



YOUR LIFE
YOUR CARE
YOUR PEOPLE



BetterOnline™ Web Portal User Manual for Service Coordinators:

New York State Department of Health

Bureau of Medicaid Waivers

Housing Payment Services for TBI & NHTD Participants




Public Partnerships LLC (PPL)
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Alpharetta, GA 30009



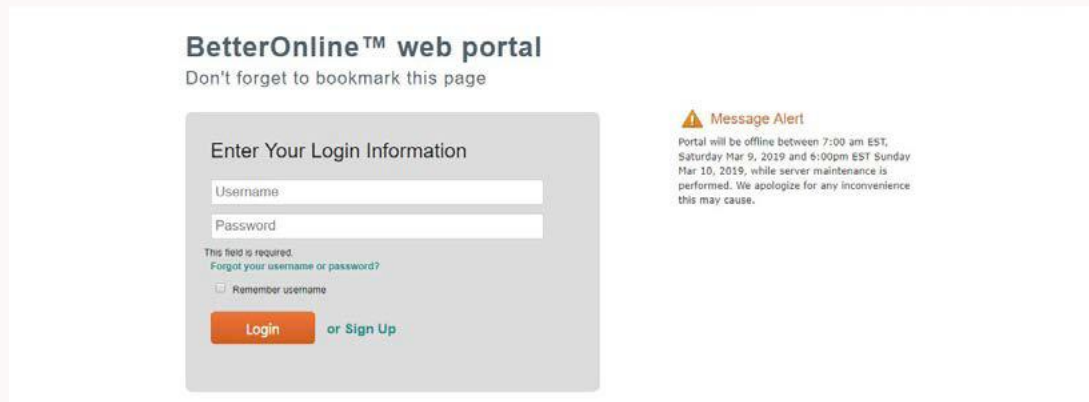
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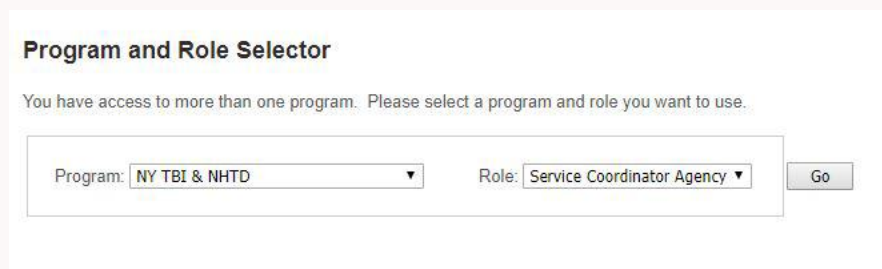
1. Creating a Budget

1. Login into the Web Portal with your username and password
 - a) <https://fms.publicpartnerships.com/PPLPortal/>
 - b) Please contact your RRDC if you do not know your username/password or your account is locked.



The screenshot shows the 'BetterOnline™ web portal' login interface. At the top, it says 'Don't forget to bookmark this page'. The main login area is a grey box titled 'Enter Your Login Information' containing fields for 'Username' and 'Password'. Below these fields are links for 'Forgot your username or password?' and a 'Remember username' checkbox. At the bottom of the box are 'Login' and 'or Sign Up' buttons. To the right of the login box is a 'Message Alert' box with a warning icon, stating: 'Portal will be offline between 7:00 am EST, Saturday Mar 9, 2019 and 6:00pm EST Sunday Mar 10, 2019, while server maintenance is performed. We apologize for any inconvenience this may cause.'

2. Select your appropriate role: Service Coordinator Agency or Service Coordinator (these roles are identical and either one is capable of creating and editing budgets).



The screenshot shows the 'Program and Role Selector' form. It includes the instruction: 'You have access to more than one program. Please select a program and role you want to use.' Below this, there are two dropdown menus: 'Program:' with 'NY TBI & NHTD' selected, and 'Role:' with 'Service Coordinator Agency' selected. A 'Go' button is located to the right of the role dropdown.

3. You'll arrive at either the Participant Search page or Service Coordinator Search page depending on the role you've selected in Step 2. If the latter, please locate the dark green menu bar on the top of the page and click on the link called Participant Search.



New York Department of Health
TBI & NHTD Housing Program

Service Coordinator Search Payment Request **Participant Search** Payee Search Contact Us

Participant Search

Participant Last Name

Participant First Name

Participant ID

Telephone

4. The Participant Search page has four search fields. To search for your participant, please type either his/her first or last name, PPL ID or telephone number in the appropriate field and then click the search button.
 - a) Please Note: The spelling of your participant's name may vary between our records and yours. You do not have to type the full first/last name in order to search for participants. Simply the first initial of either first or last name will produce results.
 - b) If you are unable to find an existing participant, please contact your RRDC. In most cases, the participant is simply not associated to your Service Agency.
 - c) If the participant is new to TBI or NHTD Housing, please notify your RRDC and they will enroll the new participant.
5. Upon finding your participant, you will notice two columns containing links at the right of your screen: Participant Profile and Service Referrals.
 - a) Click on the link called Service Referrals.

	Participant Profile	Service Referrals
1	Participant Profile	Service Referrals

6. You will arrive to the participant's Budget Summary page.

Budget Summary for [REDACTED]

Id	Start	End	Allocated	Spent	Detail	Action
580000	7/1/2011	11/1/2011	\$2,910.00	\$2,910.00	Budget Detail	
17850000	12/1/2011	3/31/2012	\$2,328.00	\$2,328.00	Budget Detail	
28930000	4/1/2012	3/31/2013	\$6,984.00	\$6,984.00	Budget Detail	
40920000	4/1/2013	3/31/2014	\$8,707.38	\$8,707.38	Budget Detail	
51270000	4/1/2014	3/31/2015	\$7,848.00	\$7,848.00	Budget Detail	
67000000	4/1/2015	3/31/2016	\$7,820.04	\$7,820.04	Budget Detail	
74360000	4/1/2016	3/31/2017	\$7,819.32	\$7,819.32	Budget Detail	
90850000	4/1/2017	3/31/2018	\$1,953.00	\$1,953.00	Budget Detail	
92950955	6/1/2018	3/31/2019	\$5,550.00	\$5,550.00	Budget Detail	

[New Budget](#)

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- You will notice that the participant has a current budget with an End Date of 3/31/2019. This budget and the service referrals (monthly subsidies) within it will expire at that time.
- In order for your participant to continue receiving his or her subsidy after 3/31/2019, you must create a new budget with an updated Start and End Date of 4/1/2019 to 3/31/2020.**

7. To create a new budget, click on the New Budget button. You'll notice that a gray box will appear prompting you to enter the new Start Date and End Date.

- Please enter 4/1/2019 for the Start Date.
- Please enter 3/31/2020 for the End Date.
- The click the Create button.
- The budget dates do not correspond to your participant's lease dates. Please only enter the dates mentioned above.
- If you made an error entering the dates, simply delete the erroneous budget by clicking on the trash can icon.

Create New Budget

Please enter a date range for the new Budget.

Start Date:

End Date:







[Create](#)

[Cancel](#)

8. Congratulations! You have just created a new budget for your participant. Please

continue to the next section to create your participant's recurring service referral(s)/monthly subsidies.

Budget successfully created.

Id	Start	End	Allocated	Spent	Detail	Action
400000	7/1/2011	11/1/2011	\$4,910.00	\$4,910.00	Budget Detail	
13020000	12/1/2011	3/31/2012	\$3,928.00	\$3,928.00	Budget Detail	
24780000	4/1/2012	3/31/2013	\$11,949.00	\$11,949.00	Budget Detail	
38060000	4/1/2013	3/31/2014	\$13,142.96	\$13,142.96	Budget Detail	
55060000	4/1/2014	3/31/2015	\$12,503.00	\$12,503.00	Budget Detail	
68040000	4/1/2015	3/31/2016	\$13,233.00	\$13,233.00	Budget Detail	
79320000	4/1/2016	3/31/2017	\$13,896.00	\$11,580.00	Budget Detail	
83370000	4/1/2017	3/31/2018	\$0.00	\$0.00	Budget Detail	 



New Budget

Back to Participant Profile

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2. Creating Recurring Service Referrals (Monthly Subsidies)

1. Once you've created your new budget with the correct Start (4/1/2019) and End (3/31/2020) Dates, please click on the link called Budget Details for new budget period.

92951728	4/1/2019	3/31/2020	\$0.00	\$0.00	Budget Detail
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2. You will arrive to your participant's Budget Detail page. This page will contain all the recurring service referrals (monthly subsidy payments) for the 2019-2020 Budget period.

Budget Detail For [Redacted]

[Show/Hide filter](#)

Service Type: Status:

Creation Date Between: And Service Referral ID

There are no service referrals for this participant.

1-0 Show records at a time.

3. As you've just created this new budget, there won't be any current service referrals listed. In order to create a new service referral, please click on the Create New Service Referral button and refer to the following instructions:

Create New Service Referral (* required)

Please enter the following information to request a new Service Referral

Waiver Type:

* Service Category:

* Service Type:

Account:

Notes/Comments:

* Start Date: * Dollars:

* End Date:

- a) Upon clicking said button, a grey box titled Create New Service Referral will appear. You will notice several fields. You must complete each required field in succession, starting with Service Category, before creating the service referral.
- i. Waiver Type: Please select either TBI or NHTD

Create New Service Referral (* required)

Please enter the following information to request a new Service Referral

Waiver Type:

* Service Category:

* Service Type:

Account:

Notes/Comments:

* Start Date: * Dollars:

* End Date:

- ii. Service Category: Please select either Rental Request or Utility Request, depending on the subsidy.

Create New Service Referral (* required)
Please enter the following information to request a new Service Referral

Waiver Type: TBI ▼

* Service Category: - Select - ▼

* Service Type: Rental Request
Utility Request

Account:

Notes/Comments:

* Start Date: 4/1/2019 * Dollars:

* End Date: 3/31/2020

Create Cancel

- iii. Service Type: If you chose Rental Request, **RRENTA: Housing – Rent Subsidy (auto) will be automatically selected.** If you chose Utility Request, select the appropriate(auto) subsidy: **UELECA, UHEATA, UMISCA, or UPHONA** (e.g. National Fuel =UHEATA; National Grid = UELECA; Verizon = UPHONA).

Create New Service Referral (* required)
Please enter the following information to request a new Service Referral

Waiver Type: TBI ▼

* Service Category: Utility Request ▼

* Service Type: - Select - ▼

Payee Name: UELECA: Utility - Electric (Auto)
UHEATA: Utility - Heat (Auto)
UMISCA: Utility - Other (Auto)
UPHONA: Utility - Phone (Auto)

Account:

Notes/Comments:

* Start Date: 4/1/2019 Months:

* End Date: 3/31/2020 * Dollars:

Total:

Create Cancel

- iv. Payee Name: This field will appear upon selecting a Service Type. If the subsidy is a utility, a list of utility companies will appear in a dropdown menu. If a rent subsidy, click on the dropdown menu and select Payee search. Upon doing so, an additional gray search box will appear. Type the name of the landlord/ management company in the **Payee Agency Name** search field only, and then click search.

Create New Service Referral (* required)

Please enter the following information to request a new Service Referral

Waiver Type:

* Service Category:

* Service Type:

Payee Name:

Account:

Notes/Comments:

* Start Date: Months: 12

* End Date: * Each Month:

Total:

Please make sure that the payee you select is the correct landlord for your participant. Many payees have similar names, but ultimately have different addresses. If you cannot find the payee or are unsure, please contact your RRDC. PLEASE DO NOT CHANGE THE ADDRESS OF A PAYEE WITHOUT THE APPROVAL OF THE RRDC.

Search for Payee

Payee Agency Name:

Payee Last Name:

Payee First Name:

Payee ID:

Payee ID:

Only the top 10 payees are shown. If you do not see the one you are looking for, narrow the search criteria.

	System ID	External ID	Type	First Name	Last Name	Name	City	State
<input type="button" value="Select"/>	E40000008	306898	AG			Fairfield Town Centre LLC	Melville	NY
<input type="button" value="Select"/>	E40000118	308533	AG			Fairfield Maples LLC	Melville	NY
<input type="button" value="Select"/>	E40000389	306889	AG			Fairfield at Lake Grove	MELVILLE	NY
<input type="button" value="Select"/>	E40000427	304954	AG			Fairfield N Patchogue LLC	Melville	NY
<input type="button" value="Select"/>	E40001201	307908	AG			Fairfield on the Bay LLC	Melville	NY
<input type="button" value="Select"/>	E40001383	305781	AG			Fairfield Thunderbird LLC	Melville	NY
<input type="button" value="Select"/>	E40001738	304801	AG			Fairfield Federal Square LLC	Melville	NY

1 2

This field is required to have the account number from the utility company for the participant. If this is not entered, the account number will not be generated on the payment from PPL and the participants utility account will not be credited for payments made. Please confirm the account number.

- v. Account: Whatever is entered in this field will appear on the check's memo line when PPL prints and mails it. **IF YOU ARE CREATING A SERVICE REFERRAL FOR A UTILITY SUBSIDY YOU, THEN MUST ENTER THE PARTICIPANT'S ACCOUNT**

NUMBER THAT APPEARS ON HIS/HER UTILITY BILL; OTHERWISE, YOUR PARTICIPANT'S FUNDS WILL NOT DISTRIBUTE PROPERLY TO HIS/HER UTILITY ACCOUNT. FOR RENT, YOU MUST ENTER THE PARTICIPANT'S STREET ADDRESS AND APARTMENT NUMBER IF APPLICABLE. The Participant's name will automatically appear on the check so there is no need to type it in the field.

Account:

- vi. Notes/Comments: This field is optional. You may enter any notes that you deem relevant to this subsidy for future reference. This field should not be confused for the Account field.

Notes/Comments:

- vii. Start Date & End Date: Both these fields will automatically populate and reflect the dates of the budget period (4/1/2019 – 3/31/2020). **Do not change the Start and End Date**, unless the RRDC gives you permission.

Create New Service Referral (* required)

Please enter the following information to request a new Service Referral

Waiver Type:

* Service Category:

* Service Type:

Payee Name:

Account:

Notes/Comments:

* Start Date: Months: 12

* End Date: * Each Month:

Total:

- viii. Months: This field is automatically calculated and determines the number of months (12) within the budget period (4/1/2019 – 3/31/2020).

Months: 12

- ix. Each Month: In this field you will enter the monthly DOH subsidy amount/rate.
Please do not include the dollar symbol (\$) or comma (,).

* Each Month: 1000.00

- b) Once all the necessary information is entered in the fields, click the Create button.
If at this time you've realized that you've made a mistake (incorrect/missing account number, wrong payee, etc.), please delete the service referral using the trash icon under the Action column and create the service referral again following the steps above.

Create New Service Referral (* required)

Please enter the following information to request a new Service Referral

Waiver Type: TBI ▼

* Service Category: Rental Request ▼

* Service Type: RRENTA: Housing - Rent Subsidy (auto) ▼

Payee Name: John - TEST LL Fox - TEST LL ▼

Account: 123 Example Avenue, Apt 456, Brooklyn, NY 11235

Notes/Comments:

* Start Date: 4/1/2019

* End Date: 3/31/2020



Months: 12

* Each Month: 1000.00

Total: \$12000.00

Create Cancel













- c) The service referral will now appear on the Budget Detail page. You'll notice that the status of the subsidy is currently "Submitted". The service referral must be first approved by the RRDC before being paid. Please follow up with the RRDC once the authorization(s) have been created so they know to go in and review and approve the authorizations.

Service	Service Referral ID	Payee	Account	Start Date	End Date	Authorized By	Unit Type	Authorized Units	In Increments Of	Rate	Total Authorized Units	Paid Units	Remaining Units	Authorized Dollars	Paid Dollars	Involved Dollars	Balance	Note	Status	Waiver Type	Actions
RRENTA: Housing - Rent Subsidy (auto)	AUL0051656	John - TEST LL Fox - TEST LL	123 Example Avenue, Apt 456, Brooklyn, NY 11235	4/1/2019	3/31/2020	Month	Dollar	N/A	0.01	N/A	N/A	N/A	N/A	\$12,000.00	\$0.00	\$0.00	\$12,000.00		Submitted	TBI	 
Total:								N/A			N/A	N/A	N/A	\$12,000.00	\$0.00	\$0.00	\$12,000.00				

1-1 Show 10 records at a time.

[Create New Service Referral](#)
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[Print Page](#)

- d) If you click the Month link under the Authorized By column, you'll see the detail payments for each month during the period. As per our example, you'll notice that each month's Line Total equals \$1,000.00, and when you add all the months up the Grand Line Total is \$12,000.00 for the period (\$1,000.00 x 12 months). **Always check the monthly amounts after creating a new service referral to confirm the subsidy was entered in correctly.**

Service	Service Referral ID	Payee	Account	Start Date	End Date	Authorized By	Unit Type	Authorized Units	In Increments Of	Rate	Total Authorized Units	Paid Units	Remaining Units	Authorized Dollars	Paid Dollars	Involved Dollars	Balance	Note	Status	Waiver Type	Actions
RRENTA: Housing - Rent Subsidy (auto)	AUL0051656	John - TEST LL Fox - TEST LL	123 Example Avenue, Apt 456, Brooklyn, NY 11235	4/1/2019	3/31/2020	Month	Dollar	N/A	0.01	N/A	N/A	N/A	N/A	\$12,000.00	\$0.00	\$0.00	\$12,000.00		Submitted	TBI	 
				4/1/2019	4/30/2019	Month 1	Dollar	N/A	0.01	\$1,000	N/A	N/A	N/A	\$1,000.00	\$0.00	\$0.00	\$1,000.00		Submitted		
				5/1/2019	5/31/2019	Month 2	Dollar	N/A	0.01	\$1,000	N/A	N/A	N/A	\$1,000.00	\$0.00	\$0.00	\$1,000.00		Submitted		
				6/1/2019	6/30/2019	Month 3	Dollar	N/A	0.01	\$1,000	N/A	N/A	N/A	\$1,000.00	\$0.00	\$0.00	\$1,000.00		Submitted		
				7/1/2019	7/31/2019	Month 4	Dollar	N/A	0.01	\$1,000	N/A	N/A	N/A	\$1,000.00	\$0.00	\$0.00	\$1,000.00		Submitted		
				8/1/2019	8/31/2019	Month 5	Dollar	N/A	0.01	\$1,000	N/A	N/A	N/A	\$1,000.00	\$0.00	\$0.00	\$1,000.00		Submitted		
				9/1/2019	9/30/2019	Month 6	Dollar	N/A	0.01	\$1,000	N/A	N/A	N/A	\$1,000.00	\$0.00	\$0.00	\$1,000.00		Submitted		
				10/1/2019	10/31/2019	Month 7	Dollar	N/A	0.01	\$1,000	N/A	N/A	N/A	\$1,000.00	\$0.00	\$0.00	\$1,000.00		Submitted		
				11/1/2019	11/30/2019	Month 8	Dollar	N/A	0.01	\$1,000	N/A	N/A	N/A	\$1,000.00	\$0.00	\$0.00	\$1,000.00		Submitted		
				12/1/2019	12/31/2019	Month 9	Dollar	N/A	0.01	\$1,000	N/A	N/A	N/A	\$1,000.00	\$0.00	\$0.00	\$1,000.00		Submitted		
				1/1/2020	1/31/2020	Month 10	Dollar	N/A	0.01	\$1,000	N/A	N/A	N/A	\$1,000.00	\$0.00	\$0.00	\$1,000.00		Submitted		
				2/1/2020	2/29/2020	Month 11	Dollar	N/A	0.01	\$1,000	N/A	N/A	N/A	\$1,000.00	\$0.00	\$0.00	\$1,000.00		Submitted		
				3/1/2020	3/31/2020	Month 12	Dollar	N/A	0.01	\$1,000	N/A	N/A	N/A	\$1,000.00	\$0.00	\$0.00	\$1,000.00		Submitted		
Total:								N/A			N/A	N/A	N/A	\$12,000.00	\$0.00	\$0.00	\$12,000.00				

1-1 Show 10 records at a time.

- e) **If applicable, repeat this process as needed for additional recurring service referrals.**
- f) **Please continue onto the next section to learn how to edit a recurring service referral.**

3. Editing Recurring Service Referrals

During the budget period (4/1/19 – 3/31/20), subsidies may change, participants may move or dis-enroll from the housing program, etc. Whatever the reason may be, you are responsible for continuously managing/monitoring your participant's budget by keeping his/her service referrals up-to-date. Please refer to the instructions below to assist you in this task.

1. Subsidy Changes - increases, decreases, or stops during the year.

a) First locate the service referral in the current budget (4/1/19 – 3/31/20).

Service	Service Referral ID	Payee	Account	Start Date	End Date	Authorized By	Unit Type	Authorized Units	In Increments Of	Rate	Total Authorized Units	Paid Units	Remaining Units	Authorized Dollars	Paid Dollars	Involved Dollars	Balance	Note	Status	Waiver Type	Actions
RRENTA: Housing - Rent Subsidy (auto)	AUL0051656	John - TEST LL	123 Example Avenue, Apt 456, Brooklyn, NY 11235	4/1/2019	3/31/2020	Month	Dollar	N/A	0.01	N/A	N/A	N/A	N/A	\$12,000.00	\$0.00	\$0.00	\$12,000.00		Submitted	TBI	 
Total:								N/A			N/A	N/A	N/A	\$12,000.00	\$0.00	\$0.00	\$12,000.00				

1-1 Show 10 records at a time

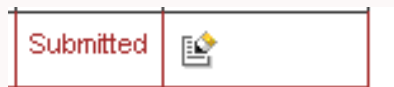
Create New Service Referral Back to Budgets Back to Participant Profile Print Page

b) Upon finding the recurring service referral in question, click on its Month link under the Authorized By column. This action will expand the recurring service referral displaying each individual month during the period (e.g. Month 1 = April, Month 12 = March)







Service	Service Referral ID	Payee	Account	Start Date	End Date	Authorized By	Unit Type	Authorized Units	In Increments Of	Rate	Total Authorized Units	Paid Units	Remaining Units	Authorized Dollars	Paid Dollars	Involved Dollars	Balance	Note	Status	Waiver Type	Actions
RRENTA: Housing - Rent Subsidy (auto)	AUL0051656	John - TEST LL	123 Example Avenue, Apt 456, Brooklyn, NY 11235	4/1/2019	3/31/2020	Month	Dollar	N/A	0.01	N/A	N/A	N/A	N/A	\$12,000.00	\$0.00	\$0.00	\$12,000.00		Submitted	TBI	 
				4/1/2019	4/30/2019	Month 1	Dollar	N/A	0.01	\$1,000	N/A	N/A	N/A	\$1,000.00	\$0.00	\$0.00	\$1,000.00		Submitted		
				5/1/2019	5/31/2019	Month 2	Dollar	N/A	0.01	\$1,000	N/A	N/A	N/A	\$1,000.00	\$0.00	\$0.00	\$1,000.00		Submitted		
				6/1/2019	6/30/2019	Month 3	Dollar	N/A	0.01	\$1,000	N/A	N/A	N/A	\$1,000.00	\$0.00	\$0.00	\$1,000.00		Submitted		
				7/1/2019	7/31/2019	Month 4	Dollar	N/A	0.01	\$1,000	N/A	N/A	N/A	\$1,000.00	\$0.00	\$0.00	\$1,000.00		Submitted		
				8/1/2019	8/31/2019	Month 5	Dollar	N/A	0.01	\$1,000	N/A	N/A	N/A	\$1,000.00	\$0.00	\$0.00	\$1,000.00		Submitted		
				9/1/2019	9/30/2019	Month 6	Dollar	N/A	0.01	\$1,000	N/A	N/A	N/A	\$1,000.00	\$0.00	\$0.00	\$1,000.00		Submitted		
				10/1/2019	10/31/2019	Month 7	Dollar	N/A	0.01	\$1,000	N/A	N/A	N/A	\$1,000.00	\$0.00	\$0.00	\$1,000.00		Submitted		
				11/1/2019	11/30/2019	Month 8	Dollar	N/A	0.01	\$1,000	N/A	N/A	N/A	\$1,000.00	\$0.00	\$0.00	\$1,000.00		Submitted		
				12/1/2019	12/31/2019	Month 9	Dollar	N/A	0.01	\$1,000	N/A	N/A	N/A	\$1,000.00	\$0.00	\$0.00	\$1,000.00		Submitted		
				1/1/2020	1/31/2020	Month 10	Dollar	N/A	0.01	\$1,000	N/A	N/A	N/A	\$1,000.00	\$0.00	\$0.00	\$1,000.00		Submitted		
				2/1/2020	2/29/2020	Month 11	Dollar	N/A	0.01	\$1,000	N/A	N/A	N/A	\$1,000.00	\$0.00	\$0.00	\$1,000.00		Submitted		
				3/1/2020	3/31/2020	Month 12	Dollar	N/A	0.01	\$1,000	N/A	N/A	N/A	\$1,000.00	\$0.00	\$0.00	\$1,000.00		Submitted		
Total:								N/A			N/A	N/A	N/A	\$12,000.00	\$0.00	\$0.00	\$12,000.00				

1-1 Show 10 records at a time

c) To edit the subsidy amount for a particular month, click the Edit This Line icon located under the Action column. This action will allow you to edit the Line Total field for that particular month.








This action will allow you to edit the Line Total field for that particular month.

Service	Service Referral ID	Payee	Account	Start Date	End Date	Authorized By	Unit Type	Authorized Units	In Increments Of	Rate	Total Authorized Units	Paid Units	Remaining Units	Authorized Dollars	Paid Dollars	Invoiced Dollars	Balance	Note	Status	Waiver Type	Actions
RENTAL Housing - Rent Subsidy (auto)	AUL0051656	John - TEST LL Fox - TEST LL	123 Example Avenue, Apt 455, Brooklyn, NY 11235	4/1/2019	3/31/2020	Month	Dollar	N/A	0.01	N/A	N/A	N/A	N/A	\$12,000.00	\$0.00	\$0.00	\$12,000.00		Submitted	TBI	 
				4/1/2019	4/30/2019	Month 1	Dollar	100,000.00	0.01	\$1.00		0.00	1,000.00	1000	\$0.00	\$0.00			Submitted		 
				5/1/2019	5/31/2019	Month 2	Dollar	N/A	0.01	\$1,000	N/A	N/A	N/A	\$1,000.00	\$0.00	\$0.00	\$1,000.00		Submitted		
				6/1/2019	6/30/2019	Month 3	Dollar	N/A	0.01	\$1,000	N/A	N/A	N/A	\$1,000.00	\$0.00	\$0.00	\$1,000.00		Submitted		

- d) Upon entering the new monthly subsidy, click the Save icon (green check mark) and continue to do the same for the remaining months. Note: You cannot edit a Month that has already been paid.



- e) If the subsidy needs to be stopped, enter 0 in the Line Total for each of the remaining unpaid months.

In Increments Of	Rate	Total Authorized Units	Paid Units	Remaining Units	Authorized Dollars	Paid Dollars	Invoiced Dollars	Balance	Note	Status	Waiver Type	Actions
0.01	N/A	N/A	N/A	N/A	\$12,000.00	\$0.00	\$0.00	\$12,000.00		Submitted	TBI	 
0.01	\$1.00		0.00	1,000.00	1	\$0.00	\$0.00			Submitted		 
0.01	\$1,000	N/A	N/A	N/A	\$1,000.00	\$0.00	\$0.00	\$1,000.00		Submitted		

Upon saving, the Line Total for a particular month, it will read "N/A".

4/1/2019	4/30/2019	Month 1	Dollar	N/A	0.01	\$1,000		N/A	N/A	\$0.00	\$0.00	\$0.00	N/A
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- f) **Please Note: If the participant disenrolls from the program, you still need to stop his/her service referrals as shown above. If a participant switches waivers, you will need to stop his/her current service referrals and create new service referrals under the new waiver dropdown.**

4. Creating One Time Payments

Throughout the budget period, it is typical to issue auxiliary payments related to your participant's recurring rental subsidy. The payments, dubbed "One Time Payments", usually encompass security deposits, late fees, and broker fees. These one time payments are created through the Payment Request page on Web Portal.



1. To get started, first select the Payee (or Landlord) associated with the participant(s). To do so, click on the magnifying glass icon near the Payee ID field.

Payee ID:



2. Enter in the landlord's name in the Payee Agency Name field. Click Search button. Click on the Select button of the applicable payee.

Public Partnerships LLC
8000 Avalon Blvd. Suite 300
Alpharetta, GA 30009

Please include the following information.

Program Name (NY TBI or NY NHTD)

Participant's Name

Participant's address (associated with the program)

Participant's PPL ID number

What funds are being sent to PPL for (returning Security Deposit).

Search for Payee

Payee Agency Name:

Payee Last Name:

Payee First Name:

Payee ID:

External Payee ID:

Only the top 15 payees are shown. If you do not see the one you are looking for, narrow the search criteria.

	System ID	External ID	First Name	Last Name	Name	City	State	Zip Code
<input type="button" value="Select"/>	E40002323				Fox Family Enterprise	Selkirk	NY	12158
<input type="button" value="Select"/>	E40000002		QA	TestProviderQA01	John - TEST LL Fox - TEST LL	ALBANY	NY	12201
<input type="button" value="Select"/>	E40000032	308190	Tony		Ninety Foxwood Square LTD	STATEN ISLAND	NY	10314

- Once you've selected the landlord, the screen will update to include the Participant's information as well as the payment information.

Submit Payment Request

You must read and agree to the Terms and Conditions by checking the box. Once the invoice is completed, click on the Save link for that line.

Please note that any lines that you try to submit that are NOT accepted by the system will not be saved.

Payee ID:

Global Attachments: No file chosen

[Upload File\(s\)](#)

Participant	Date Of Service	Service	Units Requested	Rate	Note	Check Note	Attachments	Line Status	Action
<input type="text"/>	<input type="text"/>	Please select the participant first ▼						Not Submitted	

Total Amount Submitted: \$0.00

Terms and Conditions

☐ The payee certifies that the representations made in this payment request are true, accurate and correct and that if any statements are willfully false, the payee may be subject to punishment, including suspension, debarment or disqualification from participating as a payee in State or Federal programs, as well as criminal sanctions, as may be applicable. The payee understands that payment of this payment request will be from Federal and/or State funds and that any falsification or concealment of a material fact may be prosecuted under Federal and State laws.

- To select the participant, click on the magnifying glass near the Participant field.

- Enter your participant's name in the appropriate search fields. Then click the Search Button. Click the Select Button.

Search for Participant

Participant First Name:

Participant Last Name:


Participant ID:

Only the top 15 participants are shown. If you do not see the one you are looking for, narrow the search criteria.

	System ID	Name	City	Phone
<input type="button" value="Select"/>	C00	STEPHANIE A	COPIAGUE	

- Once you've selected the participant, you'll be ready to complete the remaining fields:

- a) Date of Service: this field should either contain the present date or a past date (within a week's time). **Do not enter a future date; this will create an error.**

Date Of Service	
<input type="text"/>	


- b) Service: Select the appropriate payment type from the dropdown menu.

Service
<div><div>Please select service ▼</div><div><div>Please select service</div><div>PAYREQOTHR -- Misc - Other</div><div>RLATE -- Misc - Late Fees</div><div>RRENT -- Housing - Rent Subsidy</div><div>RSECU -- Rent - Sec. Deposit</div></div></div>

- c) Rate Requested: Enter the amount of the one time payment requested. The Units field will default to 1.

Units	Rate Requested
<input type="text" value="1"/>	<input type="text" value="500.00"/> / DOLLAR

- d) Check Note: Whatever is typed into this field will appear in the check's memo line. Enter the participant's first and last name, his/her street address, and payment type.

Line Status	Action
Not Submitted	



- e) The one time payment request will now be in submitted status and will need approval by the RRDC prior to being issued.

Submit Payment Request

You must read and agree to the Terms and Conditions by checking the box. Once the invoice is completed, click on the Save link for that line.
Please note that any lines that you try to submit that are NOT accepted by the system will not be saved.

Payee ID: John - TEST LL Fox - TEST LL [Start New Payment Request](#)

Global Attachments: [Choose File](#) / No file chosen
[Add another file](#)
[Upload File\(s\)](#)

Participant	Date Of Service	Service	Units	Rate Requested	Note	Check Note	Attachments	Line Status	Action
STEPHANIE	1/5/2019	RSECU - Rent - Sec. Deposit	1	\$500.00 / DOLLAR		Stephanie Appliances, 123 Example Ave, Apt 456, Brooklyn, NY 11235, Security	Choose File / No file chosen Add another file Upload File(s) Download Close	Submitted	 

Total Amount Submitted: \$500.00

Terms and Conditions
☒ The payee certifies that the representations made in this payment request are true, accurate and correct and that if any statements are willfully false, the payee may be subject to punishment, including suspension, debarment or disqualification from participating as a payee in State or Federal programs, as well as criminal sanctions, as may be applicable. The payee understands that payment of this payment request will be from Federal and/or State funds and that any falsification or concealment of a material fact may be prosecuted under Federal and State laws.

- f) Like a recurring service referral, you can delete and modify the onetime payment by clicking the delete and edit icons, respectively, under the Action column.

5. Appendix

How is the DOH rental subsidy calculated?

1. Participant Income after Spend Down divided by 3 = Participant Portion
2. Full Rent Amount – Participant Portion = DOH Rental Subsidy

Example

- Participant Income after Spend Down = \$785.00
- Full Rent Amount = \$600.00
- \$785.00 divided by 3 = \$261.67
- \$600 – \$261.67 = \$338.33
- Participant Portion = \$261.67
- DOH Rental Subsidy Amount = \$338.33 (this is the amount you should enter when creating a service referral)

How is the DOH utility subsidy calculated?

1. Start with the Utility Budget Amount
2. 2/3 of Utility Budget Amount = DOH Utility Subsidy
3. 1/3 of the utility budget amount=Participant Portion

Example

- Utility Budget Amount=\$30.00
- 2/3 of the Utility Budget Amount = \$20.00
- 1/3 of the Utility Budget Amount = \$10.00
- Participant Portion = \$10.00
- DOH Utility Subsidy Amount = \$20.00 (this is the amount you should enter when creating a service referral)