December 4, 2018

TO: ALL COUNTY WELFARE DIRECTORS Letter No: 18-26
    ALL COUNTY ADMINISTRATIVE OFFICERS
    ALL COUNTY MEDI-CAL PROGRAM SPECIALISTS/LIAISONS
    ALL COUNTY HEALTH EXECUTIVES
    ALL COUNTY MENTAL HEALTH DIRECTORS
    ALL COUNTY MEDS LIAISONS
    ALL CONSORTIA/SAWS PROJECT MANAGERS

SUBJECT: AUTHORIZED REPRESENTATIVE FORMS AND UPDATED PROCEDURES
(Ref: ACWDL 17-12)

The purpose of this All County Welfare Directors Letter (ACWDL) is to provide counties with the new forms, notices and policies for the designation of a Medi-Cal authorized representative (AR) and to provide instruction regarding these forms:

1. “Appointment of Authorized Representative” form (MC 382). Otherwise referred to as “Appointment Form MC 382” or “MC 382” in this ACWDL;
2. “Notice of Appointment of Authorized Representative” (MC 380). Otherwise referred to as “Appointment Notice MC 380” or “MC 380” in this ACWDL;
3. “Authorized Representative Standard Agreement for Organizations” form (MC 383). Otherwise referred to as “Standard Agreement Form MC 383” or “MC 383” in this ACWDL; and,
4. “Cancellation or Change to a Medi-Cal Authorized Representative Appointment” notification letter (MC 381). Otherwise referred to as “Cancellation or Modification Letter MC 381” or “MC 381” in this ACWDL.

The following sections provide counties with the regulatory authority for the new forms, guidance on the purpose and requirements of each of the new forms, and further guidance on the AR appointment process.
1. **Appointment of Authorized Representative Form**  
   *(Appointment Form MC 382)*

Senate Bill x1 1 (Chapter 4, Statutes of 2013) added Section 14014.5 to the Welfare and Institutions (W&I) Code to govern the appointment of ARs in accordance with Title 42 of the Code of Federal Regulations (CFR), Section 435.923. In order to align with W&I Code, Section 14014.5, the Department of Health Care Services (DHCS) developed the “Appointment of Authorized Representative” form (MC 382).

The purpose of the Appointment Form MC 382 is to provide a competent Medi-Cal applicant/beneficiary with a written method to designate an AR, specify the scope of the AR’s role and authorize an AR to receive some or all copies of notices and correspondences. An applicant/beneficiary can use this new AR form to appoint either an individual or an organization as an AR. The Appointment Form MC 382 is located at the DHCS website:  
[https://www.dhcs.ca.gov/formsandpubs/forms/Pages/MCEDFormsMC300.aspx](https://www.dhcs.ca.gov/formsandpubs/forms/Pages/MCEDFormsMC300.aspx)

2. **Notice of Authorized Representative Appointment**  
   *(Appointment Notice MC 380)*

The purpose of the “Notice of Authorized Representative Appointment” (MC 380) is for counties to notify the applicant/beneficiary and the new AR of the AR appointment and the scope of that appointment. Additionally, this notice informs the applicant/beneficiary that they may modify and/or limit the scope of duties or cancel an AR appointment at any time. The notice informs ARs on their appointment and the scope of that appointment, provides an overview of their rights and responsibilities, and alerts the AR that they may opt out of the appointment at any time by contacting the county. The notice also notifies ARs that by accepting the appointment they are agreeing to abide by all state and federal laws governing authorized representatives. The letter is only sent for the initial appointment of an AR. The Appointment Notice MC 380 is located at the DHCS website:  
[https://www.dhcs.ca.gov/formsandpubs/forms/Pages/MCEDFormsMC300.aspx](https://www.dhcs.ca.gov/formsandpubs/forms/Pages/MCEDFormsMC300.aspx)

3. **Authorized Representative Standard Agreement for Organizations form**  
   *(Organizations Only) (Standard Agreement Form MC 383)*

The purpose of the “Authorized Representative Standard Agreement for Organizations” form (MC 383) is for an individual acting on behalf of an organization that was named as an AR to sign an agreement under penalty of perjury to adhere to federal and state regulations governing ARs from an organization. Due to the implementation of W&I
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Code, Section 14014.5 and 42 C.F.R. Section 435.923, the AR role is expanded to include the appointment of organizations as well as individuals.

Additionally, these laws require that individuals who represent organizations appointed as an AR must agree to adhere to state and federal laws regarding confidentiality, reassignment of provider claims, and conflicts of interest, and must provide a signed standard agreement form.

This is not a form to appoint an AR, and should not be provided to applicants/beneficiaries to complete. The Standard Agreement Form MC 383 may be signed by one or more individual(s) representing the organization appointed as an AR for that specific applicant/beneficiary. Only individuals within the organization who have signed the MC 383 form may act as an AR. Organizations were given permission in the interim period before publication of this letter to create their own Standard Agreement form – these forms remain acceptable only for AR appointments that have already been submitted prior to the publication of this ACWDL. The Standard Agreement Form MC 383 is located at the DHCS website:
https://www.dhcs.ca.gov/formsandpubs/forms/Pages/MCEDFormsMC300.aspx

4. Cancellation or Change to a Medi-Cal Authorized Representative Appointment Letter (Cancellation or Change Letter MC 381)

The purpose of the “Cancellation or Change to a Medi-Cal Authorized Representative” letter (MC 381) is to provide counties with a standard form to inform both the applicant/beneficiary and the AR of the cancellation of, or a change in the duties of, the AR appointment. Either the applicant/beneficiary or the AR may cancel the AR appointment at any time. Only the applicant/beneficiary may modify the authorized duties for an AR by contacting the county at any time. Contact may be made electronically, over the phone, in person, or in writing. After receiving the request for cancellation or change to AR duties, the county shall mail the Cancellation or Change Letter MC 381 to both the applicant/beneficiary and the AR to notify both parties of the modification or cancellation of the AR’s duties. The Cancellation or Change Letter MC 381 is located at the DHCS website:
https://www.dhcs.ca.gov/formsandpubs/forms/Pages/MCEDFormsMC300.aspx

Availability of Forms and Notices (including SAWS)
Effective immediately, the forms and notices within this ACWDL are final and available for use. DHCS will publish the threshold translations of the forms and notices in a separate Medi-Cal Eligibility Division Information Letter (MEDIL).
The Statewide Automated Welfare System (SAWS) shall make programming changes to automate the authorized representative forms and notices during the next available SAWS release.

Appointment of Medi-Cal Authorized Representatives

Effective immediately, the following methods are the only appropriate and valid means for a Medi-Cal applicant/beneficiary to appoint an individual or organization to act as an AR:

- The “Appointment of Authorized Representative” form (MC 382)
- Online/paper Single-Streamlined Application
- Statewide Automated Welfare System (SAWS) 2 PLUS/online SAWS application portal

NOTE: Legal documentation of authority to act on behalf of the applicant/beneficiary under state law substitutes for a completed Appointment Form MC 382.

Counties may receive any of the first three AR appointment methods listed above via the Internet, by telephone, in person, by mail, or through other commonly available electronic means in counties where available. Legal documentation of authority to act may be provided electronically, by fax, in person, or via mail.

Note: Please see section “Discontinue Use of Form MC 306 ‘Appointment of Representative’” for more information on policies for short-term acceptance of the MC 306 as a valid form for AR appointment.

Discontinue Use of Form MC 306 “Appointment of Representative”

Effective six months after the release of this letter, the MC 306 will no longer be an acceptable form to use to appoint an AR. An AR previously appointed using the MC 306 form or any other form previously accepted by the county continues to be a valid AR appointment until cancelled by the applicant, beneficiary or AR. However, if the MC 306 form or another appointment form limits the scope of the AR duties or the applicant/beneficiary wants to change the scope of duties previously appointed, the applicant/beneficiary may modify the duties of an AR at any time electronically, over the phone, in person, or in writing by completing the Appointment Form MC 382.

If the county receives an MC 306 six months after the publication of this letter, or any other designation form for AR appointments that is not authorized by this ACWDL, the county shall contact the sender (either the requested AR or the applicant/beneficiary) and notify them of the expiration of the MC 306.
Depending on the applicant/beneficiary’s preference, the County Eligibility Worker (CEW) shall then offer to complete the AR appointment request over the phone, provide the online location of the forms, or mail a copy of the MC 382 to be completed. The AR appointment will not be valid until the applicant/beneficiary appoints the AR by using any of the methodologies discussed in this letter.

Implementation of the “Appointment of Authorized Representative” form (MC 382)

If the Appointment Form MC 382 is used by the applicant/beneficiary to appoint an AR, the form must be signed by the applicant/beneficiary in order for the AR appointment to be valid. The AR may also sign the MC 382 appointment form; however, this is not a requirement. Counties must accept an applicant/beneficiary’s appointment of an AR without the AR’s signature. The AR appointment is valid until cancelled by either the AR or the applicant/beneficiary.

If an individual or organization is appointed as an AR via any other method listed in this letter besides the Appointment Form MC 382, the CEW shall complete an MC 382 form on behalf of the applicant/beneficiary before sending the Appointment Notice MC 380. The CEW must obtain all necessary information from the applicant/beneficiary to complete the MC 382 including AR name, contact information, authority given to AR, and whether the AR should receive some or all copies of notices and correspondences. The CEW must include a case notation on how the request was completed (such as over the telephone). If the request is made over the phone, the CEW shall read Section D “Acknowledgement and Signatures” of the MC 382 to ensure the applicant/beneficiary and the AR (if applicable) understand and accept the rights and responsibilities listed. The CEW shall send copies of the completed MC 382 form to both the applicant/beneficiary and the AR. (See section below “Overview of AR Designation Package” for more information.) A signature is not required on the copies and the copies are not required to be returned; the intent is only to document the applicant/beneficiary’s request, inform all affected parties of the AR’s scope of duties and to inform the AR that their acceptance of the appointment demonstrates their agreement to abide by all state and federal laws governing ARs.

Until the paper and online applications are updated to allow the applicant/beneficiary to choose the scope of the AR’s duties and the notices to be copied to the AR, when an applicant/beneficiary appoints an AR through the online or paper application, the AR is considered to have full authority (no limitations to the appointment) in all matters related to Medi-Cal eligibility unless modified by the applicant/beneficiary.
Full Authority Exception: It is DHCS’ policy that the appointment of an AR with full authority does not include that the AR is authorized to receive a duplicate copy of all notices or other correspondences sent to the applicant/beneficiary.

In order for an AR to receive duplicate notices or other correspondence, the applicant/beneficiary must make this request directly to the county via written, telephonic, or electronic contact, or check the appropriate box on the Appointment Form MC 382. The purpose of this policy is to ensure ARs only receive appropriate communications/notice authorized by the applicant/beneficiary.

County Actions for an AR Appointment
When the county receives an AR appointment via any methods described in this letter, the county shall send the Appointment Notification MC 380 letter within 10 days of obtaining all necessary AR information to both the applicant/beneficiary and the AR, along with a copy of the Appointment Form MC 382 completed by either the applicant/beneficiary or CEW. The purpose of sending copies of the form is to inform both the applicant/beneficiary and the AR of the scope of duties assigned. The county shall also send a copy of the MC 219 “Rights and Responsibilities” form to the AR and document in the case file that it was sent.

When an Individual is Appointed as an AR
For an individual appointed as an AR using any of the appointment methods described in this letter, there are no additional forms needed by counties in order to finalize an AR’s appointment. If an applicant or beneficiary appoints a specific individual from an organization as an AR and does not appoint the organization, the appointment is for that individual only.

When an Organization is Appointed as an AR
For the appointment of an organization (using any of the appointment methods described previously) as an AR, an additional form(s) “Authorized Representative Standard Agreement for Organizations” form MC 383 is required to complete the organization’s AR appointment. Multiple individuals from the organization that is appointed as an AR may sign the MC 383 in order to reduce the paperwork received by the counties. The completed MC 383 form(s) may be provided electronically, telephonically, by fax, in person, or via mail by the organization or individual to the county responsible for the applicant/beneficiary’s Medi-Cal case.

The MC 383 may be provided along with the MC 382 or other accepted AR appointment methods. When counties receive an AR appointment request for an organization without an MC 383, the CEW may send the MC 383 to the organization, contact the
organization to complete the form telephonically, or notify the organization that an MC 383 is needed and where it can be located on the DHCS website.

If organizations prefer the MC 383 to be mailed, then the CEW shall mail the MC 383 at the organization’s request. Counties that work with certain organizations frequently may develop procedures with that organization to obtain signed MC 383 forms timely and efficiently.

Upon receipt of the signed MC 383 form, the named individual(s) is authorized to act as an AR for the applicant/beneficiary that has appointed that organization as their AR. If there is not a signed MC 383 in the county case file for any individual acting on behalf of an organization, that organization or an individual from the organization may not act as an AR until a signed MC 383 form is provided for at least one individual at the organization. To keep the organization’s staff information current, counties may develop processes with organizations to update applicant/beneficiary records when individuals who signed the MC 383 leave the organization or are no longer acting as ARs. The MC 383 does not expire unless the AR appointment is modified or revoked.

Note: When an organization is appointed and copies of correspondence are authorized to be sent to the AR, correspondence copied to the AR should be sent to the organization, not to individuals acting on behalf of the organization.

General AR Appointment Process Guidance

- An AR may not assign another AR to represent the applicant/beneficiary’s case; an AR appointment can only be made by the applicant/beneficiary.

- Multiple AR’s may be appointed by an applicant/beneficiary. However, if counties receive conflicting information from different ARs, the applicant/beneficiary must appoint one AR to be the “lead” AR on decisions. Ultimately, when receiving conflicting information from AR’s, it is the applicant/beneficiary’s responsibility to provide any needed clarification and to provide direction to the county. Note: An organization appointed as an AR is not considered “multiple AR’s” regardless of the number of individuals at the organization who completed and signed the Standard Agreement Form MC 383.

- The AR appointment is valid for an applicant/beneficiary while they are applying or are found eligible for Medi-Cal, or until either the applicant/beneficiary or the AR cancels the AR appointment. The AR appointment remains valid for 90 days after a case is denied or discontinued for the purpose of acting in place or on behalf of the beneficiary on issues related to the beneficiary’s eligibility for Medi-Cal program unless:
o The AR appointment is cancelled by either the applicant/beneficiary or the AR; or
o The CEW determines that “good cause” exists for the AR appointment to continue beyond 90 days because it is in the best interests of the applicant/beneficiary; or
o A fair hearing is filed. If a fair hearing is filed, the appointment will continue through the hearing process.
o This is to ensure the AR can continue to work with the county in assisting an applicant or beneficiary in reinstating their benefits.

• As a reminder, to act on behalf of the family member, an AR appointment is not needed for an applicant/beneficiary’s spouse, or the parent of a minor child if the parent is on the child’s Medi-Cal case.

Changes to an AR’s Appointment

Applicants/beneficiaries may contact the county to modify the scope of duties of an AR at any time electronically, over the phone, in person or in writing. Only an applicant/beneficiary can modify their AR’s scope of duties; an AR may not modify their own appointment duties.

If the applicant/beneficiary modifies the scope of the AR’s duties, the CEW shall complete the Cancellation or Change Letter MC 381 that indicates the changes and how the change was requested (such as over the telephone). The CEW shall then send the Cancellation or Change Letter MC 381 within 10 days of the reported modification to both the applicant/beneficiary and the AR to inform both parties of changes made to the appointment.

Cancellation of an AR’s Appointment

An applicant /beneficiary or AR can cancel the AR appointment at any time by contacting the county electronically, over the phone, in person or in writing. Upon cancellation by either party, the county shall update the AR information in the case file and notify both the applicant/beneficiary and the AR in writing within 10 days of the cancellation by using the Cancellation or Change Letter MC 381.

Overview of AR Appointment Package Distribution

In accordance with the guidance provided in this letter, please review the table below to determine what forms/letters are to be sent under circumstances on the following page.
<table>
<thead>
<tr>
<th>Forms/Notices sent to Applicant/Beneficiary</th>
<th>Forms/Notices Sent to AR</th>
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<tbody>
<tr>
<td><strong>Initial AR Appointment (Individual)</strong></td>
<td><strong>Initial AR Appointment (Individual)</strong></td>
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<tr>
<td>• Appointment Notice MC 380</td>
<td>• Appointment Notice MC 380</td>
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<tr>
<td>• Copy of Appointment Form MC 382</td>
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</tr>
<tr>
<td><strong>Initial AR Appointment – (Organization)</strong></td>
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<tr>
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<tr>
<td><strong>Modification of AR Appointment</strong></td>
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<tr>
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**Examples of County Actions and Use of Required Forms and Notices for Appointment of ARs**

*Please note: CEWs should use existing processes to update AR information in case records and data systems.*

**Scenario 1:** A competent 30-year old female applicant wishes to appoint her mother as her AR. The applicant has difficulty with forms, but is otherwise able to act on her own behalf and is in her own Medi-Cal household. The applicant completes the Appointment Form MC 382 and submits it to the county. Both the applicant and the AR have signed the form. Upon receiving the completed and signed MC 382, the CEW updates the AR information in the case file. The CEW sends:

- To the applicant: A copy of the applicant’s Appointment Form MC382 and the Appointment Notice MC 380.
- To the AR: A copy of the applicant’s Appointment Form MC382, the Appointment Notice MC380, and the “Rights and Responsibilities” form MC 219.

**Scenario 2:** A beneficiary appoints a family friend as an AR, however the family friend lives several hours away. The beneficiary completes and signs the Appointment Form MC 382 and submits it to the county without the AR’s signature. Upon receiving the form, the CEW updates the AR information in the case file. The CEW sends:
• To the beneficiary: A copy of the beneficiary’s Appointment Form MC382 and the Appointment Notice MC380.
• To the AR: A copy of the beneficiary’s Appointment Form MC 382, the Appointment Notice MC380, and the “Rights and Responsibilities” MC 219.

Scenario 3: An applicant appoints an AR using the online SSApp. When the CEW receives the application with the AR appointment, the CEW updates the AR information in the case file and completes a paper copy of the Appointment Form MC 382 on the applicant’s behalf before sending the Appointment Notice MC 380. The CEW sends:

• To the applicant: A copy of the applicant’s Appointment Form MC 382 completed by the CEW and the Appointment Notice MC 380.
• To the AR: A copy of the applicant’s Appointment Form MC 382 completed by the CEW, the Appointment Notice MC 380, and the “Rights and Responsibilities” form MC 219.

Scenario 4: An applicant appoints an organization as AR. The organization did not provide a Standard Agreement Form MC 383 at the time of AR appointment, and is, therefore, unable to act on behalf of the applicant until at least one individuals within the organization completes the Standard Agreement Form MC 383. The CEW contacts the organization as a courtesy to explain the requirement. The organization would like to appoint three volunteers to act as ARs for the applicant. The CEW provides the organization the form link at the DHCS website for future designations. The CEW also sends to the organization a blank copy of the MC 383 form per the organization’s request. The individuals within the organization who will act as ARs complete the MC 383 and faxes the form to the county. The CEW updates the AR information in the case file. The CEW sends:

• To the applicant: A copy of the applicant’s completed Appointment Form MC382 and the Appointment Notification MC 380
• To the organization AR: A copy of the applicant’s completed Appointment Form MC 382, the Appointment Notification MC 380, and the “Rights and Responsibilities” form MC 219.

Scenario 5: An AR no longer wishes to act on behalf of a beneficiary. The AR notifies the county by telephone to cancel the AR appointment. The CEW completes the Cancellation or Modification Form MC 381 and notes on the form and in the case record that the AR requested cancellation over the phone. The CEW sends:

• To the beneficiary: A copy of the Cancellation or Modification Letter MC 381.
Scenario 6: A beneficiary wishes to modify the scope of their AR’s authorized duties. The beneficiary contacts the county via telephone and requests that their AR’s duties no longer include the receipt of copies of all notices. The CEW fills out the Cancellation or Modification Letter MC 381 with the change of duties indicated and documents the modification in the case journal that the request was completed over the telephone. The CEW then sends:

- To the beneficiary: A copy of the Cancellation or Modification Letter MC 381.
- To the AR: A copy of the Cancellation or Modification Letter MC 381

Scenario 7: An applicant appoints an organization as the AR on the Appointment Form MC 382. An individual acting on behalf of the organization provides a type of standard agreement form the organization had previously created, however it is no longer an acceptable form as it is not the Standard Agreement MC 383. The CEW contacts the individual to inform them of the new Standard Agreement Form MC 383 created by DHCS, provides the link to the form on the DHCS website, and sends a copy of the form to the individual. The individual provides the signed MC 383 to the county. The CEW updates the case file with the AR information. The CEW sends:

- To the applicant: A copy of the applicant’s completed Appointment Form MC 382, the Appointment Notification MC 380 letter.
- To the AR: A copy of the applicant’s completed Appointment Form MC 382, the Appointment Form MC 380 letter and the “Rights and Responsibilities” form MC 219

If you have any questions, or if we can provide further information, please contact Kathryn Floto by phone at (916) 322-1689 or by email at kathryn.floto@dhcs.ca.gov.

Original Signed By

Sandra Williams, Chief
Medi-Cal Eligibility Division

Enclosures