

Optional Facilitator Selection Form

This is an optional form for consumers who would like to select a new CDPAP Facilitator for the Consumer Directed Personal Assistance Program (CDPAP). *If you are already working with PPL or a Facilitator and do not want to change, there is no need to complete this form.*

PPL is the CDPAP Statewide Fiscal Intermediary (SFI). PPL is responsible for all fiscal intermediary functions, including registration support for consumers and Personal Assistants (PAs), payroll processing, system training, compliance, ongoing customer service, and other functions. While PPL supports all consumer and PA needs, CDPAP Facilitators are an additional support available to you in CDPAP. Facilitators are organizations located throughout New York State who can provide ongoing support.

To request to work with a Facilitator, consumers may:

- Call PPL's support center team at 1-833-247-5346 or TTY: 1-833-204-9042 or
- Complete this form and email it to <u>nycdpap@pplfirst.com</u>, fax it to 1-833-951-0828, or mail it to: Public Partnerships LLC P.O. Box 310, Binghamton, NY 13902

Upon receiving the request, PPL will add the selected Facilitator's information to the Consumer's PPL@Home account and notify the selected Facilitator to begin working with the Consumer.

If the Consumer would like to change Facilitators at any point, a request must be submitted by the 25th of the month for the upcoming month. Consumers may submit this request to PPL by one of the above contact methods.

For a full list of CDPAP Facilitators (also listed below) and additional information visit <u>https://pplfirst.com/cdpap-facilitators/</u>. Only organizations listed here or on the PPL website are approved Facilitators.

Like PPL, some Facilitators have special expertise in working with certain populations. These specialties are indicated on the form:

- Children (C)
- People with developmental disabilities (O)
- People with traumatic brain injuries (T)
- People at risk of leaving the community and going to a nursing home (N)



Optional Facilitator Selection Form

To be completed by the CDPAP consumer:	
CDPAP Consumer Name (printed):	
CDPAP Consumer's PPL ID:	
CDPAP Consumer's Address:	
CDPAP Consumer's Phone Number or Email Address:	
If applicable, to be completed by the Designated Representative:	
Designated Representative Name:	
Designated Representative's PPL ID:	
Designated Representative's Address:	
Designated Representative's Phone Number or Email Address:	
Consumer/Designated Representative Signature:	
Date:	

Choose PPL or a Facilitator by checking the box next to the one you want:

	□ Advantage Home Care – CDPAP ^{C, N}
□ A Special Touch Home Care	□ AHS Eldercare ^C
Services (Special Touch Home Care Services, Inc.) ^{C,O}	\Box Angels in Your Home ^O
□ AccentCare of New York ^C	□ AIM Independent Living Center ^C
□ Access: Supports for Living ^{T,O}	\Box ARISE, Inc ^C
□ AccessCNY, Inc.	\Box Bestcare, Inc. ^C



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□ BHRAGS Home Care Corp. ^{C,T,N,O}	□ Independent Living Center of the
\Box Burd Home Health LLC.	Hudson Valley, Inc. (ILCHV)
□ Center for Disability Rights ^{C,T,N}	□ Independent Living, Inc. ^C
Chinese American Planning Council dba CPC Consumer Directed ^C	Long Island Center for Independent Living, Inc.
□ Committed Home Care ^C	New York Foundation for Senior Citizens Home Attendant Services,
Community Care Companions Inc	Inc. ^{C,O}
dba Community Care Home Health Services ^{c,o}	\Box People Care, Inc.
□ Community Home Health Care ^{C,T,N,O}	Personal-Touch Home Care of N.Y., Inc.
□ Companion Care of Rochester (CCOR) ^{C,T,O}	Premier Home Health Care Services, Inc.
□ Concepts of Independence ^C	□ Quality Touch Inc.
\Box Crown Home Care ^C	□ Royal Care ^c
□ DHCare NY LLC	Resource Center for Independent
□Eagle Eye FV Inc	Living, Inc. (RCIL)
Finger Lakes Independence Center, Inc	Rockland Independent Living Center dba Bridges
	dba Bridges
Inc	dba Bridges □ Southern Tier Independence Center ^{C,T,N,O}
Inc Hamaspik HomeCare^{C,T} 	dba Bridges
Inc Hamaspik HomeCare^{C,T} Heritage Christian Services^C 	dba Bridges □ Southern Tier Independence Center ^{C,T,N,O} □ Western New York Independent

*Specializes in Children^c, Traumatic Brain Injury (TBI)^{T,} Nursing Home Transition and Diversion (NHTD)^N, Office for People With Developmental Disabilities (OPWDD)⁰