

CHECKLIST

Family Support Waiver



Division of Disability and Rehabilitative Services
Bureau of Developmental Disabilities Services

1. APPLY FOR FAMILY SUPPORTS WAIVER

- Contact your local Bureau of Developmental Disability Services office for an application packet for the Family Support Waiver. Local office information can be found by calling **800-545-7763** or visiting <https://www.in.gov/fssa/files/BDDS.pdf>.
- Once you receive your application packet, send the Confirmation of Diagnosis form to a physician involved in your or your loved one's care. This must be a MD or DO involved in your care but does NOT have to be the diagnosing physician.
- Complete the Application for Developmental Disability Services.
- Mail, fax or hand-deliver the completed Application for Developmental Disability Services and Confirmation of Diagnosis form to your local BDDS office.
- If your loved one is under the age of 6 years and meets the eligibility requirements of Level of Care you will then be placed on the Family Support Waiver waitlist.

If your loved one is over the age of 6 years, an intake specialist will contact the individual or guardian to schedule a preliminary Level of Care screen.

For you to meet Level of Care, you must exhibit substantial functional limitations in at least three of the six major life areas: understanding and use of language, mobility, self-care, capacity for independent living, self-direction and learning.
- Once eligibility is determined, you are notified by mail of the decision along with information on how to appeal a decision if you disagree. If determined eligible, you are then placed on the Family Support Waiver waitlist.

2. WHILE YOU ARE WAITING

- Contact your local Bureau of Developmental Disability Services office if there are any changes to your contact information, such as address or phone number. You can also visit the BDDS Waitlist Web Portal at <http://www.in.gov/fssa/ddrs/4328.htm> to update your information.
- Make contact with local advocacy organizations that can assist you in finding other resources that may be available.
- Seek out natural supports, such as family members, church, neighbors, friends and community organizations who may be able to provide support.
- Check out LifeCourse Framework and tools! This framework was created by families to help individuals and families of all abilities and all ages to develop a vision for a good life, think about what they need to know and do, identify how to find or develop supports, and discover what it takes to live the life they want to live. Visit www.lifecoursetools.com for more information.



CHECKLIST

Family Support Waiver (cont.)



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3. TARGETING

- Once your name reaches the top of the waitlist, you will receive a targeting letter from the Division of Disability Rehabilitative Services asking to confirm that services are still desired. A "YES" response is required to proceed.
- A new Confirmation of Diagnosis will accompany the targeting letter. This must be completed and returned by a MD or DO involved in your care.
- An intake specialist will be assigned who will schedule a new Level of Care screening to determine eligibility. For you to meet Level of Care, you must exhibit substantial functional limitations in at least three of the six areas major life areas: understanding and use of language, mobility, self-care, capacity for independent living, self-direction and learning.

At this time, you may be asked to provide supporting documentation, such as medical information, schools records, testing results, etc.
- Once you are determined to be eligible, the intake specialist will ask you to choose a case management company. You will be given a pick list with all the case management companies that serve your area. Information on the pick list include case management company name, address, phone number and contact person. You may interview the case management companies and case managers before making a choice.
- If you (the waiver recipient) do NOT currently have a State Medicaid Health Plan, your intake specialist will inform you when to apply for Medicaid. You can find your local Division of Family Resources by calling **800-403-0864** or visiting <https://www.in.gov/fssa/dfr/2999.htm>.

To be eligible for a waiver, an individual must meet the requirements of eligibility for certain Medicaid categories:

- If you are under the age of 18 years, household income eligibility requirements for Medicaid are not considered and only your income/assets is taken into consideration. If the individual/family is requesting Medicaid coverage for the 90 days prior to the Medicaid application date, then household income eligibility requirements are taken into consideration.
- If you are age 18 years and older, you must apply and be approved for benefits through the Social Security Administration. You can find your local Social Security office by calling **1-800-772-1213** or visiting <https://www.ssa.gov/benefits/disability/>.

- Once Medicaid is approved, the Bureau of Developmental Disabilities Services will then send the referral to your chosen case management company.

The case manager will contact you to develop a Person-Centered Individualized Support Plan, which should guide you on choosing the appropriate waiver services and help identify other supports in the community that may be helpful.
- The case manager will then submit the Person-Centered Individualized Support Plan to the Division of Disability and Rehabilitative Services. A Notice of Action is generated, then approved, which allows services to begin.

SERVICES BEGIN!

Your local BDDS staff knows and understands that life is overwhelming and this is a long process. We are here to help you through any part of the process. Feel free to reach out to your local office or intake specialist any time with questions.

