Minor Home Modification Bid Form



This form allows providers to submit a fully itemized bid for Minor Home Modifications, detailing each cost component for each modification for our review. All fields on this form are required to be completed. Submissions missing the required breakdown may face delays or rejection in the authorization process.

Please include the following requirements with your request or bid:

- Before and after diagrams of proposed work.
- Itemized materials list attached with the bid.
- Bidder signature with the date of submission.

In addition, your request or bid must adhere to the following:

- It may not create a new structure or add square footage to the home.
- If the bid is submitted on another form, that form must contain the same elements in this form.

Member Name:		DOB:	Medicaid ID:	:		
Address:			Phone Number:			
Provider Agency Name: Address:			NPI/TIN:			
			Phone/Fax Number:			
Email Address:		Contractor Name:				
Valid to Date (if applicable):		Date Submitted:	Length of Warra	rranty: Bid #:		
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Modification	Itemized Description/Specifications MUST Include a detailed list of Materials/Items, Installation/Labor and other pertinent information.					Cost
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Before pictures/diagrams of proposed work are included with this bid. Total Bid Amount:					ıt:	
		ffirms that this home mod exas Accessibility Stand		-		
Signatures:						
Contractor Signature:				te:		
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