



Health and Wellness Waiver waiting checklist

1. Apply for Health and Wellness Waiver

- Contact your local Area Agency on Aging office to complete a preliminary level of care screening by telephone. Your local Area Agency on Aging contact information is available online at www.in.gov/fssa/da/area-agencies-on-aging.
- Once you are found eligible for the preliminary level of care, the Area Agency on Aging will mail you an official letter about your waiting list placement.
- The Area Agency on Aging will discuss Indiana Medicaid eligibility with you. If you appear to be eligible for Medicaid, the Area Agency on Aging will inform you and may assist you with this application.

2. While you are on the Health and Wellness Waiver waiting list:

- Contact your local Area Agency on Aging if there are any changes to your contact information, such as address or phone number.
- Your local Area Agency on Aging may assist you with information and resources available in your community while you are waiting.
- You may call Indiana 211 for additional information about resources in your community.
- If you currently receive Indiana Medicaid, the Area Agency on Aging may support you in seeking home care services.
- If you are applying for Indiana Medicaid the Area Agency on Aging may assist you with this application process. Or you may visit the Indiana Medicaid website by visiting www.in.gov/medicaid/members.

3. Invitation to continue the process to access the Health and Wellness Waiver when your name comes up on the waiting list

- When your name comes up on the Health and Wellness Waiver waiting list, you will receive a letter of invitation in the mail from FSSA.
- The Area Agency on Aging will assign an options counselor to contact you to schedule an in-person assessment. You may also reach out to your Area Agency on Aging to initiate the process.
- The options counselor will make three attempts within a 30-calendar day period to reach you from the date notified by the state.
- Once contact has been made, the options counselor will schedule the in-person appointment with you. During this in-person appointment, you will receive a full eligibility assessment including an updated level of care. The options counselor will also provide information and support with Indiana Medicaid eligibility.
- Once you are determined to meet eligibility for the Health and Wellness Waiver, the options counselor will:
 - Discuss your Indiana Medicaid eligibility, as Indiana Medicaid is required to participate in the Health and Wellness Waiver.
 - If you do not have Indiana Medicaid, you will be referred to a Medicaid specialist at your Area Agency on Aging, who will assist with this process.
 - If you have Indiana Medicaid that isn't compatible with receiving waiver services, you will need to apply for Indiana Medicaid disability. Your options counselor will provide more information during your meeting.
 - Explore service options with you and develop an initial service plan.
- Once the service plan is completed, the options counselor will submit to the state for review.
- Upon preliminary approval by the state, you will be required to select and make sure all providers are in place for your services. Please notify your Area Agency on Aging of your chosen providers as soon as possible.



4. When will services begin?

Services will begin once:

- Indiana Medicaid is approved by the Division of Family Resources; and
- The Health and Wellness Waiver is approved by the Bureau of Disabilities Services.

Your care manager will then receive the approved notice of action from the Bureau of Disabilities Services showing all of your services funded by Health and Wellness Waiver, which allows your services to begin. Your care manager will follow up with you and the providers to ensure services begin promptly.