



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



EDMUND G. BROWN JR.
Governor

March 28, 2017

TO: ALL COUNTY WELFARE DIRECTORS Letter No.: 17-12
ALL COUNTY ADMINISTRATIVE OFFICERS
ALL COUNTY MEDI-CAL PROGRAM SPECIALISTS/LIAISONS
ALL COUNTY HEALTH EXECUTIVES
ALL COUNTY MENTAL HEALTH DIRECTORS
ALL COUNTY MEDS LIAISONS

SUBJECT: Changes to the Designation and Responsibilities of the Medi-Cal
Authorized Representative
(Reference: All County Welfare Directors Letter No 94-62 and Medi-Cal
Eligibility Division Information Letter No.: I 14-57)

The purpose of this letter is to inform counties about changes pertaining to the appointment and scope of responsibilities of authorized representatives for Medi-Cal applicants and beneficiaries. Senate Bill x1 1 (Statute of 2013, Chapter 4, Section 14014.5) was enacted to implement changes to rules for the appointment of authorized representatives for individuals applying for or renewing health coverage in accordance with the Affordable Care Act and Title 42 of the Code of Federal Regulations §435.908 and §435.923.

Because of this legislation, applicants and beneficiaries for insurance affordability programs have increased options for choosing roles and responsibilities of the individual or organization they designate as their authorized representative. Counties must accept and use the information completed by the applicant or beneficiary to designate an authorized representative listed on the existing paper Single Streamlined Application (SSApp), on-line SSApp, Statewide Automated Welfare System (SAWS) 2 Plus, MC 306 form, or another form or written designation.

Note: The MC 306 form only authorizes specific duties for an authorized representative and an updated version reflecting the new roles available has not been released. Therefore, if the applicant or beneficiary requests that the authorized representative have expanded duties and only an MC 306 is on file, counties shall accept the applicant or beneficiary's request in any method described below.

The following provides a summary of the new appointment requirements and responsibilities for authorized representatives:

- Counties must accept electronic signatures, including telephonically recorded signatures, and handwritten signatures transmitted by facsimile or other electronic transmission from applicants and beneficiaries to appoint or to expand the duties of an authorized representative.
- Applicants and beneficiaries may choose one or more authorized representatives to act on their behalf in the application and redetermination process. The authorized representative may be an individual or an organization.
- The applicant or beneficiary may define the scope of authorized duties each authorized representative will have, such as a limited role or elect that the authorized representative fully act on behalf of the applicant or beneficiary.
- The applicant or beneficiary may specify what notices, if any, counties must send to the authorized representative in addition to the applicant or beneficiary.
- Authorized representatives are able to sign the application and complete and submit the renewal form on the beneficiary's behalf.
- 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.
- Per Welfare and Institutions Code §14014.5(k)(1), an applicant or beneficiary may designate an organization as an authorized representative. Any individual from the appointed organization that has a signed agreement to adhere to authorized representative rights and responsibilities may act on behalf of the applicant or beneficiary.

As a reminder, authorized representatives are appointed by competent applicants and beneficiaries. For more information on representatives for incompetent applicants or beneficiaries, please refer to All County Welfare Directors Letter 94-62.

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

Original Signed By

Sandra Williams, Chief
Medi-Cal Eligibility Division