



708 E. MICHIGAN ST., INDIANAPOLIS, IN 46202 P: 317.252.5558 F: 317.252.5559

# **WELCOME TO MEALS ON WHEELS!**

Enclosed you will find all the information you need to become a Meals on Wheels client.

Please review the information; if you have any questions feel free to call the office at **317-252-5558**.

Our office hours are Monday through Thursday from **9 am – 4 pm** and Friday from **9 am – 3 pm**.

We look forward to serving you!

Warm regards,
Margaret Lukes
Client Services Coordinator







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# **CLIENT APPLICATION**

Please complete all pages of this form and return to the Meals on Wheels office in the enclosed envelope with a check or money order for \$70 to cover application costs and the first two weeks on the program.

### **CLIENT INFORMATION**

NAME				
(Last)	(First)		(Middle	Initial)
GENDER				
RACE (PLEASE CIRCLE)				
American Indian or Alaska Native White or Caucasion Black or African American Asian		Hispanic or Latino Native Hawaiian or other Pacific Islander Other Prefer not to answer		
ADDRESS				
(Number & Street)		(Apt. /Lot Number)		
APT. COMPLEX OR SUBDIVISION NAM	ИЕ (IF APPLIC	ABLE)		
CITY		S	T	ZIP
DATE OF BIRTH		PHONE		
PETS? (Please circle) YES	NO			
If yes, please describe				

### **MEDICAL INFORMATION**

Please circle all conditions that apply:							
Alzheimer's Amputee Arthritis Asthma Autoimmune diseases Bed-ridden Blindness Cancer Type:	Cataracts Deafness Dementia Depression Diabetes Dialysis Emphysema Hard of hearing Heart disease	Hepatitis High blood pressure HIV Lung disease Multiple Sclerosis Muscular Dystrophy Paralysis Parkinson's Pre-Diabetes	Seizures Sleep apnea Stroke Substance abuse Vision problem				
Other:							
Please circle any aids currently used:							
Cane Glass Oxygen	ses/Contacts Hearing Aid	Wheelchair Walker	Pacemaker TTY Phone				
Other:							
ADDITIONAL INFORMATION							
Do you use a home health service? (Please Circle) YES NO							
If yes, what is the name	e of the agency used?						
PHYSICIAN INFORMATION							
NAME(Las	it) (F	irst)	(Middle Initial)				
ADDRESS	, ,	,					
CITY		STATE	ZIP				
PHONE	EXT	FAX NUMBER					
PATIENT# (IF APPLICABLE)CLINIC NAME (IF APPLICABLE)							
PRACTICING HOSPITAL							

### **EMERGENCY CONTACT**

NA	ME			
Α[	DDRESS	(Last)	(First)	(Middle Initial)
CIT	Υ		STATE	ZIP
НС	)ME PHONE	= ( )	WORK PHONE (	)
CE	ELL PHONE (	)	EMAIL ADDRESS _	
DC	DES THIS PER	RSON HAVE A KEY TO	) THE CLIENT'S HOME OR APAR	TMENT? (PLEASE CIRCLE) Y or N
ST	ATEMEN	T OF UNDERSTAI	NDING	
	accordant services. I unauthor I understa the door my pet, n I understa meal serv	nce with strict HIPAA I also understand th ized access to conf and that, for the saf my volunteer uses t ny meal service ma	Wheels will release my diet order regulations, to healthcare factor at Meals on Wheels will not implicated information.  Sety of our volunteers, all pets to deliver meals between 11A by be discontinued without further Meals on Wheels and I am remy account is not kept current meal service.	cilities in order to provide mea properly disclose or allow MUST be confined away from M and 2PM. If I do not restrain ner notice.
PER	rson com	IPLETING APPLICATIO	on (signature)	
DA	TE	RELATIONSHI	P TO CLIENT (IF OTHER THAN	CLIENT)
BILI	LING ADDR	ESS (IF OTHER THAN	EMERGENCY CONTACT OR SEI	LF)
NA	ME	(Lorot)	(Fireh)	/A Ai al al a la iti al \
AD	DRESS	(Last)	(First)	(Middle Initial)
CIT	Y		STATE_	ZIP

### FREQUENTLY ASKED QUESTIONS

**What will I receive?** Two meals – a hot lunch and a deli dinner – each weekday, along with a friendly visit from a Meals on Wheels volunteer.

**What are other benefits?** Meals on Wheels helps people maintain their independence and remain in the comfort of their own homes.

**Who is eligible?** EVERYONE. There is no age, income or disability requirement. Many clients depend upon the service long-term. Others need the service temporarily as they recover from a hospital stay or illness.

**How do I sign up?** Just call 317-252-5558. Your service will start in 2-3 business days after receiving your physician's diet order. There is no waiting list.

What about special diets? Meals on Wheels can accommodate a variety of special diets, such as low-sodium or sugar-free. In fact, about 70% of clients are on medically-tailored diets. Meals are prepared according to your doctor's written dietary prescription in local health care facilities under the supervision of registered dieticians.

DO I NEED A DIETARY PRESCRIPTION? Yes. Your physician must provide a diet prescription listing any dietary restrictions, even for a regular diet. We must have this on file before your service can begin.

What is the cost? \$6.50 per person a day. A one-time application fee of \$5 is due when you return your completed application. Payment of \$65 for your first two weeks of service is also due at that time, for a total of \$70. Two weeks is the minimum length of service we offer. Financial assistance is available to those who qualify. Call 317-252-5558 for more information.

What do meals include? The two meals we deliver provide two-thirds of your daily nutritional needs. A typical hot meal would include a meat entrée, potato, vegetable, salad, and milk. A cold meal would likely include a sandwich, salad and fruit or juice. (Both meals are placed in disposable containers that cannot be heated in a microwave.)

**When are meals delivered?** Between 11 AM and 2 PM. We cannot guarantee delivery times, but please be assured that we are trying to get your meals to you as quickly as possible.

What if I need to take medication with food? To avoid medical emergencies, please do not wait until your meals arrive if you need to take medication on a timely basis. Eat a light snack and take your medication on schedule. Consult your physician about what snacks are appropriate for you.

What if I will not be home at delivery time? You must leave a cooler outside your door with a cold ice pack inside to receive your meals. If there is no cooler with ice pack available for our volunteers to leave your meals, the meals will not be left and you will be billed for those meals. Your emergency contact will also be notified that you did not answer the door.

What about weekends? For an additional cost Meals on Wheels offers a frozen food program that you may use for weekend or emergency meals. Four meals with varied ingredients are packaged together and delivered directly to your door. Meals can be heated using a microwave or traditional oven. To order, please call 317-252-5558.

How do I pay for meals? Please mail your personal check (payable to Meals on Wheels), money order or electronic benefit transfer card authorization (for food stamp recipients) to Meals on Wheels, OR contact the office for information on how to pay by credit/debit card.

When is payment due? Meals on Wheels sends a bill after first month of meals have been delivered. Payment is due on the 10<sup>th</sup> of each month. If we do not receive your payment by the end of the month, we will send a letter of inquiry. If we do not receive a response, your meal delivery will be canceled, although that is a situation we would hope to avoid.

**What if I have a complaint?** If you are dissatisfied with your meals, call us at 317-252-5558 that same day. We will make every effort to resolve the problem.

How do I cancel meal delivery? Please call us at 317-252-5558 between 9 AM and 3 PM. You must give 24 hours notice to avoid having to pay for that day's meals. Please do not ask the volunteer to cancel meals. Meals will not be automatically canceled after your first two weeks; you must call to cancel.

When was Meals on Wheels started? Meals on Wheels has been providing medically-tailored, home-delivered meals and personal contact for senior and disabled homebound people for over 46 years. Meals on Wheels has served more than seven million meals in the Indianapolis area.

**How is Meals on Wheels funded?** Meals on Wheels receives monetary support from local corporations, foundations, individuals and United Way of Central Indiana.

**What can I do to help?** Be courteous to the volunteers who deliver your meals. Remember, they are donating their time, using their cars and paying for their own gasoline to bring meals to your door.



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# SAVE WHEN BUYING ENSURE THROUGH US



Meals on Wheels of Central Indiana offers cases of **Ensure** and **Glucerna Shake** to our clients at a reduced rate.

Cases contain 24 cans in four flavor options (Butter Pecan, Chocolate, Strawberry, Vanilla).

### **ENSURE ORIGINAL 8 OZ. CAN**

(BUTTER PECAN, CHOCOLATE, STRAWBERRY, VANILLA)

**\$21/CASE** 

## **ENSURE PLUS 8 OZ. CAN**

(BUTTER PECAN, CHOCOLATE, STRAWBERRY, VANILLA)

**\$24/CASE** 

## **GLUCERNA SHAKE 8 OZ. CAN**

(BUTTER PECAN, CHOCOLATE, STRAWBERRY, VANILLA)

**\$36/CASE** 







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# MEALS ON WHEELS' 2021 HOLIDAYS

Friday, January 1 New Year's Day

Monday, January 18 Martin Luther King, Jr. Day

Monday, May 31 Memorial Day

Monday, July 5 Independence Day

(observed)

Monday, September 6 Labor Day

**Thursday, November 25** Thanksgiving Day

Friday, December 24 Christmas Day

(observed)