



DIVISION OF DEVELOPMENTAL DISABILITIES AND AGED, BLIND AND DISABLED FORM

The State of New Jersey will begin to transition Medicaid enrollees with developmental disabilities and certain mental health problems into the Medicaid managed care program. LIBERTY Dental Plan is working to determine if the health care needs of these populations can be met by our current provider network. We ask you to please respond to the following questions.

Please include any experience with the aged, blind and/or deaf disabled patients. Qualifications can include years of providing care for these patients even if no formal training was undertaken in the past.

Provider Name:					Office ID#:	
Address:					Office Phone:	
City:		State:		Zip:		Office Fax:
1.	Do you feel qualified to handle patients (either children or adults) with developmental disabilities?					
2.	Do you feel qualified to handle patients (either children or adults) with developmental disabilities?					
3.	Do you feel qualified to handle patients with HIV and/or AIDS?					
4.	Do you feel qualified to handle the geriatric population(aged)?					

If "Yes" to the above questions, **please briefly outline** your qualifications including specialized training/certifications and experience.

Signature

Date