November 26, 2014

Medi-Cal Eligibility Division Information Letter No.: I 14-57

TO: ALL COUNTY WELFARE DIRECTORS
ALL COUNTY MEDI-CAL PROGRAM SPECIALISTS/LIAISONS

SUBJECT: Authorized Representative Appointment Period

The purpose of this letter is to remind counties about a recent change to the one year limit for the appointment of an authorized representative. Senate Bill x1 1, Statute of 2013, Chapter 4, Section 14014.5 was enacted to implement changes to rules for persons authorized to represent individuals applying for or renewing health coverage in accordance with the Affordable Care Act and Section 435.908 of Title 42 of the Code of Federal Regulations.

As a result of this change, the appointment of the Medi-Cal applicant’s or beneficiary’s Authorized Representative is in effect until the applicant or beneficiary cancels or modifies the authorization, appoints a new authorized representative, the authorized representative informs the agency that he or she is no longer acting in that capacity, or there is a change in the legal authority on which the authority was based.

Therefore, counties must continue to accept an appointment of an Authorized Representative under these new rules if the authorization was set to expire on January 1, 2014, or later. Since the new rules state that an appointment of an Authorized Representative no longer expires, counties must continue to recognize these appointments. If the current written appointment of the Authorized Representative on file expired prior to January 1, 2014, counties must require an updated appointment of an authorized representative. The county staff must inform the beneficiary that the new authorization is in effect until cancelled or modified.
If you have any questions or if we can provide further information, please contact Kennalee Gable at (916) 552-9443 or by email at kennalee.gable@dhcs.ca.gov.

Original Signed By

Tara Naisbitt, Chief
Medi-Cal Eligibility Division