

# EXHIBIT

# 3

**FI Discontinue Services Template FI to Consumer**

Date:

From: <Fiscal Intermediary Name>

RE: Important Information About Changes to Your Consumer Directed Fiscal Intermediary Services

Dear <Consumer Name>,

This letter is to inform you that effective <Month, Day, Year>, <name of FI> will no longer provide Fiscal Intermediary (FI) services under the Consumer Directed Personal Assistance Program (CDPAP). Your plan of care, hours of service, and your right to choose your personal assistant(s) is not affected by our change in providing fiscal intermediary services.

We are also sending a copy of this notification to your <managed care plan or local district>, <MCO or LDSS>, and the Department of Health. In addition, we are also sending separate notification to each of your personal assistant(s).

**No later than March 28, 2025**, all individuals and personal assistants in the CDPAP will need to register with the new Statewide Fiscal Intermediary, Public Partnerships LLC (PPL). You and your personal assistant(s) can register with PPL in any of the following ways:

- Option 1: Call PPL's support center at 1-833-247-5346 or TTY: 1-833-204-9042. A team member will help you complete the process.
- Option 2: Change through *PPL@Home* by going to PPL's website at [pplfirst.com/cdpap](https://pplfirst.com/cdpap). PPL will also send you a link.
- Option 3: Work with an approved CDPAP facilitator who can guide you through the process. A list of approved CDPAP facilitators is listed on PPL's website.

PPL is hosting online and in-person information sessions. You can visit the PPL website at [pplfirst.com/cdpap](https://pplfirst.com/cdpap) for event dates and additional information.

You can email PPL at [NYCDPAP@pplfirst.com](mailto:NYCDPAP@pplfirst.com) or call the support center at 1-833-247-5346 or TTY: 1-833-204-9042.

Sincerely,

<FI NAME>

cc: New York State Department of Health at [StatewideFI@health.ny.gov](mailto:StatewideFI@health.ny.gov)

<MCO or LDSS>

**FI Discontinue Services Template FI to PAs**

Date:

From: <Fiscal Intermediary Name>

RE: Important Information About Changes to the Fiscal Intermediary Selected by the Individual You Provide Personal Assistant Services to Under the Consumer Directed Personal Assistance Program

Dear <personal assistant's name>,

This letter is to inform you that effective <Month, Day, Year>, <name of FI> will no longer provide Fiscal Intermediary (FI) services under the Consumer Directed Personal Assistance Program (CDPAP) to your CDPAP consumer. The instructions in this letter explain how to continue to provide Personal Assistant services, as directed by the CDPAP consumer you now serve.

To ensure continuity of payroll and other FI services, and to assist your consumer with transitioning to the SFI, we have also notified your consumer's <managed care plan or local district>, <MCO or LDSS>, and the Department of Health that we will no longer be providing FI services.

**No later than March 28, 2025**, all individuals and personal assistants in the CDPAP will need to register with the new Statewide Fiscal Intermediary, Public Partnerships LLC (PPL). You and your consumer can register with PPL in any of the following ways:

- Option 1: Call PPL's support center at 1-833-247-5346 or TTY: 1-833-204-9042. A team member will help you complete the process.
- Option 2: Change through *PPL@Home* by going to PPL's website at [pplfirst.com/cdpap](https://pplfirst.com/cdpap). PPL will also send you a link.
- Option 3: Work with an approved CDPAP facilitator who can guide you through the process. A list of approved CDPAP facilitators will be listed on PPL's website.

PPL is hosting online and in-person information sessions. You can visit the PPL website at [pplfirst.com/cdpap](https://pplfirst.com/cdpap) for event dates and additional information.

You can email PPL at [NYCDPAP@pplfirst.com](mailto:NYCDPAP@pplfirst.com) or call the support center at 1-833-247-5346 or TTY: 1-833-204-9042.

Sincerely,

<FI NAME>

Cc: New York State Department of Health at [StatewideFI@health.ny.gov](mailto:StatewideFI@health.ny.gov)

<MCO or LDSS>