

FSSA Resource Guide

Indiana Family and Social Services Administration



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

Follow us on Twitter
[@FSSAIndiana](https://twitter.com/FSSAIndiana)

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 state-wide 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.



A decorative header at the top of the page features a grid of colored squares in shades of green, orange, red, and blue. On the right side, there are three small photographs: a man with a beard, a woman, and an elderly couple.

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.

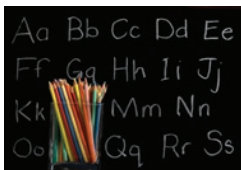
Indiana Refugee Services ensures that refugees are provided assistance and services through state-administered programs that enable them to become employed, economically self-sufficient and integrated members of society as soon as possible after their arrival in the United States.

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, 2020. For the most up-to-date information, refer to **www.fssa.in.gov**.

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- On My Way Pre-K
- Paths to QUALITY™



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

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



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

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



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

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

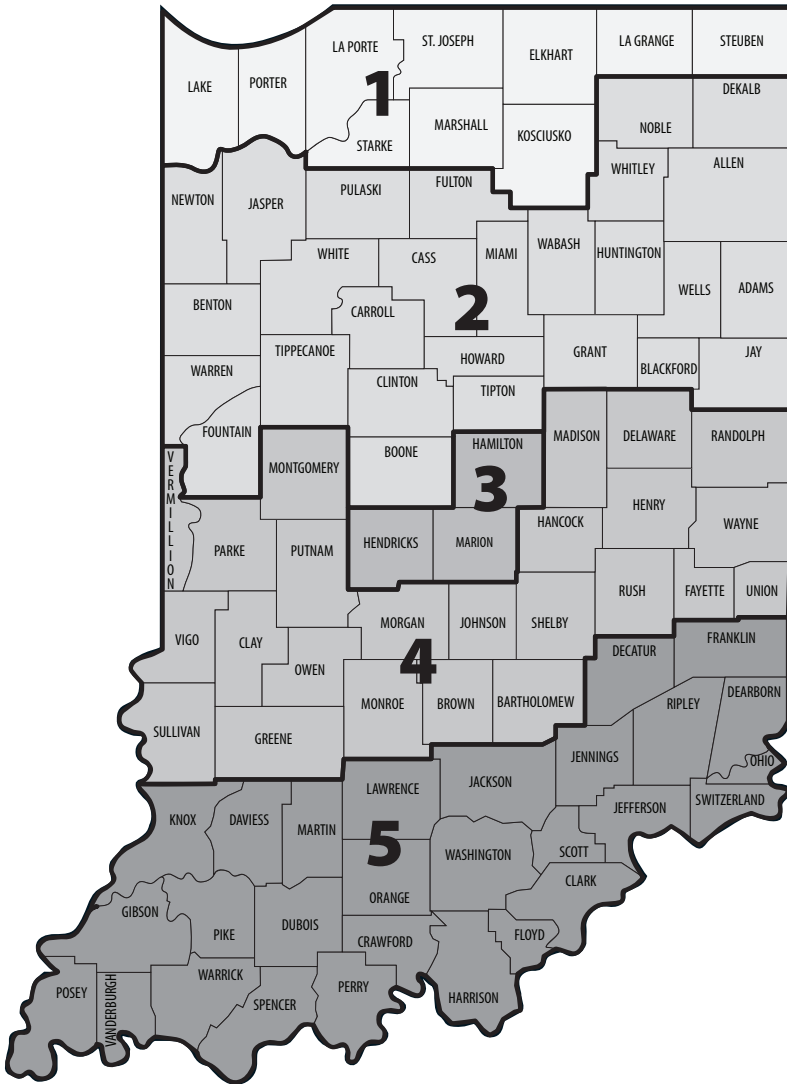
Child Care Resource and Referrals support families to raise healthy children by:

- 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 www.in.gov/fssa/carefinder and select “Changes to child care resource & referral” 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

This information is correct as of April 1, 2020. For up-to-date information, refer to www.in.gov/fssa/carefinder.

Region 1 Early Learning Connections, Geminus CCR&R

8400 Louisiana St.
Merrillville, IN 46410
Phone: 219-685-1500
Toll-Free: 844-685-1500
www.geminus.org/Child-Care-Resources.html

Region 2 The Child Care Resource Network

100 Saw Mill Road
Suite 100
Lafayette, IN 47905
Phone: 765-742-7105
Toll-Free: 800-932-3302
www.thechildcareresourcenetwork.org

Region 3 Child Care Answers

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

Region 4 Chances and Services for Youth

Booker T. Washington Community
Center, Second Floor
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 5 4C of Southern Indiana

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



■ Child Care and Development Fund

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 | \$1,350 |
| 2 | \$1,825 |
| 3 | \$2,299 |
| 4 | \$2,775 |
| 5 | \$3,247 |
| 6 | \$3,721 |
| 7 | \$4,195 |
| <i>2020 federal poverty levels at 127%</i> | |

The information in this guide is correct as of April 1, 2020. 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 offices

This information is correct as of April 1, 2020.

Region 1 Automated Health Systems (AHS)

Roberto Castro
Phone: 855-533-7342
Toll-Free: 855-533-7342
Fax: 855-631-0120

Region 2 Brightpoint childcare@mybrightpoint.org

Lesla Cassell
Phone: 260-423-3546
Toll-Free: 800-589-2264
Fax: 844-510-5775

Region 3 Children's Bureau Inc.

Andrea Massey
Phone: 317-545-5281
Toll-Free: 866-287-2420
Fax: 317-545-1069

Region 4 Maximus

Mike Romaniello
Phone: 833-946-8253,
(833-9IN-TAKE)
Toll-Free: 833-946-8253,
(833-9IN-TAKE)
Fax: 844-986-8253

Region 5 River Valley Resources Inc. leslie@rivervalleyresources.com

Leslie Abbott
Phone: 812-273-9270
Toll-Free: 855-591-7848
Fax: 812-265-2664



■ 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 Indiana families have a strong foundation to advocate for their infants and toddlers so they grow and flourish to their highest potential.

Values: Family-centered, routines-based, relationship-based, holistic, individualized and culturally competent.

Who is eligible for First Steps services?

First Steps early intervention services are for families with children under the age of 3 who are experiencing a developmental delay.

A child must exhibit a delay of 25% in one area of development or a 20% delay in two or more areas of development. These areas are:

- Cognitive development
- Communication development
- Physical development (gross motor, fine motor)
- Social/emotional development
- Adaptive/self-help skills

Or have a diagnosed physical or medical condition that makes it likely that they will develop a delay, such as:

- Chromosomal abnormalities or genetic disorders
- Neurological disorders
- Congenital disorders
- Sensory impairments, including vision and hearing
- Severe toxic exposure (pre- and post-natal exposure)
- Neurological abnormality in the newborn period
- Low birth weight (1500 grams/3.1 pounds)

Are there fees associated with being enrolled in the program?

There is never a fee for eligibility evaluation or service coordination. First Steps bills private and public insurance for ongoing services. Depending on family income and insurance coverage, families may be responsible for cost participation fees associated with ongoing services.

What services are available through the program?

Early intervention services are specifically designed to support the developmental needs of the child and 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
- Developmental therapy
- Nutrition
- Occupational therapy
- Physical therapy



- Psychological services
- Service coordination
- Social work services
- Speech therapy
- Transportation*
- Vision

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

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. To make a referral, please visit www.firststeps.in.gov and select “Make a referral” in the “Family Information” box. Visit this site to see our map and find contact information for the local First Steps System Point of Entry offices. For more information, you may also call **800-545-7763** or email us at firststepswb@fssa.in.gov.

■ 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 www.in.gov/fssa/carefinder and select “Head Start / Early Head Start” in the “Programs / Services” box.

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



First Steps clusters





First Steps local offices

This information is correct as of April 1, 2020. For up-to-date information, refer to www.firststeps.in.gov.

Cluster A

11045 Broadway St., Suite F
Crown Point, IN 46307
Phone: 219-662-7790
FAX: 219-662-7510
Toll-Free: 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: 866-725-2398
www.indianafirststeps.org

Cluster C

201 E. Rudisill Blvd., #108
Fort Wayne, IN 46806
Phone: 260-207-5799
Toll-Free: 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: 877-811-1644
www.indianafirststeps.org

Cluster F

4130 S. Seventh St.
Terre Haute, IN 47802
Phone: 812-917-2950
Toll-Free: 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: 866-212-1434
www.cibaby.org

Cluster H

1320 E. 53rd St.
Anderson, IN, 46103
Phone: 812-314-2982
Toll-Free: 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: 800-674-2285
Fax: 877-674-2285
www.firststepsbrs.org

Cluster J

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

Please see the First Steps web-site, www.firststeps.in.gov, for the most up-to-date system point of entry contact information.



■ 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 meet eligibility requirements.

What are the income limits?

An eligible child must live in a household with an income below 127% of the federal poverty level. Parents or guardians living in the household must be working, going to school or attending job training. If funding remains, there may be a limited number of vouchers available for children who live in households with incomes up to 185% of the federal poverty level. These children must also have:

- A parent or guardian living in the household who is working, going to school or attending job training. OR
- A parent/guardian who receives Social Security Disability Insurance or Supplemental Security Income (also known as SSDI or SSI) benefits.

| On My Way Pre-K income limits | |
|--|----------------|
| Household Size | Monthly |
| 1 | \$1,350 |
| 2 | \$1,825 |
| 3 | \$2,299 |
| 4 | \$2,755 |
| 5 | \$3,247 |
| 6 | \$3,721 |
| 7 | \$4,195 |
| <i>2020 federal poverty levels at 127%</i> | |

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For the most up-to-date information, refer to www.fssa.in.gov.*



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. Beginning in 2020, there will be a limited number of grants available for families meeting eligibility requirements. 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 the local intake agency located within the county in which the family resides.

Who counts in my household (family) income?

A household is considered one or more custodial adults and children related by blood or law 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 their local Child Care Resource and Referral Agency. Eligible providers are also listed online at www.onmywayprek.org or www.in.gov/fssa/childcarefinder/.



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

Yes, applicants need to be working or attending an educational or job training program to be eligible for an On My Way Pre-K grant. Beginning in 2020, individuals who are receiving SSI or SSDI may also be eligible under limited eligibility criteria.

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 on pages 16–17.

■ 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 childhood and education programs. It is a free resource to help families make informed decisions and to help early childhood and education programs improve their quality. There are four levels of quality that can be achieved by participating programs. 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 early childhood 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://childcareindiana.org>.

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 Placement 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 employment and training programs for SNAP and TANF.

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 **800-403-0864**.



Indiana Manpower Placement and Comprehensive Training offices

This information is correct as of April 1, 2020. For up-to-date information, refer to www.dfrbenefits.in.gov.

Allen County

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

Bartholomew County

2330 Poshard Ave.
Columbus, IN 47203

Benton County

307 E. Sixth St.
Fowler, IN 47944

Cass County

1 Cass City Center, Suite 301
Logansport, IN 46947

Clark County

285 Quartermaster Court
Jeffersonville, IN 47130

Daviess County

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

DeKalb County

1390 S. Grandstaff Drive
Auburn, IN 46706

Delaware County

1107 S. Tillotson, Suite 2
Muncie, IN 47304

Dubois County

125 37th St., Suite 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

1105 S. 10th St.
Noblesville, IN 46060

Hancock County

1290 N. State St., Suite 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., Suite 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., Suite 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. Suite 100
Indianapolis, IN 46222

Marshall County

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

Monroe County

1531 S. Curry Pike, Suite 300
Bloomington, IN 47404

Montgomery County

1621 Eastway Drive
Crawfordsville, IN 47933

Newton County

207 N. Seventh St., Suite 2
Kentland, IN 47951

Noble County

774 Trail Ridge Road, Suite 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, Suite 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., Suite 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., Suite A
Lafayette, IN 47905

Vanderburgh County

711 John St., Suite C
Evansville, IN 47713

Vigo County

1800 Ft. Harrison Road, Suite 12
Terre Haute, IN 47803

Wayne County

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

Wells County

915 N. Main St., Suite 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-secondary 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.



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 is 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-ETS.

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 www.vrs.in.gov and select “Pre-employment transition services (Pre-ETS) forms” in the “Provider resources” box.

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

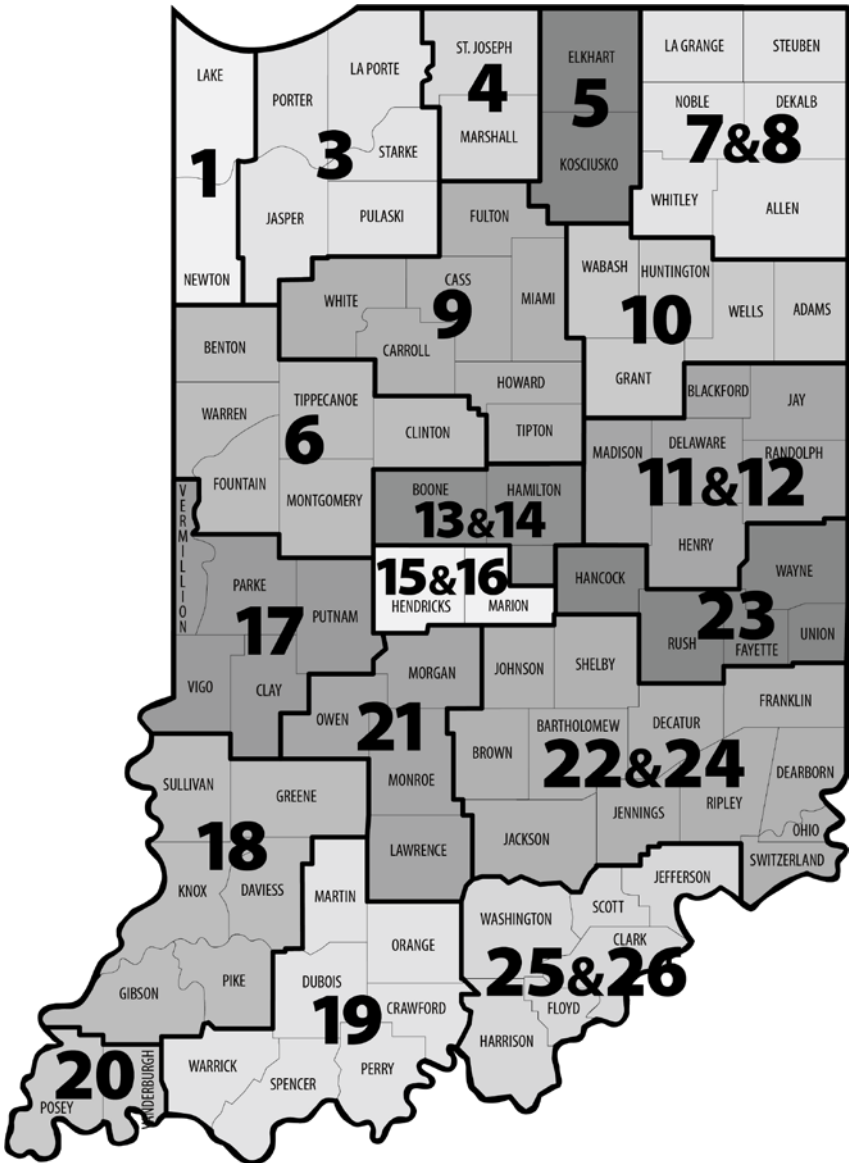
Area 5

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: Adams, Grant, Huntington, Wabash & Wells

840 N. Miller Ave., 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: Blackford, Delaware, Henry, Jay, Madison & Randolph

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, 46236, 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, 46224, 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, Gibson, 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: 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 & 26

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 FSSA, 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 or change jobs. WorkOne Career Center staff can help you find a new or better job, choose a career or access training to get you the skills needed to succeed in today's economy.

Some of the WorkOne Career Center services are listed below. To find your nearest WorkOne Career Center, visit **WorkOneWorks.com** or call **800-891-6499**.

IndianaCareerConnect.com

To find a job that matches your skills and experience, search **IndianaCareerConnect.com**.

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**.



WorkINdiana

The WorkINdiana program allows you to earn an Indiana High School Equivalency diploma and a career certificate at the same time. Pick from 30 different certificates, ranging from Certified Nurse Assistant to Computer Technician. www.in.gov/dwd/adulted_workin.htm

■ Office of Work-Based Learning and Apprenticeship

The Office of Work-Based Learning and Apprenticeship serves to develop and implement a framework of various work-based learning pathways for both youth and adult populations. The office concentrates on three objectives:

- Coordinate efforts and partner with the U.S. Department of Labor to expand registered apprenticeships in the state of Indiana.
- Develop and implement a framework of work-based learning pathways with a focus on the state's key economic sectors and regional high-wage, high-demand occupations.
- Build public-private partnerships statewide to increase business and industry engagement with education systems based on local economic needs.

Who is the program for?

OWBLA is best suited to work with employers and education providers interested in building work-based learning programs to establish and fill their workforce pipeline. Individuals interested in registered apprenticeships or other work-based learning opportunities should contact their local Work One Center and/or visit www.apprenticeship.gov.

How does someone qualify for the program?

Registered apprenticeship and State Earn and Learn programs are approved and/or certified by the U.S. Department of Labor Office of Apprenticeship and the OWBLA based on program development and standards. Individuals interested in participating in the programs will need to contact the entity that maintains "ownership" of the program, which is typically an education provider or business.

How do I apply/enroll in the program?

Employers and education providers should view our website at www.INwbl.com for additional information and email wbl@dwd.in.gov to be connected with a regional director best suited to address your needs.



Financial Services

Financial Services

■ 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. The categories of Medicaid eligible for Burial Assistance are MA A, MA B, MA D, MASI, MA R, and MADW.

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 burial providers call to verify Medicaid eligibility to file a claim?

Call **800-403-0864, Prompt #7**. A case number and category of Medicaid will be provided.

Where should inquiries and claim submissions be sent?

- Phone: **317-234-1412**
- Fax: **317-234-5075**
- Email: **Indianaburialclaims@fssa.in.gov**
- More information can be found at **www.in.gov/fssa/dfr/**. On the left-hand navigation menu, select "Burial Assistance Program."

■ 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/4430.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: www.in.gov/ihcda/4065.htm.

How does someone apply/enroll in the program?

Contact a participating lender to begin the process: <https://online.ihcda.in.gov/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 www.in.gov/ihcda/4072.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: www.in.gov/ihcda/files/Public%20IDA%20Contact%20List%202019.xlsx.

■ 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.

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 on the next page.



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, 2020.
For the most up-to-date information, refer to www.fssa.in.gov.*

Division of Family Resources offices

This information is correct as of April 1, 2020. 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 9
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

3300 W. Kilgore Ave.
Muncie, IN 47304

Dubois County

125 E. 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

1319 Pearl St., Suite B
Covington, IN 47932

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

940 N. Meridian St.
Portland, IN 47371

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 E. 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, Suite 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 47553

Miami County

300 S. Broadway, Suite 2
Peru, IN 46970

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

207 N. 7th St., Suite 2
Kentland, IN 47951

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

1340 N. Cherry St., Suite B
Rushville, IN 46173



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

1651 N. Wayne St., Suite 106
Angola, IN 46703

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

■ **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 78.

■ **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 | \$1,276 | \$981 | \$194 |
| 2 | 1,726 | 1,328 | 357 |
| 3 | 2,177 | 1,675 | 511 |
| 4 | 2,628 | 2,021 | 649 |
| 5 | 3,078 | 2,368 | 771 |
| 6 | 3,529 | 2,715 | 925 |
| 7 | 3,980 | 3,061 | 1,022 |
| 8 | 4,430 | 3,408 | 1,169 |
| Each Additional Member | +451 | +347 | +146 |

The information in this guide is correct as of April 1, 2020.

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 for most households. 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 maxi-



mum 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 www.in.gov/fssa/dfp and select "Find my local DFR office" in the "Information / Resources" box.

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 a decision will be made on the application 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?

Yes, if the applicant's income is within the established guidelines. Applicants must pass a net income test to qualify for Supplemental Nutrition Assistance Program benefits.

Can applicants get Supplemental Nutrition Assistance Program benefits if they have a felony drug conviction?

As of Jan. 1, 2020, individuals who have been convicted of a drug felony may be eligible for SNAP if they meet certain conditions. Individuals who are compliant with post-conviction supervision (such as probation or parole) or who are no longer subject to supervision and are not in violation of supervision may be eligible for SNAP if all other eligibility factors are met.

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](https://twitter.com/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 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> and additional information may also be found on the Indiana Medicaid website, at www.indianamedicaid.com.

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 **800-403-0864**.
- Applicants can visit a local Division of Family Resources office. A directory of DFR offices is found on pages 44–48 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.

■ 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**

■ 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 with incomes in 2020 up to \$17,829 annually for an individual, \$24,078 for a couple or \$36,590 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.

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

Healthy Indiana Plan monthly income limits

| Household Size | Monthly Income Limit For HIP Basic Eligibility | Monthly Income Limit For HIP Plus Eligibility* |
|---|---|---|
| 1 | \$1,064 | \$1,485.75 |
| 2 | \$1,437 | \$2,006.55 |
| 3 | \$1,810 | \$2,528.40 |
| 4 | \$2,184 | \$3,049.20 |
| 5 | \$2,557 | \$3,571.05 |
| 6 | \$2,930 | \$4,091.85 |
| 7 | \$3,304 | \$4,613.70 |
| 8 | \$3,677 | \$5,134.50 |
| For Each Additional Person, Add: | \$373.33 | \$520.80 |
| <i>*133% + 5% income disregard, income limit for HIP program. Eligibility threshold is not rounded.</i> | | |

The information in this guide is correct as of April 1, 2020. For the most up-to-date information, refer to www.hip.in.gov.



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, CareSource, 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 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.



■ 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 www.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.

■ 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 \$19,380 or less for a single person, or \$26,100 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, 2020. 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/medicaid/members/194.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

■ 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**.

■ 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.



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 receive and investigate reports regarding adults within the state of Indiana who may be endangered and, as appropriate, to coordinate a proper response to protect endangered adults who are victims of abuse, neglect or exploitation. APS field investigators operate out of the offices of county prosecutors throughout the state. If the APS unit has reason to believe that an individual who is 18 years or older is an endangered adult, the unit shall investigate the complaint or cause the complaint to be investigated by law enforcement or other agency and make a determination as to whether the individual reported is an endangered adult.

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?

Indiana is a mandatory report state, meaning everyone is required by law to report cases of suspected neglect, battery or exploitation of an endangered adult to an APS unit or law enforcement. All reports are secured and kept confidential.

- **Battery:** Knowingly or intentionally touching a person in a rude, insolent or angry manner; or in a rude, insolent or angry manner placing any bodily fluid or waste on another person

- **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; includes, but is not limited to, sexual misuse as well as the use of the endangered adult's labor without pay

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

111 N. Fourth St.
Lafayette, IN 47901
765-423-9307

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

2350 Illinois Ave.
Columbus, IN 47201
812-379-1670

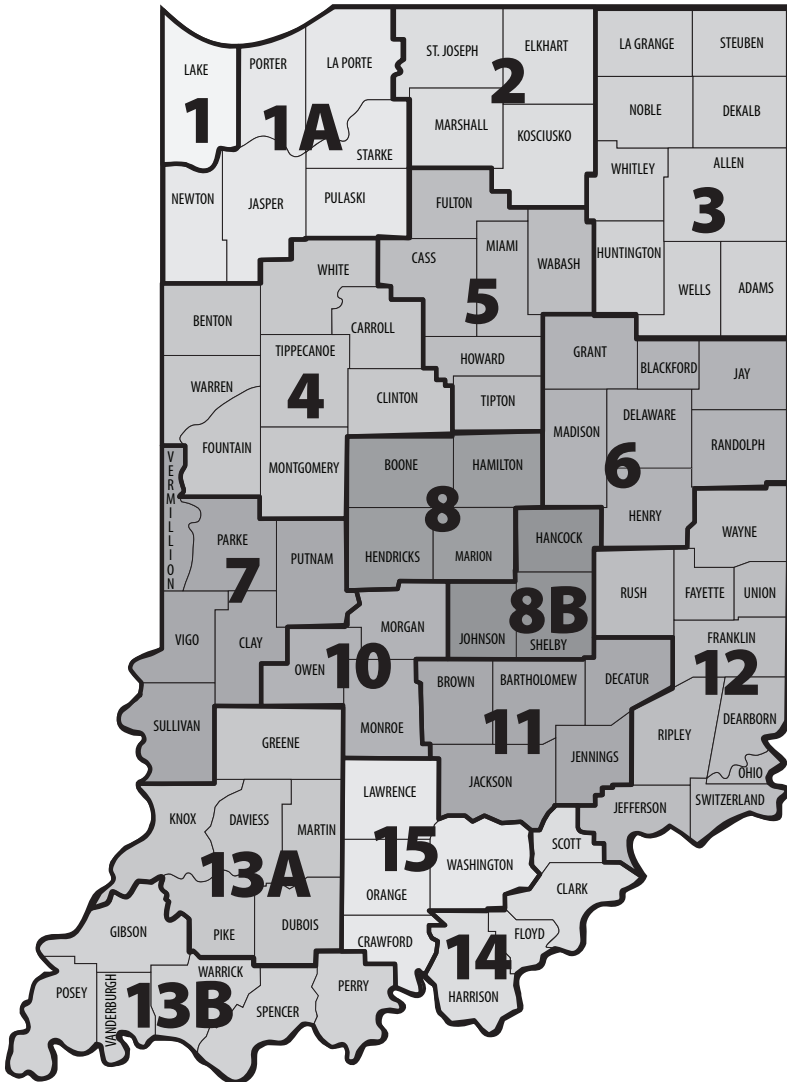
UNIT 12

165 Mary St.
Lawrenceburg, IN 47205
812-537-8862

Office listings continued on page 74.



Adult Protective Services unit service areas





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
812-280-5693

UNIT 15

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

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.

■ 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 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.

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
- Home modifications
- Health care coordination
- Homemaker
- Home-delivered meals
- Nutritional supplements
- Personal emergency response systems
- Respite
- Specialized medical equipment
- Structured family care
- Transportation
- Vehicle modifications

■ Caregiver Support Services

Caregiver Support Services provide temporary assistance for families caring for eligible children and adults with intellectual or developmental disabilities who are residing with the family or legal guardian. This service allows caregivers to take a break from their caregiving duties while a qualified trained caregiver cares for their loved one.

- There are limited funds available per fiscal year. These funds for caregiver supports are available on a first-come, first-served basis.
- The trained caregiver may be a family member but may NOT be the parent, spouse or primary caregiver of the individual. The family member also may NOT live in the home with the individual receiving supports. The family member will have to be hired by an approved provider and follow all of their employment requirements.
- Caregiver supports may not be used while the primary caregiver is at work.
- The trained caregiver can only work for 12 consecutive hours and may not sleep.



- There are no age limits to be eligible for services.
- The individual does not have to apply for waiver services, although it is strongly recommended.
- The individual does not have to apply for Medicaid, although it is recommended.
- The application for caregiver supports must be completed annually.
- Caregiver Support Services will not be available if the child or adult is receiving or begins to receive services from any other state or Medicaid-funded program such as a Home- and Community-Based waiver.
- 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.
- Frequently Asked Questions can be found at www.in.gov/fssa/files/Caregiver_Supports_FAQ_2020.pdf.

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, please visit www.bdds.in.gov and scroll down to “Online application.”

To apply by mail or in person, please call or visit your local Bureau of Developmental Disabilities Services district office and request an application. To find your local office, visit www.bdds.in.gov and click “BDDS district field services locations and maps.”

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



■ Centers for Independent Living

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. Each center is unique but operates under the same five core services.

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

Centers for Independent Living

accessABILITY Center for Independent Living Inc.

9105 E. 56th St., Suite 308
Indianapolis, IN 46216
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.siilc.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

■ 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 15 Area Agencies on Aging (serving 16 planning and service areas). 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 difficulties 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 not have assets that exceed \$250,000. In determining assets, an additional \$20,000 in countable assets will be excluded from the total. There



is a cost-sharing formula based on countable assets and individuals 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 impoverishment 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 helps children and adults with intellectual and developmental disabilities live successfully in their home. This is one of two waivers administered by the Bureau of Developmental Disabilities Services.

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

To qualify, a child or adult must have been diagnosed with an intellectual disability, developmental disability or related condition prior to the age of 22 years and the condition must be expected to continue indefinitely.

The individual must exhibit substantial functional limitations in at least three of the six major life areas. Those areas include self-care, learning, self-direction, capacity for independent living, understanding and use of language, and mobility.



In addition, the individual must also meet priority criteria. Those priority criteria are as follows:

- Individuals transitioning to the community from a nursing facility, extensive support needs facility and state operated facility
- Individuals determined to no longer need/receive active treatment in Supervised Group Living
- Individuals transitioning from 100% state-funded services
- Individuals aging out of Department of Education, Department of Child Services or Supervised Group Living
- Individuals requesting to leave a large private Intermediate Care Facility for Individuals with Intellectual Disabilities
- Death of a primary caregiver where there is no other caregiver available
- Caregiver over the age of 80 years when there is no other caregiver available
- Evidence of abuse or neglect in current institutional or Supervised Group Living placement
- Extraordinary health and safety risk as reviewed and approved by the division director

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





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

An individual or his/her guardian may apply for the Community Integration and Habilitation waiver by contacting their local Bureau of Developmental Disabilities Services office for an application packet. A complete list and contact information for the district offices is available on page 80.

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

- Adult day services
- Behavioral support services
- Case management
- Community transition
- Day habilitation
- Remote supports
- Environmental modifications
- Extended 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
- Respite
- Specialized medical equipment and supplies
- Speech/language therapy (age 21 and over)
- Structured family caregiving
- Transportation
- 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.

■ 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 15 Area Agencies on Aging. These 15 Area Agencies on Aging (serving 16 planning and service areas) comprise the INconnect Alliance. 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**.

INconnect Alliance members

FSSA's Division of Aging established the INconnect Alliance, a statewide network of 15 Area Agencies on Aging (serving 16 planning and service areas). Information about the INconnect Alliance can be found on pages 88–89.

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.

8101 W. Jefferson Blvd.
Fort Wayne, IN 46804
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



INconnect Alliance planning and service areas





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

■ Family Supports waiver

The Family Supports waiver helps children and adults with intellectual and developmental disabilities live successfully in their home. This is one of two waivers administered by the Bureau of Developmental Disabilities Services.

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

To qualify, a child or adult must have been diagnosed with an intellectual disability, developmental disability, or related condition prior to the age of 22 years, and the condition must be expected to continue indefinitely.

The individual must meet level of care. Level of care is determined by assessing six major life areas. Those areas include self-care, learning, self-direction, capacity for independent living, understanding and use of language, and mobility. The individual must exhibit substantial functional limitations in at least three of the six major life areas.

An individual or his/her guardian may apply for the Family Supports waiver by contacting their local Bureau of Developmental Disabilities Services office for an application packet. A list of the local BDDS offices can be found on page 80.

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 schedule a time to complete the preliminary level of care.

When will waiver services begin?

It is the policy of the Bureau of Developmental Disabilities Services that individuals may be placed on a single statewide waiting list after applying for waiver services and meeting Level of Care criteria. Individuals will be targeted in the order they applied for services, from the oldest date of application to the newest.



The following priority criteria allows individuals to obtain the Family Support waiver without waiting:

- Adults ages 18 through 24 who have aged out of, graduated from or have permanently separated from their school setting
- A child of an active member or veteran of the armed forces of the United States or the National Guard

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 them 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
- Day habilitation
- Extended 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
- Remote supports
- 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 15 Area Agencies on Aging (serving 16 planning and service areas). Currently, Aging and Disability Resource Centers are housed at the 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**.

■ Money Follows the Person

The Money Follows the Person program is funded through a grant from the U.S. 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 (e.g., Aged and Disabled Medicaid waiver, Traumatic Brain Injury Medicaid 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 84–87).

■ 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 Area Agencies on Aging. These 15 Area Agencies on Aging (serving 16 planning and service areas) comprise the INconnect Alliance.

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 84–87, 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 Living

Supervised Group Living, also known as “group homes,” is a residential option available to eligible individuals with intellectual or developmental disabilities. Typically, there are five to eight individuals in one SGL setting. The setting and services provided in a Supervised Group Living placement can vary depending on the individual’s age, support needs and interests.

What are the eligibility criteria for group home placement?

To qualify for SGL placement, an individual must have been diagnosed with an intellectual disability, developmental disability, or related condition prior to the age of 22 years and the condition must be expected to continue indefinitely.

The individual must meet level of care criteria. Level of care is determined by assessing six major life areas. Those areas include self-care, learning, self-direction, capacity for independent living, understanding and use of language, and mobility. The individual must exhibit substantial functional limitations in at least three of the six areas. An individual may NOT receive home- and community-based waiver services while in SGL placement.

How does someone apply?

An individual should contact their local Bureau of Developmental Disabilities Services District Office. The district offices can provide the application and provide assistance in finding additional services the individual may be eligible to receive.

A list of the local BDDS district offices can be found on page 80.



■ 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 impoverishment 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
- Home 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

Adult Mental Health Habilitation is a program designed to help Hoosiers with serious mental illness maintain or sustain skills to live successfully in their communities.

What is Adult Mental Health Habilitation?

The Adult Mental Health Habilitation program is an option for consumers with long-term behavioral health needs who may benefit more from a habilitative approach to treatment rather than a traditional rehabilitative approach.



Habilitative services help people maintain or sustain their current level of functioning. Rehabilitative services help people regain a level of functioning that they once had but lost.

AMHH is designed for people who have attempted to regain a prior level of functioning and have been unsuccessful. AMHH services are designed to help these individuals maintain or sustain current functioning level in order to prevent further regression. AMHH is intended to help people acquire, retain and/or improve the self-help, socialization and adaptive skills necessary to reside successfully in a community setting.

What are Adult Mental Health Habilitation services?

The Adult Mental Health Habilitation program consists of eight services, which are similar to what consumers receive from their behavioral health providers:

- Adult day services
- Home- and community-based habilitation and support
- Respite care
- Therapy and behavioral support services
- Addiction counseling
- Supported community engagement services
- Care coordination
- Medication training and support services

Individuals will work with their case manager to develop treatment goals and then choose from the array of services based on their individual needs to help meet specific behavioral health and community living goals. Individuals receive a predetermined amount of service units to fulfill the combination of these services for the period of time they are enrolled in the Adult Mental Health Habilitation program. This is also referred to as the “package period.”

What will change if I choose Adult Mental Health Habilitation?

The Adult Mental Health Habilitation program is a package of specialized services to help meet the habilitative goals of consumers with long-term behavioral health needs. The services are similar to other programs that offer skills training, therapy, medication support, case management and other services. However, they are specialized in their design to help individuals maintain and sustain their current level of functioning in an attempt to avoid a reduction in functioning level. AMHH services also provide training and support for family members, friends and other unpaid caregivers.

To be eligible, individuals must:

- Be at least 19 years of age
- Have an Adult Needs and Strengths Assessment of three or higher
- Be enrolled in an eligible Medicaid program
- Have a qualifying mental health diagnosis
- Live in a community-based setting



Individuals currently receiving services through a community mental health center can ask their provider for additional information. Individuals who are not currently involved with a CMHC but think they may qualify may contact their local community mental health center or call the Division of Mental Health and Addiction at **317-232-7800** or **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 to assist in the coordination of mental health and primary health needs of the individual. An individual may qualify for the BPHC program if the individual has an eligible BPHC diagnosis and needs help managing his or her 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 are the income limits?

An individual must have countable income no higher than 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 individuals can apply for Behavioral and Primary Healthcare Coordination at any community mental health center that has been approved by the Division of Mental Health and Addiction.



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. Once clinically approved, the application must be approved by the Division of Family Resources. Once all components of the application have been reviewed, 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 **317-232-7800** or **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.

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**.

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.



■ 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

LlfeSpring 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

LlfeSpring 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 / Gambling Disorder

What is problem gambling / gambling disorder?

A variety of terms is used to describe gambling issues and addiction. To provide consistency, DMHA will use the following terms when addressing specific gambling criteria:

The term “problem gambling” is used when referring to prevention, education and/or awareness activities.

The term “gambling disorder” is used when referring to gambling addiction



and/or treatment services. 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 gambling disorder treatment?

To be eligible to receive gambling treatment services from a Division of Mental Health and Addiction-endorsed gambling disorder treatment 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 gambling treatment services are available?

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

The types of gambling disorder treatment services available include:

- Enrollment / individualized integrated care plan
- Individualized integrated care plan review
- 24-hour crisis intervention
- Case management
- Intensive outpatient treatment
- Outpatient treatment (group)
- Individual counseling
- Acute stabilization (service must be related to a gambling disorder)
- Residential services (service must be billed as a separate event from acute stabilization)
- Medication, evaluation and monitoring
- Psychiatric consultation
- Financial counseling – group
- Financial counseling – individual
- Transportation
- Family counseling
- Education – group
- Education – individual
- Family education
- Certified recovery specialist services
- Certified recovery coach

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 / Gambling Disorder Resources in Indiana

There are currently 19 Division of Mental Health and Addiction-endorsed gambling disorder treatment providers throughout Indiana. To find the most up-to-date listing of these agencies, visit www.in.gov/fssa/dmha/files/Problem_Gambling_Providers.pdf.

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

For education and resources regarding suicide prevention in Indiana, please visit www.in.gov/issp/. The following resources are available for those in crisis as well:

Trevor Project

Trevor Lifeline is a crisis intervention and suicide prevention phone service available 24/7/365 for the LGBTQ+ community. Call **866-488-7386** or text “**START**” to **678678**. You can find more by visiting: www.thetrevorproject.org/.

Veteran Mental Health Crisis or Suicide Prevention Help

Call **800-273-8255**, then select 1. If you have hearing loss, call TTY: **800-799-4889**. You can find out more by visiting www.va.gov/health-care/health-needs-conditions/mental-health/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).

A teenager-specific national hotline is available as well: Teen Suicide Hotline at 800-SUICIDE (784-2433). You can also text for help. Just text “IN” to 741741 for suicide prevention.

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 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. 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 pages 78–79.

■ **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 and who, without such services, would require institutional care. 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 IHCD's programs can be found on the following pages.

■ 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 be 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. IHCD 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: www.hud.gov/program_offices/public_indian_housing/pha/contacts.

This website explains IHCD's program and service area:
www.in.gov/ihcda/2333.htm

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

■ 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 **877-GET-HOPE** today or visit <http://877gethope.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. 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/4067.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.

■ 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; the client also must be at least 18 years of age
 - > **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?

If you are interested in learning more about the program, contact your local INconnect Alliance member at **800-713-9023**. A complete listing of INconnect Alliance members is available on pages 84–87, or you can visit the INconnect Alliance website at **www.INconnectAlliance.org**.

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.

Applications can be obtained on the Division of Aging website at **www.in.gov/fssa/aging.htm**. In the "Information / Resources" box, click "Provider resources" and select "Residential Care Assistance Program."

How does someone find a Residential Care Assistance Program provider?

Contact the RCAP director at **rcap.provider@fssa.in.gov** or visit the Division of Aging website at **www.in.gov/fssa/aging.htm** for a list of facilities that are approved Residential Care Assistance Program providers.

■ 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/4076.htm**.



■ 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 decisions 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 to 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

Family and Social Services Administration

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The Indiana Family and Social Services Administration does not discriminate on the basis of race, color, creed, sex, age, disability, national origin or ancestry.

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