PUBLIC PARTNERSHIPS VENDOR FISCAL/EMPLOYER AGENT MODEL INFORMATION SESSION

May 17, 2023



Financial Management Services (FMS) / Fiscal Intermediary

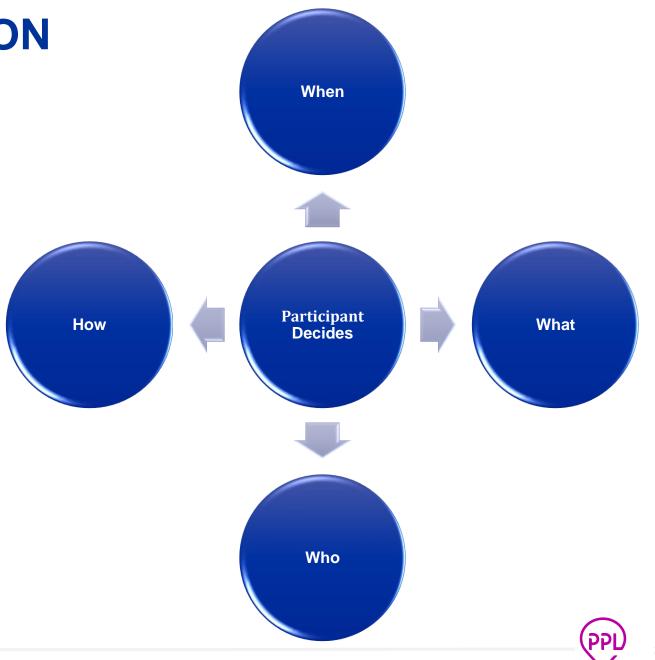
Financial Management Services provides assistance with distributing payroll, paying invoices, deducting required state and federal taxes and insurance, and monitoring budget amounts.



Teresa McMahon Self-directing with PPL since 2018.

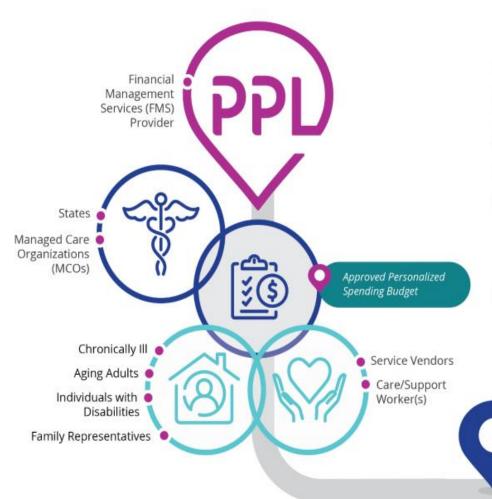
DEFINING SELF DIRECTION

- □ Those who provide support and services are accountable to the individual receiving care
- □ The freedom for one to plan his/her own care
- Flexibility based on personal preferences.
- □ Participant decides When, What type of care, Who provides the Care how they receive care.



DDD ENROLLMENT PROCESS





PPL's DDD Specialists' Role:

We assist Support Coordinators and their assigned consumers throughout the enrollment process, which includes:

- » Preparing them for the role of an employer
- » Enrolling their employees and performing background checks
- » Provide outreach and education on self-directed services and DDD service offerings within the community, to advocacy organizations, and stakeholders groups to increase program awareness
- » Ongoing and timely communication regarding enrollment related activities

** Adding a new SDE? You can reach out to your assigned PPL DDD Specialist or call Customer Service at 1-844-842-5891.

STEP 1STEP 2ReceiveCompleteReferralWelcomeCall

STEP 3STEP 4Complete
Enrollment
WalkthroughProcess
Enrollment
including
background
checks

STEP 5

Provide update to the Support Coordinator and Conduct EOR Orientation

Service Levels

- New Referrals: Newly referred individuals will be contacted for a Welcome Call by a DDD Specialist within 3 business days
- Inquiries: Inbound inquiries from individuals in the program and their SDEs will be responded to within 72 business hours

• How to expedite:

- There may be instances when an individual requires a quicker response or expedited enrollment due to care crisis caused by loss of an SDE, change in needs, or loss of payment.
- If the above situations apply, an email can be sent to our email bin, which is monitored during all business hours: <u>NJDDD-IASpecialists@pcgus.com</u>
- Expedited requests will be responded to within 24 business hours
- Expedited requests should include EXPEDITE in the subject line

OPTIONS & REQUIREMENTS FOR SELF-DIRECTION PROGRAMS



Budget Authority Option

Budget authority gives a participant the choice and control over what goods and services to purchase within his or her spending plan or budget.

Most programs with the budget authority option, allow participants to purchase goods or services that promote their independence or reduce reliance on human assistance.

Purchases must relate back to an assessed need documented in the person-centered care plan.

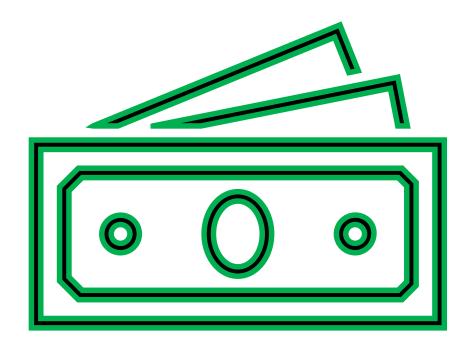


Individual Budget = Authorizations

Authorizations are the amount of Medicaid funds under the control of the participant to be used to hire an attendant and/or purchase goods & services to reduce human reliance or promote independence.

Must be consistent and equitably determined across all participants.

Typically, includes the cost of services that are selfdirected.



SELF-DIRECTED EMPLOYEE TRAINING REQUIREMENTS



MANDATED TRAININGS FOR SELF-DIRECTED EMPLOYEES

- SDE Mandated Trainings (Regardless of relationship to the individual): Within six (6) months of hire:
 - DDD Stephen Komninos' Law
 - DDD Life Threatening Emergencies (Danielle's Law)
 - DDD Shifting Expectations: Changes in Perception, Life Experience, and Services
 - Prevention of Abuse, Neglect, and Exploitation: Modules 1, 3, 4, 5, and 7

Within six (6) months of hire and every two years thereafter:

- CPR Certification (recertification every two years)
- Standard First Aid Certification (recertification every two years)

If applicable, prior to administering - Introduction to Medication Support, Lessons 1-6

If applicable, within 6 months of hire - Specialized Training

- Behavior Supports Plan Overview



TRAINING CERTIFICATION - CPR/FIRST AID RECERTIFICATION REQUIREMENT

- Effective immediately, all SDEs who have been employed six-months (180 days) or longer must complete all mandated trainings by <u>June 1, 2023</u>. This includes CPR/First Aid Recertification, which must occur once every two years.
- Current SDEs (with a hire date on or prior to December 1, 2022) have until June 1, 2023 to complete all required trainings <u>and</u> submit the signed Training Certification Form or the CPR/First Aid Recertification Form.
- New SDEs (with a hire date after December 1, 2022) will have six months (180 days) from their date of hire to complete all required trainings <u>and</u> submit the signed Training Certification Form and CPR/First Aid Recertification Form once every two years thereafter.
- If the mandatory trainings and the Training Certification Form or CPR/First Aid Recertification Form are not completed and submitted to PPL via njddd@pcgus.com or via fax to 1-844-561-5978 within the required timeframe, the SDE's ability to provide services and receive payments will be suspended.
- FAQs and Training Payment information can be found on PPLs <u>NJ DDD SDE Training</u> <u>Payments page</u>.

Public partnerships

Employee Name						
First:	La	st:		1	PPL ID:	
Individual Name						
First:	La	st:			PPL ID:	
Employer Name (this n	nust be comple	ted)				
First:	La	st:				
Required Training						
The following six trainings reimbursement payment of be made per SDE, per life	will be issued to a					
Training					Date o	of Completion
DDD Life Threatening Em	nergencies (Danie	elle's Law)				
DDD Stephen Komninos	Law Training					
DDD Shifting Expectation	s: Changes in P	erception, Li	fe Experience an	nd Services		
DDD Prevention of Abuse	, Neglect and Ex	ploitation - I	Module 1, 3, 4, 5	and 7		
Cardiopulmonary Resusc	itation (CPR)					
First Aid (FA)						
Service Plan Specific 1	Fraining					
The following four training they will deliver.	gs must be comp	eted by NJ [DDD SDEs if med	dication admini	istration a	applies to the services
Training				Date o	of Completion	
Medication Basics						
Working with Medications	i					
Administration of Medicat	ions and Treatme	ent				
Follow Up, Communication	on and Document	ation of Med	lications			
Agree and Sign						
I certify that I have compl I have NOT been rein I have been reimburs Employee Signature:	mbursed previous sed previously an	sly from any	agency and requ	ire payment.	D	ate:
I certify that this employee This employee has N This employee has b	OT been reimbu	rsed previou	Isly from any age	ncy and requir		
Employer or Authoria	zed Representat	ive Signatu	re:		D	ate:
L						

Once completed, submit the form via email to njddd@pcgus.com or fax to 1-844-561-5978

www.publicpartnerships.com

SPL

NEW JERSEY | DDD



CPR/FIRST AID RECERTIFICATION FORM

Employee Name					
First	Last	PPL ID:			
Individual Name					
First	Last	PPL ID:			
Employer Name (this must be completed)					
First	Last	PPL ID:			

Required Recertification Training

The below recertification trainings must be completed by all NJ DDD Self-Directed Employees (SDEs) once every two years.

A reimbursement payment will be made to a SDE once both courses have been completed and certified.

Training	Date of Completion
Cardiopulmonary Resuscitation (CPR)	
First Aid (FA)	

Agree and Sign

I certify that I have completed the above recertification trainings and that (check one):

I have not been reimbursed within the past 2 years for the current CPR/First Aid recertification and require payment.

I have been reimbursed for the current CPR/First Aid recertification and do not require payment.

Employee Signature:

I certify that this employee has provided me with proof that these trainings have been completed and that (check one):

This employee has NOT been reimbursed within the past 2 years for the current CPR/First Aid recertification and requires payment.

This employee has been reimbursed for the current CPR/First Aid recertification and does not require payment.

Employer or Authorized Representative Signature:

Date:

Date:

Once completed, submit the form via email to njddd@pcgus.com or fax to 1-844-561-5978.

New Vendor Enrollment Package

Public Partnerships and the NJ DDD Self-Directed Option (SDO) Program is offering a more streamlined way for vendors to access important information, required forms and helpful instructions *all in one document*.

The **NEW Vendor Enrollment Package** is now available on Public Partnerships' NJ DDD website at <u>nj-ddd-vendor-enrollment-package-040423.pdf (publicpartnerships.com)</u>.

The New Vendor Enrollment Package includes the following:

- Enrollment Instructions
- W-9 Form
- Vendor Payment Information
- Request for Payment Form
- Request for Payment Form Instructions
- Vendor Payment Schedule
- Introduction to Betteronline
- Betteronline Registration Instructions
- Viewing Invoices in BetterOnline
- Authorized Representative Form

If you have questions, please contact our Customer Service Department by emailing <u>njddd@pcgus.com</u> or dialing 1-844-842-5891.

Service Documentation

- All Medicaid waiver providers—including selfdirected employees (SDEs) are required to maintain documentation to support Medicaid reimbursement. Documentation of services provides the evidence that the provider delivered the services according to the prior authorization and delivered them in accordance with the individual's needs.
- In order to support this requirement, DDD expects to move to full mandatory Service Documentation soon which will require that all timesheets submitted *must* include service documentation notes to be considered as part of a properly completed timesheet.
- These service notes must explain how the SDE helped the individual meet their outcome(s) as outlined in their service plan.
- The required date will be announced 90 days in advance of this mandate.
- More information from DDD will follow.



GOODS & SERVICE PROCESS

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Good & Services Process

All Goods & Services require Division approval in order for prior authorization to be provided for the purchase of the Goods & Services

- The Support Coordinator will assist the individual in identifying vendors that are registered with PPL from which he/she can access the needed Goods & Services.
- The Support Coordinator will add Goods & Services to the ISP which will be submitted and reviewed by the Division.
- Once the ISP is approved, the prior authorization will be automatically transmitted to the Fiscal Intermediary.
- The Support Coordinator should send the Service Detail Report to the vendor that will be providing the approved Goods & Services.
- The Goods & Services provider will render services as prior authorized by the approved ISP and submit an invoice through the Fiscal Intermediary for payment.

IMPORTANT PPL CONTACTS

1-844-842-5891 (English) 1-844-842-5892 (Spanish) NJDDD-CS@pcgus.com Customer Service Hours Mon - Fri 8:00am - 6:00pm EST	 General inquires related to PPL services a. BetterOnline Portal registration b. Login assistance or training c. Understanding timesheets, payments or Earning Statements d. Payment status e. Enrollment support and status f. Authorization details received by PPL
NJDDD-ADMIN@pcgus.com	 Receives Complaint and Appeal forms After allowing at least one business day, receives escalated unresolved issues
1-844-561-5978 (fax) NJDDD@pcgus.com	 1) Receives program related documents only a. Enrollment forms b. Rate change forms c. Verification of employment d. Vender invoices e. Training Certification form f. CPR/First Aid Recertification form
NJDDD-training@pcgus.com	1) Inquiries related to training requirements
1-844-231-4793 (fax)	1) Receives paper timesheets



PPL

Questions/Concerns/Comments?

Please type them in the Chat!

You = We = (PP) = Mission: *Transform more lives by making self-directed home care easier for all.*

