

PPP Fiscal Intermediary (FI) Transition

The Fiscal Intermediary (FI) provides bookkeeping services for participants employing workers and acts as your business agent.

The health plans also known as Managed Care Organizations (**MCO**; Aetna Better Health NJ, FidelisCare formerly WellCare, Horizon NJ Health, United Healthcare Community Plan, and Wellpoint formerly known as Amerigroup) continue operations of the **PPP** with the current **FI**, Public Partnerships, LLC (**PPL**) ensuring members will not experience any program changes or service interruptions.

Currently PPL helps participants manage the financial responsibilities, which comes with being an employer including: paying your workers, filing your paperwork with the IRS, paying employer fees and taxes, sending out payment for goods and services, and arranging for required Workers' Compensation insurance all in accordance with program rules.

Over time, MCOs may transition to a **new FI vendor** after demonstrating to the state that they are ready for a smooth transition in the readiness review process.

PPP Fiscal Intermediary Transition Update

Improving the Program

- **Innovative and creative technology** that offers caregiver training, a provider directory, and user-friendly Electronic Visit Verification tools.
- **Efficient processes** focusing on timely enrollment timeframes and other enhancements that improve the self-directed service option.
- **Contractual accountability** between Managed Care Organizations (MCOs) and Fiscal Intermediary (FI) partner.

Best Practices in Design and Oversight

- **Continuous improvement** through community partnership and collaborative engagement with participants, families, caregivers, DMAHS PPP Team, and each MCO.
- **Smooth transition** for participants, families, and caregivers.
- **Transparency and accountability** built into implementation and operations.

Logistics for new PPP Fiscal Intermediary model

- **Maintain existing operating partnerships** between DMAHS, MCOs, and PPL (current fiscal intermediary) during transition period.
- **Engage with our community** to define the current and future state of the program, including accountability metrics. Support ongoing partnership with the nationally-recognized model we have been using to implement the electronic visit verification (EVV) mandate.
- **Amend the MCO contract** – Initial amendment 7/1/23 addressed transition; future amendments to reflect best practice and process improvements defined with community workgroups.
- **Evaluate individual MCO readiness to transition** to a selected vendor with innovation and process improvements in place and without disruption to members and their workers.