

State of California—Health and Human Services Agency Department of Health Care Services



GAVIN NEWSOM GOVERNOR

December 18, 2020

TO: ALL COUNTY WELFARE DIRECTORS Letter No: 20-28 ALL COUNTY ADMINISTRATIVE OFFICERS ALL COUNTY MEDI-CAL PROGRAM SPECIALISTS/LIAISONS ALL COUNTY HEALTH EXECUTIVES ALL COUNTY MENTAL HEALTH DIRECTORS ALL CONSORTIA PROJECT MANAGERS

### SUBJECT: AUTHORIZED REPRESENTATIVES FREQUENTLY ASKED QUESTIONS (Ref: <u>ACWDL 18-26E</u>)

The purpose of this All County Welfare Directors Letter (ACWDL) is to provide clarification to counties on the authorized representative (AR) guidance outlined in <u>ACWDL 18-26E</u> and respond to frequently asked questions about Medi-Cal AR policies and processes.

### **Obsoletion of Previous Letters**

As a reminder, ACWDL 95-30, 95-60, 96-20, 97-01, and 02-28 were previously made obsolete with the release of <u>ACWDL 02-42</u>.

### Frequently Asked Questions (FAQs)

1. **Q:** Are counties required to send the MC 383 "Standard Agreement" form to organizations when an organization is appointed as an AR?

A: Counties must send the MC 383 <u>when this form is requested by the</u> <u>organization</u>. While the MC 383 is required to be completed for organizations seeking to be appointed as an AR, counties may develop internal processes with organizations in order to streamline the AR appointment process for organizations to submit an MC 383 or to request an AR appointment. As stated in <u>ACWDL 18-26E</u>, Page 8: "Counties that work with certain organizations frequently may develop procedures with that organization to obtain signed MC 383 forms timely and efficiently." All County Welfare Directors Letter No.: 20-28 Page 2 December 18, 2020

2. **Q:** If counties receive a "Release of Information" request (such as the ABCDM 228), should counties follow the AR process detailed in <u>ACWDL 18-26E</u>?

A: A "Release of Information" request is independent of the AR process, and counties must follow the "Release of Information" process when such a request is made. An applicant/beneficiary may authorize sharing their Medi-Cal case information without appointing an AR using a written authorization, such as a "Release of Information" form, or a telephonic authorization. Title 22 of the California Code of Regulations (CCR) § 50111 requires counties to adhere to the California Department of Social Services (CDSS) Manual of Policies and Procedures for privacy and confidential information. See Chapter 19, specifically section 19-005, of that manual and All County Information Notice I-33-06 for guidance on releases of information.

3. **Q:** If an AR appears in the MEDS screen (QD), should counties use this as current AR information?

A: The AR field in MEDS under the QD screen is used by other entities and programs outside of DHCS and Medi-Cal, and may not indicate a Medi-Cal AR. Therefore, counties should not use the QD screen in MEDS as verification of current AR information. New MEDS screens that provide Medi-Cal AR information are in development and counties will be notified once these screens have been finalized. If counties are contacted by an AR listed in MEDS under the QD screen, and that AR is not known to the county as a Medi-Cal AR, the county must contact the applicant/beneficiary (via the applicant/beneficiary's preferred method of contact) to confirm if they would like the individual or organization listed in the MEDS QD screen to act as their AR. The county must document the response in the case journal per normal processes. If the applicant/beneficiary wishes to appoint that person as their Medi-Cal AR, the county must follow the process outlined in <u>ACWDL 18-26E</u> and process the request via any acceptable modality as described in that letter.

4. **Q:** Does <u>ACWDL 18-26E</u> change procedures for representatives of incompetent applicants/beneficiaries?

**A:** For incompetent applicants/beneficiaries who did not appoint an AR when they were competent, the guidance in <u>ACWDL 94-62</u> should be followed regardless of whether or not the applicants/beneficiaries are in Long-Term Care

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(LTC). (See Question 6 below regarding applicants/beneficiaries who become incompetent after appointing an AR.)

**Note:** DHCS uses the following terminology when referencing certain representatives:

- The term "authorized representative" is used when competent applicants or beneficiaries appoint either an individual or an organization as an AR as they are able to "authorize" the individual or organization as the applicant or beneficiary's representative.
- The term "applicant/beneficiary representative" is used for individuals that act on behalf of incompetent applicants or beneficiaries that are unable to provide authorization for their representative.
- 5. **Q:** What is the county process when an AR cannot be reached? Is the AR appointment still valid? Should the county take action on the case?

A: Even when ARs have full authority, including copies of notices and correspondences, all correspondences must be sent to the applicant/beneficiary, with copies sent to the AR (if authorized). If the county is unable to reach the AR after reasonable attempts have been made, then the county should contact the applicant/beneficiary via their preferred contact method in order to notify them of the county's inability to reach the AR and the reason that the county is contacting the AR (for example, verification needed by the county) and work directly with the applicant/beneficiary to obtain the necessary information. When contacting the AR, the county should use the AR's preferred method of contact. In instances where the county is not able to reach the AR, the AR's appointment would still continue and would not terminate unless requested by the AR or applicant/beneficiary per Welfare & Institutions Code (WIC) § 14014.5(d)(2). The AR may still act on behalf of the applicant/ beneficiary, but the county must request updated contact information if the AR contacts the county. Counties must follow normal business practices to request required information from the applicant/beneficiary, including taking denial or discontinuance action if the applicant/beneficiary fails to respond to the required county contacts.

## 6. **Q:** What should counties do when an applicant/beneficiary becomes incompetent or deceased after appointing someone as an AR?

**A:** If an applicant/beneficiary loses competence or dies after appointing an AR, the county must honor the AR appointment made during the time of competency. However, a spouse or any individual with legal documentation (such as a power of attorney, executor of the deceased person's estate, or the incompetent

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person's guardian/conservator) will have ultimate authority for the deceased or incompetent applicant/beneficiary's Medi-Cal case, and may cancel an AR appointment.

7. **Q:** Is a Certified Enrollment Counselor (CEC)/application assistor/insurance agent considered an AR?

**A:** A CEC, application assistor, or insurance agent is **not** automatically considered an AR. In order to be considered an AR, they must be appointed as one by the applicant/beneficiary. Per 42 Code of Federal Regulations Section <u>435.908(b)</u>, an applicant/beneficiary may choose anyone to assist them with the application or renewal process. However, if the CEC, application assistor, or agent wishes to act on behalf of the applicant/beneficiary in any other matter, the applicant/beneficiary must appoint them as an AR following the processes detailed in <u>ACWDL 18-26E</u>. If they wish to only inquire about case information, follow the guidance in Question 2 of this letter regarding a "Release of Information" request. As a reminder, county eligibility workers (CEWs) should review documents uploaded into the California Healthcare Eligibility Enrollment and Retention System (CalHEERS) to determine if any AR forms have been added to the case.

8. **Q:** Is it appropriate for the Medi-Cal program to send the CSF 14 to applicants/beneficiaries to appoint a Medi-Cal AR?

**A:** Counties should not send the CSF 14 to appicants/beneficiaries to appoint a Medi-Cal AR as it is not a DHCS form. Counties should send applicants/beneficiaries the MC 382 instead. However, if the county receives a signed CSF 14 from an applicant/beneficiary appointing a Medi-Cal AR, the county should honor that form and process it, until DHCS provides further direction.

9. **Q:** ARs are now allowed to sign on behalf of the applicant/beneficiary, including the Single Streamlined Application. How do counties ensure an AR is properly appointed to sign on behalf of the beneficiary?

**A:** An AR must be properly appointed by the applicant/beneficiary in order to act on the applicant's/beneficiary's behalf in accordance with <u>ACWDL 18-26E</u>, <u>including signing the application</u>. To ensure an AR is properly appointed to sign on behalf of an individual, the applicant/beneficiary must sign the Medi-Cal AR appointment form, authorizing such action on their behalf</u>. For example, an AR All County Welfare Directors Letter No.: 20-28 Page 5 December 18, 2020

may sign the Single Streamlined Application on behalf of the applicant/beneficiary; however, the "Authorized Representative" section of the Single Streamlined Application or another acceptable AR appointment method must still be signed by the applicant/beneficiary utilizing any of the approved signature methods outlined in <u>ACWDL 18-26E</u>.

10. Q: Should counties send the GEN 1365 with the AR forms?

**A:** Per <u>ACWDL 17-23</u>, counties must send the GEN 1365 to the applicant/ beneficiary and (if authorized) the AR with the English AR forms and with any translated AR forms.

11. **Q:** Do ARs have the same rights as the Medi-Cal beneficiary they represent to request Medi-Cal information and forms in a threshold language or in alternative formats such as Braille, Large Font, or an accessible screen-readable electronic format?

**A:** ARs do have the same rights as the Medi-Cal beneficiary they represent to request Medi-Cal information and forms in the threshold language or accessible format they prefer, when authorized to receive notices or other correspondence.

12. **Q:** How are counties to assess "conflicts of interests" for organizations as described on the MC 383?

**A:** DHCS does not expect counties to evaluate organizations for conflicts of interest. If counties receive information from an applicant/beneficiary that their appointed AR has a conflict of interest not disclosed to them, please contact DHCS via the contact information on the last page of this letter.

13. Q: What is the process for hearings in regards to ARs?

**A:** DHCS defers to CDSS State Hearings Division (SHD) policy for designation of Authorized Representatives for hearing purposes pursuant to its regulations and its <u>Manual of Policies and Procedures</u>. Applicants/beneficiaries who wish to appoint an AR to assist with the hearings process may do so through SHD confirming the AR status using the following methods: the electronic state hearings system, the telephonic appointment and signature process, the DPA 19 form, or as determined by the judge at the hearing. Counties shall continue to accept these appointments as a valid AR appointment for the full scope of the hearing process, including the 30-day compliance period after a conditional

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> withdrawal or ALJ decision, and the duration of the reheating process, unless the applicant/beneficiary withdraws authorization or has limited the AR's scope of authority via the MC 382. Counties are not required to obtain additional documentation, such as the MC 382/383, once the SHD has confirmed the AR status. The AR documentation will be detailed in the applicant's/beneficiary's Appeals Case Management System (ACMS) confidential electronic case file, maintained by CDSS and accessible by counties. In addition to the methods listed previously, SHD will accept the Medi-Cal AR forms, including the MC 382 as well as other AR forms that comply with all state and federal requirements. If an applicant/beneficiary previously appointed an AR and did not exclude hearings from the scope of the appointment (i.e. "for application process only" or similar specified duty), a DPA 19 is not required to be provided in addition to the existing AR appointment, which includes the hearing process. Please note that if a hearing is filed and the county has an AR designation on file which does not exclude that the AR help with the hearing process, then the county should provide this designation to the SHD by uploading the AR designation into ACMS. When uploading the AR designation, the county must add the AR in the Contact tab in ACMS, and if the county has knowledge that the AR is part of an AR Organization email SHDCSU@dss.ca.gov to identify that AR Organization.

#### 14. Q: Is there a limit to the number of MC 383 that an organization can submit?

**A:** While the MC 383 form provides space for three individuals from an appointed AR Organization to act as authorized representatives for an applicant/beneficiary, the AR Organization may identify additional individuals by submitting additional MC 383 forms for the applicant/beneficiary. There is no limit to the number of MC 383 forms that an organization can submit.

# 15. **Q:** ACWDL 18-26E says that legal documentation of authority to act on behalf of the applicant/beneficiary under state law substitutes for a completed Appointment Form MC 382. What constitutes acceptable legal documentation in this instance?

**A:** Legal documentation of authority to act on behalf of an applicant/beneficiary under state law encompasses a broad category of documentation. This may include, **but is not limited to**, documentation establishing conservatorship, guardianship, and Power of Attorney. Counties may reach out to DHCS about specific documentation if it does not appear to be the typical types of legal documentation received. Counties shall not require a DHCS 7068 for an appointment to act on behalf of the applicant/beneficiary if acceptable legal documentation has been received.

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16. **Q:** Should the county require a beneficiary and/or AR to submit a signed MC 382 and/or MC 383 before effectuating the AR appointment if a telephonic or electronic AR appointment has already been provided?

**A:** Counties cannot require receipt of a signed MC 382 or MC 383 in person or by mail, or otherwise restrict or delay an AR appointment, if the MC 382 and/or 383 is provided by any other means. Per <u>ACWDL 18-26E</u> p. 4, counties "must accept electronic, including telephonically recorded, signatures and handwritten signatures transmitted by facsimile or other electronic transmission." This is consistent with WIC Section <u>14014.5(f)</u>.

If you have any questions, or if we can provide further information, please contact Derek Soiu by phone at (916) 345-8193 or by email at <u>Derek.Soiu@dhcs.ca.gov</u>.

**Original Signed By** 

Sandra Williams, Chief Medi-Cal Eligibility Division