include:

- Adult day services
- Behavioral support services
- Case management
- Community-based habilitation – group
- Community-based habilitation – individual
- Extended services
- Facility-based habilitation – group
- Facility-based habilitation individual
- Facility-based support services

- Family and caregiver training
- Intensive behavioral intervention (age 21 and over)
- Music therapy
- Occupational therapy (age 21 and over)
- Participant assistance and care
- Personal emergency response system
- Physical therapy (age 21 and over)

- Prevocational services
- Psychological therapy (age 21 and over)
- Recreational therapy
- Respite
- Specialized medical equipment and supplies
- Speech/language therapy (age 21 and over)
- Transportation
- Workplace assistance



If you encounter any terms or program names you do not understand, refer to the Indiana Family and Social Services Administration glossary of terms at the end of this guide or at www.in.gov/fssa/4999.htm.

■ First Steps

First Steps is the state's early intervention program. The First Steps program ensures that all Indiana families with infants and toddlers birth through age 3 experiencing developmental delays or disabilities have access to early intervention services. Please go to page 18 for more information about First Steps.

■ INconnect Alliance

The INconnect Alliance is a statewide network of 16 Aging and Disability Resource Centers. Currently, Aging and Disability Resource Centers are housed at the 16 Area Agencies on Aging. Alliance members receive thousands of calls from Hoosiers seeking information and support for themselves or loved ones. They provide information or referral to other resources; they assess needs and match individuals with community resources, and they are the entry point for Indiana's programs of long-term services and supports for persons who are elderly or who have physical disabilities. The goal of the INconnect Alliance is to connect persons to resources, supports and services that allow them to remain as independent as possible within their homes and communities.

For more information about the INconnect Alliance, visit www.INconnectAlliance.org or call 800-713-9023.

■ Independent Living Services Program

Independent Living philosophy emphasizes consumer control, the idea that people with disabilities are the best experts on their own needs, having crucial and valuable perspective to contribute and deserving of equal opportunity to decide how to live, work and take part in their communities, particularly in reference to services that powerfully affect their day-to-day lives and access to independence. Centers for Independent Living are consumer-controlled, cross-disability, nonresidential, private, nonprofit agencies that are designed and operated within local communities by individuals with disabilities.

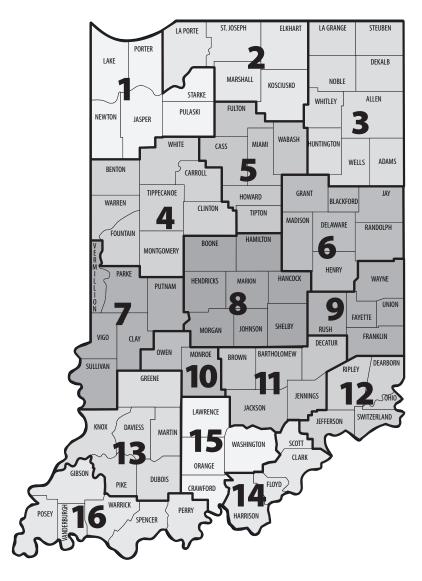
Core services include:

- Peer support
- Information and referral
- Individual and systems advocacy
- · Independent living skills training
- Services that facilitate transition from nursing homes and other institutions to the community, provide assistance to those at risk of entering institutions and facilitate transition of youth to postsecondary life





INconnect Alliance planning and service areas





INconnect Alliance members

In 2016, the Indiana Family and Social Services Administration Division of Aging established the INconnect Alliance, a statewide network of 16 Aging and Disability Resource Centers. Information about the INconnect Alliance can be found on page 87.

AREA 1

Northwest Indiana Community Action Corporation

5240 Fountain Drive Crown Point, IN 46307 219-794-1829 or 800-826-7871 TTY: 888-814-7597 FAX 219-794-1860 www.nwi-ca.com director@nwi-ca.org

AREA 2

REAL Services Inc.

1151 S. Michigan St. South Bend, IN 46601-3427 574-284-2644 or 800-552-7928 FAX 574-284-2642 www.realservices.org info@realservices.org

AREA 3

Aging and In-Home Services of Northeast Indiana Inc.

2927 Lake Ave. Fort Wayne, IN 46805-5414 260-745-1200 or 800-552-3662 FAX 260-422-4916 www.agingihs.org info@agingihs.org

AREA 4

Area IV Agency on Aging & Community Action Programs Inc.

660 N. 36th St. Lafayette, IN 47903-4727 765-447-7683 or 800-382-7556 TDD 765-447-3307 FAX 765-447-6862 www.areaivagency.org

AREA 5

Area Five Agency on Aging & Community Services Inc.

1801 Smith St., Ste. 300 Logansport, IN 46947-1577 574-722-4451 or 800-654-9421 FAX 574-722-3447 www.areafive.com areafive@areafive.com

AREA 6

LifeStream Services Inc.

1701 Pilgrim Blvd. Yorktown, IN 47396-0308 765-759-1121 or 800-589-1121 TDY 866-801-6606 FAX 765-759-0060 www.lifestreaminc.org mail@lifestreaminc.org

AREA 7

Area 7 Agency on Aging and Disabled West Central Indiana Economic Development District Inc.

2800 Poplar St., Suite 9A Terre Haute, IN 47803 812-238-1561 or 800-489-1561 TDD 800-489-1561 FAX 812-238-1564 www.westcentralin.com

AREA 8

CICOA Aging & In-Home Solutions

8440 Woodfield Crossing Blvd., Ste. 175 Indianapolis, IN 46240-4359 317-254-5465 or 800-432-2422 FAX 317-254-5494 TDD 317-254-5497 www.cicoa.org





AREA 9

LifeStream Services Inc.

423 Commerce Road Richmond, IN 47374 Phone: 765-966-1795 Fax: 765-759-1121 www.lifestreaminc.org mail@lifestreaminc.org

AREA 10

Area 10 Agency on Aging

631 W. Edgewood Drive Ellettsville, IN 47429 812-876-3383 or 800-844-1010 FAX 812-876-9922 www.area10agency.org info@area10agency.org

AREA 11

Thrive Alliance

1531 13th St., Ste. G900 Columbus, IN 47201 812-372-6918 or 866-644-6407 FAX 812-372-7864 www.thrive-alliance.org contact@thrive-alliance.org

AREA 12

LifeTime Resources Inc.

13091 Benedict Drive Dillsboro, IN 47018 812-432-6200 or 800-742-5001 FAX 812-432-3822 www.lifetime-resources.org contactltr@lifetime-resources.org

AREA 13

Generations Vincennes University Statewide Services

1019 N. Fourth St. Vincennes, IN 47591 812-888-5880 or 800-742-9002 FAX 812-888-4566 www.generationsnetwork.org generations@vinu.edu

AREA 14

Lifespan Resources Inc.

33 State St., Third Floor New Albany, IN 47151-0995 812-948-8330 or 888-948-8330 TTY 812-542-6895 FAX 812-948-0147 www.lsr14.org kstormes@lsr14.org

AREA 15

Hoosier Uplands/Area 15 Agency on Aging and Disability Services

521 W. Main St. Mitchell, IN 47446 812-849-4457 or 800-333-2451 TDD 800-473-3333 FAX 812-849-4467 www.hoosieruplands.org area15@hoosieruplands.org

AREA 16 SWIRCA & More

16 W. Virginia St. Evansville, IN 47737-3938 812-464-7800 or 800-253-2188 FAX 812-464-7843 or 812-464-7811 www.swirca.org swirca@swirca.org



Centers for Independent Living

accessABILITY Center for Independent Living Inc.

5302 E. Washington St. Indianapolis, IN 46219 317-926-1660 office 866-794-7245 toll free 317-926-1687 fax www.abilityindiana.org info@abilityindiana.org

ATTIC

1721 Washington Ave. Vincennes, IN 47591 812-886-0575 office 877-962-8842 toll free 812-886-1128 fax www.atticin.org becky@atticin.org

Everybody Counts Center for Independent Living (ECCIL)

9111 Broadway, Ste. A
Merrillville, IN 46410
219-769-5055 office
www.everybodycounts.org
teresatorres@everybodycounts.org
info@everybodycounts.org

Everybody Counts North

Roberto Clemente Center 3616 Elm St., Rm. 3 East Chicago, IN 46312 219-229-6144 office www.everybodycounts.org teresatorres@everybodycounts.org info@everybodycounts.org

FutureChoices Inc.

309 N. High St. Muncie, IN 47305 765-741-8332 office 866-741-3444 toll free 765-741-8333 fax www.futurechoices.org bquarles@futurechoices.org

Independent Living Center of Eastern Indiana (ILCEIN)

1818 W. Main St. Richmond, IN 47374 765-939-9226 office 877-939-9226 toll free 765-935-2215 fax/TTY www.ilcein.org jimm@ilcein.org

League for the Blind & Disabled (The League)

5821 S. Anthony Blvd.
Fort Wayne, IN 46816
260-441-0551 office V/TTY
800-889-3443 toll free
260-441-7760 fax
www.the-league.org
davidn@the-league.org

Southern Indiana Center for Independent Living (SICIL)

1490 W. Main St. P.O. Box 308 Mitchell, IN 47446 812-277-9626 office V/TTY 800-845-6914 toll free 812-277-9628 fax www.sicilindiana.org teresa@sicilindiana.org

The Wabash Independent Living & Learning Center (WILL Center)

1 Dreiser Square
Terre Haute, IN 47807
812-298-9455 office
812-915-9455 toll free
812-299-9061 fax
www.thewillcenter.org
petecinc@thewillcenter.org





■ Money Follows the Person

The Money Follows the Person program is funded through a grant from the federal agency Centers for Medicare and Medicaid Services. The MFP program was developed to help states move individuals from institutional settings to home- and community-based settings. Indiana was approved for the MFP program in 2007. Since then, Indiana has focused on assisting eligible persons to leave institutional care by providing services for individuals to live safely in their communities.

How does someone qualify for the Money Follows the Person program?

An applicant must be living in an institution to be eligible for Indiana's Money Follows the Person program. To apply, a person must meet specific institutional placement criteria. The criteria vary depending on the qualifying institution in which the person is currently residing. The applicant must be a resident of a qualifying institution for at least 90 consecutive days. In addition to the placement requirements, a person wishing to participate in Indiana's MFP program must also meet all of the following conditions:

- They must have needs that can be met safely through services available in the community.
- They must be an Indiana Medicaid-eligible recipient for at least one day prior to discharge from the institution.
- They must meet the minimum requirements for a funding source that is currently partnering with Indiana's MFP program. For example, the Aged and Disabled waiver, the Traumatic Brain Injury waiver, the Community Integration and Habilitation waiver or the Psychiatric Residential Treatment Facility waiver.

What are the income limits?

Applicants should refer to current Medicaid income limits. However, a Special Income Limit is applied to Money Follows the Person recipients when Medicaid eligibility is determined.

Visit the "Am I Eligible?" guide at **www.indianamedicaid.com** (click "Members" first) for current income limits.

What are the asset/resource limits?

The resource standard for a single individual is \$2,000 and for a married couple it is \$3,000. However, for certain married couples, if one spouse is receiving a home- and community-based services waiver and the other spouse is not and continues to live in the community, then spousal impoverishment provisions apply in which there are additional resource protections for the community spouse.



What services are available?

Case management services and transition services are provided to every Money Follows the Person recipient. Other available services vary based on those provided by the partner program to which the individual will transfer at the end of his or her 365 days in the MFP program.

How does someone apply for the Money Follows the Person program?

Applicants can apply through their local INconnect Alliance member (a complete listing of INconnect Alliance members is available on pages 86–88).

■ Older Americans Act programs

The Older Americans Act provides community-based services and opportunities for older individuals and their families. Supportive services and senior center programs are provided through Indiana's 16 Area Agencies on Aging.

How does someone qualify for Older Americans Act programs?

Older Americans Act programs generally require only that recipients be over the age of 60. However, funding is extremely limited, so services are not always available to cover all service options for eligible individuals in need of assistance.

What are the income limits?

There are no income limits for Older Americans Act programs. Participants are asked to make voluntary contributions as they are able.

What are the asset/resource limits?

There are no asset/resource limits for Older Americans Act programs. Participants are asked to make voluntary contributions as they are able.

How does someone apply for Older Americans Act programs?

If you are interested in learning more about the Older Americans Act programs, contact your local INconnect Alliance member at **800-713-9023**. A complete listing of INconnect Alliance members is available on pages 86–88, or you can visit the INconnect Alliance website at **www.INconnectAlliance.org**.

What services are available?

Services available under the Older Americans Act include:

- · Adult day services
- Attendant care
- Caregiver support services
- · Case management
- · Congregate meals

- Environmental modifications
- Homemaker
- Home-delivered meals
- Information and assistance
- Legal assistance





- Personal emergency response systems
- Respite

- Specialized medical equipment
- Transportation
- Vehicle modifications

If you encounter any terms or program names you do not understand, refer to the Indiana Family and Social Services Administration glossary of terms at the end of this guide or at www.in.gov/fssa/4999.htm.

■ Older Independent Blind program

The Indiana Older Independent Blind program expands independent living services for people who are age 55 and older and have a severe visual impairment. Through a grant from the U.S. Department of Education's Independent Living Services for Older Individuals Who Are Blind program, the Bureau of Rehabilitation Services and Blind and Visually Impaired Services provide funding to various contractors across the state.

The Older Independent Blind program partners with statewide community programs to administer a wide array of services for older individuals who are blind or visually impaired. Services may include assistance in correcting or modifying visual disabilities, to include providing optical vision aids, in-home training, orientation and mobility training, Braille instruction, adaptive skills training, information and referral, peer counseling and other appropriate services designed to assist the individual with daily living activities.

For a list of Older Independent Blind community programs by county of coverage and additional information about the Older Independent Blind program, please visit the program website at www.in.gov/fssa/ddrs/4902.htm or contact the Blind and Visually Impaired Services program manager at 800-545-7763.

Older Independent Blind community programs and a list of counties they serve:

- accessABILITY Counties: Boone, Hamilton, Hendricks, Marion, Hancock, Morgan, Johnson, Shelby
- Bosma Enterprises Counties: All Indiana counties
- Future Choices Inc. Counties: Grant, Howard, Tipton, Madison, Delaware, Randolph, Blackford
- Independent Living Center of Eastern Indiana Counties: Henry, Wayne, Rush, Fayette, Union, Decatur, Franklin, Jennings, Ripley, Jefferson, Ohio, Switzerland
- League for the Blind and Disabled Inc. Counties: St. Joseph, Elkhart, LaGrange, Steuben, Marshall, Kosciusko, Whitley, Noble, Dekalb, Allen, Huntington, Wells, Adams, Jay
- The WILL Center Counties: Vermillion, Parke, Putnam, Vigo, Clay, Owen, Sullivan, Greene, Knox, Daviess, Martin, Pike, Gibson



Supervised Group LivingResidential Services

A group home or Supervised Group Living is a residential option and an alternative to waiver placements for eligible individuals with intellectual/developmental disabilities needing services. There are almost 500 SGL homes in the state of Indiana with a capacity to serve over 3,000 individuals. The homes vary in size, and typically four to eight individuals reside in the home. Homes are licensed and governed by state and federal regulations and have an annual recertification by the Indiana State Department of Health to ensure standards of care are met.

The residential supports include:

- Behavioral supports
- Case management by a Qualified Intellectual Disabilities Professional
- · Day services
- · Dietary assessment
- Evacuation drills

 Individual support plan

· Life safety surveys

- Medication administration
- Nursing care services
- Occupational therapy consultation
- Person-centered planning

- Pharmacy review
- Physical therapy evaluation
- Psychiatric review
- Recreational activities
- Speech therapy consultation
- Transportation
- 24-hour staffing

If you encounter any terms or program names you do not understand, refer to the Indiana Family and Social Services Administration glossary of terms at the end of this guide or at www.in.gov/fssa/4999.htm.

What are the eligibility criteria for group home placement?

To be eligible for group home placement, an individual must have a developmental disability and meet level of care criteria including that the disability manifested before the individual was 22 years old and is likely to continue indefinitely. An individual must also demonstrate substantial functional limitations in at least three areas of major life activities including self-care, understanding and using language, learning, mobility, self-direction, capacity for independent living and/or economic self-sufficiency.

How does someone apply?

Prospective applicants can contact their local Bureau of Developmental Disabilities Services district office to ask questions and to request an application packet. The completed packet and all pertinent documents should be returned to their BDDS district office. A list of the local BDDS district offices can be found on pages 79–80.





What happens after the packet and application are turned in?

An intake specialist from the applicant's local Bureau of Developmental Disabilities Services district office will contact the applicant to complete the assessment to determine developmental disability eligibility and preliminary level of care using the information provided. Applicants can also be referred to Vocational Rehabilitation Services if they express interest in finding employment or need help keeping their current employment. The Division of Disability and Rehabilitative Services also strongly encourages applicants to apply for Medicaid at the same time they are applying for group home services.

When would group home services begin?

Once it has been determined that an individual meets the criteria for developmental disability, a service coordinator from the Bureau of Developmental Disabilities Services will seek to identify the individual's geographical preference and refer an individual to group home providers who have openings that will meet the individual's unique needs, age, gender and developmental level. The BDDS service coordinator will facilitate visits at potential group homes to ensure an individual's preferences are identified and support needs are addressed by the group home provider. Once a placement is agreed upon between the individual and group home provider, the BDDS service coordinator will facilitate the transition into the group home.

■ Traumatic Brain Injury Medicaid Waiver

The Traumatic Brain Injury Waiver provides home- and community-based services to individuals who have suffered a traumatic brain injury and who, without such services, would require institutional care.

How does one qualify for the Traumatic Brain Injury Waiver?

To qualify for the Traumatic Brain Injury Waiver, applicants must have a traumatic brain injury diagnosis, qualify for full coverage Medicaid, and either require nursing facility level of care or qualify for placement in an intellectual disability intermediate care facility.

What are the income limits?

Applicants should refer to current Medicaid income limits. However, a special income limit is applied to TBI Waiver recipients when Medicaid eligibility is determined.

- Financial Eligibility
 - > 300% of Supplemental Security Income
 - > Parental income and resources disregarded for children under age 18

Visit the "Am I Eligible?" guide at **www.indianamedicaid.com** (click "Members" first) for current income limits.



What are the asset/resource limits?

The resource standard for a single individual is \$2,000 and for a married couple it is \$3,000. However, for certain married couples, if one spouse is receiving a home- and community-based services waiver and the other spouse is not and continues to live in the community, then spousal impover-ishment provisions apply in which there are additional resource protections for the community spouse.

How does someone apply for the Traumatic Brain Injury Waiver?

If you are interested in learning more about the Traumatic Brain Injury Waiver, contact your local INconnect Alliance member at **800-713-9023**. A complete listing of INconnect Alliance members is available on pages 84–86, or you can visit the INconnect Alliance website at **www.INconnectAlliance.org**.

What services are available?

Case management services are provided to every Traumatic Brain Injury Waiver recipient.

Other services available under the Traumatic Brain Injury Waiver include:

- · Adult day services
- · Adult family care
- Assisted living
- Attendant care
- · Behavior management
- Environmental modifications
- Health care coordination
- Homemaker
- Home-delivered meals

- Nutritional supplements
- Personal emergency response systems
- Respite
- Residential-based habilitation
- Specialized medical equipment
- Structured day program
- Supported employment
- Transportation
- Vehicle modifications

If you encounter any terms or program names you do not understand, refer to the Indiana Family and Social Services Administration glossary of terms at the end of this guide or at www.in.gov/fssa/4999.htm.

Mental Health / Addictions



Mental Health / Addictions

■ Addiction recovery

The Division of Mental Health and Addiction offers many services designed to aid with addiction recovery. These services are available for adults, youth, women who are pregnant, women with dependent children, people with problems at home or at work, and people with legal troubles. Services are available for people with limited or no resources.

What is an addiction?

Thousands of Hoosiers are deeply affected by addiction every day. Family, friends and coworkers may be heartbroken by this illness. Whether a person is addicted to alcohol, prescription medication, tobacco, marijuana, illegal drugs or gambling, the result is the same. People become less and less happy with more and more attempts to regain the artificial pleasure produced by the substance, thought or behavior. As a person continues to try to regain that initial experience, the chemicals trick the body into imitating naturally occurring brain processes that allow our minds and bodies to work. Addiction is actually caused by the human body's ability to adapt to the presence of these substances and still continue to function.

Addiction is NOT taking or doing anything. Addiction is the inability to stop and not start again despite consequences. Addiction may be the only illness, the result of another mental illness, or co-occur with a mental illness. Regardless of cause and effect, people can and do recover, and regain lives of joy and purpose.

Recovery from addiction is the return of that ability to stop and stay stopped.

How does someone get help with an addiction?

Since the Division of Mental Health and Addiction programs and services are designed for all Hoosiers in need, and since each has various requirements and is for a variety of needs, the best way to begin is to call a confidential and free counselor to assist you in finding help at **800-662-4357**.

You may also find help in your area by going online to www.in.gov/fssa/addiction and clicking "Find Addiction Treatment in Indiana," https://findtreatment.samhsa.gov/ or by calling 2-1-1.

■ Adult Mental Health Habilitation

The Adult Mental Health Habilitation services program provides community-based opportunities for the care of adults with serious mental illnesses who may most benefit from keeping or learning skills to maintain a healthy, safe lifestyle in the community.



How does someone qualify for Adult Mental Health Habilitation?

Adult Mental Health Habilitation services are provided for individuals and their families, or groups of adult persons who are living in the community and who need help on a regular basis, with serious mental illness or co-occurring mental illness and addiction disorders. This is accomplished by:

- Assessing the individual's needs and strengths
- Developing an Individualized Integrated Care Plan that outlines objectives of care, including how AMHH services assist in delivering appropriate homeand community-based habilitation services to the individual
- · Assisting the individual in reaching their habilitative goals

Adult Mental Health Habilitation services are intended for individuals who meet all of the following core target group criteria:

- Individual is enrolled in Medicaid
- Individual is age 35 or older
- Individual has an AMHH-eligible, Division of Mental Health and Addiction-approved diagnosis, which may include the following:
 - > Schizophrenic Disorders
 - > Major Depressive Disorder
 - > Bipolar Disorders
- > Delusional Disorder
- > Psychotic Disorder not otherwise specified
- > Obsessive-Compulsive Disorder

What services will someone receive if eligible for Adult Mental Health Habilitation?

An eligible AMHH services recipient will be authorized to receive specific requested AMHH services as approved by the State Evaluation Team and on their care plan for one year (365 days) from the start date of the approval.

The following are the Adult Mental Health Habilitation services:

- · Adult day services
- Home- and community-based habilitation and support
- Respite care
- Therapy and behavior support services

- Addiction counseling
- Peer support services
- Care coordination
- Supported community engagement services
- Medication training and support

How does someone apply?

The community mental health center will meet with the applicant to complete the Adult Mental Health Habilitation application. They will ask questions about his or her behavioral health needs and enter the information provided. The applicant will then receive a letter informing if qualification for the





program has been met. This letter will give instructions on what rights exist if he or she does not qualify. For any further questions, applicants may contact the Division of Mental Health and Addiction at **amhhservices@fssa.in.gov**.

■ Behavioral and Primary Healthcare Coordination

The Behavioral and Primary Healthcare Coordination program consists of the coordination of services to manage the healthcare needs of eligible recipients. This includes logistical support, advocacy and linkage to assist individuals in navigating the health care system. It also incorporates activities that help recipients gain access to needed physical and behavioral health services.

How does someone qualify for Behavioral and Primary Healthcare Coordination services?

The Behavioral and Primary Healthcare Coordination program is intended primarily to provide Medicaid eligibility for individuals with significant mental health needs. A person may qualify for the BPHC program if he or she has a mental health condition including, but not limited to, schizophrenia, depression or bipolar disorder and needs help managing health care. To be eligible for BPHC, applicants must be age 19 or older and have a monthly income no higher than 300% of the federal poverty level. If there are children or other qualifying dependents in the individual's household, an individual's income may be higher.

What services will a person receive if eligible for Behavioral and Primary Healthcare Coordination?

Eligible persons will receive all medically necessary Medicaid services they qualify for if eligible for Behavioral and Primary Healthcare Coordination. Medicaid provides health care coverage and assistance for medical expenses such as doctor visits, prescription drugs, dental and vision care, family planning, mental health care, surgeries and hospitalizations. They will also receive the BPHC service. BPHC will provide care such as help in scheduling appointments with doctors, assisting in communicating more effectively with doctors and following instructions on medications or other doctor recommendations.

What are the income limits?

An individual must have countable income below 300% of the federal poverty level. Determination of financial eligibility is conducted by the Division of Family Resources.

What are the asset/resource limits?

There are no asset/resource limits.



Where does someone go to apply for Behavioral and Primary Healthcare Coordination?

Interested people can apply for Behavioral and Primary Healthcare Coordination at the community mental health center where they go for their behavioral health care services or any Division of Mental Health and Addiction-approved BPHC community mental health center provider. A list of BPHC-approved approved community mental health centers can also be found beginning on page 102 of this guide.

How does someone apply for Behavioral and Primary Healthcare Coordination?

The community mental health center will meet with the applicant to complete the Behavioral and Primary Healthcare Coordination application. They will ask questions about the applicant's physical and behavioral health and enter the information provided. The applicant will then receive a letter stating if qualification was met for the program. This letter will give instructions on what rights exist if he or she does not qualify. For any further questions, applicants may contact the Division of Mental Health and Addiction at **bphcservice@fssa.in.gov**.

■ Child Mental Health Wraparound

Child Mental Health Wraparound services provide young people identified as having a serious emotional disturbance with intensive, home- and community-based wraparound services that will be provided within a system of care philosophy and consistent with wraparound principles. Services are intended to augment the youth's existing or recommended behavioral health treatment plan (e.g., Medicaid Rehabilitation Option, Managed Care) and address the following:

- The unique needs of the Child Mental Health Wraparound participant
- A treatment plan built upon the participant and family strengths
- Services and strategies that assist the participant and family in achieving more positive outcomes in their lives

How does someone qualify for Child Mental Health Wraparound services?

Applicants must meet financial and behavioral health guidelines in order to be enrolled in the Child Mental Health Wraparound program. When an applicant completes an Indiana Application for Health Coverage, the Division of Family Resources will determine if he or she qualifies for health coverage. The Division of Mental Health and Addiction will determine if the behavioral health criteria have been met.





The table below shows the current eligibility requirements for the CMHW program. All of these criteria must be met:

Age	Must be between 6 and 17 years old
Financial Criteria	Must be eligible for Indiana Medicaid
Behavioral Health Criteria	Must have two or more DSM IV-TR diagnoses that are not considered excluded

If you encounter any terms or program names you do not understand, refer to the Indiana Family and Social Services Administration glossary of terms at the end of this guide or at www.in.gov/fssa/4999.htm.

1915(i) Child Mental Health Wraparound exclusionary criteria A youth with any of the criteria below will not qualify for Child Mental Health Wraparound services:

- Primary Substance Use Disorder
- Pervasive Developmental Disorder (Autism Spectrum Disorder)
- Primary Attention Deficit Hyperactivity Disorder
- Imminent risk of harm to self or others. Any youth identified as not able to
 feasibly receive intensive community-based services without compromising
 his/her safety, or the safety of others, will be referred to a facility capable of
 providing the level of intervention or care needed to keep the youth safe.
- Youth resides in an institutional or residential facility

What services will someone receive if eligible for Child Mental Health Wraparound?

Child Mental Health Wraparound services are provided by qualified, Division of Mental Health and Addiction approved, specially trained service providers who engage the participant and family in a unique assessment and treatment planning process characterized by the formation of a child and family wraparound team.

The state's purpose for providing CMHW services is to serve eligible participants, who have severe emotional disturbances, and enable them to benefit from receiving intensive wraparound services within their homes and communities with natural family/caregiver supports. The CMHW services available to the eligible participant include:

- Wraparound facilitation
- Habilitation
- Respite care
- Family support and training for the unpaid caregiver



How does someone apply for Child Mental Health Wraparound?

For information contact the Division of Mental Health and Addiction at 317-232-7800.

■ Community Mental Health Centers

If you are looking for assistance for a mental health or addiction issue, there are providers available in every county. Providers can be accessed for children, youth, adults and seniors through a network of community mental health centers.

To locate a CMHC near you, go to **www.fssa.in.gov/dmha** and click on "Find a Local Service Provider." Then click your county on the map shown. The list below is also a starting point for connecting to services. For more information, call **317-232-7800**.

Community Mental Health Centers

Adams County

Park Center Inc. 260-481-2721

Allen County

Park Center Inc. 260-481-2721

Bartholomew County

Centerstone of Indiana Inc. 800-344-8802

Benton County

Wabash Valley Alliance Inc. 765-463-2555

Blackford County

Grant Blackford Mental Health Inc. 765-662-3971

Boone County

Aspire Indiana Inc. 317-587-0500

Brown County

Centerstone of Indiana Inc. 800-344-8802

Carroll County

Wabash Valley Alliance Inc. 765-463-2555

Cass County

Four County Comprehensive Mental Health Center Inc. Four County Counseling Center 574-722-5151

Clark County

LifeSpring Inc. 812-280-2080

Clay County

Hamilton Center Inc. 812-231-8323

Clinton County

Community Howard Regional Health (Kokomo) 765-453-8555

Crawford County

Southern Hills Counseling Inc. 812-482-3020





Daviess County

Knox County Hospital Samaritan Center 812-886-6800

Dearborn County

Community Mental Health Center Inc. (Lawrenceburg) 812-532-3416

Decatur County

Centerstone of Indiana Inc. 800-344-8802

DeKalb County

Northeastern Center Inc. 260-347-2453

Delaware County

Meridian Health Services Corp. 765-288-1928

Dubois County

Southern Hills Counseling Inc. 812-482-3020

Elkhart County

Oaklawn Psychiatric Center Inc. 574-533-1234

Fayette County

Centerstone of Indiana Inc. 800-344-8802

Floyd County

LifeSpring Inc. 812-280-2080

Fountain County

Wabash Valley Alliance Inc. 765-463-2555

Franklin County

Community Mental Health Center Inc. (Lawrenceburg) 812-532-3416

Fulton County

Four County Comprehensive Mental Health Center Inc.

Four County Counseling Center

574-722-5151

Gibson County

Southwestern Indiana Mental Health Center Inc. 812-423-7791

Grant County

Grant Blackford Mental Health Inc. 765-662-3971

Greene County

Hamilton Center Inc. 812-231-8323

Hamilton County

Aspire Indiana Inc. 317-587-0500

Hancock County

Community Hospital of Indiana Gallahue Mental Health Center 317-621-7600

Harrison County

LifeSpring Inc. 812-280-2080

Hendricks County

Cummins Behavioral Health Systems Inc. 317-272-3330

Henry County

Meridian Health Services Corp. 765-288-1928

Howard County

Community Howard Regional Health (Kokomo) 765-453-8555



Huntington County

The Otis R. Bowen Center 574-267-7169

Jackson County

Centerstone of Indiana Inc. 800-344-8802

Jasper County

Wabash Valley Alliance Inc. 765-463-2555

Jay County

Meridian Health Services Corp. 765-288-1928

Jefferson County

Centerstone of Indiana Inc. 800-344-8802 LifeSpring Inc. 812-280-2080

Jennings County

Centerstone of Indiana Inc. 800-344-8802

Johnson County

Adult & Child Mental Health Center Inc. 317-882-5122

Knox County

Knox County Hospital Samaritan Center 812-886-6800

Kosciusko County

The Otis R. Bowen Center 574-267-7169

LaGrange County

Northeastern Center Inc. 260-347-2453

Lake County

Edgewater Systems for Balanced Living Inc. 219-885-4264

Southlake Community Mental Health Center, Inc. Regional Mental Health Center 219-769-4005

La Porte County

LaPorte County Comprehensive Mental Health Council Inc. Swanson Center 219-879-4621

Lawrence County

Centerstone of Indiana Inc. 800-344-8802

Madison County

Aspire Indiana Inc. 317-587-0500

Marion County

Adult & Child Mental Health Center Inc. 317-882-5122

Aspire Indiana Inc. 317-587-0500

Community Hospital of Indiana Gallahue Mental Health Center 317-621-7600

Health and Hospital Corp. of Marion County, Indiana Midtown CHMC 317-630-7607

Marshall County

The Otis R. Bowen Center 574-267-7169

Martin County

Knox County Hospital Samaritan Center 812-886-6800





Miami County

Four County Comprehensive Mental Health Center Inc. Four County Counseling Center 574-722-5151

Monroe County

Centerstone of Indiana Inc. 800-344-8802

Montgomery County

Wabash Valley Alliance Inc. 765-463-2555

Morgan County

Centerstone of Indiana Inc. 800-344-8802

Newton County

Wabash Valley Alliance Inc. 765-463-2555

Noble County

Northeastern Center Inc. 260-347-2453

Ohio County

Community Mental Health Center Inc. (Lawrenceburg) 812-532-3416

Orange County

LifeSpring Inc. 812-280-2080

Owen County

Centerstone of Indiana Inc. 800-344-8802

Parke County

Hamilton Center Inc. 812-231-8323

Perry County

LlfeSpring Inc. 812-280-2080

Pike County

Knox County Hospital Samaritan Center 812-886-6800

Porter County

Porter-Starke Services Inc. 219-531-3500

Posey County

Southwestern Indiana Mental Health Center Inc. 812-423-7791

Pulaski County

Four County Comprehensive Mental Health Center Inc. Four County Counseling Center 574-722-5151

Putnam County

Cummins Behavioral Health Systems Inc. 317-272-3330

Randolph County

Centerstone of Indiana Inc. 800-344-8802

Ripley County

Community Mental Health Center Inc. (Lawrenceburg) 812-532-3416

Rush County

Centerstone of Indiana Inc. 800-344-8802

St. Joseph County

Oaklawn Psychiatric Center Inc. 574-533-1234

Scott County

LifeSpring Inc. 812-280-2080



Shelby County

Community Hospital of Indiana Gallahue Mental Health Center 317-621-7600

Spencer County

LifeSpring Inc. 812-280-2080

Starke County

Porter-Starke Services Inc. 219-531-3500

Steuben County

Northeastern Center Inc. 260-347-2453

Sullivan County

Hamilton Center Inc. 812-231-8323

Switzerland County

Community Mental Health Center Inc. (Lawrenceburg) 812-532-3416

Tippecanoe County

Wabash Valley Alliance Inc. 765-463-2555

Tipton County

Community Howard Regional Health (Kokomo) 765-453-8555

Union County

Centerstone of Indiana Inc. 800-344-8802

Vanderburgh County

Southwestern Indiana Mental Health Center Inc. 812-423-7791

Vermillion County

Hamilton Center Inc. 812-231-8323

Vigo County

Hamilton Center Inc. 812-231-8323

Wabash County

The Otis R. Bowen Center 574-267-7169

Warren County

Wabash Valley Alliance Inc. 765-463-2555

Warrick County

Southwestern Indiana Mental Health Center Inc. 812-423-7791

Washington County

LifeSpring Inc. 812-280-2080

Wayne County

Centerstone of Indiana Inc. 800-344-8802

Wells County

Park Center Inc. 260-481-2721

White County

Wabash Valley Alliance Inc. 765-463-2555

Whitley County

The Otis R. Bowen Center 574-267-7169





■ Problem Gambling

What is problem gambling?

Problem gambling is a broad term used to describe gambling behavior that has a negative impact on the lives of the problem gambler, his/her family members and the community at large. Similar to an alcohol or drug addiction, a gambling addiction is a progressive disorder that can have negative implications for the addicted individual's health, family, finances and career.

How does someone qualify for problem gambling treatment?

To be eligible to receive problem gambling treatment services from a Division of Mental Health and Addiction-endorsed problem gambling provider, the following requirements must be met:

- The individual must be a resident of Indiana, and
- The individual is 18 years of age or older and has a qualifying score on the South Oaks Gambling Screen or the individual is 12 to 17 years of age and has a qualifying score on the South Oaks Gambling Screen – Revised Adolescent

This score must be reflective of gambling behavior over the 12-month period prior to screening.

What types of treatment services are available?

Each individual that is diagnosed with a current problem gambling issue is eligible to receive gambling treatment services up to \$2,500 per state fiscal year from a Division of Mental Health and Addiction-endorsed problem gambling provider. Providers are also encouraged to maximize the use of non-state funds and other alternative funding sources, when appropriate. The types of gambling treatment services available include:

- Acute stabilization (service must be related to problem gambling)
- Case management
- Certified recovery specialist services
- Education
- Family counseling
- Financial counseling
- Individual counseling

- Individualized integrated care plan review
- Intake assessment/ individualized integrated care plan
- Intensive outpatient treatment
- Medication, evaluation & monitoring

- Outpatient treatment (group)
- Psychiatric consultation
- Residential services (service must be billed as a separate event from acute stabilization)
- Transportation
- 24-hour crisis intervention

If you encounter any terms or program names you do not understand, refer to the Indiana Family and Social Services Administration glossary of terms at the end of this guide or at www.in.gov/fssa/4999.htm.

■ Problem Gambling Resources in Indiana

There are currently 18 Division of Mental Health and Addiction-endorsed problem gambling providers throughout Indiana. To find the most up-to-date listing of these agencies, go to the problem gambling portion of the Indiana Family and Social Services Administration/DMHA website, at www.in.gov/fssa/dmha/2582.htm. Look under "Gambling Treatment Providers" for this information.

Additional Resources

Indiana Problem Gambling Awareness Program www.ipgap.indiana.edu

Indiana Council on Problem Gambling www.indianaproblemgambling.org

Indiana Gaming Commission – Voluntary Exclusion Program www.in.gov/igc/2331.htm

Gamblers Anonymous
www.gamblersanonymous.org/ga

For more information, contact:

Division of Mental Health & Addiction Indiana Family & Social Services Administration 402 W. Washington St., Rm. W353 Indianapolis, IN 46204 317-232-7800

■ Suicide Prevention

If you or someone you know has ongoing thoughts of death or suicide, or if a suicide attempt has been made, contact a doctor or go to a hospital emergency room immediately or call the **National Suicide Prevention Hotline** at **800-273-TALK** (8255).

Transportation Benefits



Transportation Benefits

■ Indiana Health Coverage Programs

Transportation benefits are covered under Indiana Health Coverage Programs, subject to limitations established for certain benefit packages. Transportation benefits are available to Healthy Indiana Plan members only if in HIP State Plan Plus or HIP State Plan Basic or if offered by their managed care entity. Additionally, transportation benefits are available to other Medicaid members including Hoosier Healthwise, Hoosier Care Connect and traditional Medicaid.

Transportation benefits include a ride from a Medicaid transportation provider to any covered medical service/appointment.

How does someone arrange for transportation?

To receive transportation benefits, a member enrolled in Hoosier Healthwise, Hoosier Care Connect or Healthy Indiana Plan must call their health plan's transportation broker (similar to a dispatching service) at least 48 hours in advance. The transportation broker arranges rides to and from the medical appointment. There are no mileage or frequency limits (such as annual limits), however prior authorization may be required for longer trips or more than 20 one way trips per member per year.

Children in Hoosier Healthwise qualify for either Package A or Package C benefits, depending on family income. Hoosier Healthwise Package A covers all transportation at no cost to the member. Hoosier Healthwise Package C only covers emergency transportation with a \$10 copayment. Non-emergency transportation is not available to Hoosier Healthwise Package C members.

Traditional Medicaid members may call Southeastrans at least two business days in advance of a trip to schedule non-emergency transportation. To learn more about the nonemergency transportation benefit, Traditional Medicaid members can visit **www.in.gov/Medicaid/members**. Trips greater than 50 miles or members who have made more than 20 one-way trips during a 12-month period year require prior authorization be obtained.

■ Aged and Disabled Waiver

The Aged and Disabled Waiver is designed to provide services for people of all ages with a disability who would otherwise require care in a nursing facility. More details about services available under this program are found on pages 74–75.



■ Community and Home Options to Institutional Care for the Elderly and Disabled

The Community and Home Options to Institutional Care for the Elderly and Disabled program provides home- and community-based services to assist individuals in maintaining their independence in their own home or community for as long as is safely possible. More details about services available under this program are found on page 76.

■ Older Americans Act programs

The Older Americans Act provides community-based services and opportunities for older individuals and their families. Older Americans Act programs generally only require that recipients be over the age of 60. More details about services available under this program are found on page 90.

■ Traumatic Brain Injury Medicaid waiver

The Traumatic Brain Injury waiver provides home- and community-based services to individuals who have suffered a traumatic brain injury. More details about services available under this program are found on pages 93–94.

Housing



Housing

The Indiana Housing and Community Development Authority creates housing opportunities, generates and preserves assets and revitalizes neighborhoods by facilitating the collaboration of multiple stakeholders, investing financial and technical resources in development efforts, and helping build capacity of qualified partners throughout Indiana. An overview of IHCDA programs can be found on the following pages.

■ Indiana Foreclosure Prevention Network

Struggling to pay your mortgage? The Indiana Foreclosure Prevention Network provides free foreclosure prevention counseling to Hoosiers facing foreclosure. We will work with you and your lender to find a solution to your financial situation. Don't hesitate. Call **1-877-GET-HOPE** today or visit **http://877gethope.org/**.

■ Housing Choice Vouchers

Housing Choice Vouchers (formerly known as Section 8) provide eligible households vouchers to help pay the rent on privately owned homes of their choosing. A family receiving a voucher must pay at least 30% of its monthly adjusted gross income for rent and utilities. The vouchers are generally administered and can by applied for through local public housing authorities. The Indiana Housing and Community Development Authority is one of many independent public housing agencies in the state that provide vouchers. Housing Choice Vouchers are not ideal for immediate or emergency housing needs due to potentially long waitlists. Individuals are encouraged to apply for multiple waitlists. IHCDA serves portions of 81 counties that are not served by other PHAs (such as the Indianapolis Housing Authority and the Gary Housing Authority.)

The U.S. Department of Housing and Urban Development website lists each PHA in the state: portal.hud.gov/hudportal/HUD?src=/program_offices/public_indian_housing/pha/contacts/in

This website explains IHCDA's program and service area:

www.in.gov/ihcda/2333.htm

Other affordable housing options can be found at: www.indianahousingnow.org

■ Low-Income Home Energy Assistance Program

The Low-Income Home Energy Assistance Program assists low-income families with the cost of their home energy. The program serves low-income households subject to an energy burden. EAP is available for winter assistance beginning the first week of November through May of each



year. If a summer assistance program is offered, that program will run from June through August. To apply for EAP, contact the Local Service Provider in your area.

A complete listing of participating providers is available online at www.IN.gov/ihcda/2329.htm.

■ Neighborhood Assistance Program

The Neighborhood Assistance Program offers up to \$2.5 million in state tax credits each state fiscal year for distribution to nonprofit organizations across Indiana. An application is released annually for organizations to apply for credits and participate in the program. Organizations who meet eligibility and reporting requirements may be eligible to receive credits.

■ Weatherization Assistance Program

The Weatherization Assistance Program provides energy conservation measures and client education for the permanent long-term benefit of reducing the utility bills of low-income households. The focus of the WAP is to provide energy efficiency improvements to the households served. The program is available to both homeowners and renters. In the case of renters, the landlord must provide permission for the work to be performed and meet the conditions of the local WAP sub-grantee landlord agreement.

To find local Weatherization sub-grantees, visit www.in.gov/ihcda/2369.htm.

■ Residential Care Assistance program

The Residential Care Assistance program provides residential financial assistance to eligible individuals residing in Indiana State Department of Health licensed residential care facilities and county homes that have an approved RCAP contract with the Division of Aging. RCAP provides assistance for residents who cannot live in their homes because of age, mental illness or physical disability, but who do not need the level of care provided in a licensed nursing facility. Services include room, board and laundry with minimal administrative direction as well as care coordination provided on behalf of eligible individuals at an approved per diem rate established by the Division of Aging.

How does someone qualify for the Residential Care Assistance Program?

An applicant must be:

- At least 65 years of age, or blind or disabled or diagnosed with a serious mental illness
 - > Aged: Must be 65 years of age or older





- > Blind: The degree of blindness is determined by the Indiana Family and Social Services Administration medical review team based on a visual exam
- > **Disabled:** Disability is determined by the Indiana Family and Social Services Administration medical review team based upon social and medical information; the client also must be at least 18 years of age
- A current Medicaid recipient
- Currently residing in a Residential Care Assistance Program facility

What are the income limits?

Applicant's gross monthly income cannot exceed \$1,501.06 if residing in a licensed Residential Care Assistance Program facility. Applicant's gross monthly income cannot exceed \$1,125.41 if residing in a county home.

What are the asset/resource limits?

The asset limits are \$2,000 for an individual and \$3,000 if living with a spouse.

How does someone apply for the Residential Care Assistance Program?

The Residential Care Assistance Program facility assists the applicant in completing the RCAP application. However, the applicant's family, guardian or advocate may assist in completion of the application. Complete the RCAP application and provide supporting documentation as indicated in the application. All documentation must be submitted at the same time as the application or the application will be denied by the Division of Family Resources.

Only one application per email can be sent to the Division of Family Resources in order for the application to be considered. Completed applications must be emailed to **fssa.apps4rcap@fssa.in.gov**. Incomplete applications will not be processed.

How does someone find a Residential Care Assistance Program provider?

Contact the Division of Aging or call the Indiana Long-Term Care Ombudsman at **800-622-4484** for a list of facilities that are approved Residential Care Assistance Program providers.



■ FSSA Glossary of Terms

The following terms relate to FSSA programs and topics. They are not inclusive, but may provide insight into any terms or programs you encounter on our site or in our Resource Guide with which you are not familiar. If you need clarification on a term, or know of another one that needs to be added, please email Office.Communications@fssa.IN.gov.

Agency review: A post-hearing process conducted by the FSSA Office of Hearings and Appeals to determine whether the appeal process was properly conducted.

Appeals and hearings: Numerous actions and decision by the state are subject to appeal. An appeal is processed at a fair hearing before an impartial FSSA administrative law judge.

Area Agencies on Aging: There are 16 of these not-for-profit agencies around the state. They provide case management, information and referrals to various services for persons who are aging or developmentally disabled.

Assistance group: Persons living together who receive benefits issued through Supplemental Nutrition Assistance Program and/or Temporary Assistance for Needy Families.

Authorized representative: A person who has been specifically authorized by an applicant or recipient of health services or other benefits to receive that person's private health information or other confidential information and, if expressly authorized, to act on behalf of the beneficiary or applicant.

Case manager: An experienced professional who works with clients and providers coordinate necessary services to a client.

Copayment (copay or co-pay): The amount a beneficiary must pay for health services or prescription drugs as his or her portion of the cost that a health care program plan does not cover.

Deductible: The amount a person must pay toward his or her medical expenses before a coverage program such as a health insurance plan begins paying.

Durable medical equipment: Any equipment that provides therapeutic benefits to a patient in need because of certain medical conditions and/or illnesses. Examples include wheelchairs and other non-disposable medical equipment.

Extended care facility: A licensed health care facility for residential, long-term care.

Long-term care facility: A facility that provides a variety of permanent or temporary health and personal needs services over a period of time. Examples are nursing homes and assisted living facilities.

Low income supplement: A low income supplement, as it relates to Indiana Medicaid, may include Medicaid monthly financial supplements under any of three Medicare programs: Qualified Medicare Beneficiary, Qualified disabled working individual or Specified low-income Medicare beneficiary.

Managed care: An arrangement whereby a single provider or organization oversees the overall care of a patient so as to ensure cost-efficient quality health care to its members.

Managed care entities: Organizations that oversee the overall care of a patient so as to ensure cost-efficient quality health care to members.

Medicaid number: The unique number assigned to a member who is eligible for Medicaid services. This number can be found on the front of your Medicaid ID card.

Medicaid transportation: Patient transportation provided by vendors, whom Indiana Medicaid reimburses, for taking Medicaid members to and from medical service providers.

Prior authorization: An authorization required for the delivery of certain services. The medical services contractor and state medical consultants review PAs for medical necessity, reasonableness and other criteria. The PA must be obtained before a service for benefits is provided within a certain time period, except in certain allowed instances.

RID number: A recipient identification number is a client identification number and is found on cards issued for services, such as a card for Medicaid, SNAP or TANF services.





State of Indiana

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