

Thank you for your referral. A Certified Work Incentive Counselor will contact you within 2 business days.



**CENTER** *for*  
**ACCESSIBLE LIVING**

## WIPA Program Services Referral Form

### *Agency providing referral*

Date: \_\_\_\_\_ Agency Name: \_\_\_\_\_

Case manager/Counselor Name: \_\_\_\_\_

Case manager/Counselor Phone number: \_\_\_\_\_ Email: \_\_\_\_\_

### *Beneficiary Information*

Beneficiary Name: \_\_\_\_\_

Address \_\_\_\_\_ City \_\_\_\_\_ Zip code \_\_\_\_\_

Phone \_\_\_\_\_ Alternate Phone \_\_\_\_\_ County \_\_\_\_\_

Email address: \_\_\_\_\_ Best time to contact: \_\_\_\_\_

List any accommodations needed for Benefits Counseling: \_\_\_\_\_

Social Security #: \_\_\_\_\_ Age now: \_\_\_\_\_ Date of Birth: \_\_\_\_\_

Gender: Male Female Pronoun used: \_\_\_\_\_

Primary Disability as defined by Beneficiary: \_\_\_\_\_

Type of Social Security Cash Benefit: SSI SSDI Concurrent CDB Other

Is the beneficiary a Veteran: Yes No Unknown

Work Status: Considering Employment Looking for Employment Working or Job Offer

Does Beneficiary have Rep Payee or Guardian: If so, name and phone \_\_\_\_\_

Benefit Questions or Concerns: \_\_\_\_\_

Fax completed Referral to: **1-502-669-8928** Or email to: **wipa@calky.org**

Or mail to:  
**Center for Accessible Living,**  
**Attn: WIPA**  
**501 S. 2nd St., Suite 200**  
**Louisville, KY 40202**

***DON'T FORGET! All Documents  
Containing PII must be encrypted prior  
to emailing.***

***DO NOT EMAIL THE REFERRAL FORM  
WITHOUT ENCRYPTION!***

# WORK INCENTIVE PLANNING AND ASSISTANCE PROGRAM (WIPA)

## Who can get Center for Accessible WIPA services in Kentucky?

- Between 14 years old and full retirement age
- Beneficiaries who have a disability and currently receiving SSI and/or SSDI (or another Title II cash benefit). Please note, we cannot and do **not** help with applying for disability benefits.
- Working, or interested in returning to work, or increasing employment
- Living in one of these counties:

Ballard, Breckinridge, Bullitt, Butler, Caldwell, Calloway, Carlisle, Christian, Crittenden, Daviess, Edmonson, Fulton, Graves, Grayson, Hancock, Hardin, Henderson, Hickman, Hopkins, Jefferson, Livingston, Logan, Lyon, Marshall, McCracken, McLean, Meade, Muhlenberg, Ohio, Simpson, Todd, Trigg, Union, and Webster

## Should I fill out a Referral Form or Have the Person Call Directly?

- **Determine if you need to refer the person, or if they need to call WIPA directly.**
  - If you refer the person, WIPA gets a release of information from them, so we can share the results of the benefits counseling and analysis with you. This allows you to see the same information we provide the beneficiary and allows us to include you as needed. If you are providing any level of employment services or case management for the person, a referral is recommended.
  - If the person calls WIPA directly we will only provide the results of the benefits counseling and analysis to the person, or others at their request. For general information, have the person call the Ticket to Work Help Line at 1-866-968-7842.

## How do I refer to Center for Accessible Living WIPA?

Complete a referral form and fax to **(502) 669-8928** or email to **wipa@calky.org**. *Be sure to encrypt any email containing personally identifiable information.*

**For more information about WIPA,  
call the Center for Accessible Living Toll-free at  
and leave a voicemail:**

**1-844-689-6620**

**A CWIC will call you within 48 hours.**

or email for more information to: **wipa@calky.org**



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