

MA Participant Directed Program New Provider Paperwork Matrix

Welcome to the Massachusetts Participant Directed Program! In order to begin providing services through the program, certain paperwork must be completed and submitted to PPL for processing. Once all required paperwork has been fully and accurately completed, you are good to begin working. Depending on the provider type that you have selected to work under (Independent Contractor, Employee, or Agency), the required paperwork may vary. In order to assist with the on-boarding process of new providers, the below matrix has been created to outline all required paperwork for each required provider type in the program.

How to read the chart below:

The first column on the left is a list of all possible pieces of paperwork. The first row on the top is a list of the four provider types. Find your provider type in the top row: Employee, Independent Contractor, Agency, or 'Non-Waiver Service' Provider. Look down the appropriate column. Any cell with an 'x' in it means that the corresponding piece of paperwork in the 'paperwork column' is required.

Two Important Notes:

1. All Provider packets and CORI application are located on www.publicpartnerships.com.
2. Please note: Any participant receiving IP services must have an Employer of Record on file. An EoR is established by filling out an Employer of Record packet on publicpartnerships.com

Please refer to the chart below to determine what paperwork is required for 'good to go' status for new providers:

| | New Employee | New Independent Contractor | New Agency | New 'Non-Waiver Service' Provider |
|---------------------------------------|--------------|----------------------------|------------|-----------------------------------|
| Employee Packet: | | | | |
| Form A | x | | | |
| Form B | x | | | |
| Employee Info. Form | x | | | |
| INS Form I-9 | x | | | |
| IRS W-4 Form | x | | | |
| A DOR Form M-4 | x | | | |
| EFT Form (optional) | x | | | |
| Independent Contractor Packet: | | | | |
| IRS W-9 Form | | x | | |
| IC Info. Form | | x | | |
| Form A | | x | | |
| Form B | | x | | |
| EFT Form (optional) | | x | | |
| Agency Packet: | | | | |
| IRS W-9 Form | | | x | X |
| Agency Info. Form | | | x | |
| Form A | | | x | |
| Form B | | | x | |
| EFT Form (optional) | | | x | |
| Credentialing Packet*: | | | | |
| Information Form | x | x | x | |
| Service Selection | x | x | x | |
| Certification Page | x | x | x | |
| CORI Application: | | | | |
| CORI Request | x | x | | |

*The Credentialing Packet is obtained by creating a provider profile in the Web Portal and clicking "print forms" at the bottom of the last page