NEW JERSEY HUMAN SERVICES | Division of Developmental Disabilities

Division of Developmental Disabilities Overview

Disability Mortality Abuse Prevention Advisory Council Meeting
September 18, 2026

DDD Eligibility

- With limited exceptions, DDD services are available to persons who are age 21 or older and meet all other eligibility requirements.
- Eligibility is based on meeting both Medicaid's financial requirements and DDD's functional eligibility criteria.
- The limited exceptions for persons aged 18-20 are:
  - Graduation with immediate enrollment at an institute of higher education or trade school not funded by the DDD; and/or
  - Graduation to support continuation of established competitive integrated employment.
- To be evaluated for eligibility, a person must Apply for Services.

Establishing Functional Eligibility

New Jersey Comprehensive Assessment Tool (NJCAT)

- Initial NJCAT
  - A person completes the NJCAT when going through the intake process. It establishes functional eligibility for services, the tier a person is assigned, and whether or not they are assigned an acuity.
- NJCAT Reassessment
  - An NJCAT reassessment can occur at any time at the request of the individual/guardian.
  - A tier can go down, stay the same, or increase.
  - An acuity designation can be added, stay the same, or be removed.

DDD Waiver Programs

DDD funds services and supports for over 30,000 people living in the community. Individuals are enrolled in one of two Federal Waiver Programs:

- Supports Program (SP): provides an individual budget based on the NJCAT. Services offered include Employment/Day Supports and Family Supports.
- Community Care Program (CCP): provides an individual budget based on the NJCAT. Services offered include Employment/Day Supports, Family Supports and *Individual Supports,* which fund residential services delivered in or out of home.
  - Enrollment in the CCP occurs either through being reached on the CCP Priority Waiting List or if the person is determined to be an emergency **AND** meets the program's Level of Care criteria.

Support Coordination Agency Selection

- Care Management for individuals enrolled in DDD waiver programs is provided by DDD/Medicaid-approved Support Coordination Agencies (SCAs).
- Individuals may choose their preferred SCA or request to be auto-assigned.
  - A current list of SCAs, including counties served, number of participants, and staffing is available at https://irecord.dhs.state.nj.us/ProviderSearch.
- The selected SCA assigns one of its Support Coordinators (SCs) to work with each individual.
- Individuals may change their SCA as often as monthly.

Support Coordination Responsibilities

- Support Coordinators are responsible for the following (not an exhaustive list):
  - Developing a thorough understanding of DDD-funded services and ensuring they are utilized in accordance with program manuals;
  - Interviewing the consumer and ensuring they remain at the center of the planning process, including identifying their desired outcomes, services, supports.
  - Scheduling and facilitating planning team meetings in collaboration with the consumer;
  - Writing the Person-Centered Planning Tool (PCPT) and the Individual Support Plan (ISP);

Support Coordination Responsibilities (continued)

- Maintaining a confidential case record for each consumer, including but not limited to the NJCAT, completed Support Coordinator Monitoring Tools, PCPTs, ISPs, notes and reports, annual satisfaction surveys, annual physical and dental examinations for individuals in licensed residential settings, and all required documents uploaded to the iRecord;
- Ensuring incidents are reported promptly in accordance with policy, and that all required follow-up actions are identified and completed;
- Conducting monthly contacts, quarterly face-to-face visits, and an annual in-home face-to-face visit that includes an ISP review documented using the Support Coordinator Monitoring Tool.

Individualized Service Plan (ISP)

- It is required that each person receiving DDD services have an ISP.
- The ISP is facilitated by the assigned Support Coordinator in concert with the person/guardian and the person's planning team.
- The planning team includes, but is not limited to; The individual; their Support Coordinator; the individual's parent or guardian as applicable; and others the individual/guardian wish to include. If served residentially, the agency providing that service must also be included.
- The ISP is developed based on assessed needs identified through the NJCAT, PCPT, and additional documents as needed. It identifies the person's outcomes and describes the services needed to assist them in attaining the outcomes identified in the plan.
- An approved ISP generates required prior authorizations for services.

Provider-Managed vs. Self-Directed Services

- Individuals can use traditional provider-managed services, self-directed services, or a combination thereof.
- Provider-Managed Services
  - The agency oversees all aspects of service delivery, including hiring and terminating staff, arranging coverage for call-outs, reporting incidents, and related operational responsibilities.
  - Examples include licensed residential settings (Ex. Group Homes), certified day habilitation programs (ex. Day Programs), respite, etc.

Provider-Managed vs. Self-Directed Services

- Self-Directed Services
  - **Self-Direction:** When a person (or their guardian) elects to use Self-Directed Employee and/or Self-Directed Vendor Services paid through one of DDD's Fiscal Intermediaries (FIs).
  - **Self-Directed Employee Services:** When a person (or their guardian) elects to manage service provision through the utilization of one or more Self-Directed Employees (SDEs) paid through one of DDD's FIs. The person/family are responsible for hiring and firing staff, covering call outs, etc.
  - **Self-Directed Vendor Services:** When a person (or their guardian) elects to use one or more of the following services paid through one DDD's FIs: Assistive Technology; Environmental Modifications, Goods and Services, Person Emergency Response System (PERS), Supports Brokerage, and/or Vehicle Modifications.

Services Offered

- DDD offers 23 services between both its waiver programs.
- Each service has a specific definition that must be adhered to.
- Documentation of the delivery of any service must be maintained to substantiate claims.

List of DDD Services

- Assistive Technology
- Behavioral Supports
- Career Planning
- Cognitive Rehabilitation (SP only)
- Community Based Supports (SP only)
- Community Inclusion Services
- Community Transition Services (CCP only)
- Day Habilitation
- Environmental Modifications
- Goods & Services
- Individual Supports (CCP only)
- Interpreter Services
- Natural Supports Training
- Occupational Therapy
- Personal Emergency Response System (PERS)
- Physical Therapy
- Prevocational Training
- Respite
- Speech, Language, and Hearing Therapy
- Supported Employment
- Supports Brokerage
- Transportation
- Vehicle Modifications

Enrollment as a DDD Provider

- To apply to become a DDD/Medicaid provider of home and community-based services (HCBS) an agency must:
  - Review the Supports Program and Community Care Program Policy Manuals to understand the services.
  - Determine which services it will provide
    - Certain services like Day Habilitation, Support Coordination, Supports Brokerage, and Licensed Residential have additional requirements such as attestations, conflict free policy requirements, etc.
    - An agency-specific policy and procedure manual is required.
  - Apply for a National Provider Identifier (NPI).
  - Have agency head pass background, central registry, and Child Abuse Registry Information (CARI) check, as well as drug testing if providing direct services to beneficiaries.
  - Submit a completed Combined Application to Gainwell for processing.

Thank You