

## How to Complete the DDD Goods and Services Request Form

Prior to submitting a Goods and Services Request Form, please review the Goods and Services section of the Supports Program and Community Care Program Policies and Procedures Manuals. All Goods and Services requests are reviewed based on the information in the manuals. For information about entering Goods and Services into the Individualized Service Plan (ISP), please reference the Support Coordination Best Practice Guide.

Do not use a Goods and Services Request Form for the following items, each of which has its own procedure code(s) and request process:

- ✗ Assistive Technology (evaluation or purchase)
- ✗ Environmental Modification
- ✗ Transportation
- ✗ Vehicle Modification
  
- ✓ Fill in all applicable text fields on the Goods and Services Request Form. Missing or inaccurate information will cause a delay.
  
- ✓ Goods and Services requests must be submitted for review, and service prior authorization must be obtained before goods are ordered or purchased or services begin. Goods **(including repairs)** ordered or purchased or services started **(including classes)** without a service prior authorization are not reimbursable through DDD.
  
- ✓ The need for the requested Good or Service must be aligned with the NJCAT and specifically referenced in the PCPT.
  - Supporting documents such as invoice/statement/proposed cost should be uploaded with the Goods and Services Request Form. In the “notes” section of the uploaded documents reference the Outcome and Service Number to which the documents apply.
  - Include in the Service Description Box, an overall summary of the Goods and Services being requested, vendor name, location and contact information.
  
- ✓ **Medical Needs:** Goods and Services related to medical needs or Durable Medical Equipment (DME) must be submitted through the individual’s medical insurance and/or Medicaid prior to making a request through DDD. If the item or service is denied by insurance the appeals process should be followed and only then a request submitted to DDD.
  - Supporting documents, including current medical prescription, denial letters and the official outcome of the appeal should be uploaded with the Goods and Services Request Form.

- Typical items considered DME are: wheelchairs, travel wheelchairs, positioning equipment, feeding/eating equipment and patient lifts (Hoyer). If you have questions about specific items please contact: [DDD.ServiceApprovalHelpdesk@dhs.state.nj.us](mailto:DDD.ServiceApprovalHelpdesk@dhs.state.nj.us)

- ✓ **Classes:** Defined as two or more people attending class/instruction at the same time, going over the same subject matter at the same location with the same instructor. Classes must be open and available to the general public and/or must be delivered by a vendor that primarily serves the general public.

The following documents must be uploaded with the Goods and Services Request Form:

- Class description
- Class curriculum
- Invoice **with start and end date**

- ✓ **College Classes:** A FAFSA (Free Application for Federal Student Aid) must be completed if the individual is enrolling part-time (6 credits) or full-time (12 credits) in a matriculated program through a college/university. Results of the FAFSA application must be submitted at the time of the request. For FAFSA information and application deadlines, please visit <https://studentaid.ed.gov/sa/fafsa>

The following documents must be uploaded with the Goods and Services Request Form:

- Course description
- Course curriculum
- Student financial aid report (FAFSA results)
- Invoice **with start and end date**

- ✓ **Gym Memberships:** Annual and monthly membership fees are for the individual only and should not cover family or group memberships.
- ✓ **Activity Fees** are capped at \$1000.00 per year and may be requested for use for the individual and their staff person. Activities cannot be purely for the purpose of recreation or entertainment and must be specifically outlined in the PCPT. The Goods and Services Request Form must include the specific activity or a list of potential activities and projected costs. Please note that reimbursement payments for activity fees are only issued to the individual's support agency or self-directed employee.