



COMPASS CONSUMER HANDBOOK

Developmental Disabilities Services

Compass Residential and Consulting

9660 Commerce Drive
Carmel, IN 46032
(317) 423-9350

www.CompassRC.com

TABLE OF CONTENTS

Who is Compass?	1
The Compass Vision, Mission and Core Values	1
Compass Administrative Office Information	2
What Services does Compass Provide?	4
From Referral to Intake	10
Notice of Termination of Services	11
What are My Rights?	11
How do I Make a Complaint?	13
Management of Individual Finances	14
Health Supports	16
Information and Referral	16
Notice of Privacy Practices	21

WHO IS COMPASS?

Compass was founded in 2010 as a human services agency that provides services and supports to individuals with disabilities, mental illness and addictions. All services are designed to help people realize their hopes, dreams and personal goals. At Compass, we believe that our agency's success is measured by the successes of the people we serve.

Compass offers a variety of developmental disabilities services funded by the Indiana Medicaid Waiver program, the Bureau of Developmental Disabilities Services, and private pay. All services are designed to support you in the direction of your choice, and can help with access to:

- community participation and integration
- education and training
- recreation
- meaningful day
- health supports
- advocacy
- counseling
- spiritual opportunities

THE COMPASS VISION, MISSION AND CORE VALUES

All services and supports provided by Compass employees and agents will be rendered in accordance with our vision, mission, and core values.

It is the vision of Compass that all individuals with developmental disabilities will have an equal and valued place in their chosen communities.

The mission of Compass is to support individuals in finding opportunities to live a meaningful and fulfilling life in the direction of their choice.

Compass hopes to assist individuals by adhering to our guiding principles:

1. Self-Determination

Compass believes that all people have a rightful place in society. People with developmental disabilities are at risk of being devalued and may need help to attain valued social roles and valued lives. Compass is committed to assisting individuals in developing and maintaining relationships, opportunities, and living arrangements which are fulfilling, meaningful, and of the individual's choice. This includes the right of basic human dignity. People with developmental disabilities should be afforded

the same dignity and respect as individuals without disabilities. Individuals will be encouraged to express individuality, make choices, select and maintain possessions, and will be afforded privacy and treated with respect.

2. Community Integration and Inclusion

Compass will support individuals to become valued members of the communities in which they live. This includes attending public school, seeking employment at community businesses, shopping at local stores, using community recreation facilities, and receiving health services in the offices of community physicians, dentists, and clinics.

3. Meaningful Day

Compass is committed to providing learning opportunities throughout an individual's day. These opportunities may occur on a formal basis as part of a daily schedule, or on an informal basis by taking advantage of every opportunity to address the individual's needs.

4. Person-Centered Service Delivery

Compass will ensure that all services are provided based on how an individual's hopes and dreams determine a chosen direction.

5. Protection from Harm

Compass is responsible for ensuring that the people we serve are safe from harmful environments, abuse, neglect, or exploitation. Compass is committed to providing the safest possible living and working environments for staff and individuals. It is our goal to increase safety and health consciousness and to reduce injuries and property damage.

COMPASS ADMINISTRATIVE OFFICE INFORMATION

Compass operates seven offices across the State of Indiana. The main office is located in Indianapolis, IN. All Compass office locations recognize the following holidays: New Year's Day, Memorial Day, Independence Day, Labor Day, Thanksgiving, Christmas Day. After hours, an on-call supervisor will be on-call 24 hours per day, 7 days per week for emergency calls. All other calls will be responded to by the next business day.

INDIANAPOLIS OFFICE

Address: 9660 Commerce Drive
Carmel, IN 46032
Hours of Operation: Monday through Friday, 9:00 a.m. until 5:00 p.m.
Main Phone: 317-423-9350
Main Fax: 317-423-9355

EVANSVILLE OFFICE

Address: 701 N Weinbach Ave, Suite 810
Evansville, IN 47711
Hours of Operation: Monday through Friday, 8:00 a.m. until 4:00 p.m.
Main Phone: 812-712-4155
Main Fax: 812-473-5717

MERRILLVILLE OFFICE

Address: 5401 Broadway, Suite C
Merrillville, IN 46410
Hours of Operation: Monday through Friday, 8:00 a.m. until 4:00 p.m.
Main Phone: 219-427-0655
Main Fax: 219-427-0926

ELKHART OFFICE

Address: 803 County Road 6 East, #B
Elkhart, IN 46514
Hours of Operation: Monday through Friday, 9:00 a.m. until 5:00 p.m.
Main Phone: 574-444-0724
Main Fax: 574-607-4630

TERRE HAUTE OFFICE

Address: 2901 Ohio Blvd, Suite 248
Terre Haute, IN 47803
Hours of Operation: Monday through Friday, 9:00 a.m. until 5:00 p.m.
Main Phone: 812-577-9202
Main Fax: 812-814-9455

BLOOMINGTON OFFICE

Address: 3100 John Hinkle Place, Ste 100
Bloomington, IN 47408
Hours of Operation: Monday through Friday, 9:00 a.m. until 5:00 p.m.
Main Phone: 812-578-8089
Main Fax: 812-578-8789

FT. WAYNE OFFICE

Address: 6415 Constitution Drive
Ft. Wayne, IN 46804
Hours of Operation: Monday through Friday, 9:00 a.m. until 5:00 p.m.
Main Phone: 260-459-0024
Main Fax: 260-459-0038

WHAT SERVICES DOES COMPASS PROVIDE?

Residential Habilitation and Support Services

Residential Habilitation and Support Services, also known as RHS, is a service that is available to people with developmental disabilities through the following funding sources: CIH Medicaid waiver, Bureau of Developmental Disabilities Services (BDDS). RHS provides staffing supports in a person's home and the community to help the person acquire, improve and retain skills.

Individualized Services

RHS is an individualized service that is designed to meet the needs of the person. The agency providing RHS must comply with a person's individualized plan, called the PCISP. RHS can include the following supports, based on a person's wants and needs as outlined in the PCISP:

Direct supervision, monitoring, and training to implement the PCISP outcomes for the participant through the following:

- Assistance with personal care, meals, shopping, errands, chore and leisure activities, and transportation (excluding transportation that is covered under the Medicaid State Plan)
- Coordination and facilitation of medical and non-medical services to meet healthcare needs, including physician consults, medications, development and oversight of a health plan, utilization of available supports in a cost effective manner, and maintenance of each participant's health record
- Assurance that direct service staff are aware and active individuals in the development and implementation of PC/ISP, behavior support plans, and risk plans*
- Collaboration and coordination with the wellness coordinator when the participant receiving RHS also utilizes Wellness Coordination services

Activities Not Allowed

Reimbursement is not available through RHS-Hourly in the following circumstances:

- Services furnished to a minor by the parent(s), stepparent(s), or legal guardian
- Services furnished to a participant by the participant's spouse

- Services to individuals in Structured Family Caregiving (SFC) services or Children’s Foster Care Services
- Services that are available under the Medicaid State Plan

If a relative of the adult participant provides the service:

- The decision that a relative is the best choice of persons to provide these services is a part of the person-centered planning process and is documented in the PCISP.
- There is to be an annual review by the Individualized Support Team (IST) to determine whether the participant’s relative should continue to be the provider of PAC or RHS.
- Exploring documentation of the IST conversation as a component of case record reviews.
- Reimbursable waiver funded PAC or RHS services furnished to a waiver participant by an allowable paid relative and/or legal guardian may not exceed a total of 40 hours per week per paid relative and/or legal guardian caregiver.

Day Habilitation

Day Habilitation is a service that is available to people with developmental disabilities through the following funding sources: CIH Medicaid waiver, FS Medicaid waiver, Bureau of Developmental Disabilities Services (BDDS). Day Habilitation provides services outside of a person’s home that support learning and assistance in the areas of: self-care, sensory/motor development, socialization, daily living skills, communication, community living, and social skills. Day Habilitation activities are intended to build relationships and natural supports. This service can be provided on an individual basis or in a group, depending on what is authorized within the person’s plan.

Individualized Services

Day Habilitation is an individualized service that is designed to assist with the acquisition and retention of skills in the following areas:

- Leisure activities and community/public events (i.e. integrated camp settings)
- Educational activities
- Hobbies
- Unpaid work experiences (i.e. volunteer opportunities)
- Maintaining contact with family and friends

Training and education in self direction designed to help participants achieve one or more of the following outcomes:

- Develop self-advocacy skills
- Exercise civil rights
- Acquire skills that enable the ability to exercise self-control and responsibility over services and supports received or needed
- Acquire skills that enable the participant to become more independent, integrated or productive in the community

Activities Not Allowed

- Services that are available under the Rehabilitation Act of 1973 or PL 94-142.
- Skills training for any activity that is not identified as directly related to a participant habilitation outcome.
- Activities that do not foster the acquisition and retention of skills.
- Activities that would typically be a component of a person's residential life or services, such as: shopping, banking, household errands, appointments, etc.
- Services furnished to a minor by parent(s), step parents(s) or legal guardian.
- Services furnished to a participant by the participant's spouse.

Respite Care

Respite Care Services, also known simply as Respite, is a service that is available to people with developmental disabilities through the following funding sources: CIH Medicaid waiver, FS Medicaid waiver. Respite services are provided to individuals unable to care for themselves and are furnished on a short-term basis due to the absence or need for relief of those persons normally providing care. This service can be provided in the following locations: an individual's home, the private home of the caregiver, a camp setting, in a DDRS-approved Day Habilitation facility, a non-private residential setting such as a respite home.

Individualized Services

Reimbursable activities under Respite Care include the following:

- Assistance with toileting and feeding
- Assistance with daily living skills, including assistance with accessing the community and community activities

- Assistance with grooming and personal hygiene
- Meal preparation, serving, and cleanup
- Administration of medications
- Supervision
- Individual services
- Group services (unit rate divided by number of participants served)

Activities Not Allowed

The following activities are not allowed under Respite Care:

- Reimbursement for room and board
- Services provided to a participant living in a licensed facility-based setting
- The cost of registration fees or the cost of recreational activities (for example, camp)
- When the service of SFC is being furnished to the participant or when the participant is in Children's Foster Care with the Division of Child Services
- Care or supervision from the provider for other family members (such as siblings of the participant) while Respite Care is being provided/billed for the waiver participants
- Respite Care used as day/child care
- Respite Care provided on a continuous, long-term basis as part of daily services that would enable the unpaid caregiver to go to work or to attend school
- Respite Care to provide service to a participant while the participant is attending school
- Respite Care to replace skilled nursing services that should be provided under the Medicaid State Plan
- Respite Care that duplicates any other service being provided under the participant's POC/CCB
- Services furnished to a minor by a parent(s), stepparent(s), or legal guardian
- Services furnished to a participant by the participant's spouse

Participant Assistance and Care

Participant Assistance and Care (PAC) services support and enable the participant in activities of daily living, self-care, and mobility with the hands-on assistance, prompting, reminders, supervision, and monitoring needed to ensure the health, safety, and welfare of the participant. This service is available to people with developmental disabilities through the following funding source: FS Medicaid waiver.

Allowable Activities

Reimbursable activities under Participant Assistance and Care services include the following:

- Activities may include any task or tasks of direct benefit to the participant that would generally be performed independently by persons without intellectual/developmental disabilities or by family members for or on behalf of persons with intellectual/developmental disabilities.
- Examples of activities include but are not limited to the following:
 1. Assistance with personal care, meals, shopping, errands, scheduling appointments, chores, and leisure activities (excluding the provision of transportation)
 2. Assistance with mobility – including but not limited to transfers, ambulation, use of assistive devices
 3. Assistance with correspondence and bill-paying
 4. Escorting the participant to community activities and appointments
 5. Supervision and monitoring of the participant
 6. Reinforcement of behavioral support
 7. Adherence to risk plans
 8. Reinforcement of principle of health and safety
 9. Completion of task list
 10. Participating on the IST for the development or revision of the service plan (staff must attend the IST meeting to claim reimbursement)

Activities Not Allowed

PAC services will not be provided to household members other than to the waiver participants. Reimbursement is not available through PAC in the following circumstances:

- When services are furnished to a *minor* by the parents, stepparents, or legal guardians
- When services are furnished to a participant by the participant's spouse
- When Indiana Medicaid State Plan services are available for the same tasks
- When services provided are available under the *Rehabilitation Act of 1973* or section 602(16) & (17) of the *Individuals with Disabilities Education Act*
- Homeschooling, special education, and related activities

- When the participant is admitted to an institutional facility (for example, acute hospital, nursing facility, ICF/IID)
- For homemaker or maid service
- As a substitute for care provided by a registered nurse, licensed practical nurse, licensed physician, behaviorist, licensed therapist, or other health professional
- Transportation costs

If a relative of the adult participant provides the service:

- The decision that a relative is the best choice of persons to provide these services is a part of the person-centered planning process and is documented in the PCISP.
- There is to be an annual review by the Individualized Support Team (IST) to determine whether the participant's relative should continue to be the provider of PAC or RHS.
- Exploring documentation of the IST conversation as a component of case record reviews.
- Reimbursable waiver funded PAC or RHS services furnished to a waiver participant by an allowable paid relative and/or legal guardian may not exceed a total of 40 hours per week per paid relative and/or legal guardian caregiver.

Behavioral Support Services

Behavioral Supports can help individuals who are experiencing or are likely to experience challenges accessing and actively participating in the community because of behavioral, social, or emotional challenges. Behavioral Supports are intended to empower individuals and families (by leveraging their strengths and unique abilities) to achieve self-determination, interdependence, productivity, integration, and inclusion in all facets of community life, across all environments, across the lifespan. This service is available to people with developmental disabilities through the following funding sources: CIH Medicaid waiver, FS Medicaid waiver.

Individualized Services

- Teaches and encourages respectful, responsible behavior
- Are proactive and focus on understanding the reason for challenging behavior, teaching alternative skills, and meeting individual needs
- Sets a positive tone in building new skills
- Supports a collaborative team approach

- Can range from a simple assessment of behavior and intervention to a multifaceted assessment and intervention planning for individuals with significant behavioral needs

Activities Not Allowed

- Restrictive techniques - any techniques not approved by the IST and the human rights committee.
- Therapy services provided to the participant within the educational/school setting or as a component of the participant's school day.
- Services provided to a minor by a parent(s), step-parent(s), or legal guardian.
- Services provided to a participant by the participant's spouse.
- In the event that a Level 1 clinician performs Level 2 clinician activities, billing for Level 1 services is not allowed. In this situation, billing for Level 2 services only is allowed.
- Simultaneous receipt of facility-based support services or other Medicaid-billable services and intensive behavioral supports.

FROM REFERRAL TO INTAKE

When a call is made to Compass to ask about our services, we will gather basic information about what your current needs are and what services Compass can offer. We will set up a time to meet with you at your convenience and will also talk with your case manager to request the following information during the referral process:

- Plan of Care and services budget
- Person-Centered Individualized Support Plan and service goals
- Transportation needs
- Medical needs
- Behavioral status and needs
- Staffing preferences and needs
- Location

Compass supervisory staff will review all referral information to determine if services can be provided. Decisions to provide services will never be based on race, sex, age, color, religion, national origin, ancestry, disability, sexual orientation, or gender identity. If it is determined that Compass is not able to provide services, a Compass supervisor will notify you and your waiver case manager of the decision. We will request that your waiver case manager seek alternative providers for the requested service. As needed, we will also provide information to you regarding community resources to meet your needs. If it is

determined that Compass is able to provide services, we will take the following steps so services can begin:

- We will meet with you to talk about your services, the goals you have, your risk issues, your activities, and your staffing schedule and preferences
- We will develop your service program and make a program book for you
- We will hire staff and train them to work with you
- We will give documentation to your case manager
- Once your services budget is approved, we will begin to provide the services authorized on your budget

If Compass has a waiting list for your requested services, you will be placed at the top of a waiting list. We will contact you when a spot becomes available on a first come, first served basis.

NOTICE OF TERMINATION OF SERVICES

In the event that Compass feels we can no longer meet your needs, a written notice of termination of services will be sent to you or your legal representative, the waiver case manager, and BDDS. Upon notice of termination of services, it is the obligation of Compass to continue providing services to you until a new provider agency is located and in place. At the discretion of the Compass CEO, services may be terminated immediately only in the following situations:

- The individual's medical needs cannot be safely met by Direct Support Professional staff
- The continuation of services would pose an immediate threat to the safety of Compass employees

Compass will cooperate with the BDDS transition process and will participate in required meetings and in the development or update of the PCISP. Compass will provide assistance to you in order to ensure continuity of services and effective transitions. Compass will share your service record with the new provider.

WHAT ARE MY RIGHTS?

It is the obligation of Compass to ensure that you are informed annually of your rights. Compass is responsible for ensuring that you are treated with dignity and respect, and services are provided to you without violations of your rights.

Your rights:

1. You have the right to be treated humanely and to be protected from harm.

2. You have the right to meaningful and appropriate services.
3. You have the right to live and receive services in a safe, secure, and supportive environment.
4. You have the right for information to be confidential.
5. You have the right to complain about treatment or care and to have that complaint answered in a timely manner.
6. You have the right to be informed of your rights at least annually and in a manner in which you can understand.
7. You have the right to be free from abuse, neglect, exploitation or mistreatment. This includes but is not limited to being free from punishment, name calling and other verbal abuse, humiliation, intimidation, harassment, confinement, deprivation, unauthorized use of your property or identity, and financial abuse or exploitation.
8. You have the right to not be placed in a room or other area from which exit is prevented.
9. You have the right to be treated with dignity and respect.
10. You have the right to be free from restrictions involving sleep, shelter, food, drink, medical care, use of bathroom facilities, or prolonged restriction of movement, unless a doctor's order is being followed.
11. You have the right to not work or perform chores without payment, except for normal chores in your home or for volunteer work that you have chosen.
12. You have the right to regularly see your doctor, at your own expense.
13. You have the right to regular developmental and behavioral assessments.
14. You have the right to refuse treatment.
15. You have the right to be informed of all risks of treatment.
16. You have the right to be free from unnecessary physical or chemical restraints.
17. You have the right to personal privacy.
18. You have the right to meet privately with and communicate with persons of your own choosing.
19. You have the right to send and receive unopened mail.
20. You have the right to make and receive telephone calls privately, at your own expense.
21. You have the right to participate in social, religious and community activities of your choice.
22. You have the right to have and use appropriate personal possessions and clothing.
23. You have the right to have personal funds and property protected from misuse or misappropriation.
24. You have the right to have all alleged violations of your rights reported and investigated.
25. You have the right to be free from unnecessary medications and physical restraints.

26. You are not required to perform any type of service or work for Compass. If you do choose to work for Compass, you will be compensated at the prevailing wage for the job, commensurate with your abilities.

HOW DO I MAKE A COMPLAINT?

Compass is committed to ensuring that complaints and critical incidents involving you are addressed promptly and appropriately to assess and protect your rights and agency integrity and operations. Complaints will be handled confidentially to the extent possible while ensuring resolution of issues and concerns.

Complaints can be made in writing or verbally. Grievance & Complaint forms are available:

- In each Supported Living service site
- At each Compass office location
- Electronically on the Compass website
(www.compassrc.com, Compass Resources, Grievance & Complaint Form)

If you need help filling out the form, any Compass employee can provide assistance, and will be expected to do so.

You can also call any Compass employee to file a verbal complaint at any time. The person taking your call will complete the form and help you through the process. Any Compass employee who has observed, is involved in, or is told of a complaint is required to complete a Compass Grievance & Complaint Form. The form should be completed as thoroughly as possible.

Once a Compass Grievance & Complaint Form is received at the office, it will be given to Human Resources. Human Resources will determine who will be responsible for following up and will make sure that your complaint or grievance is resolved within two (2) weeks of receipt. Someone will contact you to let you know the outcome of the complaint including actions taken and resolution.

If Compass is unable to resolve your complaint, you can contact one of the following individuals to help you:

1. Your Waiver Case Manager

If you do not know your Case Manager's phone number, you can find it on your Individual Profile, your PCISP, or you can ask Compass staff to get it for you.

2. Your local BDDS office staff
 - Indianapolis: 317-205-0101
3. The DD Ombudsman
 - 1-800-622-4484

MANAGEMENT OF INDIVIDUAL FINANCES

If Compass is designated in the PCISP as responsible for managing your finances, the following processes will be followed:

Compass will assist you in maintaining your financial resources as designated within your PCISP. Compass will protect your funds and property from misuse or misappropriation. You will be encouraged to participate in the management and maintenance of your own finances and resources through formal and informal training opportunities. Compass is responsible for ensuring that if you rent property you secure and maintain renter's insurance. Purchases made will be for your use only, including food, personal necessities, and household items. If Compass is responsible for managing your finances, we will apply to become your Representative Payee for Social Security benefits. We will also open two accounts on your behalf with Old National Bank: one account for deposit of benefits and payment of bills, and one account for your spending money. The Compass Director of Finance and Financial Benefits Coordinators will have access to these accounts as well and will monitor the accounts online.

Participation in the Management of Financial Resources

Compass will ensure that you and/or legal representative will be given the opportunity to participate in the acquisition, maintenance and review of your finances. You will be given the opportunity to use your best judgment regarding financial decisions, however, in the event that these decisions jeopardize your health and welfare, the Compass *Incident Reporting* policy & procedure will be followed.

Paying Bills and Budgeting Your Money

Compass will prepare a monthly budget for you based on your benefits and your expenses. Compass will ensure that the following expenses are paid for on your behalf each month from the Compass office:

- Rent
- Utilities
- Telephone
- Property Insurance

- Personal Necessities

Compass will budget a portion of your benefits money each month to make sure that you have enough money to pay for larger expenses such as bedroom furniture, new clothing, or other more expensive items.

When you are new to Compass, it may take several weeks for your benefits checks to begin coming in. Compass will make sure that all of your necessities are paid for while waiting for your benefits. If you want to purchase something outside of your necessities during this time, you can make a request in writing to your Program Director. The request will be reviewed and either approved or denied on an individual basis. Once your benefits begin, Compass will work with you to review a Repayment Agreement.

Also, when you are new to Compass, Compass will make sure that your home is furnished and includes everyday household items such as pots and pans, dishes, waste baskets, etc. These items will remain the property of Compass unless you decide that you would like to purchase them. If Compass purchases items for your use only such as bedroom furniture, you will be expected to pay for these items and they will become your personal property.

If you move into a brand new home, you will be responsible for paying deposits on housing and utilities as well as any set-up costs.

If you are having trouble affording your living expenses, Compass will help you and your team to work through possible options such as moving to more affordable housing, finding housemates, finding a job, etc.

If you damage property or throw out belongings or food, you will be expected to pay for repairs and replacement.

If you earn money from a job, your benefits might not be enough to pay for all of your monthly expenses. If this is the case, you will be expected to help pay for regular monthly expenses such as rent, utilities, food and medicine with the money you earn at work. Money that you have left over after paying all of your necessities will be yours to spend or save, whichever you choose. If you earn money from a job and you owe money back to Compass, the Financial Benefits Coordinator will work with you on a Repayment Agreement. Once you have paid Compass back, the money you have left over will be yours to spend or save, whichever you choose.

Maintaining Your Financial Records

Compass will prepare a monthly statement of your benefits and expenses and will maintain documentation regarding your financial resources at your residence for a period of no less than ninety (90) days. This documentation will include if applicable:

- Reconciled bank statements
- Purchase logs, bills and receipts
- Monthly Financial Review signature sheet
- A copy of the renter's insurance policy

Compass will maintain the documentation listed above for a period of no less than seven (7) years at the Compass office. Compass will also maintain an inventory of your personal belongings and will update this inventory a minimum of once per year.

HEALTH SUPPORTS

If Compass is designated in the PCISP as responsible for health supports, the following services and supports will be available to you:

- Maintaining documentation of health and medical appointments
- Attendance at health and medical appointments
- Monitoring of medication side effects
- Medication administration
- Vitals monitoring
- Review of health information
- Risk Protocol creation and monitoring

Compass employees will follow all procedures outlined in the *Compass Health Supports* and *Medication Administration System* policies unless otherwise specified in your PCISP.

If your guardian or other family members are also Compass employees and the PCISP specifies that Compass is not responsible for health supports, the guardian or other family members will not complete any health supports duties during paid time.

INFORMATION AND REFERRAL

The Indiana Bureau of Developmental Disabilities Services (BDDS) administers funding for services for individuals with developmental disabilities in order for them to maximize their capabilities and to actively participate in the community. Local BDDS office contact information is included below.

BDDS District Offices

The Bureau of Developmental Disabilities Services (BDDS) is a program of the Division of Disability & Rehabilitative Services, a division of the Indiana Family & Social Services Administration.

District 1

110 W. Ridge Road
Gary, IN 46408-2709
Phone: 219-981-5313
Toll Free: 1-877-218-3053 (V/VRS/711)
Toll Free Fax: 1-855-455-4265
Counties: Jasper, Lake, Newton,
Porter, Pulaski & Starke

District 2

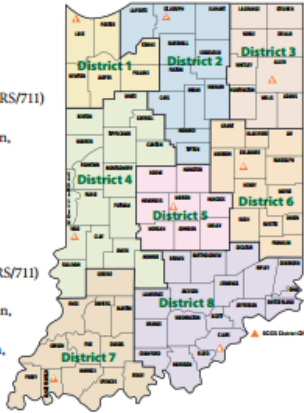
100 W. South Street, Suite 100
South Bend, IN 46601-2435
Phone: 574-232-1412
Toll Free: 1-877-218-3059 (V/VRS/711)
Toll Free Fax: 1-855-455-4266
Counties: Cass, Elkhart, Fulton,
Howard, Kosciusko, La Porte,
Marshall, Miami, Saint Joseph,
Tipton & Wabash

District 3

201 E. Rudisill Blvd., Suite 300
Fort Wayne, IN 46806-1756
Phone: 260-423-2571
Toll Free: 1-877-218-3061 (V/VRS/711)
Toll Free Fax: 1-855-525-9370
Counties: Adams, Allen, DeKalb,
Huntington, LaGrange, Noble,
Steuben, Wells & Whitley

District 4

30 N. 8th Street, P.O. Box 10217
Terre Haute, IN 47801-0217
Phone: 812-232-3603
Toll Free: 1-877-218-3096 (V/VRS/711)
Toll Free Fax: 1-855-525-9374
Counties: Benton, Carroll, Clay,
Clinton, Fountain, Monroe,
Montgomery, Owen, Parke, Putman,
Sullivan, Tippecanoe, Vermillion,
Vigo, Warren & White



District 5

2620 Kessler Blvd. E. Dr., Suite 105
Indianapolis, IN 46220-2890
Phone: 317-205-0101
Toll Free: 1-877-218-3530 (V/VRS/711)
Toll Free Fax: 1-855-525-9373
Counties: Boone, Hamilton, Hancock,
Hendricks, Johnson, Marion, Morgan
& Shelby

District 6

201 E. Charles Street, Suite 130
Muncie, IN 47305-2434
Phone: 765-288-6516
Toll Free: 1-877-218-3531 (V/VRS/711)
Toll Free Fax: 1-855-525-9372
Counties: Blackford, Delaware, Fayette,
Franklin, Grant, Henry, Jay, Madison,
Randolph, Rush, Union & Wayne

District 7

700 E. Walnut Street
Evansville, IN 47713-2561
Phone: 812-423-8449
Toll Free: 1-877-218-3528 (V/VRS/711)
Toll Free Fax: 1-855-525-9375
Counties: Daviess, Dubois, Gibson,
Greene, Knox, Martin, Perry, Pike,
Posey, Spencer, Vanderburgh &
Warrick

District 8

1452 Vaxter Avenue
Clarksville, IN 47129-7721
Phone: 812-283-1040
Toll Free: 1-877-218-3529 (V/VRS/711)
Toll Free Fax: 1-855-525-9376
Counties: Bartholomew, Brown, Clark,
Crawford, Dearborn, Decatur, Floyd,
Harrison, Jackson, Jefferson, Jennings,
Lawrence, Ohio, Orange, Ripley, Scott,
Switzerland & Washington.



www.ddrs.IN.gov
1-800-545-7763

RESOURCES

You may be able to receive services from a number of different resources. Talk to your case manager about some of the resources listed below. They may also know of other resources that you should pursue.

CHOICE

A state-funded program under the Indiana Bureau of Aging and In-Home Services that provides supports to people who are elderly and disabled, including children. In-home services such as respite care, home modifications, personal assistance and other services can be provided. There is a waiting list for services.

Contact: Area Agencies on Aging, 1-800-986-3505

DEPARTMENT OF EDUCATION (DOE) FUNDING

The Department of Education (DOE) offers funding for a variety of "wraparound" services for children enrolled in special education whose education program cannot be fully met by their local school district. These community-based services are individually planned to meet a child's needs, and plans are family-centered, rather than child-centered.

Contact: Local school system.

DEPARTMENT OF HEALTH

The Children's Special Health Care Services covers a variety of medical needs for children who qualify (needs and income requirements).

Contact: 1-800-475-1355

DIVISION OF FAMILY RESOURCES (DFR) FUNDING

The Division of Family Resources (DFR) offers funding for some services. Their CHINS Program (Children in Need of Services) ensures Medicaid eligibility and services for children who are wards of the State. Healthy Families program offers intensive services for at-risk children and their families. The First Steps program assures families with infants and toddlers (birth to age 3) experiencing developmental delays or disabilities have access to early intervention services close to home when they need them.

Contact: Local Division of Family Resources Office

EMPLOYMENT EARNINGS

Individual's employment earnings or savings from that earning may constitute a personal resource that can pay for some of the services. If you are unemployed or want to be employed, discuss the possibility of employment with your case manager or BDDS Service Coordinator. Both BDDS and Vocational Rehabilitation Services (VRS) offer various work-related services.

Contact: Bureau of Developmental Disabilities Services

MEDICAID

Medicaid is a medical insurance program, which funds medical services and equipment to eligible individuals. An individual must meet specific income and resources guidelines, based on the size of the family. Medicaid can also pay for a licensed residential facility, such as a group home.

Some individuals may be eligible to receive services through one of Medicaid's managed care programs, such as Hoosier Healthwise. An individual cannot be on a Medicaid

managed care program and also receive Medicaid waiver services; however, an individual receiving Medicaid waiver services can receive regular Medicaid medical services.

Contact: County Office of Division of Family Resources (DFR) to apply for Medicaid. Contact the Bureau of Developmental Disabilities Services to apply for Medicaid waivers or Medicaid funded residential services.

MEDICAID FOR EMPLOYEES WITH DISABILITIES (M.E.D. WORKS)

Individuals with disabilities who are working can participate in this program and may pay a premium based on the earning to continue Medicaid coverage.

Contact: County Office of Division of Family Resources (DFR)

MEDICAID HOME AND COMMUNITY BASED SERVICES (HCBS) WAIVERS

The Medicaid HCBS Waivers fund supportive services to individuals in their own homes or in community settings. The Medicaid waivers fund services to individuals who are at risk of institutionalization, meet the level of care specific to a waiver, and meet the financial limits established by the particular waiver. (For children under 18 years old, parental income is disregarded.) There are a limited number of slots for each waiver, so eligible individuals cannot receive services until there is a slot available for that individual.

An individual can be on the waiting list for any or all of the waivers, after meeting eligibility requirements; however, may receive services from only one waiver.

Contact: Bureau of Developmental Disabilities Services

MEDICARE

Medicare is the nation's largest health insurance program and funds health care benefits for individuals who meet the eligibility criteria. Individuals must be at least 65 years old, or disabled, or have permanent kidney failure. Medicare has two parts – Part A is hospital insurance, Part B is medical insurance.

Contact: Local Social Security Administration office. Addresses and phone numbers can be obtained by calling 1-800-722-1213 or via the internet at <http://www.ssa.gov/>

SOCIAL SECURITY ADMINISTRATION DISABILITY INSURANCE (SSDI)

Social Security Administration Disability Insurance (SSDI) provides a specified monthly benefit to individuals who meet eligibility requirements. An individual must have paid into the Social Security system for a minimum of 5 years (fewer years for individuals under 25) or be the widow/widower of an individual who has paid into the system. Children can receive SSDI benefits after the death or disability of a parent who paid into

the Social Security system. The amount of the monthly benefit is based on the individual's, spouse's, or parent's past income.

To be eligible for SSDI payments, an individual must meet the criteria of "disability", e.g. have a physical or mental impairment, or a combination of impairments that are long-lasting in nature or expected to last for at least a year, and the condition prevents the individual from working. Individuals who are approved for SSDI will have periodic reviews of their condition of disability, in order to ascertain if the individual continues to be disabled.

Contact: Local Social Security Administration office. Addresses and phone numbers can be obtained by calling 1-800-722-1213 or via the internet at <http://www.ssa.gov/>

SUPPLEMENTAL SECURITY INCOME (SSI)

Supplemental Security Income (SSI) provides a specified monthly benefit to individuals who meet eligibility requirements. SSI can be paid to individuals who are disabled. To be eligible for SSI disability payments, an individual must meet the established eligibility criteria to be "disabled." For instance, the individual must have a physical or mental impairment, or a combination of impairments, that are long-lasting in nature or expected to last for at least a year, and the condition prevents the individual from working. The eligibility also includes an income limit that varies with the size of the family. The amount of the benefit is based on the individual's income and resources. Individuals who are approved for SSI disability will have periodic review of their conditions to ascertain if the individual continues to be disabled.

Contact: Local Social Security Administration office. Addresses and phone numbers can be obtained by calling 1-800-722-1213 or via the internet at <http://www.ssa.gov/>

TRUST FUNDS

There are various types of trust funds, e.g. funds in a trust that has been established for the benefit of an individual. Families should consult a knowledgeable attorney or trust advisor when creating a trust. How a trust is established can determine whether or not trust funds count as a personal resource. Following is a brief description of trusts that may be established for an individual with a disability.

A trust is "available" to an individual with a disability if he or she has the unrestricted right, authority or legal ability to liquidate or dispose of trust property.

A trust is not "available" to the person with a disability if he or she does not have the unrestricted right, authority or legal ability to liquidate or dispose of the trust property.

"Special Needs Trusts" and "Pooled Trusts", if set up to meet specific guidelines under federal law, are not available to the person with a disability, and therefore would not count as a resource for means tested benefits such as SSI, the federal/state Medicaid program, or the state supported living program.

Information on Special Needs Trusts and Pooled Trusts is available from The Arc of Indiana at 1-800-382-9100 or via <http://www.arcind.org/>. This information is provided by The Arc Trust, which is sponsored by The Arc of the United States and The Arc of Indiana.

VOCATIONAL REHABILITATION SERVICES

Vocational Rehabilitation Services (VRS) can provide any goods and services necessary to help an individual become employable. Vocational Rehabilitation Services provides individualized services for those who meet the eligibility requirements and want to work. To be eligible for services, an individual must have a physical or mental impairment, which creates or causes a substantial impediment to employment. The individual must require VRS services to prepare for, secure, retain, or regain employment.

Contact: Local Vocational Rehabilitation Services office. You may call 1-800-545-7763 and ask for extension 1319 to obtain local office numbers.

OTHER RESOURCES

Your family may assist you in meeting some of your needs. You may also have other supports from friends, faith community, clubs, etc. that can help meet some of your needs. There may be other types of funding and/or supports available to you from agencies. Examples are United Cerebral Palsy, the Epilepsy Foundation or any not-for-profit community organization; support from a philanthropic individual/organization; or funds/gifts or willingness to volunteer for unpaid supports/assistance from a relative or friend. Your case manager can help you explore the availability of these funds.

NOTICE OF PRIVACY PRACTICES

Important: This notice describes how medical and other confidential information about you may be used and disclosed and how you can get access to this information. Please review it carefully.

Notice of Privacy Practices:

Compass will provide a Notice of Privacy Practices to all individuals receiving services upon admission to Compass and at least annually thereafter. Copies of the Notice will also be made available to all employees, agents and individuals at the Compass office.

The Notice describes Compass' privacy practices, individuals' legal rights, and how Compass is permitted to:

- a. Use and disclose PHI
- b. How a person can access and copy that information
- c. How a person can request amendment of that information
- d. How a person can request restrictions on Compass' use and disclosure of his/her PHI

Compass employees and agents are required to abide at all times by the practices described in the Notice of Privacy Practices.

Uses and Disclosures of PHI:

Compass may use PHI for the purposes of treatment, payment and health care operations, in most cases without written permission. Examples of use of PHI include:

For Treatment

This includes such things as verbal and written information that we obtain about an individual and use pertaining to his/her developmental disabilities services and treatment provided by Compass and other healthcare personnel.

Compass is not permitted to share information with another Medicaid waiver provider without a written authorization unless the individual has signed a waiver picklist for the provider, or the individual receives services from the provider as indicated by a current Notice of Action (NOA).

For Payment

This includes any activities we must undertake in order to get reimbursed for the services provided to individuals, including such things as organizing PHI and submitting bills to insurance companies, management of billed claims for services rendered, and collection of outstanding accounts.

For Healthcare Operations

This includes quality assurance activities, licensing, and training programs to ensure that our personnel meet our standards of care and follow established policies and procedures, obtaining legal and financial services, conducting business planning, processing grievances and complaints, and creating reports that do not individually identify individuals for data collection purposes.

Compass is permitted to use PHI without written authorization or opportunity to object in certain situations, including:

- As required by state or federal law.
- To a government authority if necessary to report abuse or neglect of a child.
- To a person legally authorized to investigate a report that an individual has been abused or has been denied his/her rights.
- For public health and health oversight activities Compass may disclose confidential information about an individual when Compass is required to collect information about disease or injury, for public health investigations, or to report vital statistics.
- To another healthcare provider or entity for the payment activities of the provider or entity that receives the information (such as an individual's healthcare services providers or insurance company).
- To another healthcare provider for the healthcare operations activities of the covered entity that receives the information as long as the covered entity receiving the information has or has had a relationship with an individual and the PHI pertains to the relationship.
- For healthcare fraud abuse detection or for activities related to compliance with the law.
- To a family member, other relative, or close personal friend or other person involved in an individual's care if Compass obtains verbal agreement to do so or if Compass gives the individual an opportunity to object to such a disclosure and the individual does not raise an objection. We may also disclose health information to an individual's family, relatives, or friends if Compass infers from the circumstances that the individual would not object.
- To avert a serious threat to health or safety Compass may disclose information to medical, law enforcement personnel or other persons who can reasonably prevent or lessen the threat of harm, if the individual or others are in danger and the information is necessary to prevent physical harm.
- To a public health authority in certain situations (such as reporting a birth, death or disease as required by law, as part of a public health investigation, to report child or adult abuse or neglect or domestic violence, to report adverse

events such as product defects, or to notify a person about exposure to a possible communicable disease as required by law).

- For health oversight activities including audits or government investigations, inspections, disciplinary proceedings, and other administrative or judicial actions undertaken by the government (or their contractors) by law to oversee the health care system.
- For judicial and administrative proceedings as required by a court or administrative order, or in some cases in response to a subpoena or other legal process.
- For law enforcement activities in limited situations, such as when there is a warrant for the request, or when the information is needed to locate a suspect or stop a crime.
- For military, national defense and security and other special government functions.
- To avert a serious threat to the health and safety of a person or the public at large.
- For workers' compensation purposes, and in compliance with workers' compensation laws.
- To coroners, medical examiners, and funeral directors for identifying a deceased person, determining cause of death, or carrying on their duties as authorized by law.
- If you are an organ donor, Compass may release health information to organizations that handle organ procurement or organ, eye or tissue transplantation or to an organ donation bank, as necessary to facilitate organ donation and transplantation.
- For research projects, but this will be subject to strict oversight and approvals and health information will be released only when there is a minimal risk to an individual's privacy and adequate safeguards are in place in accordance with the law.
- Compass may use or disclose health information about an individual in a way that does not personally identify or reveal who the individual is.

Any other use or disclosure of PHI, other than those listed above will only be made with an individual's written authorization. The authorization must specifically identify the information Compass seeks to use or disclose, as well as when and how Compass seeks to

use or disclose it. **An individual may revoke authorization at any time, in writing, except to the extent that Compass has already used or disclosed medical information based upon that authorization.**

Your Rights:

An individual has a number of rights with respect to the protection of his/her PHI, including:

The right to access, copy or inspect his/her PHI.

This means an individual may come to the Compass office and inspect and copy most of the information about the individual that Compass maintains. Compass will normally provide an individual access to this information within 30 days of the request.

The right to request an amendment of his/her PHI.

An individual has the right to ask Compass to amend written information that Compass maintains. If errors are found, Compass will generally amend an individual's information within 60 days of the request and will notify the individual when the information is amended. Compass is permitted by law to deny an individual's request to amend his/her information, but only in certain circumstances. For example, if Compass believes the information is correct and no errors exist, a request for amendment will be denied.

The right to request an accounting of Compass' disclosure of an individual's PHI.

An individual may request an accounting of certain disclosures of information that Compass has made in the last 6 years prior to the date of the request. Compass is not required to give an accounting of information used or disclosed for purposes of treatment, payment or health care operations. Compass is also not required to give an accounting of uses of PHI for which an individual has given written authorization.

The right to request that Compass restrict the uses and disclosures of an individual's PHI.

An individual has the right to request that Compass restricts how information is used and disclosed for treatment, payment or health care operations, or to restrict the information that is provided to family, friends and other people involved in an individual's health care. Requests must be made in writing to the privacy officer and must explain: what information an individual wants to limit and to whom the limits apply. However, if a restriction is requested and the information restricted is needed to provide an individual with emergency treatment, then Compass may use the PHI or disclose the PHI to a health care provider to provide an individual with emergency treatment. Compass is not required to agree to any restrictions you request, but any restrictions agreed to by Compass are binding on Compass.

Internet, Electronic Mail, and the Right to Obtain Copy of Paper Notice on Request.

Compass will prominently post a copy of the Notice on its web site and make the Notice available electronically through the web site. If an individual allows, Compass will forward the Notice by electronic mail instead of on paper and individuals may always request a paper copy of the Notice.

An individual's Legal Rights and Complaints.

Individuals have the right to complain to Compass, or to the Secretary of the United States Department of Health and Human Services if they believe their privacy rights have been violated. Individuals will not be retaliated against in any way for filing a complaint with Compass or to the government.

Revisions to the Notice:

Compass reserves the right to change the terms of this Notice at any time, and the changes will be effective immediately and will apply to all protected health information that we maintain. Any material changes to the Notice will be promptly posted in Compass facilities and posted to the website.

Jennifer Sims, HR Director/ Privacy Officer, 317-423-9350, Jennifer.Sims@CompassRC.com